



Public Only Consultant Contract 2023 Innovation Fund

Purpose

The **Public Only Consultant Contract 2023** facilitates Medical Consultants and Dental Consultants (referred to hereafter as Consultants) to foster innovation in patient care. In order to support this, €8,000 per annum will be made available on application for each consultant for research and innovation projects (an expression that has a broad meaning, to include academic research and innovation projects) and such other similar projects as may be specified by the Employer from time to time. Such projects will be undertaken by the Consultant and/or their team, under the direction of the Consultant. Access to and decision on the appropriate use of such funds will be made by Consultants holding the **Public Only Consultant Contract 2023 (POCC23)** who have generated same, in conjunction with the relevant Clinical Director/Executive Clinical Director / Line Manager.

Funding model

The funding will be made available to all employers of Consultants holding the POCC23 within the HSE and Section 38 hospital and will be ring-fenced to fund service delivery and enhancements in the services / clinical programme in which the monies have been accrued. Governance for the approval and drawdown of such monies rests with the respective Hospitals' Chief Executive Officer, CHO Chief Officer or equivalent and signed support must accompany each innovation fund application. Administration of the innovation fund will be supported centrally through the HSE Spark Innovation Programme and can be accessed by POCC23 consultants in accordance with guidance outlined below.

Consultants identified a number of challenges in 2024 and 2025, including delays in fund transfers, limited time to utilise funds before 31 December, insufficient time to implement feedback from the Spark Team, and inefficiencies in obtaining required signatures for approved projects prior to fund transfers.

To address these issues and speed up the process, the below changes have been introduced:

- Pre-submission phase: Consultants are strongly encouraged to submit their applications via the Consultant Innovation Fund Pre-Submission Application Form on the application portal to receive feedback on their proposal. Applications must be submitted by **16 January 2026** and will receive feedback before the **06 March 2026**.

Note: Applications submitted after 16 January 2026 will not be eligible for feedback.

- Final application deadline: **03 April 2026**. Applications submitted for final review via the Consultant Innovation Fund Formal Application Form on the application portal will be assessed solely against the CIF guidance using the *Application Assessment Checklist*, and no further changes to the application will be possible after submission.

- Fund transfers: Scheduled for **February, April, and May 2026**. The final transfer will occur in May 2026.

Note: All required documentation must be returned to the Spark Team by the 6th of each month to be included in that month's fund transfer.

- The **03 of April** will be the final deadline for 2026 applications.

