

THINK ADULT think c

Naas General Hospital **SUPPORTING BEREAVED CHILDREN**

CHILDHOOD BEREAVEMENT IN IRELAND
By age 9 among Irish Children

| | | | |
|-------------------------|----------------------------|--------------------------|--------------------|
| 28% | 7% | 6% | 2.2% |
| Have lost a grandparent | Have lost an aunt or uncle | Have lost a close friend | Have lost a parent |

44.3% will have experienced bereavement

Childhood Bereavement Services National Survey 2022
The Learning to Grieve in Ireland National Longitudinal Study of Children

CHILDREN'S GRIEF IS:

- Personal, individual and unique.**
- Intermittent and intense;** some days big and strong like huge waves on a stormy sea, other days more like gentle, calm ripples.
- Each child grieves to the relationship they had with the person who has died.**

WHAT CAN HELP?

A child's environment is important in determining how grief will affect them and how to support them. Children's reaction to death is dependent on their age and developmental stage. Access to accurate up-to-date information and education on the impact of childhood bereavement for the adults is important.

TALK with them. Tell them the truth, have an open honest conversation.
ENCOURAGE them to talk while still respecting their coping style.
ACKNOWLEDGE their feelings, that the loss is important and that it matters.
REASSURE them that they are not to blame for the death.
SUPPORT Yourself. Mind yourself so you can mind me.

With OCHA and Bereavement Network

- Keep to **familiar routines** as much as you can to give **security** and keep a sense of continuity.
- Bereaved children can feel different from their peers. Children need to know there are **others like them**, going through similar difficulties.
- As the child matures they may need new 'explanations', which can involve **revisiting the loss and what it means**.

MIND YOURSELF so you can mind me

If you are struggling there are a number of ways to get support. No one can fix or reverse what has happened but as an adult you can do your best to help children. This means knowing how to mind your grief and theirs.



www.childhoodbereavement.ie
www.barnardos.ie
www.familyresource.ie
www.hospicefoundation.ie
 Finding your Way Through Grief - St Francis Hospice



Hospice Friendly Hospitals Quality Improvement (HFHQI) Awards

Application Pack

Irish Hospice Foundation is delighted to announce, in partnership with the HSE National Quality and Patient Safety Directorate, the launch of the Hospice Friendly Hospitals Quality Improvement Awards for 2024.

This pack contains all the information you need to apply for an Award for your hospital.





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A Message from the HFHQI Team

In 2019, the Hospice Friendly Hospitals Quality Improvement Awards were launched to recognise projects that will improve end-of-life care for patients, their families, staff and the hospital. This initiative is supported through the Hospice Friendly Hospitals programme and now delivered in partnership with the HSE Quality and Patient Safety Improvement Team.

Since inception, 53 projects have been awarded funding across 32 hospital settings with variety in initiatives ranging from tailored memory boxes to comfort care packs.

As a new initiative for 2024, we have chosen to theme the Awards this year. The theme for 2024 is 'Innovation & Integration'.

By 'Innovation,' we mean fresh ideas that have not previously been supported through the awards. Whereas 'Integration' focuses on projects that aim to bridge the gap between different healthcare providers, leading to improved patient experiences.

As such, we are specifically seeking quality improvement projects that are either:

1. New and unique to the awards.
2. Integrated projects working across different health and care service providers, between hospitals, wards and/or care settings.

In recognition of the anticipated time, cost and resources required with developing an innovative and/or integrated quality improvement project, we have increased the funding amount available from €1,000 to €3,000.

Note: for an application to be considered, projects must meet the theme criteria and provide a detailed cost breakdown ([click here to see an example](#)).

To better understand the impact that projects supported through HFHQI Awards have, all awardees are required to evaluate their QI projects. Additionally, introduced this year is a compulsory reflective piece all awardees must complete within 12 months of receiving the award. For further information on the evaluation and reflection required, [click here](#).

