

Non-Executive Director Application Pack



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Foreword

Thank you for your interest in applying to become a Non Executive Director at Tameside and Glossop Integrated Care Foundation Trust. This is an exciting time to consider a Non Executive role within our organisation. Our vision is *to improve health outcomes for our population and influence wider determinants of health through collaboration with our health and care partners*. We have made good progress to deliver this vision, and our system working with partners is recognised as best practice. Our priorities are to move from individual patient care to a population health model where prevention is key, and where overall well-being is a priority. The publication of the NHS 10 Year Plan supports this vision, as does the Greater Manchester strategic framework for devolved health and social care.

We are an integrated care organisation serving a community of 250,000 people across Tameside and Glossop, providing acute and community health care services. We operate from the Tameside Hospital site and a number of community locations across the locality of Tameside and Glossop. Following our last inspection by the Care Quality Commission (CQC) we are delighted that we have maintained our rating of “good” with elements of “outstanding” for adult community services and community end of life care. We have an ambition to be outstanding, and the whole team is dedicated to further improving.

I hope you will consider applying for a role with us, and I look forward to meeting candidates whose ambitions and values support ours.

Jane McCall,
Chair, Tameside and Glossop Integrated Care NHS Foundation Trust



1. The Opportunity

We are looking for a Non-Executive Director to join our Board. This is an exceptional opportunity to join a forward thinking, innovative, friendly organisation with whom you can share your talents and expertise to make a positive difference to the lives of those served by our Trust.

We believe that the best boards are those that reflect the communities they serve. We are therefore seeking to improve the diversity of our Board to make it truly representative of our workforce and local population. We are committed to equality of opportunity for all, and appointments are based on merit.

We are keen to receive applications from all protected characteristics and those who either have a strong connection to their local community or those with lived experience, either as carers or service users. We would particularly welcome applications from black, Asian and minority ethnic communities and individuals with a disability, people who we know are under-represented in chair and non-executive roles.

1.1 The Role

You will need to have a genuine commitment to patients and the promotion of excellent health care services. You will need 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
- Hold the executive to account by providing purposeful, constructive scrutiny and challenge
- Shape and actively support a healthy culture for the Trust

A full role description and person specification can be found towards the end of this document on pages 15-17.



2. About Us

Tameside & Glossop Integrated Care NHS Foundation Trust (ICFT) was established as a Foundation Trust on February 1st 2008. The Trust operates from the Tameside General Hospital site, which is situated in Ashton-under-Lyne and has a number of community premises throughout the locality of Tameside & Glossop. The ICFT services a population of approximately 250,000 residing in Tameside in Greater Manchester, and the town of Glossop in Derbyshire.

Tameside & Glossop Integrated Care NHS Foundation Trust is a self-governing Foundation Trust, the Board of Directors assume management responsibility but are accountable for its stewardship to the Council of Governors and members. Our performance is scrutinised by the Foundation Trust regulator NHS Improvement (NHSI) and the Care Quality Commission (CQC).

Employing approximately 4,000 staff, the ICFT provides a range of healthcare services one would associate with a general hospital such as general and specialist medicine, general and specialist surgery and full consultant led Obstetric and Paediatric hospital services for women, children and babies. We have a range of Community services including Urgent Integrated Care, Learning Disabilities, Children's Young People & Families and a 96 bedded Intermediate Care facility, the Stamford Unit. We also have our own in-house Catering, Portering and Domestic services.

2.1 Our vision and values

As an Integrated Care Foundation Trust our vision is to improve health outcomes for our population and influence the wider determinants of health, through collaboration with our health and care partners.

Tameside and Glossop Integrated Care NHS Foundation Trust has been established to manage and provide integrated health and care services to people in the area. The locality will do so as part of the Greater Manchester Health and Social Care Partnership, taking advantage of opportunities offered by devolution.

2.1.1 Our vision, which we share with our partners is supported by the following objectives:

- i) We will support local people to remain well by tackling the causes of ill health, supporting behaviour and lifestyle change, and maximising the role played by local communities.