Items encompassed

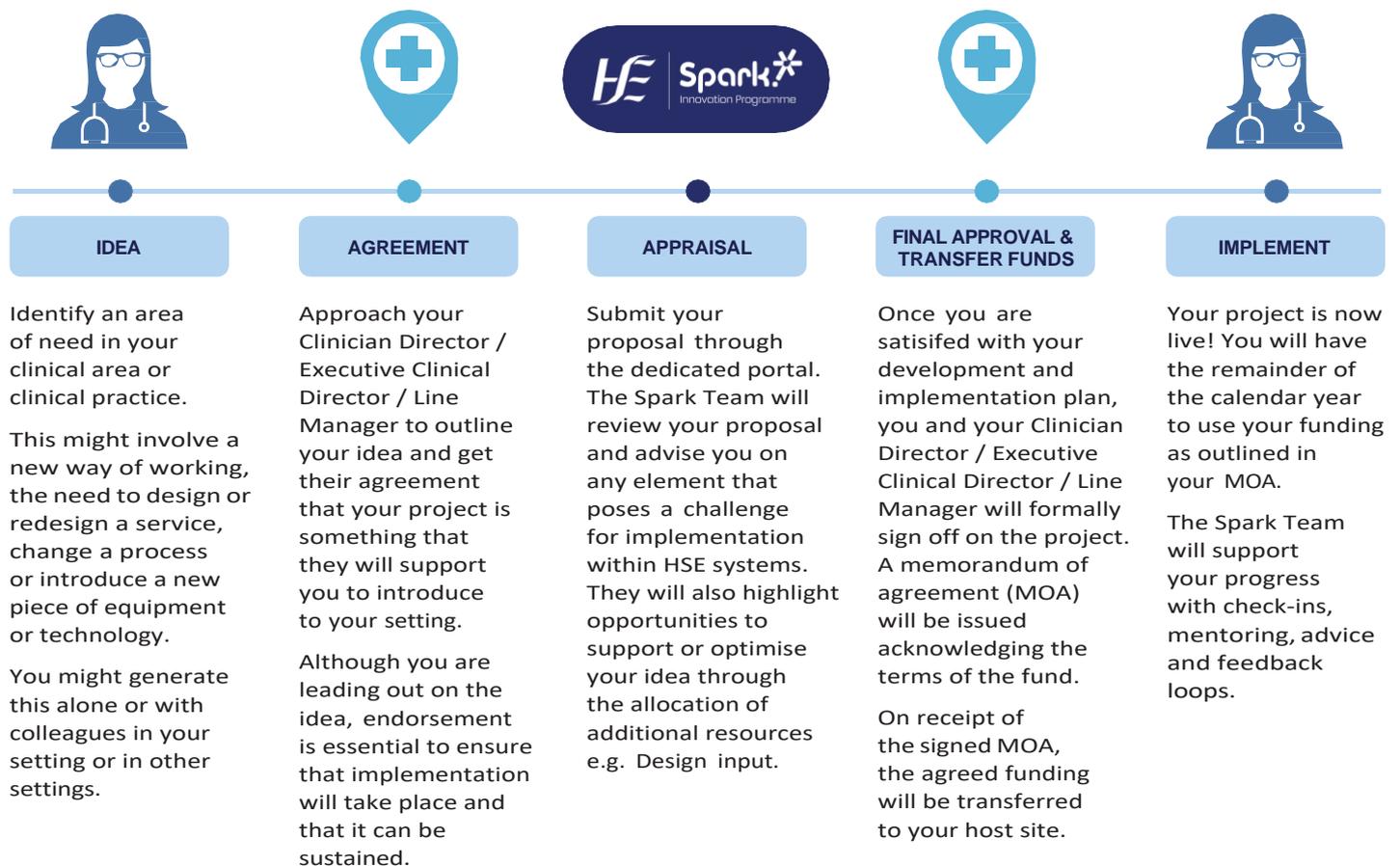
The innovation fund provides funding for research and innovations that are not covered under the normal allocation of equipment/staff/other resources by the employer and are directed at patient care. The amount is available for each Consultant on the **Public Only Consultant Contract** and may be pooled by the relevant Consultants. Examples of items that may be funded under this initiative include, but are not limited to:

- Innovation in terms of piloting a new development / adoption of new technologies
- Innovative research / payment / commissioning of an external researcher (i.e. separate to HSE employment)
- Hosting a specialty based conference (aligned with innovative practice).
- Piloting new ways of care delivery in acute, community or other settings / developing new ways of working
- Process improvement / Service improvement
- Utilising Automation, AI and machine learning as a new way / better way of delivering services
- Human Centred Design Led Innovation
- The purchase / leasing of equipment / diagnostic appliances etc. necessary to support the above
- Research conducted with the explicit intention towards innovation and/or translation

Delivery model via SPARK Innovation Programme

The Spark Innovation Programme will facilitate the administration of the innovation fund associated with the POCC23 in addition to a general annual fund to support the research and innovation activity of frontline healthcare workers. The Spark programme activity is underpinned by expertise in project appraisal and selection, experience in providing frontline healthcare workers with the right supports to deliver on their innovation activity and skills for mentoring intrapreneurs and entrepreneurs across the Irish Healthcare system.

Overview of the process



Guidance for the management and dissemination of the Innovation Fund

1. Overview of fund allocation and budget

- Funding of up to €8,000 per Consultant (as specified in their contract of employment section 17.2a) will be made available per annum. This figure may be exceeded in circumstances where Section 17.4 is invoked (see below) with no roll-over between calendar years from 2024 onwards
- The pooling of such supports in cases where multiple such Consultants work together in respect of such projects can be facilitated. Using this method, Consultants can apply for funding up to a maximum of €50,000 pooled funds per innovation/research project, see [Form A](#)
- [Form D](#) facilitates the pooling of Innovation Fund allocations by consultants under the Public Only Consultant Contract (POCC) 2023. This form is to be completed by consultants who wish to pool their individual Innovation Fund allocations to collectively support a shared project. By completing this form, consultants formally agree to combine their funding contributions, ensuring all pooled resources are used exclusively for the specified project.

Once completed, this form must be uploaded to the application portal as part of the submission process.