Appreciating the changes implemented this year, we continue to offer a range of supports to applicants:

- Opportunity to engage and attend two HFHQI Support Sessions (online delivery).
 - For further details and to register for these upcoming sessions, [click here](#).
- Individual Project Clinics.
 - These are scheduled on a 1-2-1 basis and all applicants in attendance at the support sessions will be offered a project clinic appointment.
- Review Meetings.
 - Scheduled with successful applicants to support the development, implementation and evaluation of their QI project.

To help you prepare a strong application, we've created a comprehensive application pack with all the necessary information and guidance. We suggest taking the time to carefully review all the materials included.

Should you have any further queries, please contact the HFHQI Panel via email at hfh@hospicefoundation.ie.

We wish you the best of luck with your application!

- HFHQI Panel

Section 1: Information about the HFHQI Awards

What are the HFHQI Awards?

The HFHQI Awards is a financial support for HSE/Voluntary hospitals that are engaging with the HFH programme. The Awards will support the continual quality improvement approach to end-of-life care (EOLC) for patients, their families, staff and the hospital and help your hospital towards implementation of the Quality Standards for End-of-Life Care in Hospitals, a full list of which can be found in the appendix A.

What is the purpose of the HFHQI Awards

The Awards have been developed to inspire acute hospital staff to come together in a cohesive and collaborative way to improve person-centred end-of-life care.

Reflective in nature, the Awards require staff to examine current practices and look at new ways of working.

At the heart of the awards is the aim of continuing to improve the end-of-life care approach and to help hospital towards the implementation of the Quality standards for End-of-Life Care.



Raise awareness

Of how Quality Improvement methods can be used to improve EOLC



Person-centred

Shining a light on improved ways of providing person-centred EOLC



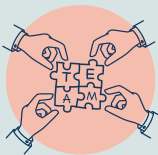
QI

Use a robust Quality Improvement approach to make these changes; e.g., how would we know that a change is an improvement?



Innovation

Explore innovative and creative ways to improve the way they work; e.g., how can we make the change?



Examining current ways of working, e.g.,

What are we doing that could be done better?
What would we like to accomplish?



What types of projects will be considered for an Award?

The aim of the HFH Programme is to address the needs of all people dying in acute hospitals in Ireland, the needs of their family members and the needs of staff to ensure a consistent quality improvement approach to all aspects of end-of-life care.

This year we are specifically looking to support projects that are new and innovative and that will result in any of the following:

- Improved experience of EOLC care for patients, family members and staff
- Enhanced EOLC planning for every person
- Continual development and support of staff to deliver excellent EOLC

The following projects are examples of previous awardees and are representative of innovative and new ideas:



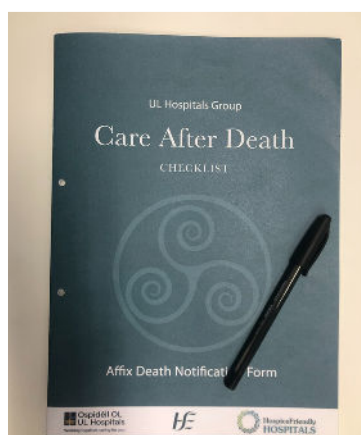
Easy Read End-of-Life Care Booklet for People with Intellectual or Developmental Disabilities

Naas hospital received a HFHQI Award in 2023 for the development of an easy read booklet for people with an intellectual or developmental disability (IDD). This project was co-facilitated and co-delivered with Project Search interns and was developed with the belief that every person should be provided with relevant information in a way that they can understand. [Click here](#), to watch a short video about this project and to find out further information.



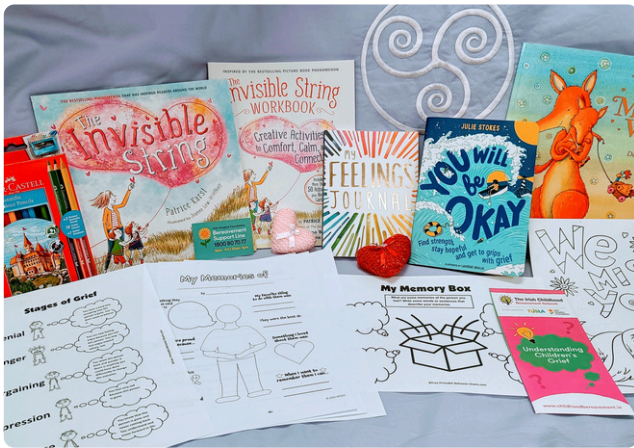
Keepsake Pouch

Portiuncula University Hospital saw the Awards in 2019 as an opportunity to improve how personal possessions are returned to families of loved ones. This project has since been upscaled nationally, and the pouch is available to order. [Click here for further information](#).



