

# HEALTHWATCH STAFFORDSHIRE MEMBERS FORM

'Any information you provide will be held securely and in accordance with the Data Protection Act 1988. Your personal details will not be disclosed to any third parties'

By becoming a Healthwatch Member you will receive our regular newsletter and any information about health and social care developments.

*If you are joining on behalf of an organisation; please provide the organisations contact details*

## Section One

Name:	Date:
Organisation: <i>(if applicable)</i>	
Address:	Postcode:
	Contact Number:
Email Address:	

## Section Two

Where did you hear about Healthwatch Staffordshire?
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## Section Three

Please tick which Staffordshire district you currently receive services from or which district(s) your organisation covers and represents		
<input type="checkbox"/> Cannock Chase	<input type="checkbox"/> Newcastle-under-Lyme	<input type="checkbox"/> Staffordshire Moorlands
<input type="checkbox"/> East Staffordshire	<input type="checkbox"/> South Staffordshire	<input type="checkbox"/> Tamworth
<input type="checkbox"/> Lichfield	<input type="checkbox"/> Stafford & Surrounds	<input type="checkbox"/> County Wide
<input type="checkbox"/> Other (please specify)		



## Section Four

Thematic Interests:

- |  |   |
|--|---|
| <input type="checkbox"/> Urgent Care/A&E | <input type="checkbox"/> End of Life Care     |
| <input type="checkbox"/> Primary Care    | <input type="checkbox"/> Cancer Care          |
| <input type="checkbox"/> Frail Elderly   | <input type="checkbox"/> Long Term Conditions |
| <input type="checkbox"/> Mental Health   | <input type="checkbox"/> Other                |

If you are interested in becoming a Healthwatch Champion please continue to section five of the application; however if you wish to sign as a Healthwatch Member only then please return this form to us at:

Healthwatch Staffordshire, Suite 2,  
Opus House, Priestly Court,  
Staffordshire Technology Park,  
Stafford, Staffordshire, ST18 0LQ.

Signature:

Date:



# HEALTHWATCH CHAMPIONS

Healthwatch Staffordshire is a county-wide service with a commitment to have a presence in local areas. In addition to the work of paid staff in districts, Healthwatch wishes to establish strong district networks of Healthwatch Champions. Champions will support engagement work in communities by being active in their own local area, representing and channelling the views of local people. Healthwatch Champions will be volunteers committed to improving Health and Social Care Services and who are willing to support the Healthwatch team.

## Section Five

Why are you interested in becoming a Healthwatch Champion?

## Section Six

Could you give a brief summary of your work/volunteering/life experience:

What interests personal or otherwise do you have in Health and/or Social Care Services in Staffordshire?



As a Healthwatch Champion you would need to be independent and impartial in given situations - do you see any potential conflicts of interest?

What qualities would you bring as a Healthwatch Champion:

## Section Seven

Although it is not essential, if you do have any experience in any of the following areas, please provide details:

- Consulting with people by undertaking discussions and/or surveys
- Delivering talks, presentations and/or facilitating focus groups
- Supporting and/or delivering events and displays



## Section Eight

From the role descriptors provided, please indicate below the areas of activity as a Healthwatch Champion you would be interested in:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Marketing & Promotions                  | <input type="checkbox"/> Events & Engagement |  |
| <input type="checkbox"/> Enter & View, Authorised Representative |  |  |
| <input type="checkbox"/> Complaints Advocate                     | <input type="checkbox"/> Researcher          | <input type="checkbox"/> Reading Panel |

## Section Nine

Please supply the names of two people that we can contact for references (*nb. These can be personal references*)

Name: Address:	Name: Address:
Contact Number:	Contact Number:

The information I have provided is a true and accurate account of my experience and suitability to perform this role.

Signature:	Date:
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Please return your completed form to [enquiries@healthwatchstaffordshire.co.uk](mailto:enquiries@healthwatchstaffordshire.co.uk) or Healthwatch Staffordshire, Suite 2, Opus House, Priestly Court, Staffordshire Technology Park, Stafford, Staffordshire, ST18 0LQ

A member of the Healthwatch Staffordshire team will be in contact with you shortly to arrange an informal interview.

Many thanks for your interest in becoming a Healthwatch Staffordshire Champion Volunteer.



Interviewer Notes/Comments

