

Could you help lead the NHS in your area?

Clinical Non-Executive Director Candidate information pack

Reference: S1505



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.

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1. The opportunity

Thank you for your interest in the Non-Executive Director post at Portsmouth Hospitals NHS Trust and for taking the time to read this information pack. This is an exceptional opportunity to share your talents and expertise to make a positive difference to the lives of people in your community.

You will join the Trust at an exciting and challenging time. The Trust is developing an innovative strategy which demonstrates how they will deliver their vision to be recognised as the best hospital, providing the best care with the best employees. It is based both on a sound understanding of the challenges that they face in delivering an ambitious programme of change, and on a strong commitment to working in partnership with key stakeholders and partners.

The Trust continues to develop in many directions and has a well-earned reputation for clinical excellence. It is recognised as a major acute hospital, as it offers many services not normally associated with a District General Hospital. It has a designated cancer centre, and provides Renal and Transplant Services to a population in excess of two million. The Trust hosts the largest Defence Medical Group in the country. In addition it is a major provider of education and training for clinicians in the South-East of England.

As one of the largest and busiest NHS Trusts in the country, Portsmouth Hospitals is an organisation with great ambition. The Trust employs a dedicated and committed workforce who, every day, strives to provide excellent care for the communities they serve across South East Hampshire and beyond. The Trust is also a major provider of training and education to a wide range of health professionals and has a strong national R&D profile. Portsmouth Hospitals is driving major transformation to address weaker areas of clinical, operational and financial performance that will improve their CQC rating and most importantly, ensure they continue to offer patients high quality, timely and affordable care services. These are challenging times for the Trust, but such challenge offers real scope for innovation and closer collaboration with partners across the health and social care system.

The Trust is looking for a Non-Executive Director who shares their ambition to innovate, transform and further strengthen their position as a leading healthcare provider and employer of choice.

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 clinical and patient safety expertise gained from medical, nursing, allied disciplines or social care experience at a senior level in an academic, research, regulatory or clinically focused role.

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 have strong connections with Portsmouth or the surrounding areas.

3. About Portsmouth Hospitals NHS Trust

Portsmouth Hospitals NHS Trust provides a range of acute services at the Queen Alexandra Hospital. The Queen Alexandra Hospital site went through a major redevelopment in 2009, to create a modern and 'fit for purpose' hospital. The majority of the Trust's acute services are now provided at the Queen Alexandra Hospital following the completion of the redevelopment.

Queen Alexandra Hospital has:

- 1,200 beds, including cots
- 28 theatres - with four dedicated endo theatres
- Four state of the art linear accelerators
- Two purpose built interventional radiology suites, two MRI scanners, three CT scanners and a PET scanner
- State of the art pathology laboratory
- Superb critical care facilities

The Trust employs approximately 6,480 full time equivalent staff including Ministry of Defence employees, who are fully integrated into the activities of the hospital.

Portsmouth Hospital NHS Trust is the largest employer in the area.

The Trust is host to the largest one of four Ministry of Defence Medical Group Units (DMGUs) in England. The Unit treats members of the armed forces and their families across the United Kingdom. The Trust trains a range of military clinicians from all three of the armed forces who are regularly deployed to bases across the

world. Military staff account for 5% of the total workforce and the Trust has responsibility to ensure the staff have exposure to the appropriate clinical experience required during their times of deployment.

The Trust has a significant reputation in relation to research and development. Although not a University Hospital allied to a Medical School, the Trust is a major provider of under-graduate and post-graduate education working with three universities (Southampton, Portsmouth and Bournemouth).

The 'Emergency Department' at Queen Alexandra Hospital is one of the busiest in the UK treating in excess of 142,000 patients each year. Similarly, maternity services are responsible for the delivery of around 5,800 births per year, making it one of the largest maternity services on the south coast.

The Trust's vision, values and priorities:

The Trust's vision is to "be recognised as a world-class hospital, leading the field through innovative healthcare solutions, focused on the best outcome for our patients, delivered in a safe, caring and inspiring environment."

The priorities of the Trust are to bring values to life, to help create an underpinning brand, culture and way of working which all staff want to be a part of with a goal to unify around core purposes and belief systems.

The Trust's vision is supported by a series of values which continue to guide the strategic objectives of the Trust. The Trust's values are:

- **Respect and Dignity**
- **Quality of Care**
- **Efficiency**
- **Working Together**



4. Key challenges

Our mission and strategic goals

To be the best hospital, providing the best care, staffed by the best people.

- Deliver safe, high quality patient centered care
- Develop a reputation for excellence in innovation, research and development and education in the top 20% of our peers

- Be a hospital whose staff recommend the Trust as a place to work and a place to receive treatment
- Become the hospital of choice for general, specialist and selected services
- Develop sufficient financial strengths to adapt to change and invest in the future

Key areas of work for the organisation in 2015/16

1. Financial sustainability

The current NHS economic climate necessitates significant savings both locally and nationally. This is at a time when everyone in the NHS is seeking continuing improvements in standards of patient care. The Trust faces the dual challenge of delivering high quality care whilst offering value for money and creating year on year surpluses to reinvest in patient care for local communities. The financial challenges faced in 2014/15 continued into 2015/16 and the Trust finished the year with a £23.5m deficit. This was certainly not where they wanted to be, but the Board was adamant that they would not compromise patient care for cost. This performance was unsatisfactory and materially adverse to the Trusts original plan for a £16m deficit.

