

## **PHC Practice-Based Research Challenge 2024**

For Point-of-Care Nursing & Allied Health Staff

## **Letter of Intent**

Your project idea or re	search question (Please limit to	o 250 words. Print below or attach ext	ra page.)
My project is linked to	the following PHC Strategic	Directions:	_
Quality-Forward	People-Forward	Learning-Forward	Partnerships-Forward
(For a description of these d	irections, visit https://www.missi	ionforward.ca/strategic-directions/)	
Name of Team Leader:		** Signature:	
Email:		Phone:	
List other team members a	nd <u>patient family partners</u> (if kno		DTE: at least one team member
List other team members a must be a point-of-care staf	nd <u>patient family partners</u> (if knor f (DC-1 for nursing, Grade 1 or 2 fo	Phone: Phone: NOTE: NOTE: NOTE:	OTE: at least one team member f paper if needed.
List other team members a must be a point-of-care staf	nd patient family partners (if known f (DC-1 for nursing, Grade 1 or 2 fo	wn) and their contact information. NO or allied staff). Use a separate sheet of	OTE: at least one team member f paper if needed.
List other team members a must be a point-of-care staf  Name:  Profession:	nd <u>patient family partners</u> (if knor f (DC-1 for nursing, Grade 1 or 2 fo	wn) and their contact information. NC or allied staff). Use a separate sheet of Name:	OTE: at least one team member f paper if needed.
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List other team members a must be a point-of-care staf  Name: Profession: Title: Dept/Unit: Email:	nd patient family partners (if known f (DC-1 for nursing, Grade 1 or 2 for nursing)	Phone:Phone:Phone:Phone:Phone:Profession:Title:Pept/Unit:	OTE: at least one team member f paper if needed.

For information or help completing this form, contact Aggie Black at ablack@providencehealth.bc.ca or 604-806-9970.

## **DEADLINE FOR APPLICATION: February 6, 2024 at 4:00 PM**

Submit completed forms to Wilma Chang by email at wchang@providencehealth.bc.ca. Decisions will be announced in early March.

If you are accepted for participation in the Research Challenge, the Research Challenge organizing team agrees to work with you to select a mentor for your project and provide research skills workshops. **By signing above**, you agree to communicate with the organizing committee any changes to your team or your participation, to complete the on-line Research Challenge evaluation surveys, and to encourage all team members to complete the surveys.

<sup>\*\*</sup>Agreement between Team Members and Research Challenge Organizing Committee