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Nomination Form

Faculty of Pre-Hospital Care Advisory Board

**INTRODUCTION**

The Faculty aims to promote high standards of pre-hospital care through education, research and teaching. The Faculty Advisory Board plays an integral role in fulfilling this aim. It does this by shaping the strategic priorities of the Faculty, both nationally and internationally, through the provision of expert opinion and advice. The multi-professional ethos of the Faculty is fully represented within the Faculty Advisory Board which has representation from across the full pre-hospital care spectrum.

At the Annual General Meeting (AGM) in October 2017, approval was given to amend the Faculty Constitution to reflect this multi-professional ethos. It was agreed to appoint to the Faculty Advisory Board:

|  |
| --- |
| 2 x Doctor Representatives |
| 2 x Nurse Representatives |
| 2 x Paramedic Representatives |
| 2 x Non-Health Care Professional Representatives |

The representative with the highest number of votes in each category will also have a seat on the Faculty’s Executive Committee, which is responsible for setting strategy and has overall management responsibility of the Faculty on a day to day basis.

In the event that there are insufficient nominations to go to ballot, the Fellow / Member with the longest tenure as a Fellow / Member will be chosen as the Executive representative.

**TIME COMMITTMENT**

Elected Members will be expected to attend meetings of the Faculty Advisory Board which take place four times a year (twice in Edinburgh and twice in Birmingham) where they will represent their constituent profession. Beyond attendance at meetings there will be ad-hoc opportunities to promote the work of the Faculty and become involved in a range of pre-hospital activities.

The Faculty Executive representative is additionally expected to attend meetings of the Faculty Executive, which take place six times a year (five via teleconference and one in person at the Annual Conference), where they will report on their constituent profession. Beyond attendance at meetings, by mutual agreement, there will be additional opportunities to promote the work of the Faculty and become involved in a range of pre-hospital activities.

It has been agreed that Fellows / Members will vote within their own profession. In practice voting will be segmented as follows:

|  |
| --- |
| Doctors: Membership Levels 5 - 8 |
| Nurses: Membership Levels 5 - 8 |
| Paramedics: Membership Levels 5 - 8  **Note:** Non-Registered Health Care Professionals at Membership Level 4 also vote for Paramedics |
| Non-Health Care Professionals: Membership Levels 1-3  **Note:** Students may stand as representatives for Non-Health Care Professionals but must demit office when they qualify as a Registered Health Care Professional |

As a Fellow / Member of the Faculty of Pre-Hospital Care (FPHC) you are entitled to nominate yourself to be considered for election to the Faculty Advisory Board. There are currently **EIGHT** vacancies as described above.

**ELIGIBILITY**

To be eligible an individual must:

* Be a Fellow / Member of the Faculty in good standing
* Have a proposer and a seconder who are Faculty Fellows / Members in good standing
* Be in good standing with the appropriate regulator (*unless you are working at Levels 1 to 4*)

Those elected will be invited to attend the Faculty Advisory Board meeting **held in Edinburgh**, scheduled for **11.00 am on** **Tuesday 11 July 2017**.

**TO APPLY**

If you wish to nominate yourself for election to the Faculty Advisory Board please:

* Complete, sign and return the nomination form and declarations below before the deadline
* Submit a passport sized head and shoulders photo of yourself along with your application

These should be returned either by email to [fphc@rcsed.ac.uk](mailto:fphc@rcsed.ac.uk) or by post, to the address below, to be received no later than: **5.00 PM on 26 April 2017**.

**Laura Vermeulen**

Faculty Manager

Faculty of Pre-Hospital Care

The Royal College of Surgeons of Edinburgh

Nicolson Street

Edinburgh

EH8 9DW

**SECTION A – PERSONAL DETAILS**

**Important Note:** *\*Denotes data that will be shared publicly for the purposes of the election. All other data is for administrative use only.*

|  |  |
| --- | --- |
| **\*Surname:** | |
| **\*First name:** | **\*Preferred first name:** |
| **\*Title:** | **GMC/IMC/GDC Number** (if applicable): |
| **Date of Birth:** *(dd/mm/yyyy)* | **\*Profession:** |
| **\*Region** | |
| **Name of Workplace:** | **\*Specialty** (if applicable): |
| **Work Address:**  **Postcode:** | |
| **Home Address:** | |
| **Post Code:** | **College Membership Ref Number:** |
| **Work Phone:** | **Mobile No:** |
| **Email:** | |

**SECTION B – PERSONAL STATEMENTS**

**Important Note:** *\*Denotes data that will be shared publicly for the purposes of the election. All other data is for administrative use only.*

Please answer the following question in ***no more than 100*** words:

|  |
| --- |
| **\*Question 1:**  **Describe yourself and your current roles.** |
|  |

Please answer the following question in ***no more than 250*** words:

|  |
| --- |
| **\*Question 2:**  **What relevant activity have you undertaken to date that would enable you to be an effective elected representative of the FPHC Faculty Advisory Board?** |
|  |

Please answer the following question in ***no more than 250*** words:

**Important Note:** *\*Denotes data that will be shared publicly for the purposes of the election. All other data is for administrative use only.*

|  |
| --- |
| **\*Question 3:**  **If elected to the FPHC Faculty Advisory Board, what would you bring to the role and what would you hope to achieve during your term of office?** |
|  |

**SECTION C – DECLARATIONS**

**Proposer’s Details and Declarations:**

|  |  |  |
| --- | --- | --- |
| **\*Surname:** | | |
| **\*First name:** | **Title:** | |
| **Date of Birth:** *(dd/mm/yyyy)* | **Mobile No:** | |
| **Email:** | | |
| **College Membership Ref Number:** | **I confirm I am a member of the Faculty in good standing.** | *(please tick)* |
| **Signature:** *a scanned signature is acceptable* | | |

**Seconder’s Details and Declarations:**

|  |  |  |
| --- | --- | --- |
| **\*Surname:** | | |
| **\*First name:** | **Title:** | |
| **Date of Birth:** *(dd/mm/yyyy)* | **Mobile No:** | |
| **Email:** | | |
| **College Membership Ref Number:** | **I confirm I am a member of the Faculty in good standing.** | *(please tick)* |
| **Signature:** *a scanned signature is acceptable* | | |

**Nominee’s Declaration:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **By submitting this form I agree that I meet the requirements as set out for the role and I confirm that I do not have any conflicts of interest which may affect my ability to undertake the role on the Faculty Advisory Board and / or the FPHC Executive Committee.** | | | | *(please tick)* |
| **I agree to data in the annotated fields being shared publicly as part of the election process.** | *(please tick)* | **I confirm I am a member of the Faculty in good standing.** | | *(please tick)* |
| If elected do you agree to have your photograph and a short biography being publicly visible on the Faculty of Pre-Hospital Care website? | | | | |
| **Yes, I agree** | *(please tick)* | **No, I do not agree** | | *(please tick)* |
| **I have attached a passport sized head and shoulders photo.** | | | | *(please tick)* |
| **I have noted the date and time of the Faculty Advisory Board:**  Faculty Advisory Board meeting **held in Edinburgh**, scheduled for **11.00 am** on  **Tuesday 11 July 2017**. | | | | *(please tick)* |
| **Signature:** *a scanned signature is acceptable* | | | **Date:** | |