The Trust has experienced significant Unscheduled Care pressures during the year and this has impacted on the delivery of the 2015/16 plan overall. The financial position has likewise been affected and expenditure increases, greater than the value of additional income generated and difficulties in delivering full anticipated efficiency savings, have been major contributors to this adverse financial performance. External Auditors have issued a Section 30 report, under the Local Audit and Accountability Act 2014, reporting their view that the Trust would not be able to achieve their breakeven duty over a rolling three year period. In order to satisfy itself that it is appropriate to adopt the 'going concern' basis, in preparing the 2015/16 financial statements, the Trust has applied the definition as set out in the Department of Health Group Manual for Accounts; which outlines the interpretation of International Accounting Standard 1 'Presentation of Financial Statements' as 'anticipated continuation of the provision of a service in the future, as evidenced by inclusion of financial provision for that service in published documents'. The Trusts planning process for 2016/17 has taken account of the out-turn financial position from 2015/16, and with support from the Sustainability and Transformation Fund, aims to return the Trust to financial balance in the coming year. There are significant challenges contained within the plan including a 5.6% efficiency requirement of £32m. The development of savings plans has been supported by a newly established Delivery Unit which will continue the development of plans for future years, monitor and drive in year delivery and connect the efficiency programme to the overall improvement agenda. The Trust is also committed to taking a leading role, working with all stakeholders across the local health economy, to ensure the

financial stability of the healthcare system to become less reactive to financial pressures and more able to control investment decisions.

2. Unscheduled care

Working with a range of partners the Trust is implementing sustainable plans to provide sufficient capacity, and speed of access, to ensure that patients receive high quality services in line with NHS constitutional standards. These plans have been captured as part of an Unscheduled Care Improvement Plan with key sections covering:

- Improved patient flow within the Emergency Department
- The redesign of the 'Medical Take Model' to ensure the timely assessment of medical patients
- Increased focus on the effective and timely turnaround of short stay patients
- The transformation of the Acute Medical Unit to accommodate patients up to a 24 hour period
- An increase in the level of ambulatory care provision, preventing the need for an inpatient admission
- Improving the timeliness of ward-based discharges and an increased focus on the Acute Frailty Pathway including early comprehensive interdisciplinary assessment
- Streamlined site operations to maximise patient flow

3. The development of a healthcare hub

The Trust is working with a wide range of partners to ensure that the hospital Trust is the focal point for acute care provision, reaching out to the boundaries of their catchment area to further develop services in community locations.

This will include:

- The provision of more complex treatments covering a population of over 1 million
- Networking in 'hospital chains', expanding work with other local acute providers to ensure a full range of high quality services is offered to the local population within the geographical area e.g. collaboration of maternity services between Portsmouth, Southampton, Isle of Wight, Winchester and Basingstoke
- Working with community partners and local authorities to ensure patients can access high quality local rehabilitation services
- Providing enhanced levels of service, including diagnostics, in community hubs to support the delivery of new models of care
- Working closely with GP practices to ensure that long term conditions can be managed close to, and in, patients' own homes

- Collaborating with all NHS partners to play a proactive role in the prevention, and early detection, of illnesses and diseases

4. Digitalisation and interoperability

In line with local and national aspirations the Trust is aiming to become a paper free organisation by 2020. This will be achieved through the development and subsequent roll out of an extensive 'e-hospital' programme. This will replace many of the Trusts ageing IT systems giving maximum clinical efficiency and further improving patient care. Linked to 'e-hospital' is a focus on creating seamless two way transfers of information between all local health providers.

5. Standardisation and transformation

Many pathways of care including unscheduled, elective, diagnostic and cancer, have been reviewed and redesigned to ensure that patients are treated in line with the best clinical and administrative practice. These revised pathways will be introduced across the whole organisation and in some cases across the wider health and social care system through a systemic transformation programme.

6. Seven day services

The Trust will continue to increase the level of provision to ensure that all appropriate services are available to patients seven days a week.

7. Research and innovation

The Trust will further build upon their significant reputation for research and innovation. They are actively involved in the national agenda in this work and will continue to push the boundaries to improve the health and outcomes for the population they serve.

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: The seven principles of public life

The principles of public life apply to anyone who works as a public office-holder and therefore will apply to the successful candidate for this role:

- **selflessness** - holders of public office should act solely in terms of the public interest
- **integrity** - holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships
- **objectivity** - holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias
- **accountability** - holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this
- **openness** - holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing
- **honesty** - holders of public office should be truthful
- **leadership** - holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour whenever it occurs

The Commissioner for Public Appointments would like to find out what you think of the public appointments process. When you have completed the process, the Commissioner would appreciate a few minutes of your time to [complete a survey](#). Your response will be anonymous and will inform the Commissioner's ongoing work with Government Departments to improve the public appointments process.

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. New regulations now require NHS Improvement to make a number of

specific background checks to ensure that those we appoint are “fit and proper” people to hold these important roles. More information can be found on our [website](#).

Appendix 3: Terms and conditions of appointment

- The remuneration payable for this role is £6,157 pa.
- On average this role will require a time commitment equivalent to 2 to 3 days a month.
- Your appointment will be for an initial period of up to four years, after which you may be considered for further terms of office, subject to the needs of the organisation and a good performance

Appendix 4: More information

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

Follow the links below for more information about:

- [the support NHS Improvement provides to Trusts](#)
- [terms and conditions of Chair and Non-Executive Director appointments](#)
- [disqualification from appointment](#)
- [how your application will be handled](#)
- [dealing with your concerns including how to complain to the Commissioner for Public Appointments](#)
- [other sources of information](#)

Appendix 5: 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: 5 October 2017 at 11am.** Please forward your completed application to public.appointments@nhs.net.
- **interview date: 20 October 2017**
- **proposed start date: tbc**

Getting in touch

- **with the Trust** - For an informal and confidential discussion with Mark Nellthorp, the Acting Chair of the Trust, please contact his PA on 023 9228 6770
- **with 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.

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