**“Fit and Proper Person” SELF declarATION**

**PLACE-BAsed committees of the West Yorkshire InTEGRATED CARE BOARD**

1. Non-executive roles in the NHS are positions of significant public responsibility and it is important that those appointed can maintain the confidence of the public, patients and NHS staff. The ICB wants to ensure that those that are appointed to place-based committees of the ICB are of good character, and will ensure an open and honest culture. The “Fit and Proper Person” requirements are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
2. By signing the declaration below, you are confirming that you are a “fit and proper person” outlined at (2), that you do not fall within any of the categories outlined at (4) or (5) below and that you are not aware of any pending proceedings or matters which may call such a declaration into question in the future.
3. The regulations require you are:

(a) of good character;

(b) have the necessary qualifications, competence, skills and experience; and

(c) are able by reason of your health, after reasonable adjustments are made, of properly performing tasks which are intrinsic to the office or position.

1. Do any of the following conditions apply to you? You are asked to confirm that you are not:
2. a person who has been convicted in the United Kingdom of any offence or been convicted elsewhere of any offence which, if committed in any part of the United Kingdom, would constitute an offence;
3. a person who has been erased, removed or struck off a register of professionals maintained by a regulator of health care or social work professionals;
4. an undischarged bankrupt, or a person whose estate has had a sequestration awarded in respect of it and who has not been discharged;
5. the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland;
6. a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986(40);
7. a person who has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it;
8. included in the children’s barred list or the adults’ barred list maintained under section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland;
9. a person who has been responsible for, privy to, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying on a regulated activity, or discharging any functions relating to any office or employment with a service provider.
10. The following conditions disqualify you from appointment. You are asked to confirm that you do not hold an ongoing leadership role (hold Executive, Non Executive or elected positions or offices) at a health or social care organisation within the place covered by the place-based committee. You will need to stand down from such a role if appointed to this new independent role.
11. In addition you are asked to confirm that you are not:
12. a serving MP nor MEP or a candidate for election as MP or MEP;
13. a person who has been dismissed (except by redundancy) by any NHS body;
14. a person whose earlier appointment as chair or chair or non-executive director of an NHS trust was terminated;
15. under a disqualification order under the Company Directors Disqualification Act 1986; and / or
16. a person who has been removed from trusteeship of a charity.

**DECLARATION**

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|  | I confirm that I do not fit within any of the categories listed at (4) or (5) and that there are no other grounds under which I would be ineligible for appointment. If appointed, I undertake to notify the ICB immediately of any change of circumstances that may affect my eligibility to remain in post. |
|  | I wish to declare the following information which may be relevant to my eligibility for this role: |
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| **Signature:****Name:** **Date:**  |