- Each application will be considered in its own right in order to confirm that the required criteria are met. It is not a competitive process.
- The POCC23 contract also provides for €12,000 per annum for CME funding. Any unspent balance of the Consultant's CME funding may be transferred for the purposes of innovation activity in any given year by completing [Form B](#) (See section 17.4 of POCC23 for details)
- With the approval of the Consultant's Clinical Director/ Executive Clinical Director/ Line Manager, the balance of unspent innovation funding may be transferred for the purposes of CME in the case whereby the Consultant's CME allowance is inadequate to meet their CME expenses in any given year by completing [Form C](#) (See section 17.3 of POCC23 for details).

Per Calendar Year	Individual POCC23 Innovation Funding	Individual POCC23 Unused CME	Individual POCC23 Unused Innovation Funding	Pooled with other POCC23 applicant(s)	Pooled with Spark Funding call
Amounts (within calendar year)	Max 8,000	Max 12,000	Max 8,000	Max 50,000	Funding limit related to the specific call
Mechanism	Application through Form A	Application through Form B	Application Form C	Application Form A	Application form associated with the specific call
Mechanism for funding allocation	Rosetta transfer process	Rosetta transfer process	Rosetta transfer process	Rosetta transfer process	Rosetta transfer process

2. Funding allocation principles

- The funding is available to fund service delivery and enhancements in the services / clinical programme in which the monies are accrued.
- The funding is intended for use towards research and innovation that is directed at patient care and does not cover funding for equipment / staff / other resources by the employer that should be included in the normal allocation of funding.
- The funding is available to fund research / innovation that incorporates patient initiatives.
- The innovation fund is not to be considered a substitute source of funding for routine costs e.g. funding of a routine job post, general renovations, funding of routine equipment etc.

- The funding amount sought must be justified and based on a clearly laid out budget.
- The intended use of the innovation funding must clearly demonstrate value and impact for patients/service users and/or staff and/or the organisation
- The funding must be used for the purpose first outlined at the application process
- Funding proposals (individual and combined) are subject to national procurement rules.

3. Application submission process / Accessing the Innovation Fund

Upon agreement regarding the target/focus of innovation at their host site with the Clinical Director/Executive Clinical Director/Line Manager, consultants will submit their application for review and processing via the dedicated digital portal hosted by the HSE Spark ([Click here](#) or See Form A in appendix ii).

HSE Spark undertake to appraise the application and link with the applicant as appropriate to provide support and advice. The final project and associated funding is written up into a Memorandum of Agreement (MoA) and issued for signing by the consultant, Clinical Director/Executive Clinical Director/Line Manager and CEO (or equivalent).

Following return of the signed MoA, the funding for the project is transferred from HSE Spark to the host site in the next available Rosetta Transfer window.

Please note that the final transfer window to allocate funding is before the end of November each year.

4. Support

Applicants to the POCC23 Innovation Fund are encouraged to access the many supports made available by the HSE Spark Innovation Programme to define and design the details of their innovation proposal/project. See Appendix (ii)

5. Reporting

All Consultants utilising the POCC23 Innovation Fund are required to report on the progress, outcomes and outputs of their innovation activity in the interest of good governance but also to facilitate learning that can then be shared.

6. Scaling and Diffusion

Innovations that have proven successful in one setting, clinical area or region should be made available on an 'open-source' basis or published in a peer reviewed journal (other

than in circumstances for example where IP or patent considerations may take precedence), so that impact can be shared widely across the healthcare community.

7. Evaluation Criteria for Innovations

All applications submitted to HSE Spark are evaluated within a four-week period to ensure that they align with the principles of funding allocation as outlined above.

Evaluation is based on 4 core pillars of value proposition:

- 1 Opportunity assessment: Assessment of Desirability, Feasibility and Viability
- 2 Innovation: Novelty and uniqueness
- 3 Due Diligence & Horizon Scanning: Anticipating current and future needs
- 4 Prioritisation Matrix: Identifying which projects to prioritise by considering impact, environmental and systems variables. Group and individual applications will carry the same weighting.

Applications for funding may be rejected where the value proposition of the proposal is unclear, where the value proposition is not evidenced or in the event that the request does not comply with the funding application principles as outlined above. The HSE Spark Innovation Programme as administrators / facilitators of the fund will endeavour to support the applicant in reframing their application to align with the funding allocation principles and evaluation criteria. The Consultant has an option to appeal decisions as outlined below.

8. Appealing rejected application for funding

Applicants have the right to appeal a decision not to support or fund a funding request.

