Spinal Cord Injury Implementation and Evaluation Quality Care Consortium (SCI-IEQCC)

Application Form

|  |
| --- |
| **Principal Applicant’s Information** |
| Name:  | Position:  |
| Prefix:  | Affiliation: |
| Email:  | Telephone: |
| **RHSCIR Site’s Information** |
| Name of Site: |
| City: | Province: |
| **Digital Signature** |
| Signature of Nominated Principal Investigator: | Date: |
| **Anticipated Impacts of Site Participation in SCI-IEQCC**Discuss in relation to:* Enhanced network development and/or collaborations
* Improved clinical care processes and outcomes
* Other impacts
 |
|  |
| **Organizational Readiness Assessment Questionnaire**  |
| **Check all the apply:** | **Comments** |
| [ ]  Affiliation with a RHSCIR Rehabilitation site (outside of Ontario) |  |
| [ ]  Quality and timeliness of RHSCIR Data collection  |  |
| [ ]  Confirmation of leveraged funds from other sources (Specify source and amount) |  |
| [ ]  Organizational Leader or Quality Champion identified |  |
| [ ]  Implementation and Evaluation Specialist identified |  |
| [ ]  Willingness to work toward Consortium goals and shared deliverables/benchmarks |  |
| [ ]  Ability to sign and execute Consortium Data Sharing Agreement and Non-Disclosure Agreement on behalf of organization |  |
| [ ]  Prior SCI Knowledge Mobilization Network (KMN) participation or other established expertise in implementation |  |

|  |
| --- |
| **Brief Operational Summary*** Which domain(s) will be collected? (see articles [here](https://pubmed.ncbi.nlm.nih.gov/?term=SCI-HIGH+Project&sort=date&size=20))
* What is the current related practice?
* Describe current data collection and quality, staffing and processes, and any engagement in addition to rehabilitation, i.e. in the acute or community phase of care.
 |
|  |
| **Stakeholder Engagement Activities*** Describe types of stakeholders (e.g. clinicians/administrators), type and timing of engagement, anticipated outcomes, and engagement planned with ON SCI-IEQCC
 |
|  |
| **Knowledge Translation and Dissemination Activities** * e.g. IES/Site Lead training local site staff, disseminating results to local site etc.
 |
|  |
| **Table of Milestones and Deliverables** |
| **Milestone and Deliverables** | **Performance Targets** | **Target Completion Date** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Budget Request** (Use excel template to complete this section) |

Please submit your completed and signed Application Form along with attachments to funding@praxisinstitute.org before the deadline. Note that consent must be provided as a condition of funding that the Principal Investigator to allow Praxis to publicly disclose information about the award including the title, term, award amount, and a summary of the initiative.