

Partner Organisations:

Health Research Authority, England

NHS Research Scotland

HSC Research & Development, Public Health Agency, Northern Ireland

NIHR Clinical Research Network, England

NISCHR Permissions Co-ordinating Unit, Wales

Notification of Non-Substantial/Minor Amendments(s) for NHS Studies

This template **must only** be used to notify NHS/HSC R&D office(s) of amendments, which are **NOT** categorised as Substantial Amendments.

If you need to notify a Substantial Amendment to your study then you MUST use the appropriate Substantial Amendment form in IRAS.

Instructions for using this template

- For guidance on amendments refer to <http://www.hra.nhs.uk/research-community/during-your-research-project/amendments/>
- This template should be completed by the CI and optionally authorised by Sponsor, if required by sponsor guidelines.
- This form should be submitted according to the instructions provided for NHS/HSC R&D at <http://www.hra.nhs.uk/research-community/during-your-research-project/amendments/which-review-bodies-need-to-approve-or-be-notified-of-which-types-of-amendments/> . If you do not submit your notification in accordance with these instructions then processing of your submission may be significantly delayed.

1. Study Information

| | |
|---|--|
| Full title of study: | Improving perioperative care through the use of quality data: Patient Study of the Perioperative Quality Improvement Programme |
| IRAS Project ID: | 215928 |
| Sponsor Amendment Notification number: | 12 |
| Sponsor Amendment Notification date: | 21.01.19 |
| Details of Chief Investigator: | |
| Name [first name and surname] | Professor Suneetha Ramani Moonesinghe |
| Address: | Professor SR Moonesinghe Centre for Perioperative Medicine Department for Targeted Intervention Division of Surgery and Interventional Science University College London Charles Bell House 43-47 Foley Street London |
| Postcode: | W1W 7TS |
| Contact telephone number: | 07956620717 |
| Email address: | ramani.moonesinghe@nhs.net |
| Details of Lead Sponsor: | |

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| | |
|--|--|
| Name: | Suzanne Emerton |
| Contact email address: | uclh.randd@nhs.net |
| Details of Lead Nation: | |
| Name of lead nation <i>delete as appropriate</i> | England |
| If England led is the study going through CSP? <i>delete as appropriate</i> | Yes |
| Name of lead R&D office: | Joint Research Office, UCL, London, WC1 E6BT |

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2. Summary of amendment(s)

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| No. | Brief description of amendment <i>(please enter each separate amendment in a new row)</i> | Amendment applies to <i>(delete/ list as appropriate)</i> | | List relevant supporting document(s), including version numbers <i>(please ensure all referenced supporting documents are submitted with this form)</i> | | R&D category of amendment <i>(category A, B, C)</i> <i>For office use only</i> |
|-----|--|--|---|--|---------|--|
| | | Nation | Sites | Document | Version | |
| 1 | Change of PI at Royal Liverpool and Broadgreen Hospital from Dr Peter Delve to Dr Ben Lane | England | Royal Liverpool and Broadgreen Hospital | | | |
| 2 | Addition of new sites: East and North Hertfordshire Trust Mid Yorkshire Hospital NHS Trust Royal Free London NHS Foundation Trust West Suffolk NHS Foundation Trust Western Sussex Hospitals NHS Foundation Trust Warrington and Halton Hospitals NHS Foundation Trust | England | | | | |

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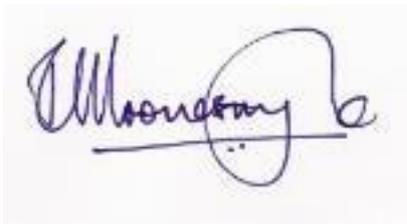
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3. Declaration(s)

Declaration by Chief Investigator

- I confirm that the information in this form is accurate to the best of my knowledge and I take full responsibility for it.
- I consider that it would be reasonable for the proposed amendment(s) to be implemented.



Signature of Chief Investigator:

Print name: SR MOONESINGHE

Date: 21.01.2019

Optional Declaration by the Sponsor’s Representative (as per Sponsor Guidelines)

The sponsor of an approved study is responsible for all amendments made during its conduct.

The person authorising the declaration should be authorised to do so. There is no requirement for a particular level of seniority; the sponsor’s rules on delegated authority should be adhered to.

- I confirm the sponsor’s support for the amendment(s) in this notification.

Signature of sponsor’s representative:

Print name:.....

Post:

Organisation:.....

Date:.....