Appeals related to decisions made by the HSE Spark programme must, in the first instance, be sent by email to spark@hse.ie within four weeks after the notification of the decision to the applicant. A meeting will be arranged to discuss the matter not later than seven working days following receipt of the appeal. In the event that a dispute remains between the Applicant(s) and the HSE Spark Innovation Programme regarding granting funds, the Consultant will have the right to seek redress in respect of their terms and conditions of employment in accordance with the Grievance Procedure provided for in Section 27 and Appendix 6 of the POCC23.

A similar appeals mechanism will address any disputes arising between the Applicants and HSE Spark Innovation Programme regarding the reallocation of funds between CME and Innovation Funds.

Similarly, consultants have the right to appeal a decision by their Clinical Director/ Executive Clinical Director/Line Manager to not support an application. Again, this can be managed in accordance with the Grievance Procedure provided for in Section 27 and Appendix 6 of the POCC23.

Appendix (i): Frequently Asked Questions:

1. What is the purpose of the Innovation Fund under the terms of the Public Only Consultants Contract?

The Innovation Fund under the POCC23 has been developed to empower and support Consultants to be active agents of change and innovation in the services they lead. It is a unique fund dedicated to leveraging the knowledge and skills of senior clinicians for the purposes of innovation.

2. What is defined as innovation under the terms of use for the innovation fund?

The innovation fund provides funding for research and innovations that are not covered under the normal allocation of equipment/staff/infrastructure/other resources by the employer and are directed at patient care. Innovation is defined as a novel idea, process, innovative/translational research, technological support or new way of working that represents a 'step change' in the way in which services are currently designed or delivered in practice. Examples include:

- Innovation in terms of piloting a new development
- Equipment/diagnostic appliances etc. necessary to support the above
- Service enhancements / improvements to the clinical pathway
- Innovative research / supporting the translation of research into practice and new ways of delivering services

This list is by no means exhaustive. The nature of innovation is that new needs and opportunities emerge constantly. As such, the HSE Spark Innovation Programme will remain responsive to including new innovation directions that emerge over time.

3. Am I eligible to apply for the innovation fund?

All Consultants who are contracted under the Public Only Consultants Contract are entitled to access an annual innovation fund of up to €8,000 annually on a pro rata basis. However, applications must also satisfy the eligibility and assessment criteria set out in the National guidance. Consultants are strongly encouraged to review their application against the 'Application Assessment Checklist' prior to submission to ensure their application is compliant with the guidance.

4. How do I apply for the innovation fund?

Simply complete the dedicated electronic application form. Consultants are strongly encouraged to engage in the optional consultation and pre-submission phase, where you can discuss your project and receive feedback to strengthen your application before submitting. Once submitted to the formal application submission, applications will be assessed using Application Assessment Checklist, in line with the national and CIF guidance, and **further changes will not be possible.**

5. Will the funds be sent directly to me?

No, the funds will be transferred to your organisation from HSE Spark through the internal BPC transfers in February, April and May. Your site will then trigger the use of the funds in the normal manner. For example, if the application was to purchase a device, the funding for the device is provided to the site to make the purchase for the

proposed project. The equipment remains the property of the site. In the event of pooling the innovation fund, you may elect for your allocated funding to be released to a partner organisation within the HSE.

6. What supports are available to me from the HSE Spark Innovation programme?

Supports include access to education, mentorship, advice, ideas workshopping, boot-camps etc. Feedback and guidance on proposed projects from the Spark team through the optional consultation and pre-submission phase. Support packages for teams and individuals are curated on a bespoke basis relative to the needs and objectives of the innovator(s). A full list is available on www.hse.ie/spark.

7. Can equipment be purchased with the innovation fund?

Yes, equipment can be purchased to support your innovation or research project. All equipment must comply with relevant regulations, including CE approval and MDR regulations where required, and must follow procurement rules under the National Financial Regulations Document B-1 Procurement. In addition, applications that include the purchase of equipment must have confirmation of support to ensure suitability and compliance from Clinical Engineering and/or ICT and comply with HSE procurement policies.

8. Can I implement any innovation/research I wish using the innovation fund?

At its core, innovation and research must comply with some core fundamentals such as governance, quality and patient safety. Research and innovation activity must add value, protect the patient, represent value for money, compliment 'systems thinking' and abide within the rules of purchasing frameworks, regulation and competition law in Ireland.

Research proposed under this initiative must have an explicit intent towards innovation and/or translation.