Care After Death Checklist

University Hospital Limerick were awarded the HFHQI Award in 2022, with their 'Care after death checklist'. A simple yet highly effective tool that includes all forms needed for completion, to ensure homogenous delivery of care for patients during the dying phase and after they have died in the hospital.



Grief in the ICU - Bereavement Support for Children

This project at St Luke's, Kilkenny aimed to meet the individual needs of children who experience the loss of a loved one in the ICU setting. [Click here](#) to watch lead applicant, Paddy Cahill, share his experience and learnings from the development of this child-centred project.



Soothing Melodies

Connolly Hospital received an Award in 2022 for their project, which developed a quality initiative to provide radios and Bluetooth speakers to all clinical areas for end-of-life care patients and their loved ones. The project aims to improve the experience for patients and families by creating a more homely space filled with music, memories, sound, familiarity and love.

How might ideas be generated for improvement projects?



The best ideas for EOLC QI projects come from our patients and their families. Engaging with the people to whom we provide services offers an understanding as to what true value is to a patient. The voice of personal experiences, heard first-hand, and what that brings, is a priceless contribution to enabling improvements in services.



A review of the National End of Life Survey and the National Patient Experience Survey can offer inspiration. [Click here to access these published results.](#)



Great improvement ideas can also come from staff who are providing the care themselves. Enabling staff to have the opportunity to reflect on current ways of working and consider 'What do we do well?' 'What we don't do so well?' and 'How could we do things differently?' will stimulate thinking about potential project ideas.



Additionally, [The Ombudsman's report 'A Good Death' \(2014\)](#) and the updated report [A Good Death: Progress Report \(2018\)](#) are also useful resources to refer to.



The HFHQI Awards aim to support hospitals to be achieving the [Quality Standards for End-of-Life Care in Hospitals](#), which sets out a shared vision for the EOLC each person should have and what each hospital should aim to provide.

How can I increase my chances of getting an Award?

This year we will be supporting innovative, creative initiatives that have not been previously supported. Specifically, we are looking for unique **QI** projects that will have maximum impact for improving EOLC for everyone concerned.

It is important to us that the HFHQI Awards are invested into projects that can demonstrate the following:



Clear and thoughtful planning.



Advanced consideration of any potential risks, resistance, and adverse effects.



Engagement with and involving the key people whom your project idea will impact.

Stakeholder Engagement

Ask yourself who will be affected by this project and be sure to include them in your project team or as part of your consultation/scoping exercise.

Appendix C contains a template for a stakeholder mapping exercise, and we'd encourage you to use the QI Tool for Capturing Patient and Staff Perspectives.



There may be staff in your hospital who have particular expertise in the process of Quality Improvement.

Including them on your team and considering the six drivers for Quality as outlined in the HSE document Framework for improving quality in our health service will help to strengthen your application.

Frequently Asked Questions

Where does the money for the Awards come from?

This funding has been made possible as part of Irish Hospice Foundation's ongoing partnership with the HSE.

Is there a maximum amount available?

Historically, the maximum amount of funding available was €1,000. However, this year applicants can seek funding up to €3,000. Note: Only applications that provide rationale, cost breakdown and fit this year's criteria will be considered.

What if our project budget is over €3,000?

If your project budget exceeds €3,000, you may apply for an Award of €3,000 but must indicate in the application the total budget required and supply information about how your hospital commits to meet the shortfall.

Is there a deadline for these Awards?

Yes. Applications must be submitted by the deadline. For further details, please refer to the [HFHQI webpage](#).

Who can apply for an Award?

Anyone working within the hospital can apply for an Award. The application must be supported by the Chairperson of the Hospital End-of-Life Care Committee. Please ensure you make your hospital Senior Management Team, including the lead person for Quality and Patient Safety, aware of the application.

