Patient and Public Voice (PPV) partner application form for the System User Insight Advisory Group

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**Application to become a PPV Partner for the System User Insight Advisory Group**

**Guidance notes**

Please carefully read the **application information pack** before completing this form, to ensure you fully understand the application process, and to determine whether you have the skills, experience and time to become a Patient and Public Voice (PPV) Partner.

Please submit only one application form for each person applying for this role.

The closing date for all applications is **Friday 1st July**

Interview dates to be arranged for week starting **11th July 2022.**

Please complete and return this application, along with the Equal Opportunities Monitoring Form, by email to charlotte.brooke@nhs.net

**Role**

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| **Patient and Public Voice (PPV) Partner for the System User Insight Advisory Group.** |

**About you**

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| **Full name:**  |
| **Title (for example Mr, Mrs, Ms, Miss, Dr):** |
| **Preferred name:** |
| **Are you aged 18 or over?** Yes / No (please delete as applicable) |
| **Address:** |
| **Postcode:**  |
| **Daytime contact telephone number:** |
| **Mobile telephone number:**  |
| **Email address:**  |
| **Please select the option that best applies to you;** I am a [ ]  Patient or service user  [ ]  Carer of a patient or service user [ ]  Both [ ]  Other (please state details below) |
| **Do you have any additional needs or require additional support from NHS England to enable you to participate?** Yes / No (delete as applicable). If yes, please tell us what support:**Are you able to use telephone, email and the internet to communicate and take part in meetings?** Yes / No (delete as applicable).**We want to make our meetings as inclusive as possible, so please let us know if you have any training or support needs.** |
| **How did you find out about this role?** [ ]  In Touch newsletter[ ]  NHS England and NHS Improvement website[ ]  Social media[ ]  Word of mouth[ ]  Other NHS England and NHS Improvement newsletter[ ]  Other, please explain:  |
| **Are you able to commit to the time commitment outlined in the application pack?** Yes / No (delete as applicable). Comments:  |
| **Do you hold any other Patient and Public Voice (PPV) Partner roles?** *Please note that NHS England and NHS Improvement PPV Partners can hold a maximum of three roles that attract an involvement payment at any one time, and a maximum of five roles that do not attract a payment.* Yes / No (delete as applicable). If yes, please provide details:  |

**Skills and experience**

You should refer to information provided in the **application information pack** before completing this section.

Your response should be typed, wherever possible.

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| **Please tell us why you would like to apply for this role, and what skills and experience you would bring to the advisory group** (we suggest you do this in about 350-500 words). |
| **From your experience of NHS services, either as a service user or carer, what issues have you experienced around joined up (integrated) care that you would like healthcare professionals to understand or be aware of?** (we suggest you do this in about 200-250 words). |

**References**

Please provide us with two references. Your referee should be someone who can comment on your suitability and experience/skills related to the PPV role OR be someone who knows you and can comment on your interest in this area of work.

Please include the name, job title, address, telephone number and email address of both of your referees.

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| **Reference 1** |
| Name |  |
| Job Title |  |
| Address |  |
| Postcode |  |
| Telephone number |  |
| Email address |  |
| Relationship  |  |
| How long know |  |
| **Reference 2** |
| Name |  |
| Job Title |  |
| Address |  |
| Postcode |  |
| Telephone number |  |
| Email address |  |
| Relationship  |  |
| How long know |  |

Please return your completed application form, along with a completed [Equal Opportunities Monitoring Form](https://www.england.nhs.uk/wp-content/uploads/2019/03/ppv-equal-opps-monitoring-form.docx) to charlotte.brooks@nhs.net.

Please include ‘‘Patient and Public Voice (PPV) partner application for the System User Insight Advisory Group” in the email title.

We take your privacy seriously. If you would like to see NHS England and NHS Improvement’s Privacy policy, please use the following link: [https://www.england.nhs.uk/contact-us/privacy-notice/](https://nhsengland.cmail19.com/t/t-l-xqkkn-slhldikjt-jd/)

**Thank you for your application and interest in this role.**