Email completed Application form to prosper@essex.gov.uk

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| --- |
| **Home Name:**  |
| **Name and contact details of person completing the form:** |
| **Bronze Award** |
| **Please refer to the ‘Prosper Window Sticker Criteria’ Document and use the following boxes to evidence how you are meeting the various points of the criteria required.** |
| **Routine Data collection on one or all 3 areas (falls, pressure ulcers, UTI’s) for a minimum of six months.**  |
| **Analysis of the data to see what area to focus on.**  |
| **Small tests of change with interventions focusing on the area where improvement is needed as identified by the data analysis. These interventions could be trialled via the ‘Plan Do Study Act’ cycle, or other ways.**  |
| **Please use this box to add any additional evidence which you feel may support your application** |