Non-Executive Director (Audit and Risk Assurance Committee Chair) of NHS England

Information pack for applicants

Closing date: Midday on Thursday 5 May 2016
Reference no: E16-10
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Dear candidate,

It is now over four years since NHS England took up its full range of statutory responsibilities, and we are looking to bring further talent to the non-executive membership of what has developed into a strong Board.

The challenge is truly exceptional. We are required, through the strategic investment of over £100billion a year in health care providers, to bring about continuous improvement in the quality of healthcare for the population of England, whilst also promoting the transformation in its provision that is necessary to adapt to the changing burden of ill health, particularly with a steadily ageing population. There is the opportunity to advance the deployment in this context of the technologies that have brought about radical change in other industries, to empower patients as consumers of healthcare and to ensure the sustainability of the NHS as a world leading service under challenging economic conditions.

We are looking for an individual who shares the values of the NHS – of providing healthcare of world-class quality, free to all at the point of need – and who is able to bring to the Board outstanding experience, expertise and insight developed in a range of different contexts.

We have developed a strong unitary Board and a strong executive team led by our Chief Executive Simon Stevens, who took up the position in April 2014. This is a time of great opportunity for the NHS and, equally, of opportunity for the non-executive members of its Board to make a real difference to its future.

Once again many thanks for your interest.

Yours sincerely

Malcolm Grant
Chair
NHS England
Non-Executive Director of NHS England (REFERENCE E16-10)

Making an application

Thank you for your interest in the appointment of a Non-Executive Director to NHS England. The attached Annexes provide details on the role of a Non-Executive Director and the person specification, the role and responsibilities of NHS England and the selection process.

To make an application please send a CV, supporting letter and completed monitoring form (attached) to the address below:

appointments.team@dh.gsi.gov.uk quoting the reference in the subject field, or post to: Alex Staples, Department of Health, 79 Whitehall, London, SW1A 2NS. Applications must be received by midday on Thursday 5 May.

In making an application please note the following:

Supporting letter

The supporting letter is your opportunity to demonstrate how you meet each of the criteria set out in the person specification. How you choose to present the information is up to you. However, you should aim to provide specific and detailed examples that demonstrate how your knowledge and experience matches each of the criteria, and which describe what your role was in achieving a specific result. It will also benefit the selection panel if you can be clear which particular evidence you provide relates to which criteria. Providing separate paragraphs in relation to each criterion is common practice. Please write all acronyms in full first.

Please ensure your full name, the role to which you are applying and the corresponding reference number for the post are clearly noted at the top of your letter.

Please limit your letter to two pages, and type or write clearly in black ink.

Declaration of interests and ensuring public confidence

If you have any business or personal interests that might be relevant to the work of NHS England and which could lead to a real or perceived conflict of interest were you to be appointed, please provide details in your supporting letter. Should you be successful in your application, if there is anything in your personal or professional history, that if brought into the public domain, may cause embarrassment or disrepute to the organisation, please provide further details in your supporting letter. Failure to disclose such information could result in an appointment being terminated – refer to the “Eligibility Criteria for appointment” section in Annex A.

CV

Please ensure your CV includes:

- your full name, title, home address, personal contact telephone numbers (land line and mobile) and personal email address

- similar contact details for two referees who will support your application. One referee should be the person to whom you are/were accountable in your current/most recent appointment or position of employment. Please indicate
the relationship of each referee to you. References will be requested for short-listed candidates prior to interview.

- brief details of your current or most recent post and the dates you occupied this role. Please identify any past or present Ministerial appointments. Please write all acronyms in full first.

**Monitoring form**

Please complete the monitoring form. Diversity monitoring information will not be seen by the panel assessing your application.

**Guaranteed Interview Scheme**

The Department of Health operates a Guaranteed Interview Scheme (GIS) for disabled people. The Equality Act 2010 defines a person as disabled if they have a physical or mental impairment and the impairment has a substantial and long term adverse effect on their ability to carry out normal day to day activities. Under the GIS a disabled candidate will be selected for interview if they meet the **essential criteria** for the post.