- ii) We will ensure that those receiving support are equipped with appropriate knowledge, skills and confidence to enable them to take greater control over their own care needs and the services they receive.
- iii) When illness or crisis occurs, we will provide high quality integrated services that are designed around the needs of the individual and, where appropriate, are provided as close to home as possible



At Tameside & Glossop Integrated Care NHS Foundation Trust we believe that ‘Everyone Matters’. Our Aim is to deliver with our partners, safe, effective care which you can trust. To help us achieve our aim we have developed a set of values which we aspire to. By living our values and behaviours throughout the organisation, we are able to demonstrate that everyone really does matter, our values are *Safety, Respect, Learning, Communication and Care*



2.2 Corporate Objectives – 2020/21

In seeking to achieve our vision, we have set ourselves a number of objectives which help to define what success for the organisation will look like over the coming year. These objectives cover ‘business as usual’ – continuing to provide high quality care to people in our area – as well as transformational objectives which will help us to achieve the aspiration of a new integrated approach to health and care which better meets the needs of the local population. These are the specific priorities of the organisation for 2020/21, but they will also support the longer-term transition to a new approach to health, care and wellbeing in Tameside and Glossop.

The key objectives of T&G ICFT are:

1. Deliver personalised safe and caring services.
2. Improve our patients’ and carers’ experience of our services
3. Support the health and wellbeing needs of our community and staff
4. Drive service improvement, innovation and transformation
5. Develop our workforce to meet future service and user needs
6. Use our resources wisely
7. Reduce our carbon footprint and impact upon the environment

2.3 Challenge and Context

There is increasing recognition that the health and care system is facing one of the most challenging periods of its history. People are living longer, there is an increasing demand for both health and care services, advances in technology have made more expensive therapies available, and all of this must be managed within a tightening financial situation. In 2014 the NHS came together to publish a Five Year Forward View (FYFV), which recognised the scale of these challenges and projected a funding gap of up to £30bn by 2020 if the NHS did not radically change the way it delivered services. The pressures of an aging population and constrained funding are causing similar challenges in the social care system.

The FYFV set out a call for action, across the health and care system, to bring about radical changes to the way in which health and care is provided, to ensure it better meets the needs of individuals, whilst meeting the financial and sustainability challenge.



On 7 January 2019, the NHS long-term plan was published setting out key ambitions for the service over the next 10 years. The Long Term plan aims to respond to the current position of the NHS and the challenges it faces in the 21st century;

- Funding pressures, availability of appropriate workforce, increasing inequalities and pressures from a growing and ageing population.
- Significant optimism for continuing medical advances and the prospect of better outcomes of care.

The Plan recognises that to succeed, we must keep all that's good about our health service and its place in our national life, whilst tackling head-on the pressures described above as well as making funding go as far as possible.

Key to the success of the plan is the ambition to accelerate the redesign of patient care and integration of services across traditional boundaries of organisation and professional groups to future-proof the NHS for the decade ahead.

The Trust's strategic plan, Beyond Patient Care to Population Health, is aligned to the NHS Long Term Plan.

For the period 2011-13, the England average life expectancy for men was 63.3 years, the North West average was 61.2 years. Male Tameside residents on average have a healthy life expectancy of 57.9 years; the situation is similar in Glossop. Statistics for women also show healthy life expectancy as worse than the England and North West average.

T&G ICFT has worked together with our clinical commissioning and local authority partners to set out its ambition for the health and care system through its Locality Plan to improve life expectancy in Tameside and Glossop to GM and national average. The ICFT is working collaboratively with our partners to transform the way in which services, care for, involve and support the 250,000 residents, to improve health and wellbeing as well as supporting financial sustainability.

Our strategic plan sets out our vision, aspirations and approach to creating an integrated care trust that can achieve the vital aims of better health, wellbeing and care for the people of Tameside and Glossop.



2.4 Summary of Performance

During 2019-2020, the Trust has continued to perform well operationally, and to meet the financial plan agreed by the Board. We are pleased that, against most of the operational performance metrics regarded as key in the Single Operating Framework, we have met or exceeded the stated targets.

Throughout the year, we have met the requirements set out in the NHS Constitution for-

- Cancer treatment waiting times, notably the 62-day, 31-day and 14-day pathways
- The 18-week Referral to Treatment (RTT) pathway
- Ensuring low cancelled operations and that those affected are treated within six weeks of the cancellation
- Ensuring that no individual waits more than 52 weeks for treatment

For a significant proportion of the year, the Trust was also meeting the national target of ensuring that more than 95% of A&E patients were seen and either admitted or discharged within 4 hours of arrival. In common with the NHS both regionally and nationally, towards the end of the year performance against this indicator dropped substantially. The Board closely reviewed both performance and the underlying causes, which were identified as a significant increase in the number of patients choosing to attend A&E above that which could reasonably have been forecast. The Board was satisfied that the response to these pressures was appropriate and focused on ensuring that each patient was seen, triaged and their condition responded to appropriately.

