

**Service User Member and Carer Member for the**

**Southern Test Area Integrated Partnership Board**

**Integrated Care System NI**

**Expression of Interest Form**

**Ref no:**

**Guidance notes**

Please read the information included in the information pack carefully before completing this form, ensuring you fully understand the expression of interest process, and can confirm that you have the skills, experience and time to participate as a Service User member or Carer member.

If you need more information about this opportunity or require support or adjustments to complete this form, please contact Louise King at louise.king@hscni.net or call 028 9536 1029, from 9.00am-5.00pm Monday to Thursday, 9.00am – 12.30pm on Friday.

Please note the closing date for all EOIs is **Friday 24 March 2023 at 5pm**.

Please complete and return this form, along with the Equal Opportunities Monitoring Form to:

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| **Full name:**  |
| **Title (for example Mr, Mrs, Ms, Miss):** |
| **Preferred name:** |
| **Address:** |
| **Postcode:**  |
| **Preferred telephone number:** |
| **Email address:**  |
| **Please select the option that best applies to you. I am currently a:** [ ] Southern Trust service user [ ] Carer for an individual residing within the Southern Trust area |
| **Would you require support or reasonable adjustments to enable you to carry out this role?**Yes / No (delete as applicable). If yes please explain:**Do you have access to and the ability to use telephone, email and the internet to communicate and take part in training, meetings and receive information?** Yes / No (delete as applicable). If no, please explain:  |
| **Are you able to commit to the time commitment outlined for this opportunity?**Yes / No (delete as applicable). Please advise of any limits on availability:  |
| **Please declare any potential conflicts of interest that may arise for you in relation to this role (particularly if you are currently or have previously been employed by an HSC Organisation or C&V org, have an active complaint, SAI investigation, or legal issues with the Southern HSC Trust)** |

**Skills and Experience** – please ensure you have read the skills and experience required for this role as specified in the information pack.

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| **Please tell us why you decided to apply for this role? (maximum of 250 words)** |
| **Please tell us of your experience in reflecting the health and social care needs of others, at meetings with many partners, including those at senior position levels.** **(maximum of 250 words)** |
| **Please tell us your experience of representing the needs of others with multiple stakeholders including those at senior management level. (maximum of 250 words)** |
| **Please tell us about any other experience or skills you have which would support your application. You should refer to the required skills and experience outlined in the information pack. (maximum of 250 words)** |
| **How did you find out about this opportunity?** ☐ PCC newsletter☐ An HSC website☐Social media☐ Word of mouth☐ Engage (PHA) ☐ Other, please explain: |

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| **Thank you so much for your interest** **in this important HSC integration work** |