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# **EMPAN Project Selection Evaluation Form**

# **Project Details**

- Project Title:
- **Project Type:** (Audit / Service Evaluation / Quality Improvement / Research)
- Proposer(s):

**Date of Assessment:** 

# **Step 1 – Feasibility and Potential Assessment**

Assessor(s):	
Criteria	Yes / No
1. The proposer is a Resident Doctor primarily working in Paediatrics within	□ Yes /
the East Midlands.	□ No
2. The proposed project has clearly defined aims and objectives.	☐ Yes /
	□ No
3. The proposed project has a clear and appropriate methodology for its aims	□ Yes /

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Outcome	of Sten	
Outcome	or Step	

Feedback to Proposer(s):

and is achievable within the EMPAN framework.



### Step 2 – Selection Criteria

Date of Assessment: Assessor(s):

Scoring Criteria (Scale: 1 - Strongly Disagree to 5 - Strongly Agree)

Descriptor	Score (1- 5)
1. The proposer has demonstrated enthusiasm and engagement regarding their submission.	
2. The proposer has demonstrated an understanding of the background and context of their submission.	
3. The proposer has demonstrated the ability to proceed with this proposal OR has identified areas where they require support.	
4. The proposed project is relevant to Paediatric practice within the East Midlands.	
5. The proposed project addresses an interesting and important research question.	
6. The proposed project is achievable within the EMPAN framework.	
7. The proposer has considered an appropriate methodology for the study.	
8. There are no major concerns about conducting this study within EMPAN. (Yes / No)	☐ Yes / ☐ No

### **Final Selection Outcome**

- Total Score:
- Rank within Selection Process:
- Decision (Accepted / Requires Revision / Declined):

### Feedback to Proposer(s):

#### **Notes:**

- If a project fails Feasibility (Step 1), feedback must be provided with recommendations for refinement before reconsideration.
- Projects passing Selection Criteria (Step 2) will be ranked based on total score, with higher-ranked projects prioritized for EMPAN support.