If you wish to apply under the GIS please complete the GIS form and return it with your application.

All applications will be acknowledged by email after the closing date.

**Indicative timetable**

- Closing date: Midday on Thursday 5 May
- Shortlisting complete: Friday 13 May 2016
- Interviews held: Monday 13 June 2016

**Key facts about the post**

- **Location:** NHS England has its headquarters in London, but also has a major national office in Leeds, and regional teams based across the country. Board meetings and committee meetings are held mainly in London.
- **Remuneration:** £26,272 per annum.
- **Time Commitment:** 2 to 3 days per month

**Contacts:**

The Department of Health has appointed Russell Reynolds Associates to provide executive search support to this recruitment campaign. For an informal discussion about the role, please contact:

Patrick Johnson  
Tel: 020 7830 8052  
Email: fiona.birkmire@russellreynolds.com
For further information regarding the selection process, please contact:

Alex Staples  
Appointments Team  
Tel: 020 7210 2713  
Email: alex.staples@dh.gsi.gov.uk

For further information regarding the role of NHS England and the role of the Non-Executive Director please contact:

Tel: 0113 825 1104  
Email: laurabanks1@nhs.net

Please quote reference E16-10 on all correspondence.

If you choose to apply, we would like to thank you in advance for your time and effort in making an application.

Feedback

The Commissioner for Public Appointments would like to find out what you think of the public appointments process. If you make an application, the Commissioner would appreciate a few minutes of your time to complete this survey: http://publicappointmentscommissioner.independent.gov.uk/candidate-survey/

Your response will be anonymous and will inform the Commissioner's ongoing work with Government Departments to improve the public appointments process.
Annex A

Appointment of the Non-Executive Director of NHS England

Role and responsibilities

The primary role of Non-Executive Directors is, as a team, to lead in developing the strategy and oversee the work of NHS England by participating fully in the work of the board, both in the context of the board meetings themselves, and more widely. Non-Executive Directors also play a part in representing NHS England externally, alongside the Chief Executive, the Chair and the Executive Director team.

The responsibilities of all Non-Executive Directors of NHS England are:

- work with the Chair and the Executive Board to develop NHS England’s strategy to ensure that it carries out its statutory responsibilities and delivers its mandate, meeting its targets and objectives, and ensure that the Executive Team is held to account for doing so
- ensuring the board reinforces the values of the organisation by setting a high standard for ethics and responsible business, and by maintaining and enhancing NHS England’s reputation as an open and independent body, which puts the interests of the public and patients first
- contributing to the meetings of the Board, taking an active part in discussions, providing counsel, advice, challenge and support to the Executive Team; contributing to an environment of constructive debate on key issues in order to build consensus
- ensuring that NHS England’s Executive Team develops and maintains strong working relationships with the Department of Health, the other health arm-length bodies and other stakeholders
- promoting the work of NHS England, with an understanding of the value of strategic communication and engagement
- contributing across a range of specific areas, including: setting and maintaining an appropriate clinical agenda for NHS England; ensuring the Board listens to the patient voice; ensuring appropriate financial controls are in place, and risks are managed accordingly; contributing to the change management agenda; ensuring that best practice is followed in all workforce and leadership policies and behaviour
- ensure that the Executive Team is held to account for putting in place appropriate financial controls and ensure compliance throughout the organisation

In addition the chair of the Audit and Risk Assurance Committee will

- chair NHS England’s Audit and Risk Assurance Committee, ensuring that NHS England manages its resources effectively and efficiently within budget, with appropriate financial controls in place, and strategic risks managed accordingly
Qualities required for the role of Non-Executive Director

To be considered, you must be able to demonstrate that you have the qualities, skills and experience to meet all the essential criteria for appointment.

