

Could you help lead the NHS in your area?

Associate Non-executive Director Candidate information pack

Reference: N1305



We value and promote diversity and are committed to equality of opportunity for all and appointments made on merit. We believe that the best boards are those that reflect the communities they serve.

We particularly welcome applications from women, people from the local black and minority ethnic communities, and disabled people who we know are under-represented in chair and non-executive roles.

Contents

1. The opportunity	4
2. The person specification	4
3. About the Trust	5

Appendix 1: Role and responsibilities

Appendix 2: More information

Appendix 3: Making an application

1. The opportunity

We are recruiting an Associate Non-executive Director (NED) for Hull and East Yorkshire Hospitals NHS Trust. This is an exceptional opportunity to share your talents and expertise to make a positive difference to the lives of people in your community.

Please note that the successful candidate will be a key member of the non-executive director team. They will attend trust board meetings and relevant committee meetings, playing an active role by providing advice and appropriate challenge across the range of Trust healthcare services and supporting business areas. However, as they are not formally appointed as board members, and should circumstances arise, they will not be eligible to vote. In all other respects Associate NEDs are of equal status and value.

The Associate NED will be identified through NHS Improvement using our selection processes but will be appointed by the Trust. This is part of the board's succession planning and the successful candidate may be considered for appointment as a full non-executive director, without further competition, if a suitable vacancy arises.

2. The person specification

Essential criteria

You will need to have a genuine commitment to patients and the promotion of excellent health care services. You will have senior level clinical and patient safety expertise gained from either medical, nursing or allied disciplines.

Applicants should not be former employees of Hull and East Yorkshire Hospitals NHS Trust.

You will need to be able to demonstrate you can use your experience to:

- work alongside other non-executives and executive colleagues as an equal member of the board;
- bring independence, external perspectives, skills, and challenge to strategy development and expertise in the delivery of safe, innovate, high quality acute services whilst understanding their cost;
- supporting and holding the executive to account by providing purposeful, constructive scrutiny and challenge; and
- shape and actively support a continuous improvement culture for the trust.

All non-executive directors must **champion the standards of public life** – by upholding the highest standards of conduct and displaying the principles of selflessness, integrity, objectivity, accountability, openness, honesty, and leadership.

As a future NHS leader, the successful candidate will be able to demonstrate the range of behaviours required to contribute effectively in this board level role. These are outlined in the NHS Leadership Academy’s [Healthcare Leadership Model](#).

- Applicants should live in or have strong connections with Yorkshire.
- On average this role will require the equivalent to 2 to 3 days a month.
- The remuneration payable for this role is £6,157 pa.

Given the significant public profile and responsibility members of NHS Boards hold, it is vital that those appointed inspire confidence of the public, patients and NHS staff at all times. NHS Improvement make a number of specific background checks to ensure that those we appoint are “fit and proper” people to hold these important roles. For more information please contact Miriam.walker@nhs.net

3. About Hull and East Yorkshire Hospitals NHS Trust

The Trust’s vision is:

Great Staff, Great Care, Great Future

It believes that by developing an innovative, skilled and caring workforce, it can deliver great care to patients and a great future for its staff and their community.

The Trust’s values are:

CARE

We are polite and courteous, welcoming and friendly. We smile and we make time to listen to our patients and staff. We consider the impact our actions have on patients and colleagues. We take pride in our appearances and our hospitals and we try to remain positive.

We do not treat anyone unfairly. We do not let our mood affect the way we treat people. We don’t talk negatively about colleagues or other teams. Offensive language, shouting, bullying and spreading rumours are unacceptable.

HONESTY

We tell the truth compassionately. We involve patients in decisions about their care and we are honest when things go wrong. We always report errors and raise concerns we have about care. Our decisions and actions are based on facts not stories and opinions.

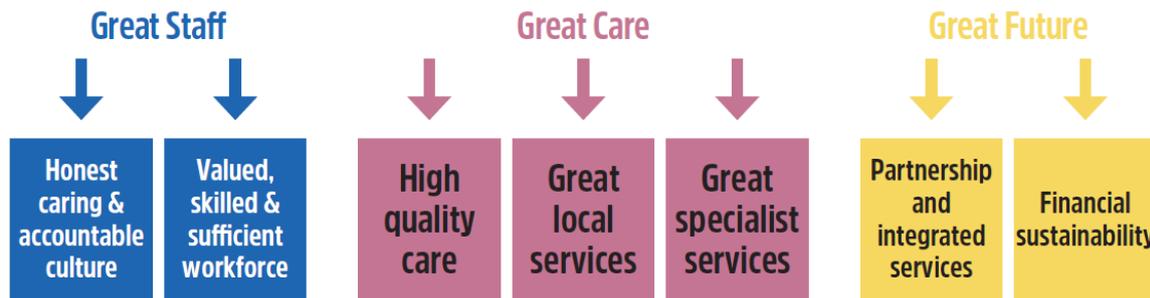
We do not withhold information from colleagues or patients. We never discourage staff from reporting concerns. We are not careless with confidential information. We do not present myths as facts.

ACCOUNTABILITY

We are all responsible for our decision and actions and the impact these have on care. All staff are responsible for maintaining high standards of practice and we take every opportunity to continuously learn. Everyone is encouraged to speak up and contribute their ideas to improve the care we provide.

We do not unfairly blame people. We positively embrace change and we don’t discourage people from having opinions. Controlling behaviours and silo working should not be exhibited on our Trust.

Building on its vision, the Trust has developed seven long term strategic goals which when achieved will make the three elements of its vision reality.



Hull and East Yorkshire Hospitals NHS Trust (HEY) is a large acute trust situated in Kingston upon Hull and the East Riding of Yorkshire. The Trust has two main sites, the Hull Royal Infirmary (HRI) and Castle Hill Hospital (CHH) employs approximately 7,000 staff (WTE). It has an annual income of circa £550m. It is also a university teaching hospital and partner in the Hull York Medical School.

The Trust's secondary care service portfolio is comprehensive, covering the major medical and surgical specialties, routine and specialist diagnostic services and other clinical support services. These services are provided primarily to a catchment population of approximately 600,000 in the Hull and East Riding of Yorkshire area. It also provides specialist services to a catchment population of between 1.05 million and 1.8 million extending from York and Scarborough in North Yorkshire to Grimsby and Scunthorpe in northern Lincolnshire. In addition, The Trust is a tertiary/specialised provider a range of services, including cancer and cardiology, and is a Major Trauma Centre.

Hull is a geographically compact city of circa 270,000 people. It was identified as the second-most deprived local authority in England in 2015. The health of people in Hull is generally worse than the England average, with life expectancy for both men and women being lower than the England average.

The East Riding of Yorkshire is a predominantly rural area, populated by circa 340,000 people. The geography of the East Riding makes it difficult for some people to access services.

Hull and the East Riding are served by separate Clinical Commissioning Groups (CCGs) that are largely co-terminous with their local authorities. This Trust provides virtually all of Hull CCG's secondary services and around 60% for the East Riding of Yorkshire.

Key Challenges

The Care Quality Commission (CQC) undertook a comprehensive inspection of the Trust in June 2016. It recognised the improvements that had been made since its last inspection in 2015 and areas highlighted for further work have been included in the Trust's Quality Improvement Plan for 2016/17. The Trust currently has an overall rating of 'requires improvement' and has set a target to reach 'good' and then 'outstanding' within three years.

The national financial environment is challenging for both health and social services. The Trust's financial position has deteriorated over the last 3 years with a recurrent deficit carried into 2016/17. Whilst the Trust met its statutory financial targets in 2016/17, it needs to look at its underlying deficit, which is predicted to be circa £14m 2017/18. This is a challenging agenda for the Trust, both in terms of delivering the scale of savings required to meet its financial plan and not impact further on the deficit, and addressing pressures to enable it to deliver its contractual and NHS Constitution obligations. The Trust is working through the recommendations of the Lord Carter Efficiency Review in addition to pursuing its own analyses of opportunities for increasing productivity and reducing cost. The Trust has seen improvement in meeting NHS Constitutional waiting times in relation to the Emergency Department (four-hour target) but faces pressures in meeting diagnostic waiting times and associated treatment waiting times (18-week and some cancer waiting times).

The Trust is one of the largest employers in Hull and the East Riding and can play a positive role with its partners to create employment opportunities for local people. In addition, the Trust is a key player in the Humber, Coast and Vale Sustainability and Transformation Plan (STP), where decisions about the future delivery of services reflect the collaborative models emerging from the Five Year Forward View. The Trust is the workstream lead for the STP workstream on in-hospital care.

Appendix 1: Role and responsibilities

Role of the NHS Board

NHS Boards play a key role in shaping the strategy, vision and purpose of an organisation. They hold the organisation to account for the delivery of strategy and ensure value for money. They are also responsible for assuring that risks to the organisation and the public are managed and mitigated effectively. Led by an independent chair and composed of a mixture of both executive and independent non-executive members, the Board has a collective responsibility for the performance of the organisation.

The purpose of NHS Boards is to govern effectively, and in so doing build patient, public and stakeholder confidence that their health and healthcare is in safe hands. This fundamental accountability to the public and stakeholders is delivered by building confidence:

- in the quality and safety of health services
- that resources are invested in a way that delivers optimal health outcomes
- in the accessibility and responsiveness of health services
- that patients and the public can help to shape health services to meet their needs

- that public money is spent in a way that is fair, efficient, effective and economic.

