

Nomination Form Public (2025)

Make a difference as a Governor of our
NHS Foundation Trust

Be the Elected Voice for our members and
the wider public (at large)

Are you passionate about the NHS and would like to be a voice for patients, their families, carers and the wider public (at large)?

If so, why not stand for election as a Public Governor in our 2025 Elections?
Get started by filling in this nomination form.



Welcome

At MFT we are responsible for running ten hospitals across seven different sites, with the most recent to join our wider family of hospitals being North Manchester General Hospital, in April 2021.

We are one of the largest acute Trusts in the UK, employing around 30,000 staff. We aim for excellence in everything that we do, from the care our teams provide in people's own homes and in our hospitals, the education and training we provide, through to the research and innovation work we do to help shape the healthcare of tomorrow. And we are a caring organisation – we care for people from before they are born to the end of their life.

As an NHS Foundation Trust, public members can be more involved in the work of our Trust with one of the key ways being through our Council of Governors, who are responsible for representing the interests of our members (public and staff) and the wider public, influencing the Trust's future plans and seeking performance assurance from our Board of Directors. Our Governors are encouraged to proactively engage with members and the wider public; acting as ambassadors when promoting membership and their role as a Governor.

At MFT we are committed to equality, diversity and inclusion of staff, patients, carers, families, members and the communities that we serve. As part of this commitment, we aim to have a Council of Governors whose membership reflects our diverse communities. We believe that having a broad and representative membership community, and a Council of Governors directly elected from and by our members, is key to working together to better meet the needs of our patients and our local communities.

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 Hutchinson at Civica Election Services on 020 8889 9203 or email Ciara.Hutchinson@cesvotes.com

You can find out more information on the election process, how to submit a nomination, tips on how to write an effective election statement alongside completing a form online via the following election website **www.cesvotes.com/mft2025**

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 public member, aged 16 years or over, of Manchester University NHS Foundation Trust
2. Belong to the public constituency (live in the area) that you wish to represent
3. Be willing to declare your political and financial interests on page 5 of this form
4. Having carefully read the 'Declaration' section on page 6 of this form, you are eligible to stand as a Governor candidate. If later found that any of the declarations were, or become applicable, please be aware that this will result in you being removed as a Governor (if successfully elected).

Your details (please use BLOCK CAPITALS)

Membership ID (if known):

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:

Please note Use of the personal information (data) you have provided:

- your personal information will be used for the purpose of this nomination and for any ballot or appointment that may be required and for no other purpose.
- your personal 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 public membership eligibility.

Your Public Constituency

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

My Public Constituency (area in which you live) is:

Public

☐

Manchester

☐

Rest of Greater Manchester

☐

Rest of England and Wales

☐

Trafford

Maps of each of the above Public Constituency Areas are available via MFT's Governor 'Election' webpage:
<https://mft.nhs.uk/the-trust/governors-and-members/elections/>

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 (voting pack), if the seat you stand for is contested.

Before you start writing your statement, we recommend that you read the enclosed 'preparing your election statement' document.

Upon request, Civica Election Services (CES) will be able to provide examples of candidate statements.

You can **handwrite** your statement in the space below, attach a copy to this form or email it to info@honesty.com

ftnominations@cesvotes.com

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.

[illegible]

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 i.e. 250 words.

Your photograph

Please print your name clearly on the reverse side of your photograph and glue it here (do not staple)

In keeping with 'Model Election Rules' (produced by NHS Providers and form part of the Trust's Constitution), you are invited to provide a photograph of yourself, to be published alongside your statement in the election statement booklet.

You can affix your photograph to this form by gluing it to the space provided or by emailing it to ftnominations@cesvotes.com

Please tick here if you have emailed your photograph ☐

Please Note: Candidates are welcome not to submit a photograph with the invitation to provide one being open to all candidates in order to fulfil requirements to provide members with appropriate information to make an informed choice about which candidate(s) they feel would best represent them, and is in keeping with the aforementioned 'Model Election Rules'.

Declaration of interests

Are you a member of a political party?

YES ☐ NO ☐

If you have answered yes, please let us know which one

Do you have any financial or other interest in the Trust?

YES ☐ NO ☐

If you have answered yes, please let us know what your interest is

Are you currently, or have you previously been, a governor of another NHS Foundation Trust?

YES ☐ NO ☐

If you have answered yes, please state the name of the Trust

Please note:

This information will be published. Where you have answered no, the word 'none' will be published as your answer.