**Essential Criteria**

- a career record of achievement, with an ability to operate effectively on the board of a high-profile national organisation
- a strong understanding of corporate governance and a commitment to the principles of public service, with the highest standards of personal propriety in relation to governance, accountability, risk and financial management
- an ability to guide NHS England’s strategic direction, and use sound judgement, based on the ability to consider and challenge complex issues from an impartial and balanced viewpoint
- good communication skills, with the ability to work as part of a team, with a positive and constructive style, challenging management recommendations where necessary
- an understanding of the importance of risk management and audit to good governance, and a record of achievement at a senior level in strategic financial management

**Remuneration**

- the Non-Executive Director who will act as the chair of the Audit and Risk Assurance Committee will receive £26,272 per annum
- remuneration is taxable, and subject to National Insurance contributions, both of which will be deducted at source under PAYE before you are paid. Remuneration is not pensionable
- you may claim travel and subsistence expenses, which are properly and necessarily incurred in carrying out your role and responsibilities as a Non-Executive Director of NHS England, in line with travel and subsistence policy and rates for NHS England. A copy of the policy and rates can be obtained from NHS England

**Time commitment**

- 2 to 3 days per month

**Tenure of office**

- the Secretary of State determines the length of the appointment, which will be for up to a maximum of 4 years

**Accountability**

Non-Executive Directors are appointed by the Secretary of State and are accountable to the Secretary of State via the Chair for carrying out their duties and for their performance
Disqualification from appointment

There are circumstances in which an individual may not be considered from appointment. For more information on the disqualification criteria, please refer to the full document at: http://www.legislation.gov.uk/uksi/2011/2250/regulation/3/made.

Further advice about disqualification from appointment can be provided by contacting Laura Banks on 0113 825 1104.

Conflict of Interests

You should particularly note the requirement for you to declare any private interests which may, or may be perceived to, conflict with the role and responsibilities as a Non-Executive Director of NHS England, including any business interests and positions of authority outside of the role in NHS England.

If appointed, you will also be required to declare these interests on appointment which will be entered into a register which is available to the public.

Standards in public life

You will be expected to demonstrate high standards of corporate and personal conduct. All successful candidates will be asked to subscribe to the Code of Conduct for Board Members of Public Bodies, you can access this document at: http://www.bl.uk/aboutus/governance/blboard/Board%20Code%20of%20Practice%202011.pdf

Diversity and equality of opportunity

The Department of Health and NHS England value and promote diversity and encourage applications from all sections of the community.
Annex B

NHS England role and responsibilities

A brief history

NHS England was established by the Health and Social Care Act 2012. It is the first time in its history that responsibility for the operations of the NHS has been transferred to an independent board established by primary legislation.

NHS England shares responsibility with the Secretary of State for Health for promoting a comprehensive health system in England, to secure improvement in physical and mental health, and in the prevention, diagnosis and treatment of ill-health. The 2012 Act establishes the relationship through a mandate, which is the means by which the Secretary of State specifies the objectives that NHS England is expected to deliver. The mandate is reviewed annually, and may not be amended during the year without special reason. The mandate for 2016-17 was published on 17 December 2016 ahead of the publication of NHS Shared Planning Guidance. There are bi-monthly accountability meetings between the Secretary of State and the Chair of the Board, and the agenda and the minutes are published. The Secretary of State is also required to publish an annual assessment of NHS England’s performance against the mandate.

Although the mandate establishes the formal relationship, there is regular informal liaison between NHS England and the Department of Health, as there is with the various other arm’s length bodies with interdependent responsibilities, including the Care Quality Commission, NHS Improvement, Public Health England, NICE and Health Education England.

Mode of operation

From the outset, NHS England has committed itself to an open and transparent style. The Board is a unitary board, in which both non-executives and executive members work as a team. Its formal business meetings are not only conducted in public, but are also web cast live. Each meeting is followed by a private meeting for reserved business as required. Much preparatory work is also done by members of the Board in informal development sessions. Recent sessions have covered such subjects as reviewing the implementation of the Five Year Forward View, strengthening patient and public involvement, and shaping strategy for mental health, maternity and obesity.

