Imperial Young Persons’ Advisory Network Involvement Submission Request Form

**Section 1 - About you**:

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| **Name** |  |
| **Department/Faculty/Centre** |  |
| **PPIE lead** |  |
| **Email\*** |  |
| **Contact Number** |  |
| **Is this your first-time contacting the YPAN?** | **Y/N** (if yes, please answer the question below) |
| **How did you hear about YPAN?** |  |

\*Please provide your preferred contact email which members of the YPAN can use to contact you

**Section 2 – About the opportunity:**

**Short description of the project (maximum 150 words in plain language)**

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**Opportunity type [select one]:**

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| Event  Debate  Workshop  Questionnaire  Citizen Science | Community Researcher  Research Participant  Public/Patient Representative  Discussion  Live Stream |
| Other (please specify): | |

**Aim of the opportunity:** [What is the overall objective of this involvement opportunity? What insight are you hoping to get from the young people you are involving and how will this help with/improve your research plans/design etc?]

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**Involvement criteria** [please outline how many people you are looking for including any key requirements for involvement, insight or experience that you are looking for such as living in London, being of a certain age/gender, having personal experience of a certain health condition etc.]:

**When will the opportunity take place?** [Please include all details about when the opportunity will take place including dates and times, and an indication of how long the task will take (please specify if it is online only and the platform which will be used). Please also]

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**Where the opportunity will take place** [If an in-person event, please also include address and map and where relevant, please also include accessibility information of venues. If an online only event, please specify the platform (Zoom/MS Teams) that will be used]:

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**Describe payment and expenses:** [What payment will be provided to those involved e.g. in accordance with [NIHR guidance](https://www.nihr.ac.uk/documents/centre-for-engagement-and-dissemination-recognition-payments-for-public-contributors/24979) for travel, time and WIFI/data. Please specify any restrictions on reimbursements, for example travel costs will only be covered up to zone 5 on public transport. We will not cover overnight accommodation etc.]

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**What issues or barriers do you think you may come across with this event/activity, and what could be done to minimise them?**

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**Opportunity close date:** [the date you would like e.g. expressions of interest or completion of questionnaire completed by]

**Feedback date:** [this is the date you will be able to provide feedback to those involved, see [Guidance for researchers: Feedback by the Centre for Research in Public Health and Community Care](https://www.clahrc-eoe.nihr.ac.uk/wp-content/uploads/2016/05/Guidance-for-Researchers-PPI-Feedback_2018.pdf) for further information about feedback]

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**Section 3 – Evaluating your involvement activity**

How do you intend to evaluate the impact of your involvement activity? Please include the approach you will take and/or what you will measure or capture. If you need support with this part, please get in touch with the Patient Experience Research Centre ([publicinvolvement@imperial.ac.uk](mailto:publicinvolvement@imperial.ac.uk)). You can also find further information and guidance on evaluating your involvement activity on our [webpage](https://www.imperial.ac.uk/patient-experience-research-centre/ppi/ppi-resource-hub/).

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**Section 4 – Confirmation**

In order to have access to the Imperial Young People’s Network, you will also need to provide PERC with the following confirmation (please tick each box):

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| * I have undertaken appropriate safeguarding training including the [Imperial safeguarding training](https://rise.articulate.com/share/shVR8LNQOvvLO9s4p-Aod4OvbgwC7d8r#/) and/or the [NSPCC Safeguarding training for 16 -25 year-olds](https://learning.nspcc.org.uk/training/safeguarding-young-adults-16-to-25-year-olds) * I have read and will be acting in accordance with Imperial College’s/Imperial Healthcare Trust’s Safeguarding Policies (including holding a current DBS where required) * I will store and keep secure any contact details and other personal information provided to me by the young people in accordance with the Data Protection Act 2018 * I will feedback to the young people and to PERC about the impact of their activity on my project within one month of the opportunity having taken place * I understand that I need to complete a risk assessment for the event/ activity in accordance with Imperial College/Trust policies [please see risk assessment form [here](https://www.imperial.ac.uk/safety/forms/) under ‘events and festivals’]. |  |

I, [insert name] confirm that the confirmations I have provided above are true and correct.

Role:

Date: