**Applicant Ref:***(office use only)*

Application Form
Criteria Form

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|   |   |   |   |   |   |   |   |   |

Job Ref Number: N/A

Job Title: HSC Leadership Centre—Associate Consultant Select List

Closing Date: **Friday 26 November 2021 at 4pm**

Forms to be returned to: AssociateList@leadership.hscni.net

Surname:

Title (Mr, Mrs, Miss, Ms, Dr):

Yes

No

Yes

No

Yes

No

Would you be willing to receive correspondence by email AND SMS/TEXT?

Do you hold a current full driving licence valid in the UK?

Contact Number:

National Insurance No:

If required, do you have access to a car, or a form of transport which will enable you to undertake the duties of this post?

Email Address:

Previous Surname:

Correspondence Address:

Mobile Number:

Postcode:

First Names:

*We are under no obligation to take account of your holiday arrangements.*

For administrative purposes please indicate planned holiday arrangements: **From** **To**

**NOTES:**

 CVs will not be accepted

 Canvassing will disqualify

 Only applications containing all the information which has been sought will be considered

 You are strongly encouraged to complete the equal opportunities section of this form which is used only for monitoring/statistical purposes and is not made available to the panel

 Applications received after the closing date and time will not be considered

 Complete in Black Ink

*AN EQUAL OPPORTUNITIES EMPLOYER*

**FURTHER EDUCATION/ PROFESSIONAL QUALIFICATIONS**(e.g. Nursing, AHP, Social Care, Management, Administration)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Certificate/Diploma/Degree** | **Institute** | **Exams yet to be taken** | **Result** | **Date Obtained** |
|   |   |   |   |   |

**PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Professional Body** | **Type of Registration** | **Professional Registration No.** | **Date Obtained** | **Date of Expiry** |
|  |  |  |  |  |

Are you currently the subject of a referral to, or an investigation by, your professional body?

Yes

No

Not Applicable

Have you ever been referred to the Independent Safeguarding Authority as a result of misconduct involving children and / or vulnerable adults?

If yes please provide full details below.

Yes

No

**INDEPENDENT SAFEGUARDING AUTHORITY**

eeey

**EMPLOYMENT HISTORY — PRESENT POST (if applicable)**

Employment Status:

Permanent

Temporary

Agency

Employer Name:

Employer Address:

Job Title:

Job Dept/Location:

Start Date:

Salary/Wage:

Period of Notice:

Reason for Leaving:

**Principle Duties of Present Post:**

**EMPLOYMENT HISTORY — PREVIOUS POSTS**

Please list all your previous posts beginning with the most recent including periods out of employment and any training.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name and Address of Employer** | **Job Title** | **Start Date** | **EndDate** | **Reason for Leaving** | **Duties** |
|  |  |  |  |  |  |
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If you have any gaps in your career history, please include and explain these in the box below.

**Please note, you need only complete criteria relevant to your experience.**

|  |
| --- |
| **Criterion 1:**SERVICE IMPROVEMENT: Applicants must demonstrate a proven track record and expertise in service improvement methodology for a minimum of 3 years in the last 5 years. Examples of projects undertaken, including the level of complexity, should be included. |
|  |

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| **Criterion 2:**EXECUTIVE COACHING: Applicants must demonstrate a proven track record and expertise in coaching at senior level. Senior executive level is defined as second tier or above in an organisation. Examples of coaching interventions and techniques should be included. Applicants should have had accredited training or recognition in this area. |
|  |

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| **Criterion 3:**MANAGEMENT / LEADERSHIP and / or ORGANISATIONAL DEVELOPMENT: Applicants must have a minimum of 5 years’ experience in designing and leading regional or national programmes or significant Organisational Development interventions within Health and Social Care. Details of programmes including the level of staff and duration of the programme, should be included in the application form. |
|  |

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| **Criterion 4:**HUMAN RESOURCE / PERSONNEL MANAGEMENT AND EXECUTIVE RECRUITMENT: Applicants must demonstrate a proven track record in the design and delivery of assessment / development centres at Assistant Director level (Band 8C) or above. Examples of a range of tools and techniques should be included. Applicants should have a CIPD qualification to work in this area. |
|  |

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| **Criterion 5:**MEDICAL / CLINICAL LEADERSHIP and / or PROFESSIONAL REGULATION: Applicants must demonstrate a proven track record and expertise or working at senior level for a minimum of 3 years in the last 5 years. Applicants must demonstrate how they keep up to date with the latest tools and techniques in terms of medical / clinical leadership. |
|  |

|  |
| --- |
| **Criterion 6:**SPECIALIST EXPERTISE: Applicants must demonstrate knowledge and experience of undertaking assignments or projects in specific service areas which require specialist expertise within Health and Social Care e.g. review of critical incidents. |
|  |

List below details of ALL charges, prosecutions, convictions, cautions, bind-over orders—even if they happened a long time ago. You must include any minor matters, any road traffic or motoring offences and any which may be pending.

Are you currently the subject of police investigation or do you have any prosecutions pending?

Have you ever been convicted of any criminal offence?

No

Yes

No

Yes

Under the Rehabilitation of Offenders (Exceptions) Order Northern Ireland, 1979, the Northern Ireland Health and Social Services are included in the list of excepted employers. As such, all criminal convictions may never be regarded as spent and must be disclosed when applying for a post in the Health Service. It is necessary therefore to ask the following questions:

**CONVICTIONS / OFFENCES**

*Please note that disclosure of a conviction does not necessarily debar any applicant from obtaining employment.*

**DISABILITY**

Yes

No

(a) attend for interview?

Do you require a reasonable adjustment for reasons related to a disability to allow you to:

If yes please give details:

(b) undertake the duties of this post if appointed to the list

Yes

No

If yes please give details:

**PERSONAL DECLARATION**

1. I declare that all the foregoing statements are true, complete and accurate

2. I understand that if I give wrong information or leave out important information I could be removed from the Associate List

3. I must have satisfactory references, health assessment and Access NI checks (if applicable)

4. I understand that I may be asked to show some formal identification and evidence of qualifications if required

5. I confirm that as far as I know there are no medical reasons which would stop me from carrying out this role

6. I agree to you making any necessary enquiries during the recruitment and selection process

7. I understand that canvassing will disqualify me from the selection process for this job

8. I understand that the personal data I have provided will be processed by the HSC Leadership Centre in accordance with the provision of the UK GDPR.

Your Signature: Date: