



Department
of Health



Resolution

Non-Executive Director of NHS Resolution (formerly the NHS Litigation Authority)

Information pack for applicants

Closing date: Midday on 15 June 2017

Reference no: SP17-04



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Dear candidate,

The NHS Litigation Authority (NHSLA) is changing its name to NHS Resolution and launching a five year strategy, *Delivering fair resolution and learning from harm*, which extends its role beyond the historic narrow remit of claims management. Against this backdrop and the increasing focus on the costs of clinical negligence, it has probably never received as much outside attention as it is at the present time.

Approaching two years ago the results of the independent Triennial Review were published which reported that the NHSLA's current form was suitable for its current purpose and that it was well led and operationally efficient. However it also noted that the NHSLA could do more to help meet the challenge of the continually rising costs which was something for DH and NHSLA to consider further. We were delighted with this last conclusion and following discussions with DH, Ministers and other parts of the system NHS Resolution is the response. In simple terms NHSLA is not the problem but in my view it can and should be a greater part of the solution(s). The challenges are exceptional: last year we collected £1.56 billion to meet claims for clinical negligence and at the end of March 2016 reported liabilities of £56.4 billion. The cost of clinical negligence is understandably receiving ever more attention and the system, including the NHSLA's role, is currently the subject of a Value for Money review by the NAO.

We are looking for an individual who has the experience, expertise, insight and enthusiasm to contribute to the future development of all parts of NHS Resolution and its role in the system, both in terms of strategy and the implementation of plans to deliver this strategy in collaboration with others.

Specifically, we are looking for an individual with the experience and skills required to take on the role of chair of the Audit and Risk Committee and enable the Board and Accounting Officer to discharge their respective responsibilities for the identification and management of risk, the integrity of the financial records and the fairness of our financial reporting.

We have a unitary Board and a strong but relatively new executive team. Day-to-day operations are the responsibility of our Chief Executive, Helen Vernon, who took up the position in December 2014, and three other Executive Directors who have all been appointed within the last two years, who are keen to work with the Non-Executives to implement our new strategy and further the development of NHS Resolution within the system.

Thank for your interest. Further details, including our new strategy, *Delivering fair resolution and learning from harm; Our strategy to 2022*, our Business Plan for 2017/18 and our 2016/17 annual report, are available from our website at <http://www.nhsla.com/Pages/Home.aspx>

Yours sincerely,

Ian Dilks
Chair
NHS Resolution

SECTION 1 – The Role

1.1 Role and Responsibilities of a NED of NHS Resolution

Introduction

Ministers are seeking to make a Non-Executive Director (NED) appointment to the board of NHS Resolution (NHSR). The NED will also chair the Audit and Risk Committee (ARC) from 1st December 2017.

Role and Responsibilities of a NED

As a Non-Executive Director of NHS Resolution you will be responsible for the good governance of the organisation, including the expenditure of considerable sums of public money. You will ensure that NHSR promotes the values of the NHS and places a high priority upon the safety of patients and staff. You will play a key role in ensuring that the organisation meets the needs of member organisations (NHS Trusts, commissioners and other service providers) is focused upon providing excellent services and good value for money and enables NHSR to contribute to the wider aims of the NHS where appropriate. You will provide appropriate challenge, scrutiny and support at Board level ensuring that NHSR learns from things which go wrong in the NHS and shares that learning, to improve patient safety and the standard of care.

In addition as Chair of the Audit and Risk Committee you will ensure the effective functioning of that committee which, as an important sub-committee of the Board, is responsible for providing assurance that NHSR manages its financial resources effectively and efficiently; has appropriate financial controls in place; oversees management's procedures for the identification and management of risk; and achieves a high quality of financial reporting.

Key responsibilities

Strategy

- develop and promote the strategic focus of NHSR through constructive debate and challenge at Board level
- support the maintenance and development of effective relationships with external stakeholders, including member organisations and partner bodies in the health and social care system. Where appropriate, to act as a good ambassador for NHSR
- help to strengthen the reputation of NHSR through ensuring that it provides timely and relevant expertise to the NHS

Performance

- ensure the Board acts in the best interests of the public and other stakeholders and is fully accountable for the services provided and the expenditure of public funds
- set ambitious targets for all aspects of NHSR's work to ensure that it delivers high quality services, decision making and advice
- scrutinise the performance of senior NHSR staff and Executive members of the Board to ensure that financial and other performance targets are met and that NHSR delivers on the objectives set out in the Business Plan and Framework Agreement

People

- ensure that NHSR has appropriate policies to promote the interests and training of its staff, so that they can provide an excellent service to customers

Governance

- ensure that the Audit and Risk Committee operates efficiently and effectively and discharges its responsibilities on behalf of the Board (a copy of the Terms of Reference is attached)

Qualities required for the role of a NED

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

- an ability to analyse complex and sometimes conflicting data and to draw balanced conclusions from information presented to you
- excellent communication skills and the ability to gain the confidence of senior stakeholders
- first class team-working skills and the willingness to work in a corporate manner to achieve NHSR's objectives
- a strong financial acumen and background and experience of governance, risk management, assurance and internal control functions including through membership of or close working with audit committees. A recognised financial qualification and/or previous experience of sitting on an audit committee.

Remuneration

- £7,883 per year (standard NED rate); and will increase on 1 December 2017 to reflect ARC Chair rate of £13,137 per year
- 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 NED, in line with travel and subsistence policy and rates for NHS Resolution. A copy of the policy and rates can be obtained from NHS Resolution.

Time commitment

2 to 3 days per month

Location

London

Tenure of office

Ministers determine the length of the appointment, which can be for up to a maximum of 5 years.

Accountability

NEDs 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.

For further information regarding the role of NHS Resolution (formerly the NHS Litigation Authority) and the role of Non-Executive Director and Chair of the Audit and Risk Committee:

Ian Dilks

Tel: 020 7811 2705

Email: ian.dilks@nhsla.com

1.2 NHS Resolution role and responsibilities

NHS Resolution role and responsibilities

On 1 April 2017, the NHS Litigation Authority (NHS LA) was relaunched as NHS Resolution with a new five year strategy which expands its historic remit of claims management and is focused on: providing expertise to the NHS on resolving concerns fairly, sharing learning for improvement and preserving resources for patient care.

NHS Resolution will be more involved in incidents at an earlier stage, providing increased support to the NHS in delivering candour in practice and in sharing learning for improvement, coupled with a fresh approach to resolution which reduces the need for costly and stressful court proceedings. This will include increasing the use of mediation in the NHS via its newly launched mediation service as well as developing a Peer support network for staff who are involved in an incident and providing a platform via its indemnity schemes to share learning for improvement.

NHS Resolution will:

- Improve the experience for patients, families and healthcare staff, with support for candour and the learning which goes hand in hand with a claim for compensation.
- Resolve concerns and disputes fairly and effectively to deliver resolution in its broadest sense, which is about more than just money.
- Provide analysis and expert knowledge to the healthcare and civil justice systems, to drive improvement.
- Deliver in partnership, interventions and solutions that prevent harm, improve safety and save money.
- Expand its role of sharing learning through the development of interventions, in partnership with others, to improve patient safety and prevent future harm.

NHS Resolution consists of three operating arms:

- Claims Management – providing seven indemnity schemes covering clinical negligence, third party damages and property expenses for the NHS in England and resolving claims for compensation fairly
- National Clinical Assessment Service – resolving concerns about the performance of doctors, dentists and pharmacists
- Family Health Service Appeals Unit – ensuring the prompt and fair resolution of appeals and disputes between primary care contractors and NHS England.

In 2017-18, NHS Resolution will administer spend across its indemnity schemes of over £2 billion*. It employs approximately 300 staff.

Further information about NHS Resolution, its five year Strategy and its Business Plan for 2017-18 can be obtained from its website:

<http://www.nhsla.com/Pages/Home.aspx>

*Before the effect of the change to the personal injury discount rate announced by the Lord Chancellor which came into effect on 20 March 2017.

Section 2: How to Apply

2.1 Making an application

Thank you for your interest in the appointment of a NED to NHS Resolution.

To make an application please email your CV, a supporting letter and completed monitoring form to:

appointments.team@dh.gsi.gov.uk – please quote ref: SP17-04 in the subject field.

If you are unable to apply by email you may send your application by post to:

Kully Kanda, Department of Health, Room 1N09, Quarry House, Quarry Hill,
Leeds, LS2 7UE

Applications must be received by **midday on 15 June 2017**.

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. It will benefit the Advisory Assessment 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 Resolution and which could lead to a real or perceived conflict of interest were you to be appointed, please provide details in your supporting letter.

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.

Given the nature of public appointments, it is important that those appointed as members of public bodies maintain the confidence of the public and Government. If there are any issues in your personal or professional history that could be misconstrued, cause embarrassment to Ministers or NHS Resolution or cause wider public confidence to be jeopardised, it is important that candidates bring them to the attention of the Assessment Panel. The panel may explore any such issues with you before they make a recommendation on the appointment.

Failure to disclose such information could result in an appointment being terminated.

Also, please refer to the Disqualification from appointment in Section 2.3.

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.

Monitoring form

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

If you are appointed to this role, please note that any political activity you declare will be published in accordance with the Governance Code on Public Appointments.

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.

Contacts:

For further information regarding the selection process, please contact:

Kully Kanda
Appointments Team
Tel: 0113 254 5301
Email: kuldeep.kanda@dh.gsi.gov.uk

For further information regarding the role of the NHS Resolution (formerly the NHS Litigation Authority) and the role of Non-Executive Director and Chair of the Audit and Risk Committee:

Ian Dilks
Tel: 020 7811 2705
Email: ian.dilks@nhs.uk

Please quote reference SP17-04 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.

2.2 The Selection Process

The Appointments Team will deal with your application as quickly as possible and will advise you of the likely timetable at each stage.