For contested seats, and again to fulfil requirements to provide members with appropriate information to enable them to make an informed choice about which candidate(s) they feel would best represent them (in keeping with the aforementioned 'Model Election Rules'), election statement booklets (which accompany ballot papers) include all valid candidates' names alongside declarations, photographs and personal statements received. For candidates that are current Governors that are standing for re-election, key meeting attendance (provided by the Trust), is also included.

Declaration it is important that you read carefully the declaration section below in order to ensure your eligibility to stand as a Governor candidate. If later found that any of the declarations below were, or become applicable, this will result in you being removed as a Governor (if successfully elected)

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

I, the above named candidate (outlined on page 3), 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 Trust Chair 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 non-disclosure of a pecuniary interest.
- h) I accept and abide by the Trust's 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 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 Trust.
- k) I am not a member of a local authority's Scrutiny Committee covering health matters.
- l) 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, and that, if successfully elected, am aware that any future breach may result in being removed as a Governor.
- m) I am not a person whose tenure as a Governor of another Foundation Trust has been terminated for cause.
- n) 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.
- o) I am aware that I will be required to disclose any declaration of interest on an annual basis or at any time should my circumstances change and that failure to disclose any interest may result in being removed as a Governor.
- p) I am aware that I will be required to participate/attend regular meetings and training sessions and adhere to the Trust's Governor Meeting Ground Rules (details outlined in the Candidate Information Pack with meetings predominately held Monday to Friday, anytime between 9.00 am - 5.00 pm).
- q) I am not a person who is unfit and improper defined by regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and/or condition of the Trust's Licence (details outlined in the Candidate Information Pack) and are aware that I will be required to consent to and clear associated checks/reviews i.e. insolvency, bankruptcy and disqualified directors' registration alongside a health questionnaire and are also aware that in the event of being found, or becoming an unfit person, will result in being removed as a Governor.
- r) 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.
- s) I am not a person in relation to whom a moratorium period under a debt relief order applies under Part 7A of the Insolvency Act 1986.
- t) Unless otherwise decided, I am not currently or have previously been a Governor of an NHS Foundation Trust, other than the Trust.
- u) I am not a vexatious complainant that: Has threatened, harassed, harmed or abused staff, patients and/or visitors of the Trust; or has been found by the Trust to have abused or used inappropriately the Trust's or a predecessor Trust's complaints procedure.
- v) I am aware that the terms of office for the Governor role is for a 2 year period starting at the Annual Members' Meeting (2025) and is subject to any legislative changes as a result of the Government's 10-year Health Plan for England published in July 2025.

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

Signature: Date:

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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@cesvotes.com

Or alternatively, you can find/complete your form on-line via the election website www.cesvotes.com/mft2025

Please ensure it is received by the Returning Officer, Ciara Hutchinson at Civica Election Services no later than:

- **5PM on MONDAY, 11 AUGUST 2025** It won't be possible for you to stand in this election if your nomination form is received after this time (please do not return completed forms to the Trust (MFT) as these also will not be included in the election process).

All nomination forms received will be acknowledged within 24 hours by first class post to the address provided on page 3 of this form (or via e-mail if one has been provided). If you have not received your acknowledgement after this time (or if you are sending your form close to the deadline), please contact the Returning Officer who will check to make sure that your form has been safely received:

- Ciara Hutchinson – Returning Officer (Civica Election Services)
Tel: 020 8889 9203
Email: Ciara.Hutchinson@cesvotes.com

If you have mislaid your reply envelope, please send your nomination form to Civica Election Services, 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.
- ☐ Read carefully and if you are an eligible Governor candidate i.e. none of the declarations are applicable to you, you have signed the declaration on page 6.
- ☐ Checked your statement for accuracy and that you have not exceeded the maximum number of words i.e. 250.
- ☐ Provided a photograph, if you would like one published in the election statement booklet (voting pack sent to members) in the event that the seat is contested.



Important Information:

Newly elected Governors formally take up their role following closure of our Annual Members' Meeting scheduled for:

Monday 29th September 2025 from 12pm in the Education & Research Centre, Wythenshawe Hospital, Southmoor Road, Wythenshawe M23 9LT.

The event timings and other arrangements will be confirmed nearer the time - please visit the webpage for more details:

<https://mft.nhs.uk/member-meetings/annual-members-meeting-6/>

All candidates standing for election are invited to participate in this meeting.

Use Your Voice