The HSE Spark Innovation Team will be on hand to assist you, if required, in refining your idea to ensure alignment with the factors outlined above **before you submit your formal application**.

9. Can I procure external services to help me deliver my innovation?

Yes, you can engage third-party suppliers (e.g., designers, researchers, etc.) to facilitate or contribute to your project, provided normal tendering and recruitment rules are followed. For projects that involve workforce dependency or are reliant on hiring staff, applications must demonstrate how the project can be sustained beyond the duration of CIF funding.

10. Can I pay for a course or training with the innovation fund?

In exceptional circumstances, and with approval from the Clinical Director/Executive Clinical Director/Line Manager, the balance of innovation funding may be transferred for CME if CME allowance is insufficient. The final transfer in Spark takes place in November. Therefore, consultants who meet the exceptional circumstances criteria must submit their transfer request, together with the required confirmation of approval from their Clinical Director, before 01 November.

Please note that retrospective transfers are not eligible, and transfers apply only to the innovation fund from the relevant year.

11. How much funding am I entitled to on an annual basis?

As a POCC23 holder, you are entitled to an annual fund of €8,000 on a pro rata basis.

12. Can I combine my application with another Consultant who is contracted under the POCC23 contract?

Yes, you can submit a joint application with other Consultants contracted under the POCC23 contract to engage in collaborative work up to the value of €50,000. The electronic application portal will allow you to indicate if you are engaging in joint work with other colleagues on the POCC23 contract. To be eligible for combined funding, all applicants must be employed under the POCC23 contract.

13. If I am applying for joint funding with colleagues across multiple sites, which site will the funding be released to?

The preferred receiving site can be nominated by the primary applicant. Agreement will be made on a case-by-case basis with Clinical Director/Executive Clinical Director/Line Manager and HSE Spark Innovation Programme.

14. What considerations are made in terms of desirability, feasibility and viability when evaluating applications?

- Managing duplication of effort: Applications will be evaluated to monitor for the duplication of already validated tools and technology or indeed tools and technology which have not met the burden of suitability in other settings. The HSE Spark Innovation Programme will hold a central repository of applications and activity to mitigate against unnecessary duplication and ensure value for money.
- Alignment with organisational goals: Applications will be evaluated to determine whether or not Management / the employer have been made aware of, and are supportive of, the proposed innovation.
- Complex system considerations: Application will be evaluated to ensure that research and innovation opportunities have been considered in the context of the wider complex health system.
- Innovation in a highly regulated environment: Applications will be evaluated to ensure that proposals that pertain to equipment selection and procurement are in line with medical device regulation requirements, European Safety Standards and HSE procurement rules.
- Quality and Patient Safety: Applications will be evaluated to ensure that applicants uphold the standards of patient safety as the bedrock of health care provision and will be subject to the quality and patient safety guidelines of their organisation and the HSE.

15. Can I apply if my project has received funding from the CIF previously?

No. Repeat funding for the same project is not permitted. However, projects that build on a previously funded CIF project may be considered if they demonstrate significant changes or additional value. In such cases, applicants must provide evidence of outputs from the original funded project to support consideration of

funding a second phase.

16. Can non-consultants lead a CIF project?

No. The CIF is designed to be POCC23 consultant-led. Non-consultants may collaborate but cannot be lead applicants.

17. Are routine service delivery projects eligible?

No. Routine service delivery or procurement-only initiatives are not eligible. The CIF supports innovation with measurable impact.

18. Can I submit a project that is research-focused?

Research-related projects are welcome where they include a strong translational component with demonstrable impact on service delivery, patient care, or system improvement. However, pure research projects (e.g., basic science, literature reviews, feasibility studies or registry development without a clear service-delivery impact) are not eligible.

19. Do applications need to demonstrate alignment with national/HSE priorities?

Applications should demonstrate appropriate alignment and free from conflict with HSE priorities such as Sláintecare, HSE Digital Health Strategy, National Clinical Programmes, etc.

20. Can training or simulation (SIM) activities be funded through the CIF?

Training or simulation (SIM) activities may be considered fundable where they are an essential component of delivering an innovative new service or a significant change to an existing service. Such applications will be assessed on a case-by-case basis. However, the CIF does not fund the development or refurbishment of simulation centres, nor related infrastructure such as centres of excellence, furniture, pods, or similar capital items.

21. Are POCUS (Point-of-Care Ultrasound) projects eligible for CIF funding?

POCUS applications are only considered innovative for CIF purposes, when they are directly tied to the development of a new clinical pathway. Applications must clearly demonstrate return on investment and provide strong cost justification.