Timetable:

- Closing date: Midday on 15 June 2017
- Shortlisting complete: 23 June 2017
- Interviews held: 5 July 2017

The selection panel will be:

- Lee McDonough - DH Senior Sponsor for NHS Resolution
- Ian Dilks – Chair of NHS Resolution
- Rima Makarem - Independent Panel Member, who is independent of both the Department of Health and NHS Resolution

The Governance Code on Public Appointments requires all Advisory Assessment Panel members to declare any political activity within the last five years. All panel members have declared that they have not taken part in any political activity within the last five years.

After the closing date for applications:

- the Advisory Assessment 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 Advisory Assessment 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
- your application may be "long-listed", subject to the volume of applications received, before it is passed to the Advisory Assessment Panel for consideration. You should be aware that in this situation, your application might not be considered in full by all of the panel
- interviews will be held on 5 July 2017. Please hold this date, in the event you are invited to interview
- the Advisory Assessment 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 if you are unable to attend on the set date then an alternative date can only be offered at the discretion of the Advisory Assessment Panel
- the Appointments Team will email 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 Advisory Assessment 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, including asking specific questions to assess whether you meet the criteria set out for the post
- The Advisory Assessment Panel will also explore with candidates any potential conflicts of interest or any other issues arising from candidate's personal and professional history which may impact on an appointment decision (see section 2.1 for further details)
- candidates who the panel believe are 'appointable', will be recommended to Ministers who will make the final decision. Ministers may choose to meet with shortlisted candidates, before or after interview, before making a decision. Candidates should therefore be prepared for a short time gap between interview and a final appointment decision being made. Candidates who have been interviewed will be kept informed of progress
- if you are successful, you will receive a letter from Ministers appointing you as a NED of NHS Resolution, 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 **Section 2.4**

Queries

For queries about your application, please contact Kully Kanda on 0113 254 6769.

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: <https://www.gov.uk/government/publications/board-members-of-public-bodies-code-of-conduct>

Diversity and equality of opportunity

The Department of Health values and promotes diversity and encourage applications from all sections of the community.

Governance Code on Public Appointments

The Governance Code on Public Appointments, published by the Cabinet Office, sets out the principles that should underpin all public appointments. The Governance Code can be found at <https://www.gov.uk/government/publications/governance-code-for-public-appointments>.

The Commissioner for Public Appointments

The regulation of public appointments against the requirements of the Governance Code is carried out by the Commissioner for Public Appointments. The Commissioner provides independent assurance that public appointments are made in accordance with the principles set out in the Code. The Commissioner is appointed by the Queen and is independent of the Government and the Civil Service. Further about the role of the Commissioner 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 8938

Email: publicappointments@csc.gsi.gov.uk

2.3 Disqualification from Appointment/Eligibility Criteria

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 The National Health Service Litigation Authority Regulations 1995 (and subsequent amendments):

7(1) Subject to regulation 8 (cessation of disqualification), a person shall be disqualified for appointment as the chairman or as a non-officer member if—

- (a) he has within the preceding five years been convicted in the United Kingdom, the Channel Islands or the Isle of Man of any offence and has had passed on him a sentence of imprisonment (whether suspended or not) for a period of not less than three months without the option of a fine;
- (b) he has been adjudged bankrupt or has made a composition or arrangement with his creditors;
- (c) he has been dismissed, otherwise than by reason of redundancy, from any paid employment with a health service body;
- (d) he is a person whose tenure of office as the chairman, a member, a director or a governor of a health service body other than a clinical commissioning group has been terminated on the grounds that—
 - (i) it was not in the interests of the health service body or of the health service that he should continue to hold that office,
 - (ii) of non-attendance of meeting,
 - (iii) of non-disclosure of a pecuniary interest, or
 - (iv) of misbehaviour, misconduct or failure to carry out his duties
- (da) he is a person who has been removed from office as the chair or a member of the governing body of a clinical commissioning group
- (e) he is the chairman or an executive director of the National Health Service Commissioning Board or the chair or a member of the governing body of a clinical commissioning group;
- (ea) he is the chair, chief executive or a member of the National Institute for Health and Care Excellence or the Health and Social Care Information Centre.
- (f) he has had his name removed, by a direction under section 46 of the Act, from any list prepared under Part II of the Act, and has not subsequently had his name included in such a list.
- (g) he is chairman or another member of the Independent Regulator of NHS Foundation Trusts.

(2) For the purposes of paragraph (1)(a), the date of conviction shall be deemed to be the date on which the ordinary period allowed for making an appeal or application with respect to the conviction expires or, if such an appeal or application is made, the date

on which the appeal or application is finally disposed of or abandoned or fails by reason of its not being prosecuted.

(3) For the purposes of paragraph (1)(c) a person shall not be treated as having been in paid employment by reason only of his having been-

(a) in the case of an NHS foundation trust, the chairman, a governor or a non-executive director of the trust

(b) in the case of a clinical commissioning group, the chair or a member of the governing body of the group, or

(c) in the case of any other health service body, the chairman or a member or director of a health service body in question.

These are from <http://www.legislation.gov.uk/ukxi/1995/2801/contents/made> (and subsequent amendments).

Further advice about disqualification from appointment/ the eligibility criteria can be provided by contacting Cheryl Lynch on Tel: 020 7210 5143.

2.4 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 Advisory Assessment Panel assessing your application at any stage. However, panels may 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.