The financial performance of the Trust during the year was positive. The Board set a challenging financial plan for the year, which had been agreed with NHS Improvement as the regulator, and required the delivery of substantial savings on an on-going basis in order to receive additional central funding support. The Trust met its financial plan for the year, with the efficiency programme delivering more than had been planned for; of particular note is the £7.2 million of recurrent savings achieved through the efficiency programme in the year. The Board is particularly pleased to be able to report that the changes made through the efficiency programme have not just made financial savings, but have also identified improvements to patient care and experience which were also delivered. At the year-end, NHS Improvement awarded an additional £5.2 million in Financial Recovery Fund to the Trust, enabling us to report a small full-year surplus for the first time in several years.



During the year, the Trust received the outcome of the inspection by the Care Quality Commission (CQC) undertaken in March and April 2019. The Board is pleased that the overall rating was 'Good', supported by 'Good' ratings in each of the underlying inspection domains. A rating of 'Requires Improvement' was received in respect of the use of resources; the Board recognises that, given the position regarding support from Government loans, this was the best rating possible for the Trust.

The Trust has, during the year, adopted a Sustainable Development Management Plan, setting out how the Trust looks to reduce its environmental impact. This plan operates both in the context of the Greater Manchester strategy to reduce environmental impacts, and also the development of a national NHS approach led by NHS England. The Board has agreed that it will receive an annual report on progress against the strategy, in order to ensure that it is aware of progress and can address any areas of concern.

At the end of the financial year, the United Kingdom started to move into the emergency response to the COVID-19 pandemic. This has had a significant impact on the Trust, with most 'normal' activities being suspended (such as non-urgent elective operations) and the Trust moving to activate its Emergency Planning, Preparedness and Response arrangements within the guidance being received from national and regional levels. The Board has remained involved, to ensure that appropriate governance is kept in place, whilst ensuring that the Trust is in a position to respond appropriately to this highly unusual situation. As part of the national response, the normal planning process has been suspended and the Trust is being funded on a 'break-even' basis for the period of the pandemic. The Board also has in mind the need, as the pandemic recedes, to carefully address how to return to providing its regular range of services whilst continuing to put in place lessons learned, for example in having remote appointments for out-patients.

Following the end of the financial year, HM Government announced that they would be converting all day-to-day loans to NHS provider bodies to be Public Dividend Capital. This change is expected to be formally implemented in September 2020, but to be treated as occurring on 2nd April 2020. In the case of this Trust, approximately £106 million in loans from the Department of Health and Social Care are expected to be converted to an equivalent amount of Public Dividend Capital in this process.



2.5 Workforce

Like most NHS providers, the Trust experiences workforce shortages within certain staff groups, due to national and international deficits within those professional groups. This is most notable in medical roles, nursing roles and some allied health professionals.

In the short term, there are clear recruitment and retention strategies to fill vacancies where possible. This includes robust advertising and recruitment processes, and holding regular recruitment open days for specific groups. There are also on-going actions plans to improve retention in these staff groups; and significant improvements have already been made in terms of retention.

In addition the Trust recognises the national drive set out in the Interim People Plan to utilise international recruitment to fill gaps in the national workforce. The Trust is working with agencies to pursue international recruitment for both medical and nursing staff in 2020, enabling the Trust to supplement its existing workforce with experienced professionals from overseas.

In the medium to longer term, the Trust recognises that shortages are unlikely to be addressed through traditional means alone, and there is a need to consider different workforce models and ways of working. For example, the Trust has recruited a third cohort of Trainee Nurse Associates, to supplement the registered nurse workforce, with consideration of extending this programme yet further. There is also a scoping exercise underway to understand the value of Physicians Associates and Advanced Clinical Practitioners to support in hard to recruit to medical posts.

The Trust approved an Equality Diversity and Inclusion strategy in September last year. Key objectives within the Strategy are to ensure that there are full and appropriate opportunities for all to offer their skills and experience, to improve the staff experience for those who have a protected characteristic and to improve the number of senior leaders who have a disability and who are BAME. As part of that strategy, the Board has set the following leadership targets that are relevant to Board appointments-

