Additional information for candidates

NHS boards play a key role in shaping the strategy, vision and purpose and hold the organisation to account for the delivery of strategy and ensure value for money. The board is also responsible for assuring that risks to the Trust 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 directors, the board has a collective responsibility for the Trusts performance. 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.

A non-executive appointment in the NHS is an opportunity to be involved in decisions that affect you and your community and to gain board-level experience. It’s a rewarding and influential role, putting your commitment to the health service into practice.

View current chair and non-executive vacancies

- View all current vacancies
- Sign up to receive email alerts on the latest vacancies

Our website offers a wealth of information for those considering making an application for a non-executive role on an NHS board. This includes:

Why become a non-executive director?

About the non-executive role

Getting to the board table

Eligibility and disqualification from appointment

Terms and conditions of chair and non-executive director appointments

How your application will be handled

Dealing with concerns

Why become a non-executive director?

Becoming an NHS non-executive director can be a rewarding experience. It allows you to develop new skills, raise your profile in your professional or business community, and opens your horizons to engage with a wide range of different people and organisations. You will be exposed to different leadership styles and ways of working bringing your skills and experience to bear on fresh challenges in new ways.

Non-executives often find themselves being approached for other projects or roles on the basis that they have built a profile in their NHS role.
Many non-executives claim that once they have one board level role on their CV, they are more easily able to access further opportunities.

You receive local induction training on appointment, access to national training sessions and other development opportunities.

**What's expected?** The basic expectation will be to attend the monthly board meeting and any further committees you are appointed to. You may also be asked to represent the Trust at external events and those designed to support your continuous development. It is anticipated that an NHS non-executive role will take two or three half days a month - but there is no fixed time commitment. The experience of most of our non-executives is that once you get a taste for the NHS you can’t resist getting more involved.

**What it takes to be a non-executive director?** These roles carry responsibility, and the demands placed on NHS non-executives come from all directions from government, stakeholders and regulators. Listed below are some important personal attributes needed for the role:

*independent and impartial thought and judgement, strategic mind, willingness to challenge, inquisitive mind and eagerness to learn, listening and communication skills, influencing without dominating, confidence and sensitivity, clear vision and passion, emotional intelligence, facilitating, enabling and mentoring, integrity, courage, resilience*

Successful non-executive directors bring knowledge gained from many different business and operational settings. They can bring a fresh perspective to entrenched problems, and can promote collaboration and help break down boundaries that hold back progress.

A diverse group of people will learn from, and challenge each other and therefore be more insightful. NHS Improvement believes that to make the best possible decisions, NHS boards need people with a mix of skills and experience. We are looking for people from a range of backgrounds that understand the needs and priorities of their local communities and can hold the confidence of patients and the public. You can make a really valuable contribution by offering skills such as:

*finance, commerce, risk and performance management, consumer focus, marketing, the law, organisational development, change management, digital innovation, turnaround experience, HR, workforce development, clinical and patient safety expertise, quality improvement, business development, regeneration, community development, service provision for disadvantaged groups, patient advocacy, community engagement*

**About the non-executive role**

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 non-executive directors 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 non-executive directors 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.

Getting to the board table

Included below are a few suggestions for those considering a non-executive role in the NHS:

• Do your homework before starting your application – research the Trust to learn about specific challenges, read board papers and speak to those you know who have used their services.
• Who to influence and how – make contact with the Chair of the trust to gain an understanding of the Trusts priorities and the skills needed. Contacts are usually included in the information packs and an informal conversation will help you decide if this is the right role for you and give you an advantage in completing your application.
• Gathering momentum – engage with healthcare and local community networks to raise your profile and improve your understanding of the NHS and its challenges.

Your application should articulate what it is you can offer. Tailor it to reflect the needs of the Trust and how your skills and experience can add value:

• Scrutinise the person specification and use the intelligence you have gained from the Chair to ensure your CV and supporting statement demonstrate the requirements for the role.
• Bring your experience to life by explaining your personal responsibility and influence on achievements within relevant roles.
• Demonstrate your understanding of the non-executive perspective and the relationship with the executive colleagues
• Always outline your motivation for applying to show your enthusiasm and commitment to improving the quality of care for patients.