How do I apply?

Application instructions and inclusion criteria are detailed in section 3. [Click here to jump to this section](#).

Frequently Asked Questions

What happens after I apply?

The HFHQI Awards Panel will review all applications on closing of the application process. Each application will be scored against the selection criteria for the Awards ([available in Appendix B](#)). Applications that score higher on the score sheet will be given priority consideration for an Award.

What happens if we are successful in applying for an Award?

The HFHQI Awards Panel will be in contact with you to arrange payment of the Award. A timeline will be agreed for your project, which will include start, review and completion dates and a plan for presenting your project and sharing your experience at HFH events.

What happens if we are unsuccessful in applying for an Award?

The HFHQI Awards Panel will be in contact with you to explain how your proposal was assessed against the selection criteria and the reasons why the Award was not given and to discuss possible suggestions for progression of the project at a local level.

Is the Award transferable to another project?

No, any Award granted is done so based on the project outlined in the Award application. If for any reason your project does not proceed, please contact hfh@hospicefoundation.ie immediately as the award may be transferred to another quality improvement project.

How is funding for the Award received?

If your project is successful, you will need to collect your HFHQI Award by providing an invoice addressed to the Irish Hospice Foundation on hospital headed paper. All relevant information must be included and will be detailed within your approval letter.

Note: Invoices must be received by the deadline stipulated.

Are there any terms of agreement if the Award is accepted?

If your project is successful and the award is accepted by the hospital, then we request commitment to the following:

1. Commitment to measuring the impact of the project, with details stipulated within the project plan.
2. Commitment to completing the post-project evaluation and sharing this with Irish Hospice Foundation.
3. Agreement to acknowledge the funding of this project by including the HFH tri-logo.

Section 3:

Guidance notes to help with completing your application

The way you present this information is completely up to you. We welcome:

- Applicants can complete either the [PDF](#) or [Word](#) version of the QI Awards Application form and email it as an attachment to the HFH programme team - hfh@hospicefoundation.ie.
Alternatively, completed applications can be posted to the following address:
IHF, Morrison Chambers (Floor 4), 32 Nassau St, Dublin 2, D02 X627.
- Applications via a video blog, whiteboard presentation or other equally creative media can be emailed to the HFH Programme Team - hfh@hospicefoundation.ie.

The following section contains guidance for completing your application. It outlines required information that needs to be included when applying.

1. Applicant details

Please complete all sections, including the roles of co-applicants listed.

2. Support for application

It is important that your application has the support of the End-of-Life Care Committee, senior management and also the lead person for quality improvement in your hospital.

3. QI Criteria

Indicate which of the inclusion criteria that your QI project meets. You can select any or all of these as appropriate. Note: Failure to meet any criteria will result in your application not being reviewed.

4. Project Title

Provide the title of your project.

5. Project Aim

Your project aim should describe the improvement you want to make and clarify what you are trying to achieve, and how much, by when. Each aim statement should be SMART (i.e., Specific, Measurable, Achievable, Realistic and Timely).

Examples of project aim statements:

- By 31st March 2025, all bereaved families in our hospital will receive a sympathy card from XX team within one month of their bereavement.
- By 31st January 2025, all family members who stay overnight in our hospital will be offered a comfort pack by staff.
- To ensure 100% compliance with all CVL bundle elements in ICU1 by medical and nursing staff by 31st June 2025.

Remember the aim statement is about the outcome you want to achieve for patients and/or staff, rather than the solution you wish to implement.

6. Linking to the Quality Standards for End-of-Life Care in Hospitals

Indicate here which of the Quality Standards for End-of-Life Care your project helps to achieve. You can select any or all of these as appropriate.

7. Evidence of the need for this improvement

- Why is this project needed? Consider the following types of evidence:
 - Feedback from patients / relatives / staff
 - Hunches (i.e., clinical insights or identified risks)
 - Part of the strategic QI or EOLC plan of your organisation
 - Local data (e.g., audit results or complaints)
 - Ideas from a published review/conference
 - Outcome of a service review meeting



8. QI Project Plan

This section asks about the development and implementation of your project using the drivers of the HSE Framework for Improving Quality. It is recommended to provide as much relevant information as you can.

