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| **ARC West Proposal for Collaboration** | | |
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| ARC West conduct research which is novel and of national/international importance, and in response to priorities from the health and care system that fit within our four Research Themes. | | |
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| **1. Proposed Collaborator details** | | |
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| Name of proposed collaborator | Click or tap here to enter text. | |
| Current role | Click or tap here to enter text. | |
| Institution | Click or tap here to enter text. | |
| Address | Click or tap here to enter text. | |
| Telephone | Click or tap here to enter text. | |
| Email | Click or tap here to enter text. | |
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| **2. Proposed Project** | | |
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| *Please provide a short summary of the proposed project – proposed plan, aims, objectives and potential outputs and impact with suggested timelines (maximum 500 words - boxes will expand to accept additional text)* | | |
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| Click or tap here to enter text. | | |
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| **3. Existing evidence** | | |
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| *What is already known on this topic? (maximum 500 words)*  *Is there a systematic review?* | | |
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| Click or tap here to enter text. | | |
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| **4. Health and care system priority** | | |
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| *What health and care priority area does your project address (e.g., children and young people’s mental health?)* | | |
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| Click or tap here to enter text. | | |
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| **5. Which ARC West research theme does your project relate to?** | | |
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| Public health and prevention | |  |
| Integrated and optimal care | |  |
| Mental health | |  |
| Healthier childhoods | |  |
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| **6. Support required from ARC West** *(please mark all required, and elaborate below)* | | |
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| Project/study design | |  |
| Qualitative | |  |
| Quantitative | |  |
| Mixed methods evaluation | |  |
| Health economics | |  |
| Systematic review/Evidence synthesis (incl. scoping/rapid review) | |  |
| Other, please specify below: | |  |
| **Please describe the support you are requesting from ARC West:** | | |
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| Click or tap here to enter text. | | |
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| **7. Health and care system partners** | | |
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| *Please list which NHS, CCG, Local Authority or other service providers are involved in this proposal* | | |
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| Click or tap here to enter text. | | |
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| **8. Bristol Health Partners Health Integration Teams (HITs)** | | |
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| *Please list which HITs (if any) are involved in the proposal:* | | |
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| Click or tap here to enter text. | | |
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| **9. Funding/co-funding** | | |
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| *Is there funding to support/co-fund this work? If so, please provide details:* | | |
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| Click or tap here to enter text. | | |
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| **10. Further information?** | | |
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| *Is there any further information you wish to provide:* | | |
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| Click or tap here to enter text. | | |