Nomination Form Staff





Manchester University NHS Foundation Trust (MFT) was formed on 1st October 2017 following the merger of Central Manchester University Hospitals NHS Foundation Trust (CMFT) and University Hospital of South Manchester NHS Foundation Trust (UHSM).

Could you be our next Governor?

If you would like to be elected to the Council of Governors in 2017, you can start by filling in this nomination form.

Use Your Voice

Welcome

We are the main provider of hospital care to approximately 750,000 people in Manchester and Trafford and the single biggest provider of specialised services in the North West of England. We are also the lead provider for a significant number of specialised services including Breast Care, Vascular, Cardiac, Respiratory, Urology Cancer, Paediatrics, Women's Services, Ophthalmology and Genomic Medicine.

Our vision is to improve the health and quality of life of the people we serve by building an organisation that:

- Excels in quality, safety and patient experience
- Is recognised internally as a leading healthcare provider
- Attracts, develops and retains great people
- Plays its full part in meeting the health and social care objectives set for Greater Manchester
- Undertakes large scale research, innovation and education for the benefit of the whole health and social care system.

At MFT we are committed to equality, diversity and inclusion of staff, patients, carers, families, members and the communities that we serve. We believe that having an inclusive culture: by listening to all our people and respecting each other, we will deliver our commitment to equality, diversity and inclusion. As part of this commitment we aim to have a Board and a Council of Governors whose membership reflects our diverse communities. We support our Governors in becoming more representative of our members and communities whether in respect of race, disability, gender, gender reassignment, age, sexual orientation, religion or belief, marriage and civil partnership, caring responsibility, social class and pregnancy and maternity.

We welcome nominations from any persons aged 16 years or over.

Help completing this form

If you require any further information or assistance to complete this form, or if you require the nomination form in large print, Braille, audio or another language, please contact Ciara Norris at Electoral Reform Services (ERS) on 020 8365 8909 or email ciara.norris@electoralreform.co.uk

You can find out more information on the election process, how to submit a nomination, tips on how to write an effective election statement and more by taking the ERS e-learner at www.ersvotes.com/mft2017

Criteria: To be eligible to stand for election

Before you proceed, you must first of all check that you meet the following criteria:

- 1. Be an eligible staff member of the Manchester University NHS Foundation Trust
- 2. Belong to the staff constituency (staff class) you wish to represent
- 3. Be willing to declare your political and financial interests on page 5 of this form

In order to be an eligible staff member, you must be employed by the Trust under a contract of employment which has no fixed term or has a fixed term of at least 12 months; or been continuously employed by the Trust under a contract of employment for at least 12 months or you must exercise functions for the purposes of the Trust, otherwise than under a contract of employment with the Trust, provided you have exercised these functions continuously for a period of at least 12 months. For the avoidance of doubt this does not include individuals who assist or provide services to the Trust on a voluntary basis.

Manchester University

NHS Foundation Trust

Your details (please use BLOCK CAPITALS)

Full Name:

Name as you wish it to appear on the election material (if different to Full Name):

Title (e.g. Mr, Ms, Dr):

Home Address:

Post Code:

Date of Birth:

Contact Telephone Number:

Contact Email Address:

Job Role/Title:

Departmental/Work Address:

Please note: Your home address, telephone number and email address are for the sole use of ERS and the Trust so they can contact you should they need to. This information will remain confidential unless the Trust is required to release it by law.

The details that you provide will be used by the Trust to confirm your staff membership eligibility.

For Sodexo Staff only: By completing the above section of the form you are providing consent for the Trust's Membership Office and MES/ERS to retain your details for the purposes of being a staff member/validating your nomination form.

NB: The Trust Secretary shall make the final decision about the staff class of which an individual is eligible to be a member

Your constituency

Please indicate which constituency you belong to. Please tick one box only.

Medical and Dental

Nursing and Midwifery

Other Clinical

Non-Clinical and Support



Your election statement: Why you would like to be a Governor

Your election statement, describing why you think you should be elected, will be circulated to voters as part of the election statement booklet accompanying the ballot paper.

Before you start writing your statement, we recommend that you read the enclosed 'preparing your election statement' document. Further information on submitting a good election statement can be found by taking the ERS e-learner at www.ersvotes.com/mft2017

You can handwrite your statement in the space below, attach a copy to this form or email it to ftnominations@electoralreform.co.uk

Please tick here if you have emailed your statement

Your statement will be reproduced word for word so remember to read it through carefully and check for any mistakes before you submit it.