Leadership

- Who is the project lead?
- How does the project link with the goals and values of your department or service?
- What are the main risks/challenges that you see at this stage and what can you do to minimise them?

Governance

- Who is on the project team/who will you invite to the project team?
- Who does the project lead report to/look to for support needed for the project?
- Do you have a sponsor who will support this project?
 - A QI sponsor is a senior person in the organisation who can provide support throughout the project.
- How does the project lead report and when? Is there a communication plan for the project?
- What communication pathway has been agreed for the project?

Engaging with others – Patients, families, and staff

- Who needs to be involved – i.e., Who are your stakeholders? – either directly or indirectly?
- Who are the main stakeholders (those people you need to talk to before commencing this project)?
- How are you going to engage with them, before, during and at the end of the project?

Use of improvement methods

Quality improvement is an incremental, continuous process made up of small step-by-step tests of change – you may have heard of similar concepts, such as Measurable Gains. The tests of change are often described in terms of PDSA cycles (Plan, Do, Study, Act) that you implement after your base line measure is undertaken and SMART aim agreed.

- Plan - predict/plan and agree the who, what, how and when of your test of change.
- Do - carry out your agreed changes in different circumstances (e.g., days, nights, weekends; using different approaches; using different methods of engagement).
- Study - examine the difference beside your baseline, noting improvements or NOT.
- Act - decide to adopt the change in practice or start again!



Measurement / evidence of improvement

What evidence will you use to show if your test of change has worked or not?

Usually, one or two key pieces of evidence are enough and they can be a combination of things like:

- Patient / family / staff feedback
- Patient / family / staff stories
- Survey / audit results
- Routine data that is available (e.g., about admissions, discharges, waiting times, expenditure, education programmes, etc.)

Importantly, do you have a baseline so that you can show if your improvement idea makes a measurable difference?

Remember: all improvement requires change, but not all change results in improvement.

Communication plan

When creating your communication plan, it is suggested to consider the following:

- Who is the intended audience or audiences?
- Why are you issuing this communication - is this objective to:
 - Ask?
 - Educate?
 - Influence?
 - Orientate?
 - Update and inform?
- What is the key message, e.g.,
 - Reasons for the project
 - Aim of the project
 - Benefits of the project and for whom
 - Changes to expect during the project
 - Impact on services or people
 - Timeline for the project
- How do you intend to communicate the message to best suit intended audiences, e.g.,
 - Person to person
 - Electronic and digital
 - Printed materials
- When is the best time to communicate the message? How frequently?
- Where to access the right information for the right audiences at the right time.
 - Remember to include a name and contact details for each communication.

9. Budget

Please outline the anticipated costs associated with your project. If additional funds are needed, please say how these will be obtained and provide supporting evidence (e.g., letter from hospital manager). Note: We do not require proof of invoices but an accurate breakdown is required. [Please refer to the example here.](#)

10. Commitment & Agreement

It is requested that all successful applicants agree to the following:

- Commit to measuring the impact of the project
- Commit to completing and sharing the post-project evaluation with Irish Hospice Foundation
- Acknowledge funding received by Irish Hospice Foundation by including the Hospice Friendly Hospitals tri-logo

Measuring the impact

So that we can continue to understand the impact that the HFHQI Awards has, we ask that all successful applicants measure their QI project throughout.

By measuring the impact, this allow us to:

- Understand if, and which, incremental changes made a difference.
- Gain valuable insights into what worked well and what could be improved. Not only does this benefit future QI projects within the hospital but this learning can be disseminated to other HFH hospitals.
- Serve as a tool for recognising the project's achievements and can inspire others, creating a ripple effect of positive change.

We appreciate that this element of a QI project can seem daunting, so in addition to the Support Sessions, we continue to offer Project Clinics and HFHQI Review Meetings.

- Project Clinics - Interested applicants can arrange to meet with members of the HFHQI Panel to discuss their QI idea on an individual level.
- HFHQI Review Meetings - These reviews are offered to all awardees and serve as an opportunity to meet with the team to discuss the progress and development of the QI initiative. Additionally, these have been noted as beneficial at supporting the impact measurement.

