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| **THE BUTTERFLY IMPACT AWARD 2024Project / Initiative Submission Template** |
| **Project/ Initiative Title:** |
| **Name, position and main affiliation of the professionals responsible for the initiative (max 6)**  |
| **Contact email:**  |
| **Origin of the project** |  |
| **Problem to be addressed**  |  |
| **Objectives - Expected Patient Safety impact**  |  |
| **Healthcare settings / departments where the project was tested or implemented** |  |
| **Methodology – Key actions**  |  |
| **Resources used** (justify the non-technological, low-tech or open source approaches) |  |
| **Results: Achieved patient Safety impact (evidence-based)** |   |
| **Most important elements of innovation**  |  |
| **Barriers and enablers to adoption by healthcare professionals or patients**  |  |
| **Keys implementation points or conditions** |  |
| **Applicability/transferability**  |  |
| **Conclusions** |  |
| *By submitting, I confirm that the project/initiative has not already been the subject of a published scientific paper, nor have been presented at another patient safety international meeting.* |