Total number of words..... (max 250)

Please note that voters won't get to read any words that exceed the word limit so please ensure your statement is no longer than it should be.



Your photograph

Please print your name clearly on the reverse side of your photograph and glue it here (do not staple) You are invited to submit a photograph of yourself, to be published alongside your statement in the election statement booklet. While you are welcome not to submit one, providing a photograph can help voters to identify you.

You can affix your photograph to this form by gluing it to the space provided or by emailing it to ftnominations@electoralreform.co.uk

Please tick here if you have emailed your photograph

Please note: Where you have answered no, the word 'none' will be published as your answer.



Declaration

I, the above named candidate, consent to my nomination and agree to stand for election to the Council of Governors in the staff constituency (staff class) on page 3 of this form. I also declare that I am a an eligible staff member (eligibility outlined on page 2) in that staff constituency and that I am not a member of any other staff class or public constituency.

I, the above named candidate, hereby declare that:

- a) I am not a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged
- b) I am not a person who has made a composition or arrangement with, or granted a trust deed for, his creditors and has not been discharged in respect of it
- c) I am not a person who within the preceding 5 years has been convicted in the British Islands of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than 3 months (without the option of a fine) was imposed on me.
- d) I am not a person who is under sixteen (16) years of age
- e) I am not a person who is subject to a sex offender order
- f) I am a person who has not within the preceding two (2) years been dismissed, by any other reason than redundancy, from any paid employment with an NHS body
- g) I am a person who has not had a tenure as the Chairman or as a member or Director of an NHS body terminated because my appointment is not in the interests of the health service, for non-attendance at meetings, or for nondisclosure of a pecuniary interest
- h) I accept and abide by the Foundation's Trust values and will agree to confirm acceptance of and adhere to the Trust's Code of Conduct for Governors (details outlined in the Candidate Information Pack).
- i) I am not a Director of the Foundation Trust or a governor or director of an NHS body (unless appointed by an appointing organisation which is an NHS body)
- j) I am not the spouse, partner, parent or child of a member of the board of directors of the Foundation Trust
- k) I am not a member of a local authority's Scrutiny Committee covering health matters
- I) I am not a person who has previously been removed as a Governor or Member due to committing a serious breach of the Code of Conduct or that I acted in a manner detrimental to the interests of the Foundation Trust or that the Council of Governors considered that it was in the best interests of the Foundation Trust for me not to continue as a Governor or Member or for failing to attend Council of Governors' Meetings or for refusing to undertake any training which the Council of Governors requires all Governors to undertake.
- m) I am aware that I will be required to consent to and clear a Disclosure and Barring Service (DBS) check and are aware that I will be disqualified if considered to be unsuitable by the Trust on the basis of any disclosures obtained
- n) I am aware that I will be required to disclose any declaration of interest on an annual basis or at anytime should my circumstances change
- o) I am aware that I will be required to attend regular meetings and training sessions (meetings predominately held Monday to Friday, anytime between 9.00 am 5.00 pm)
- p) I am not a person who is unfit and unproper defined by regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and/or condition on G4 of the Trust's Licence
- q) I am not person who has refused to sign a declaration of my qualification to vote as a member of the Trust and that I am not prevented from being a member of the Council of Governors

I confirm that, to the best of my knowledge, the information provided on (or in connection with) this form is accurate.

Signature:

Date:

Remember to sign the declaration before returning your nomination form. Your nomination form won't be valid without your signature.

Close of nominations

After you have completed all sections of your nomination form, simply return it in the special reply envelope you have been provided with. You can also send a scanned copy of your completed form to ftnominations@electoralreform.co.uk

Please ensure it is received by the Returning Officer, Electoral Reform Services Limited no later than **NOON on WEDNESDAY 18 OCTOBER 2017.** It won't be possible for you to stand in this election if your nomination form is received after this time.

All nomination forms received will be acknowledged within 24 hours by first class post to the address provided on page 3 of this form. If you have not received your acknowledgement after this time (or if you are sending your form close to the deadline), please contact Ciara Norris on 020 8365 8909 or email ciara.norris@electoralreform.co.uk to check that we have received your form.

If you have mislaid your reply envelope, please send your nomination form to Electoral Reform Services Limited, The Election Centre, 33 Clarendon Road, London N8 ONW.

Thank you for taking the time to complete this nomination form.

Checklist

Before returning your nomination form, please ensure you have:

Please tick

Completed all sections

Signed the declaration on page 6

Checked your statement for accuracy and the maximum number of words

Provided a photograph, if you would like one published in the election statement booklet







Use Your Voice