22. Can I use CIF funding to cover PhD/MD fees, stipends, or dissemination costs such as conferences and publications?

No. CIF funding cannot be used to pay for PhD or MD fees, stipends, or similar academic costs. In addition, dissemination expenses such as publication fees, conference attendance and travel, or academic posters are not eligible for funding. The CIF is focused on supporting innovation projects that deliver direct service or patient care impact.

23. Do I need to provide a detailed budget with my CIF application?

Yes. All applications must include a clear and detailed budget that outlines how the requested funding will be used. This breakdown is required to support auditing, transparency, and good governance, and helps ensure that the proposed costs are appropriate and aligned with the aims of the project.

24. Can CIF funding be used alongside industry funding or matched with external grant

Yes, in certain circumstances CIF can be used in conjunction with external or industry funding, provided the project remains compliant with the CIF eligibility criteria and governance requirements. Applicants must ensure that any co-funding arrangements are transparent, clearly documented, and do not result in duplicate funding for the same activities or outputs. Each application will be assessed on a case-by-case basis, and applicants should highlight any proposed industry partnership or matched funding in their submission.

25. What is the maximum amount of funding a project can receive, and can applications be pooled for a single project?

The maximum value of CIF funding that can be awarded to a single project is €50,000. Consultants may pool their individual allocations to support a shared project, provided the combined total does not exceed €50,000. Applications cannot be divided into multiple pooled applications for the same overall project.

26. What are the next steps if my project is approved?

If your project is approved you will be asked to return a signed Memorandum of Agreement (MOA), confirmation of CME availability, your POCC start date, and relevant departmental approvals (e.g., Clinical Engineering, ICT, or University support) as relevant to your project. Once documentation is returned, the Spark team will schedule a transfer of your project funds in the next available transfer (February, April, or May, with May being the final transfer window).

27. If my application is not approved, can I use my innovation fund for another project

Yes. If your original application is not approved, you may submit a different project for consideration or reallocate your funding to as a pooling consultant to a different project, provided it is submitted before the deadline for formal application submissions. **After this deadline, funding cannot be reassigned to a different project.**

28. Are there any post-funding requirements?

Yes. If your project is approved, you will receive a MOA which you are required to sign. As part of this MOA, you must complete two post-funding obligations: a 6-month evaluation report and a 12-month final report.

Applications from consultants who have previously received CIF funding but have not submitted the required reports for those projects will have their new application assessment paused until the outstanding reports are received. Applicants will be notified if reports are outstanding, and given sufficient time to submit all required reports before the final fund transfer.

Appendix (ii) Current version of forms for informational purposes

Form A

POCC Innovation Fund Application Form

PRELIMINARY QUESTIONS

Name: (required)

Clinical Director/Executive Clinical Director/ Line Manager Support

Please confirm that you have support from your clinical director/executive clinical director/line manager to carry out this project. If you do not have management support we recommend that you do not proceed with your application. Signed confirmation of support is not required at this stage but will be required prior to transfer of funds.

I confirm that I have management support for this project

Clinical Director/Executive Clinical Director/Line Manager Name: (required)

Clinical Director/Executive Clinical Director/Line Manager Email: (required)

Name of Hospital CEO, CHO Chief Officer or equivalent: (required)

*Signed approval for the project will be required from the Chief Executive Officer/Chief Officer/ and Clinical Director or equivalent at the MoA stage.

Projects that fall under the following categories will NOT be eligible for funding:

- Development of Electronic Health Records or similar
- Research without clear translational component
- Research publication fees
- Medical technology that is not CE marked
- Projects intended for commercialisation

I confirm my project does not relate to the categories listed above

Projects that involve new technology must satisfy the following criteria:

- Technology is CE marked
- Technology integrates with national digital strategy
- Your site has the necessary infrastructure to facilitate implementation

I confirm my project proposal satisfies the above criteria

Not applicable. My project does not relate to new technology.

Application Information

Name: (required)

Phone number: (required)

Email: (required)

POCC Start Date (required)

Please indicate your WTE status (e.g. 4 day/week = 0.8): (required)

IMC Number: (required)

Specialty: (required)

Within which health region do you work? (required)

What county do you work in? (required)

Please name the specific healthcare site where this project will be implemented. Please note that this is the location to which funds will be transferred if your application is successful. (required)

To which healthcare setting does your project relate? (required)

Pooling

Are you making a joint application to pool funds with another consultant?