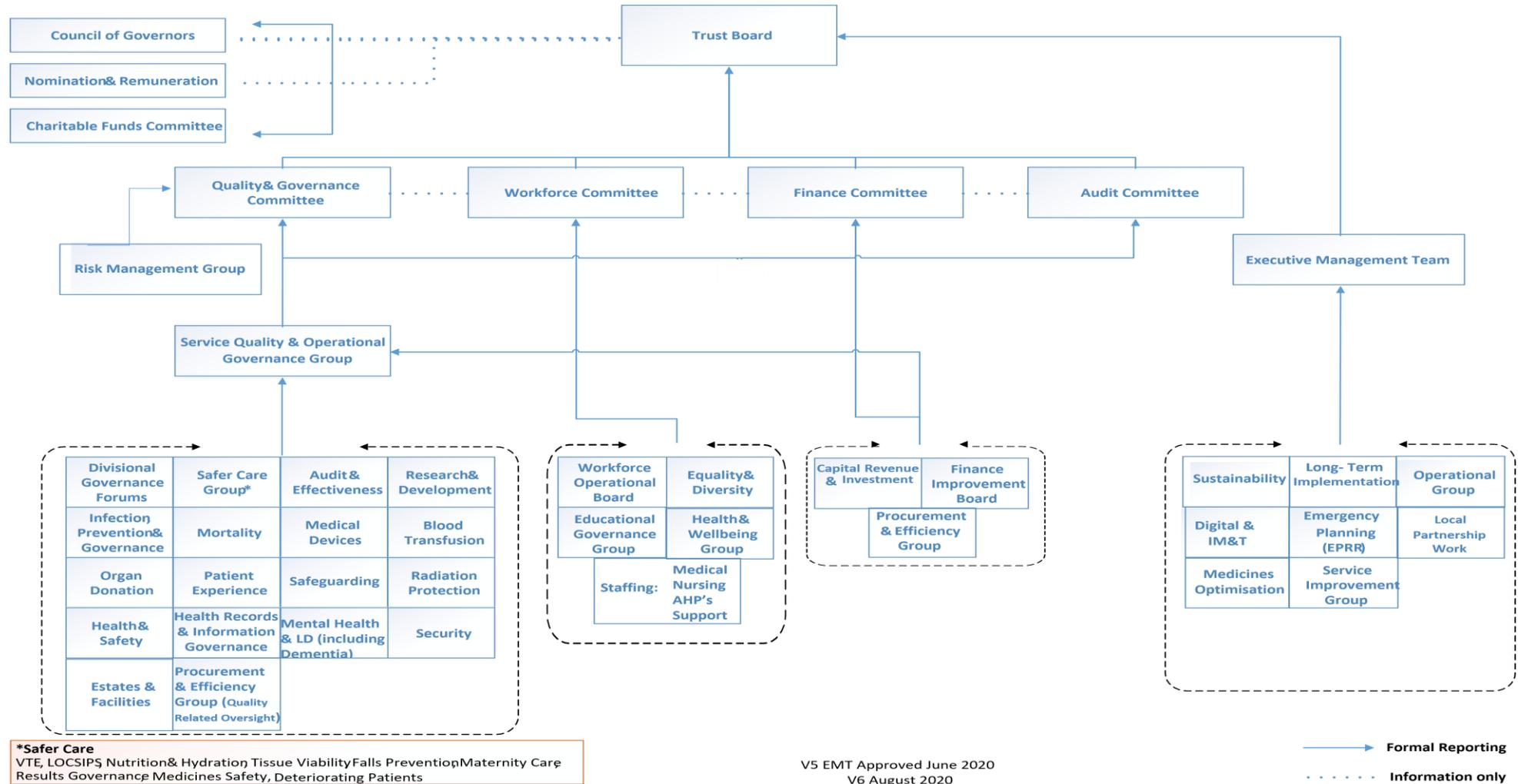
- Increasing Black, and Minority Ethnic (BAME) diversity on the Board to at least 15% by March 2022;
- Increasing Disability diversity across non-clinical leadership positions (which includes the Board) to at least 5% by March 2022.

These imply that by March 2022 the Board will include at least 2 Directors from a BAME background, and at least one with a Disability background.