Responsibilities

NHS England has responsibility for the commissioning of health care in England and, under the mandate, to invest its annual budget (exceeding £100 billion) to bring about measurable improvements in health outcomes for the population. Most of the commissioning in terms of expenditure is undertaken by the 209 clinical commissioning groups (CCGs) that were set up under the 2012 Act. NHS England allocates some £60 billion to the CCGs, but does not have power of direction over them. In accordance with the philosophy of the 2012 legislation, the relationship is one of support and facilitation. NHS England oversees their performance against plans prepared by them and agreed with NHS England’s respective area teams, and through the recently-published CCG Improvement and Assessment Framework.

The remaining commissioning is undertaken by NHS England directly, and includes primary care (general practice, community pharmacy, dentistry and optometry
services), some specialist services, including justice and military; and around £13.8 billion of specialised commissioning, which includes some 146 different clinical specifications which are of such rarity, or require such skilled teams and/or advanced technology, as to make it necessary for them to be commissioned nationally rather than locally. Highly specialised hospitals, such as Great Ormond Street in London, may earn over 70% of their NHS income through this route.

Current state of play

In October 2014, NHS England, in partnership with Public Health England, Health Education England, Monitor, the NHS Trust Development Agency and the Care Quality Commission published the Five Year Forward View, which sets out a collective vision of how the NHS needs to change if it is to close the widening gaps between healthcare needs, funding and the quality of services.

The Five Year Forward View is clear that the continued success of the NHS will require a combination of strategies that span the usual means of enhanced efficiency and procurement, in conjunction with radical transformation of NHS services. NHS England is taking a leading role in the realisation of the changes in the Five Year Forward View. Fifty sites, spanning primary, emergency, acute and community care are now acting as Vanguards, rolling out new models of care to act as blueprints for the NHS to move forward, and as an inspiration to the rest of the health and care system. Devolved commissioning arrangements such as those developed in Greater Manchester will enable commissioners to pool their resources with those of local authorities and other key stakeholders to empower them to better and more efficiently serve their local health economies. Co-commissioning of primary care by NHS England and Clinical Commissioning Groups will ensure these services are better attuned to local needs.

The challenge to NHS England over the coming years is, working closely with the Secretary of State and the other arm’s length bodies, to deliver the transformation of healthcare in England, wrapped around the needs of empowered patients, and focused upon world-class excellence. The Board is committed to ever increasing emphasis upon compassionate care, fully informed by the needs and wishes of patients and their carers, and reinforced by more effective use, analysis and transfer of data across the NHS, and the transformational power of the new technologies and applications that are currently being developed in healthcare.
The selection process

The Department of Health’s Appointments Team will deal with your application as quickly as possible and will advise you of the likely timetable at each stage. After the closing date for applications:

- the panel will assess candidates’ CVs and supporting letters to determine who it believes best meet the criteria for the role, and who will be invited to interview. The panel will rely only on the information you provide in your CV and letter to assess whether you have the skills and experience required. Please ensure that you provide evidence to support how you meet all of the essential criteria.

- the selection panel will be chaired by a Senior Departmental Official and will also comprise of the interim Chair of the Audit and Risk Assurance Committee, the Chair of NHS England and an Independent Panel Member.

- your application may be “long-listed”, subject to the volume of applications received, before it is passed to the shortlisting panel for consideration. You should be aware that in this situation, your application might not be considered in full by all of the panel. We may also use a search agency to carry out long-listing screening interviews. In this situation the agency will provide feedback to the panel on how candidates best meet the criteria.

- we anticipate that by 13 May the panel will have decided who will be invited for interview on 13 June.