- Yes
- No

If Yes, Please provide the following details:

Name(s) of collaborating consultant(s): (required)

IMC Number(s): (required)

Specialty: (required)

Email addresses: (required)

Project Information

Project Title: (required)

Services involved in the initiative: (required)

Project Details

Description of Project: (required)

(Describe the proposed innovation and explain why it is novel. Please outline the resources required and the proposed timeline (including start date) for implementing the project. If this is a research proposal, please outline how this is translational/innovation research as opposed to traditional research.)

Expected Outcomes and Results (required)

Outline the expected impact of the project on your service, service user and/or staff.

Primary benefits may include reduced wait times, improved service user or staff experience, cost savings, time savings, increased capacity, and service improvement

Secondary benefits include increased staff engagement and opportunities for interdisciplinary collaboration or creating relationships with other bodies.

Metrics:

(In bullet points, list the specific metrics that will be used to measure the impact of the project.)

Does your innovation align with any HSE/government policy or strategy?

- Yes
- No

If yes, please outline which one(s): (required)

Does your project align with a clinical programme?

- Yes
- No

If yes, please state which one(s): (required)

If your application involves the purchase of equipment intended to be used in a clinical environment, please confirm that it is clinically indicated and appropriate for use with the target population.

(required)

- Yes
I confirm that the equipment is clinically indicated and appropriate for use with the target population
- No
I cannot confirm that the equipment is clinically indicated and appropriate for use with the target population
- N/A
My application does not involve the purchase of equipment intended to be used in a clinical

Please give details of any pilot studies/prototypes that have been undertaken:

(required)

Proposed Scheduled Timeline:

(Please provide details on the project's purposed scheduled timeline - expected launch and completion date, procurement timeframe.)

Is there a research component to this project?

- Yes
- No

If yes, please outline any university/college/research partners: (required)

Funding:

Total amount of funding being sought: (required)

If pooling funds with other POCC23 consultant, please breakdown the contribution from each individual:

Please declare any other partners/funders (industry, charities etc.) on this project and outline the amount they will provide.

Please outline a breakdown of full costs for this project, the total amount of funding being sought and the expected drawdown date: (required)

Provide details of any contribution of the recipient team/service in relation to project funding and staffing resources: (required)

Please provide the name and contact details of the person in your finance/accounting department that will be processing the transfer of funds: (required)

Form B

Transfer of Unallocated Continuing Medical Education (CME) fund to Innovation Fund

Name: (required)

Phone number: (required)

Email: (required)

IMC Number: (required)

Specialty: (required)

Funding:

Please indicate the amount requested to be transferred from the CME fund to the POCC23 Innovation Fund: € _____

Please state the name of the project(s) the transferred funds are intended for:

(Projects must be approved prior to transfer of additional funding)

I confirm that I have exhausted my allocated innovation funding as per the terms of my POCC23 contract for the current calendar year.

(Please note, applicants should have exhausted their innovation fund allocation before requesting reallocation of CME funding for the purposes of innovation)

Signed _____
POCC23 Applicant

Express approval is required to facilitate the transfer of unallocated CME funds.

Please upload a signed letter from your Clinical Director/Executive Clinical Director/Line manager to support this. (required)

I confirm that the CME funding stated above remains unspent by (consultant applicant) and I approve the funding to be transferred to the POCC23 innovation fund in HSE Spark.

Signed _____
Clinical Director/Executive Clinical Director/Line manager

Form C

Transfer of unallocated Innovation Fund to CME

Name: (required)

Phone number: (required)

Email: (required)

IMC Number: (required)

Speciality: (required)

Please indicate the amount requested to be transferred from the POCC23 Innovation Fund to the CME fund: € _____

Please state the CME opportunity the transferred funds are intended for:

I confirm that I have exhausted my allocated CME funding as per the terms of my POCC23 contract for the current calendar year.

(Please note, applicants should have exhausted their CME fund allocation before requesting reallocation of innovation funding for the purposes of CME)

Signed _____
POCC23 Applicant

Express approval is required to facilitate the transfer of unallocated innovation funds. Please upload a signed letter from your Clinical Director/Executive Clinical Director/Line manager to support this. (required)

I confirm that the above consultant's CME allowance is inadequate to meet their CME expenses in this calendar year and support the request for the transfer of the amount stated above to be transferred from the POCC23 innovation fund to the consultant's CME allowance.