Post-project Evaluation

We ask that all awardees provide an evaluation summarising the findings and impact of their QI project, once this has been implemented. Essentially this provides the narrative of the project journey from conception to completion.

How you choose to present this, is completely up to you. However, we have included some ideas below:

- PowerPoint Storyboard - Template is available, to request this email hfh@hospicefoundation.ie
- Poster Presentation
- Video Recording

Reflective in nature, we encourage awardees to consider the following:

- What worked well?
- What would have worked better?
- Do you feel more confident in QI?
- Has this initiative led to further opportunities?

Alternatively, awardees can take a pragmatic approach by following the below format:

- Introduction
- Methods
- Results
- Discussion
- Conclusion

Regardless of the format or approach awardees choose to take, the report must include details of the results and impact.

Please note additional information and guidance will be provided to all successful applicants upon receiving their award.

11. Reach, Scalability and the ‘Ripple Effect’

Does your project have the potential to be replicated in other areas of the hospital or to be scaled-up to a Hospital Group or National level or to lead on to other QI projects?

Additional Information & Resources

- [Quality Standard for End-of-Life Care in Hospitals](#)
- [Ombudsman’s report ‘A Good Death’ \(2014\)](#)
- [A Good Death: Progress Report \(2018\)](#)
- [HSE Framework for Improving Quality](#)
- [HSE National Quality and Patient Safety Directorate’s Quality Improvement Toolkit](#)
- [Quality Improvement Terms and Concepts Used in the Irish Healthcare Setting](#)

If you are not familiar with Quality Improvement, we’d encourage you to undertake the short Introduction to Quality Improvement module available on HSeLanD. Simply log onto the HSE’s online learning portal at www.hseland.ie. If you are already registered, login and search for ‘Introduction to Quality Improvement.’ If you are new to HSeLanD, select ‘create an account’ and follow the registration instructions.

Appendix A: The Quality Standards for End-of-Life Care in Hospitals

| Standard | | |
|--------------|------|---|
| The Hospital | 1.1 | A culture of compassionate end-of-life care |
| | 1.2 | General governance policies and guidelines |
| | 1.3 | Effective communication with patients and their families |
| | 1.4 | The healthcare record |
| | 1.5 | The hospital environment |
| | 1.6 | Monitoring and evaluating end-of-life care |
| | 1.7 | Assessing and responding to end-of-life care needs of patients |
| | 1.8 | Clinical responsibility and multi-disciplinary working |
| | 1.9 | Pain and symptom management |
| | 1.10 | Clinical ethics support |
| | 1.11 | Care after death |
| | 1.12 | Post mortems |
| | 1.13 | Bereavement care |
| The Staff | 2.1 | Cultivating a culture of compassionate end-of-life care among staff |
| | 2.2 | Staff induction |
| | 2.3 | Staff education and development needs |
| | 2.4 | Staff education and training programmes |
| | 2.5 | Staff support |
| The Patient | 3.1 | Communicating a diagnosis of the possibility of a need for end-of-life care |
| | 3.2 | Clear and accurate information |
| | 3.3 | Patient preferences |
| | 3.4 | Pain and symptom management |
| | 3.5 | Discharge home/out of the hospital |
| | 3.6 | The dying patient |
| The Family | 4.1 | Communication with family members |
| | 4.2 | Communication with family members – where death may be anticipated |
| | 4.3 | Communication with family members – sudden/unexpected death |
| | 4.4 | Patient discharge |
| | 4.5 | Supporting family members |
| | 4.6 | Responding to the needs of family members after a death |

The full document can be found if you [click here](#).