Roles and responsibilities of the non-executive director

Non-executive directors will work alongside other non-executives and executive directors as an equal member of the Board. They share responsibility with the other directors for the decisions made by the Board and for success of the organisation in leading the local improvement of healthcare services for patients. Non-executives use their skills and personal experience as a member of their community to:

- **Formulate plans and strategy**
 - bringing independence, external perspectives, skills, and challenge to strategy development
- **Ensure accountability**
 - holding the executive to account for the delivery of strategy
 - providing purposeful, constructive scrutiny and challenge
 - chairing or participating as a member of key committees that support accountability
 - being accountable individually and collectively for the effectiveness of the Board
- **Shape culture and capability**
 - actively supporting and promoting a healthy culture for the organisation which is reflected in their own behaviour
 - providing visible leadership in developing a healthy culture so that staff believe NEDs provide a safe point of access to the Board for raising concerns
 - ensuring the directors of the Board are 'fit and proper' for the role and champion an open, honest and transparent culture within the organisation
- **Context**
 - mentoring less experienced NEDs where relevant

- **Process, structures and intelligence**

- satisfying themselves of the integrity of reporting mechanisms, and financial and quality intelligence including getting out and about, observing and talking to patients and staff
- providing analysis and constructive challenge to information on organisational and operational performance

- **Engagement**

- ensuring that the Board acts in best interests of patients and the public
- being available to staff if there are unresolved concerns
- showing commitment to working with key partners

In particular the responsibilities of non-executive directors are to:

- commit to working to, and encouraging within the Trust, the highest standards of probity, integrity and governance and contribute to ensuring that the Trust's internal governance arrangements conform with best practice and statutory requirements
- provide independent judgement and advice on issues of strategy, vision, performance, resources and standards of conduct and constructively challenge, influence and help the executive board develop proposals on such strategies to enable the organisation to fulfil its leadership responsibilities to patients, for healthcare of the local community
- ensure that patients and service users are treated with dignity and respect at all times, and that the patient is central to trust decision making
- ensure that the Board sets challenging objectives for improving its performance across the range of its functions
- structure the performance of management in meeting agreed goals and objectives
- in accordance with agreed board procedures, monitor the performance and conduct of management in meeting agreed goals and objectives and statutory responsibilities, including the preparation of annual reports and annual accounts and other statutory duties

- ensure that financial information is accurate and that financial controls and risk management systems are robust and defensible and that the Board is kept fully informed through timely and relevant information (you may be asked to sit on the audit committee on behalf of the Board)
- accept accountability to the NHS Improvement for the delivery of the organisation's objectives and ensure that the Board acts in the best interests of patients and its local community
- contribute to the determination of appropriate levels of remuneration for executive directors
- participate in the audit committee and take an active part in other committees (including the investment and remuneration committees) established by the Board of directors to exercise delegated responsibility
- as a member of board committees, appoint, remove, support, encourage and where appropriate "mentor" senior executives
- bring independent judgement and experience from outside the Trust and apply this to the benefit of the Trust, its stakeholders and its wider community
- assist fellow directors in providing entrepreneurial leadership to the Trust within a framework of prudent and effective controls, which enable risk to be assessed and managed
- assist fellow directors in setting the Trust's values and standards and ensure that its obligations to its stakeholders and the wider community are understood and fairly balanced at all times
- ensure that the organisation values diversity in its workforce and demonstrates equality of opportunity in its treatment of staff and patients and in all aspects of its business
- engage positively and collaboratively in board discussion of agenda items and act as an ambassador for the Trust in engagement with stakeholders including patients and the local community, dealing with the media when appropriate.

Appendix 2: More information

For information about the Trust, such as business plans, annual reports, and services, visit their [website](#).

The following information about NHS Improvement and this appointment is available on request from Miriam.walker@nhs.net

- Becoming a non-executive director
- Eligibility and disqualification from appointment
- Terms and conditions of chair and non-executive director appointments
- How your application will be handled
- Your personal information
- Dealing with concerns

Appendix 3: Making an application

If you wish to be considered for this role please provide:

- a CV that includes your address and contact details, highlighting and explaining any gaps in your employment history
- a supporting statement that highlights your motivation for applying and your understanding of the NHS and the role. You should outline your personal responsibility and achievement within previous roles and how your experience matches the person specification
- the names, positions, organisations and contact details for three referees. Your referees should be individuals in a line management capacity, and cover your most recent employer, any regulated health or social care activity or where roles involved children or vulnerable adults. Your references will be taken prior to interview and may be shared with the selection panel
- please complete and return the monitoring information form which accompanies this pack and is available for download
- tell us about any dates when you will not be available

Key dates

- **closing date for receipt of applications: 25 July 2017 at 11am.** Please forward your completed application to public.appointments@nhs.net
- **interview date: 3 August 2017**
- **proposed start date: September 2017**

Getting in touch

- For an informal and confidential discussion with Terry Moran, the Chair of the trust, please contact Rebecca Thompson on 01482 674 828
- **NHS Improvement** – for general enquiries contact Miriam Walker on 0300 123 2059 or by emailing Miriam.walker@nhs.net

About NHS Improvement

NHS Improvement is responsible for overseeing Foundation Trusts, NHS Trusts and independent providers. We offer the support these providers need to give patients consistently safe, high quality, compassionate care within local health systems that are financially sustainable. By holding providers to account and, where necessary, intervening, we help the NHS to meet its short-term challenges and secure its future.

NHS Improvement is the operational name for the organisation that brings together Monitor, NHS Trust Development Authority, Patient Safety, the National Reporting and Learning System, the Advancing Change team and the Intensive Support Teams.

Contact us

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