Information about individual NHS Trusts such as business plans, annual reports and further information about services, will be available on Trust websites. Other sources of information include:

• NHS Improvement for information about the support provided to Trusts:
• The Department of Health has information including latest policy initiatives
• The Care Quality Commission (CQC), which regulates all health and social care services in England. The commission ensures the quality and safety of care in hospitals, dentists, ambulances, and care homes, and the care given in people’s own homes
• NHS England empower and support clinical leaders at every level of the NHS through clinical commissioning groups (CCGs), networks and senates, in NHS
England itself and in providers, helping them to make genuinely informed decisions, spend the taxpayers' money wisely and provide high quality services

- The Healthcare Financial Management Association (HFMA) has more information about NHS financial management

Useful reading

- The Healthy NHS Board 2013
- Equality Delivery System for the NHS
- Quality in the New Health System
- The NHS Constitution
- Healthcare Leadership Model
- Five Year Forward View

Eligibility and disqualification from appointment

You should declare anything in either your professional or personal history which may affect your eligibility for appointment or may cause embarrassment or bring the organisation into disrepute, should you be appointed.

**Residency** - Preference will usually be given to candidates who live in, or have strong connections with the area served by the Trust. We may sometimes accept applications from those with the appropriate experience living in the surrounding areas. You should always check the person specification specific to the vacancy.

**Conflicts of interest** – You should note the requirement to declare any business or personal interests that might be relevant to the work of the Trust for which they have applied and which could lead to a real or perceived conflict of interests.

The “fit and proper persons” requirement plays a major part in ensuring that the people who have director level responsibility for the quality and safety of care and for meeting the fundamental standards are suitable to carry out these important roles. Under the regulations, NHS providers must be able to provide evidence that appropriate systems and processes are in place to ensure that all new directors and existing directors are, and continue to be, fit for purpose and that no appointments meet any of the ‘unfitness’ criteria set out in the regulations. Further information about our approach, including the checks we will undertake to ensure that the chairs and non-executives we appoint meet these requirements is also available on our website.

**Disqualification for appointment** - Not everybody is eligible to be appointed to an NHS Trust. The following people are disqualified from appointment as chairs or non-executive directors:

- Employees of NHS Trust with the vacancy
- serving MPs – including MEPs and candidates for election as MP or MEP
- Chairs and members of the governing bodies of clinical commissioning groups - or employees of such group
• People who have received a prison sentence or suspended sentence of 3 months or more in the last 5 years
• People who are the subject of a bankruptcy restriction order or interim order
• Anyone who has been dismissed (except by redundancy) by any NHS body
• In certain circumstances, those who have had an earlier term of appointment terminated
• Anyone who is under a disqualification order under the Company Directors Disqualification Act 1986
• Anyone who has been removed from trusteeship of a charity.

In most circumstances, we would not appoint Civil Servants within the Department of Health, or members/employees of the Care Quality Commission to these roles.

All the disqualifications above apply to both chair and non-executive director posts. For chair roles the following additional criteria apply:

• People who perform or provide primary dental services, primary medical services or primary ophthalmic services under the National Health Service Act 2006;
• People who are partners or are in a partnership, or are legal and beneficial owners of shares in a company that, or a director of a body corporate that provides primary dental services, primary medical services or primary ophthalmic services;
• Employees of any of the above

Terms and conditions of NHS trust chair and non-executive director appointments

These posts are public appointments and not jobs and are therefore not subject to the provisions of employment law.

Period of appointment - New appointments will usually be made for an initial period of between two to four years, after which individuals may be considered for further terms of office, subject to the needs of the organisation and a good performance.

Time commitment – These are part time roles with considerable flexibility for how individuals decide to spend their time, including some evening engagements and preparation time away from the trust. We estimate that as a minimum these roles require the equivalent to:

• 3 days a week for chairs
• 2 to 3 days a month for non-executive directors

Standards in public life – You will be expected to demonstrate high standards of corporate and personal conduct. The seven principles of public life apply to anyone who works as a public office-holder:
• **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

Public service values are at the heart of the NHS and chairs and non-executives are expected to subscribe, understand and commit to the personal behaviours, values, technical competence and business practices outlined in the “**The standards for members of NHS boards and clinical commissioning group governing bodies in England**” produced by the Professional Standards Authority.