Appendix B: HFHQI Award Submission Scoresheet

| Project Name: | | |
|---|---|----------|
| Lead Applicant: | | |
| Essential Criteria | ✓ | Comments |
| Application received by deadline | | |
| Application supported by Chair or EOLC Committee | | |
| Hospital Senior Management Team are aware of the application | | |
| Hospital Lead for Quality Improvement is aware of application | | |
| Project meets the criteria and theme of innovation and/or integration | | |
| The project is linked to relevant Quality Standards for End-of-Life Care in Hospitals | | |
| Award request does not exceed €3,000 | | |
| Commitment from the hospital to meet any financial shortfall? (if applicable) | | |
| The project has clearly defined aims | | |
| There is a clearly defined governance/support structure for the project | | |
| Applicant has agreed to evaluating and measuring the impact of this project (if successful) | | |

Appendix B: HFHQI Award Submission Scoresheet

| Scoring Criteria | Max Score | Score Given & Comments |
|--|-----------|------------------------|
| Innovation of Idea | 4 | |
| Does the idea involve integration (score 1 for each): Between wards (1) Whole hospital (2) Between Care Settings (3) | 3 | |
| Impact of Project (Score 1 for each): <ul style="list-style-type: none"> • Patients • Family members/relatives • Staff • General Public | 4 | |
| Project Planning (score 1 for each): <ul style="list-style-type: none"> • PDSA reflection in plan • Evidence based • Engagement with stakeholders • Appropriate project team • Clearly identified tasks/objectives • Clearly identified risks/adverse effects • Management of resistance • Measures used | 8 | |
| If there a communication plan, is it: (score 1 for each) <ul style="list-style-type: none"> • Inclusive • Comprehensive • Creative • PR/Media dissemination considered | | |
| Potential for sustainability: <ul style="list-style-type: none"> • Short term (score 1) • Long term (score 2) | | |

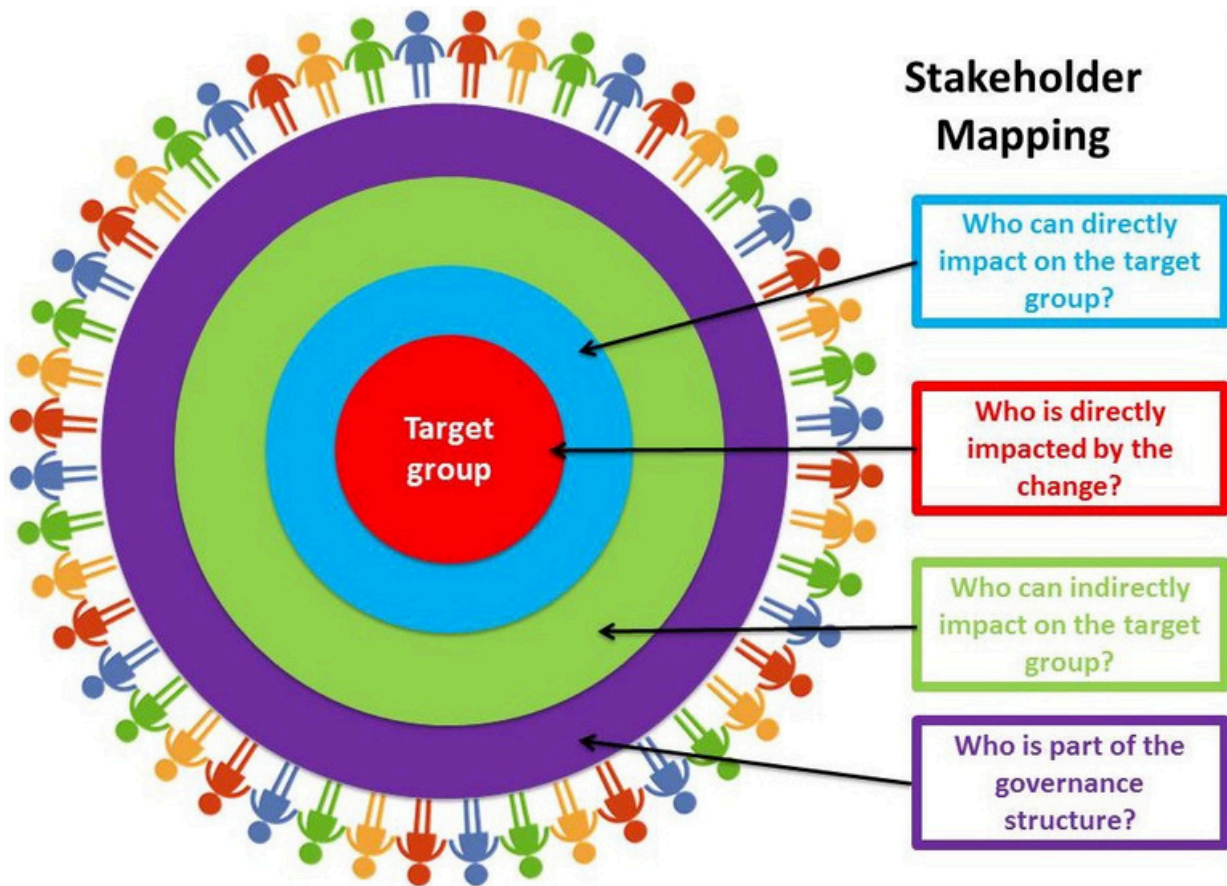
Appendix B: HFHQI Award Submission Scoresheet