Signed _____
Clinical Director/Executive Clinical Director/Line manager

Form D

Project Information

Project Title: (required)

Services involved in the initiative: (required)

Purpose of the Pooling Agreement:

This agreement confirms that the undersigned consultants agree to pool their respective Innovation Fund allocations, as outlined below, to collectively support the development and implementation of the project specified above. Each consultant's financial contribution is drawn from their Public Only Consultant Contract (POCC) 2023 Innovation Fund allocations. This agreement is made in alignment with HSE guidelines and the Consultant Innovation Fund policy, ensuring that all contributions are utilised within the current calendar year and adhere to the stated objectives of the Innovation Fund.

Consultant Information

Consultant Name	IMC Number	POCC Start Date	Innovation Fund (€)	Unused CME If applicable (€)	Total Contribution (€)

Total Pooled Funds:

Terms of Agreement:

- 1. Utilisation of Funds:** The total pooled amount will be dedicated solely to the project detailed above and in accordance with HSE Innovation Fund guidelines. Funds must be used within the specified calendar year(s) and in line with the project plan and budget submitted to HSE Spark.
- 2. Oversight and Reporting:** The designated lead consultant, if applicable, will be responsible for coordinating the project and ensuring all expenditures are compliant with HSE financial guidelines and procurement regulations. Progress reports will be submitted as required by the HSE Spark programme.
- 3. Financial Accountability:** Each consultant acknowledges that the pooled funds will be managed collectively for the purposes outlined.
- 4. Signatures and Agreement:** By signing below, each consultant agrees to contribute their allocated funds as specified in this document to the above project and adheres to the terms of this pooling agreement.

Consultant Signatures with Date

Appendix (iii): Supports and expertise offered by HSE Spark Innovation Programme to guide innovation activity

Access to centralised supports:

- Access to our in-house suite of supports for mentoring, project preparation tools, project management, communications etc.
- Support from our Clinical Design and Innovation Labs to navigate projects where Co-Design or Design Led expertise will benefit applicants.
- Access to expertise in the practical implementation of change and innovation projects (including stakeholder mapping, business case development, project planning tool kits etc.)

Apply strategic direction for innovation:

- Create opportunities to align funding streams with national priorities e.g. adopt or scale up innovations that align with national priority areas and Clinical Programme activity.
- Incentivise desirable innovation activity by of match funding centrally or bundling funding packages for high impact/high potential ideas.
- Liaise with national agile procurement fund and national purchase framework services to streamline access to approved innovations and fast track the purchasing of desirable technologies.
- Provide support for innovators around procurement rules and frameworks.

Access to an active innovation network and ecosystem:

- Leverage existing access to an active Innovation pipeline and ecosystem
- Connect the internal eco-system of innovators to allow for cross discipline/within discipline impact.
- Allow access to the eco-system of NCHDs and other Healthcare Professionals who can lend their expertise to planned innovation projects.

Develop a more efficient portfolio of innovation:

- Avoid duplication of efforts by recording and communicating previous and current innovation activity nationally.
- Capture knowledge and data about innovations with limited impact or technologies which have not yielded the desired outcomes.
- Create opportunities for 'sharing libraries' for approved equipment trials across the system.
- Avoid the introduction of 'innovation debt' by reducing innovation that leads to increased complexity as opposed to streamlining of services.

Workforce Investment:

- Build Capability and skills across the workforce for innovation activity
- Promote Consultant led innovation activity across the health service through dedicated communication channels nationally and internationally
- Create a structured awards / rewards system through award ceremonies / recognition events.
- Promote recruitment and retention of Doctors in Irish Healthcare by leveraging innovation activity and opportunity to showcase the HSE as a great place to work.

Support to engage with research and data informed activity:

- Connect frontline innovators with our research partnerships
- Engage in research to underpin innovation activity
- Provide access to Health Economics reporting

Promote Equity and Inclusion:

- Avoid the evolution of multiple location specific and institution specific methods for managing and administering the fund which may lead to inequity of access.
- When required, the Spark programme can promote inclusion, diversity and equity of innovation funding distribution through targeted calls for underrepresented disciplines of medicine, delivery settings or geographical locations.

Cultivation of strategic partnerships

- Access to support for the identify cation and brokering of collaborations and strategic partnerships.
- Arrangement and facilitation of pilots and management of Pilot Project Agreement Documents