- the panel will select for interview only the strongest applicants who it feels have demonstrated that they best meet the criteria set out in the person specification. However, if you have applied under the GIS and you meet all of the essential criteria, then you will also be invited for interview.

- if you are invited to interview and you are unable to attend on the set date then an alternative date can only be offered at the discretion of the panel.

- the Appointments Team will write to let you know whether or not you have been invited to be interviewed. It is our intention that interviews will take place in a central London location.

- if invited to interview, the panel may invite you to make a brief presentation at the start of the interview and will go on to question you about your skills and experience, asking specific questions to assess whether you meet the criteria set out for the post.

- candidates who the panel believe are ‘appointable’, will be recommended to the Secretary of State who will make the final decision. The Secretary of State may choose to meet with appointable candidates before making a decision. If he does, he will meet all candidates and in the presence of the panel chair or their nominated representative. The time taken between interview and a final appointment decision being made can sometimes take a number of weeks. Candidates who have been interviewed will be kept informed of progress.
• if you are successful, you will receive a letter from the Secretary of State appointing you as a Non-Executive Director of NHS England, which will confirm the terms on which the appointment is offered

• if you are unsuccessful at interview, you will be notified by the Appointments Team. We appreciate it takes a lot of time and effort to apply for roles and that feedback is a valuable part of the process. As a result, the letter will provide the details of who you may approach for feedback on your interview and application, if you so wish

• for further information on how we will manage the personal information that you have provided to us through your application, see Annex D

Queries

For queries about your application, please contact Alex Staples on 020 7210 2713.

Regulation by the Commissioner for Public Appointments

The Commissioner regulates and monitors appointments to public bodies to ensure procedures are fair, open and transparent and based on merit. More information about the role of the Commissioner and his Code of Practice is available from http://publicappointmentscommissioner.independent.gov.uk

If you are not completely satisfied

DH will aim to process all applications as quickly as possible and to treat all applicants with courtesy. If you have any complaints about the way your application has been handled, please contact Julie Nichols in the Department of Health by emailing julie.nichols@dh.gsi.gov.uk

If after receiving a comprehensive response from the Department you are still concerned, you can write to the Commissioner for Public Appointments. Please contact:
The Commissioner for Public Appointments
1 Horse Guards Road
London SW1A 2HQ

Tel: 0207 271 0849
Email: publicappointments@csc.gsi.gov.uk
Annex D

How we will manage your personal information

Your personal information will be held in accordance with the Data Protection Act 1998. You will not receive unsolicited paper or electronic mail as a result of sending DH any personal information. No personal information will be passed on to third parties for commercial purposes.

When we ask you for personal information, we promise we will:

- only ask for what we need, and not collect too much or irrelevant information
- ensure you know why we need it
- protect it and insofar as is possible, make sure nobody has access to it who shouldn’t
- ensure you know what choice you have about giving us information
- make sure we don’t keep it longer than necessary
- only use your information for the purposes you have authorised

We ask that you:

- provide us with accurate information
- inform us as soon as possible of any changes or if you notice mistakes in the information we hold about you

If you apply for a post, we will share some of the information you provide with the members of the selection panel for the post to which you are applying, so that your CV and supporting letter can be assessed.

The diversity monitoring information you provide will not be used in the selection process and will therefore not be shared with the selection panel assessing your application at any stage. However, the Commissioner for Public Appointments requires that selection panels review the political activity response at the interview stage. This in no way acts as a bar to appointment. Further information on this is provided in the attached Monitoring form.

The Commissioner for Public Appointments regulates and monitors appointments to public bodies to ensure procedures are fair. The Department of Health is required by the Commissioner for Public Appointments to retain information about the people who apply for public appointments within his remit, and make this information available to him for audit purposes, if requested to do so. Information you provide in your application may therefore be made available to the Commissioner for Public Appointments and the Commissioner’s auditors on a confidential basis in order to help fulfil either the Commissioner’s formal complaints investigation role or for audit purposes.