| Scoring Criteria | Max Score | Score Given & Comments |
|--|-----------|------------------------|
| Potential for inspiring future projects/Ripple Effect <ul style="list-style-type: none"> • No (no score) • Yes - within Dept (score 1) • Yes - within Hospital (score 2) • Yes - within and without Hospital (score 3) | 3 | |
| Potential for Scalability <ul style="list-style-type: none"> • Within Hospital (score 1) • Hospital Group (score 2) • Nationally (score 3) | 3 | |
| Consideration and thought has been given to the evaluation of this QI project? <ul style="list-style-type: none"> • Initial suggestions (score 1) • Some planning but further exploration required (score 2) • Detailed evaluation plan with measurements noted (score 3) | 3 | |

Grant awarded
 Yes
 No

Further comments:

Appendix C: Stakeholder Mapping and Analysis Tool



Who is directly impacted by the change?

Who is the target group – is it patients, relatives, visitors or staff?

Who can directly impact on the target group?

Who will be closely connected to the target group and key to implementing the change?

Who can indirectly impact on the target group?

Who is closely connected to the key people (the blue group) and can influence how the change is implemented?

Who is part of the governance structure?

Who is part of the bigger organisational picture? Who provides governance support for the project?

Have you included everyone?

| Stakeholder Group | Target Group | Have a direct impact on the target group | Have an indirect impact on the target group | Are part of the governance structure |
|---|--------------|--|---|--------------------------------------|
| Who are they? | | | | |
| What is important to them? | | | | |
| How much impact does the project have on them (high, medium, low)? | | | | |
| What impact does the project have on them? | | | | |
| How much influence do they have over the project (high, medium, low)? | | | | |
| How can they contribute to the project? | | | | |
| How could they block the project? | | | | |
| How are you going to engage and communicate with them? | | | | |

Appendix D: HFHQI Award Budget Example

The below budget is based on the development of a leaflet and serves as an example for applicants.

Each budget will vary depending on the QI project, and it is important to consider all potential costs within the below. Additionally, we recommend sourcing quotes to ensure close estimation of project costs.

Note: Completion of a budget is a requirement for all HFHQI applications. However, we do not require invoices. Successful applicants will receive their award into the hospital's bank account.

| Activity | | Cost (€) |
|---|---|------------|
| Graphic Designer to design the leaflet and promotional poster | | 675 |
| Printing of 500 copies of the A5 tri-fold leaflet | | 500 |
| Printing of 21 A4 posters (one poster per ward) | | 100 |
| | | |
| Total cost of Project: | Amount of HFHQI Award requested (max €3,000): | Shortfall: |
| 1,275 | 1,275 | N/A |
| How has your hospital committed to meeting the shortfall (if applicable)?: | | |
| N/A | | |
| What resources do you need other than money (e.g., time, personnel, expertise)?: | | |
| Time, personnel and expertise is required for the following activities (as referenced within the project plan): | | |
| <ul style="list-style-type: none"> • Time to meet with stakeholders to discuss content and material • Expertise from clinical consultant and oversight for this project • Working with the marketing and communications team for promotion of this project on our social media platforms | | |