

FORM H₁ - INFORMATION ON HOSTING ORGANISATIONS (UK)

The host organisations are kindly requested to complete this information form legibly in English and to send it by email to the national co-ordinator at hope@leadershipacademy.nhs.uk before **31 October 2017**.

The following information should also be considered:

The acceptance of two candidates can have several advantages for the hosts themselves and for the professionals who in that case should preferably have different nationalities.

Following discussion with the participant(s), the host organisation agrees on sending by email to the participant(s) a written and detailed draft version of the individual programme before the deadline set up by HOPE. Please see Programme and Applicant Guide for Hosts for additional information.

GENERAL INFORMATION	
Organisation	
Name of the Chief Executive/ General Director	
Full address and short description of location in terms of country/region/major cities	
Tel (international codes as well)	+ 44
Fax	+ 44
E-mail	
Type of organisation (delete as appropriate)	Primary care organisation Acute hospital – teaching Acute hospital – non-teaching Psychiatry Rehabilitation Other (please specify)
Number of beds (for hospitals)	
Does your organisation use LEAN processes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Short description of services provided	

EXCHANGE POSTS	
Number of exchange posts available <i>(please note offering at least 2 places are encouraged)</i>	
Specific candidate profile requested (i.e. specific gender for accommodation purposes; background in particular professional speciality, etc.)	
Language(s) accepted (If other than English)	

ACCOMMODATION		
<p>The host organisation will provide decent accommodation on a free basis. Please tick the appropriate box(es) and indicate some details on the accommodation and bathroom facilities.</p>		
Individual room	<input type="checkbox"/>	
Shared room	<input type="checkbox"/>	
Individual room with shared facilities	<input type="checkbox"/>	
Hospital Campus	<input type="checkbox"/>	
Hospital room	<input type="checkbox"/>	
University/Student Room	<input type="checkbox"/>	
Hotel	<input type="checkbox"/>	
Apartment/Cottage	<input type="checkbox"/>	
Estimated time to host hospital	<input type="checkbox"/> up to 15 min <input type="checkbox"/> up to 30 min <input type="checkbox"/> up to 1 hour	
Need to use public transport	<input type="checkbox"/> Yes <input type="checkbox"/> No	
What will be the approx. price the professional will have to pay for meals/day?		

INSURANCES	
Need for specific health insurance coverage in case of accident/illness. Tick box	
European Health Card accepted	<input type="checkbox"/>
Private Insurance advised	<input type="checkbox"/>
Host organisation insurance	<input type="checkbox"/>
Other	<input type="checkbox"/>

PERSON IN CHARGE - CONTACT	
Person in charge of the scheme, designated by the host as the Local Coordinator	
Name	
Position	
Tel	+44
Fax	+44
Mobile	+44
E-mail	
Best way to be contacted during the exchange period?	
Experience in previous HOPE/foreign exchanges	
As co-ordinator	<input type="checkbox"/> Yes <input type="checkbox"/> No
As participant	<input type="checkbox"/> Yes <input type="checkbox"/> No

INTEREST	
Please explain what your organisation would like to gain from participating in this exchange programme	

Hosting organisations must be fully aware of the implications of the Exchange as they are mentioned below and also acknowledge that they will abide by the requirements for hosting organisations. By signing this declaration, the hosting organisation acknowledges this commitment.

Hosting organisation's declaration

This organisation understands and accepts the conditions for its participation in the 2018 HOPE Exchange Programme.

During the exchange period this organisation will develop a local programme meeting the requirements of the theme for the year and, where possible, the participants specific interests. It will provide adequate accommodation for the participants we are hosting for the required dates of the programme (**from 8th – 30th May 2018**). It will undertake to provide at least one meal a day at a reasonable rate or free of charge, as well as access to IT, which will preferably be available outside of programme hours. This organisation will also submit a report to HOPE **no later than 31 July 2018** evaluating its experience as a host during the 2018 programme.

In the event that we arrange for participants to spend time with another organisation during the exchange period, we agree that necessary arrangements to uphold the above standards will be met during their time there as well.

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Organisation name and date

Name and signature of the
Nominated Local Lead

Name and signature of the
CEO or General Director

This form should be scanned and emailed to the UK National Co-ordinator at hope@leadershipacademy.nhs.uk before 31 October 2017 and originals retained by the Nominated Local Lead.