The [NHS Leadership Model](#) describes nine behaviours which together contribute towards strong and effective NHS leaders. Chairs and non-executive directors will need to demonstrate this range of behaviours and the highest standards of conduct required to contribute effectively in this board level role.

More information about non-executives in the NHS is available on our [website](#).

**How your application will be handled**

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.
We ensure that all appointments of chairs and non-executives to NHS trust boards throughout England are made in a way that is open, transparent and fair to all candidates.

We aim to process all applications as quickly as possible and to treat all candidates with courtesy:

- You will receive an email acknowledging receipt of your application by email.
- We will rely on the information you provide in your covering letter and CV to assess whether you have demonstrated the expertise required at the appropriate level for the post.
- It is likely that applications will be long-listed before they are passed to the selection panel for consideration. You should be aware that in this situation, your application might not be considered in full by all panel members.
- In some cases the Trust will employ search consultants and long listed candidates may be invited to a preliminary interview. If this is the case, your application form will be shared with the search consultants. Feedback from preliminary interviews will be given to the panel who will decide which candidates will be invited for the final panel interview.
- The panel will decide which candidates will be invited for interview.
- You will be notified whether or not you will be offered an interview. Due to the volume of applications we receive, we are not able to provide feedback to individuals not shortlisted for interview.
- If invited to interview, the panel will ask you questions about your skills and experience and how you would apply them to this role. The questions will also enable you to demonstrate the board level behaviours required for the role.
- Where a candidate is unable to attend an interview on the set date, an alternative date will only be offered at the discretion of the panel.
- After the interviews, the panel will identify and rank the appointable candidates and the panel chair will submit a report to our Provider Leadership Committee or Sub Committee. The Committee will consider the panel chair’s report and make the final decision on the appointment.
- You will be notified of the outcome of your application.

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 us 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:

- give us accurate information
- tell us as soon as possible of any changes
- tell us as soon as possible 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 apply, so that your application form and CV can be assessed. The monitoring information you provide is not used in the selection process and will not be shared with the selection panel assessing your application. If you are successful and are appointed to an NHS Trust we will also share some of your information with relevant individuals at the organisation concerned.

We are 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 and his auditors on a confidential basis in order to help fulfil the Commissioner’s formal complaints investigation role and for audit purposes.

**Information management**

Information that you provide may be used for statistical analysis but it will not be used in a way that enables you to be identified.

In relation to the information we collect:

- If you submit an application form, your form and any supporting documentation will be retained for up to two years after the closing date for applications
- Any other information relating to an application held electronically, which includes your contact details and monitoring information you provided, will be held for up to 2 years after the closing date for applications
- If at any time you wish your personal information to be removed from our records please contact us.

We are committed to equality and diversity and actively encourage people from all sections of the community to consider applying for public appointments. We are also committed to protecting all of the personal and sensitive information we hold and will take all reasonable steps to ensure that it is protected against unauthorised access, use, modification, disclosure or loss.

We also recognise our obligations under Section 22 of the Gender Recognition Act 2004 and have set out a robust framework for handling protected information to ensure that these obligations are met.

**Dealing with your concerns**
The role of the Commissioner for Public Appointments is to provide independent assurance that appointments to the boards of public bodies are made in accordance with the Government’s Principles of Public Appointments and Governance Code. More information about the role of the Commissioner and the Governance Code is available from his website.

Our appointment and recruitment processes are conducted in accordance with the Code of Governance to ensure that they are made on merit after a fair and open process so that the best people, from the widest possible pool of candidates, are appointed to these important roles.

If you feel your application has not been treated in accordance with the Code and you wish to make a complaint, you should contact us in the first instance. If you are not satisfied with the response you receive you can contact the Commissioner for Public Appointments through his complaints procedure.