# UCLPartners Invasive Procedures Safety Network

# Application form

## Guidance on completing this application form

***Please read the Information for applicants before completing this form.***

We recommend you save this form to your own computer before completing it. The application should be submitted using the following format: ‘Organisation name’, and ‘lead applicant’ eg: ‘Merrydown Hospital – Michaela Quinn.docx’ submitted to valentina.karas@uclpartners.com

The deadline for submitting an application is **5pm on Wednesday, 1 May 2019**. Late applications will not be considered.

Please note that the applicant and the executive sponsor will need to both sign the application before submission, so you will either need to use electronic signatures or scan sections 4 and 5 of your application.

If your organisation is shortlisted for interview, you will be notified by **5pm on 3rd of May**.

Telephone interviews will take place between **12-5pm on Thursday, 9 May 2019.** While we will do our best to accommodate you at a suitable time, unfortunately, there is no flexibility with the actual date.

If you have any questions, please contact valentina.karas@uclpartners.com in the first instance.

## Section 1: About your team

Each team will require:

* One lead applicant, who will act as the main point of contact for UCLPartners
* At least one member of the management team, to ensure organisational engagement

## Lead applicant

|  |  |
| --- | --- |
| Name (and title) of applicant |  |
| Job title  |  |
| Department |  |
| Organisation  |  |
| Key responsibilities *Please briefly summarise the responsibilities of your current role (100 words max)* |  |
| Contact number *Mobile preferred* |  |
| Email address  |  |

## Additional team members

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name (and title) | Job title | Department | Role in the team  |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 | *Please add more rows, if needed* |  |  |  |

## Section 2: Motivation for applying – to be completed by the lead applicant

Please tell us why your organisation wishes to be a part of the Invasive Procedures Safety Network and what difference this work will make to your organisation *(max. 400 words)*

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Please tell us why you have selected the team members outlined in section 1 and how you think this team will lead to success. *(max. 400 words)*

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## Section 3: Learning session participation

The sessions below are integral to the programme and it would be ideal for all team members to attend all sessions. However, we recognise that this is not always practicable, and so would look for a **minimum of three team members to attend each session**.

Each session will be held in central London between 10am and 4pm. Please confirm whether you are able to attend the sessions as below.

|  |  |  |
| --- | --- | --- |
| **Programme content**  | **Dates** | **Applicant** (please tick) |
| **1** | **2** | **3** | **4** | **5** |
| Session 1 | Thursday, 6 June 2019  |  |  |  |  |  |
| Session 2 | Wednesday, 17 July 2019 |  |  |  |  |  |
| Session 3 | Thursday, 12 September 2019  |  |  |  |  |  |
| Session 4 | Thursday, 21 November 2019 |  |  |  |  |  |
| Session 5 | Thursday, 23 January 2020 |  |  |  |  |  |
| Session 6 | Wednesday, 1 April 2020  |  |  |  |  |  |

## Section 4: Organisational support and declaration

***To be completed by a member of Trust’s senior management team e.g. CEO, medical director, associate medical director.***

Employing organisations are expected to:

* Enable teams to commit to a minimum of 4 learning sessions between June 2019 and April 2020
* Ensure teams have the opportunity to share what they learn
* Work with UCLPartners and other participating organisations throughout the process.

Please tell us why you are supporting your organisation to be a part of this network and how you will ensure they can contribute fully to it and get the most out of it? (max. 150 words)

|  |
| --- |
|  |

As the executive sponsor, I have read and fully understand the aim and nature of the Invasive Procedures Safety Network, as well as the support required for the participating team.

I hereby confirm that I have the authority to make the above commitment and undertake to provide internal organisational support during the period of the network.

I confirm that I have read and fully support this application.

|  |  |
| --- | --- |
| Name of executive sponsor |  |
| Signature |  |
| Role |  |
| Date |  |

## Section 5: Declaration of nominated participants

I understand that any personal data I supply will be held in confidence by UCLPartners, to help process and review my application, in accordance with General Data Protection Regulation (GDPR) and as detailed in the [Privacy Notice](https://uclpartners.com/wp-content/uploads/2019/04/2019_20-Local-Privacy-Notice-IPSN.docx).

By signing this form, I understand and agree:

* To UCLPartners processing the personal data, in accordance with Privacy Notice provided.
* If selected, I will participate fully in the network by, attending events and sharing learning with others.
* To abide by the rules of engagement as outlined in the Information for applicants.
* To participate in any review or evaluation as and when requested by UCLPartners.
* If I am no longer able to participate, I will let UCLPartners know in writing at the earliest opportunity.

We each confirm that the information provided in the application form is accurate.

|  |  |
| --- | --- |
| Name – Lead applicant  |  |
| Signature |  |
| Role |  |
| Date |  |

|  |  |
| --- | --- |
| Name – Exec-level team member  |  |
| Signature |  |
| Role |  |
| Date |  |

**Voluntary Information**

If you are successful, and following completion of the programme, we would like to include your contact details on UCLPartners Database, to send you invitations to relevant workshops and talks, as well as notification of and requests to circulate information on programmes/jobs open for application. This will not affect your application in any way.

If you would like to be included on this database, please tick this box: [ ]

Please note that your data will be processed in accordance with this [Privacy Notice](https://uclpartners.com/wp-content/uploads/2019/04/2019_20-Local-Privacy-Notice-IPSN.docx).