3. Structure and Governance

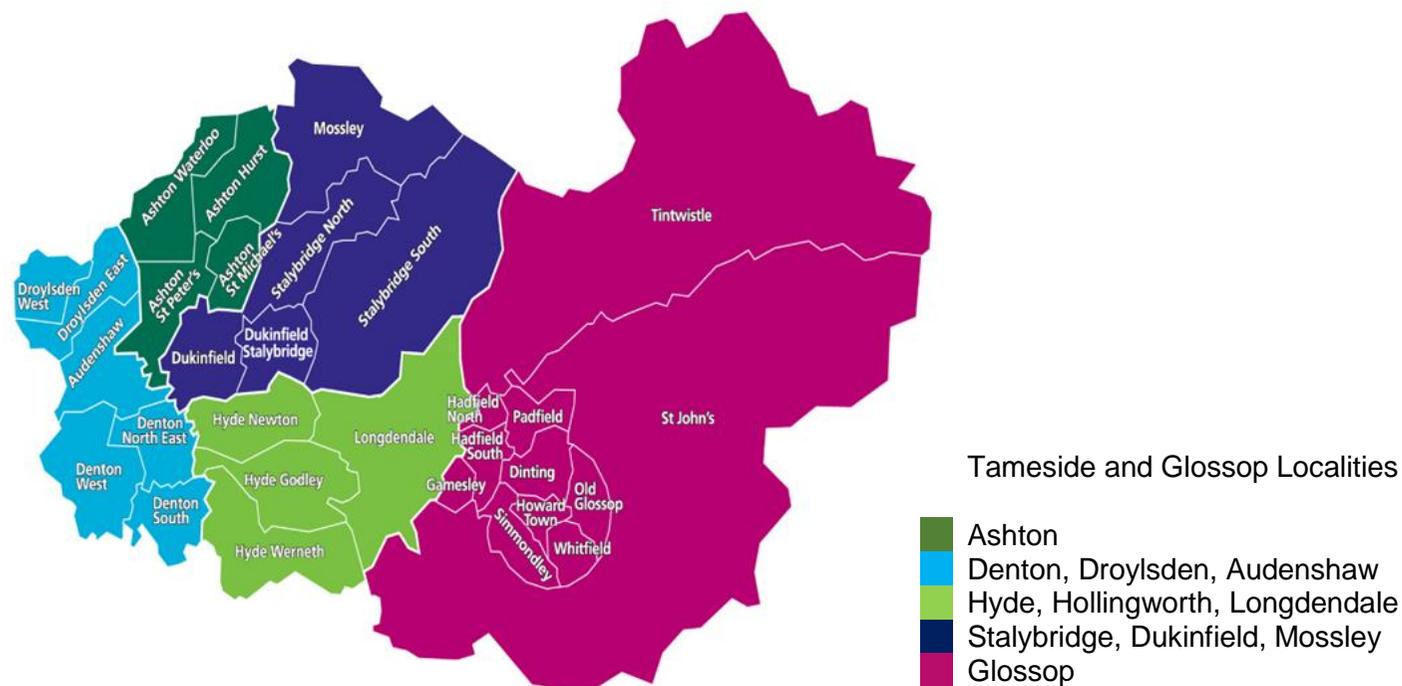
The chart below describes the Trust's Governance structure.



4. About Tameside & Glossop

The Metropolitan Borough of Tameside is a metropolitan borough of Greater Manchester in North West England. It is named after the River Tame, which flows through the borough and spans the towns of Ashton-under-Lyne, Audenshaw, Denton, Droylsden, Dukinfield, Hyde, Mossley and Stalybridge plus Longdendale. Its western border is approximately 4 miles (6.4 km) east of Manchester city centre. It borders High Peak in Derbyshire to the east with the City of Manchester to the west.

Glossop is a market town in the High Peak, Derbyshire, about 15 miles (24 km) east of Manchester and 24 miles (39 km) west of Sheffield. Glossop lies just outside the Peak District National Park and has transport links to Manchester, making the area popular for commuters.



The make-up of the five integrated neighbourhood teams (NTs) made up of GPs and their practice staff, pharmacists, social workers, support for mental health, community nursing teams and community wellbeing co-ordinators are made up of a combination of the towns within Tameside & Glossop. The five neighbourhoods are shown in the map above.

The resident population of Tameside and Glossop is approximately 254,646, (13% Glossop, 87% Tameside). More people now live in Tameside than at any time in the past, with population projections estimating that this will continue to increase over the next 10 years.

The ethnic composition of the Tameside population is also changing, with the current Census (2011) showing that 15.8% of the local population are from an ethnic minority group; this is an increase from the last Census (2001) of 7.4%. 21% of residents have declared themselves as having a disability, according to the 2011 Census. 51% are Female and 49% male.

In Glossop, 95.9% of residents are white British whilst 4.1% are Black and Minority Ethnic (BME). 51% are Female with 49% male mirroring the make-up of Tameside. 18% of residents in Glossop declared themselves as having a disability.



5. Role specification

JOB TITLE: Non-Executive Director

RESPONSIBLE TO: Trust Chair

ROLE SUMMARY:

The Non-Executive Directors work alongside the Chairman and Executive Directors of the Foundation Trust Board to advise on the development of strategy and to oversee the performance of Tameside & Glossop Integrated Care NHS Foundation Trust NHS Foundation Trust.

They share responsibility with other Directors for the success of the organisation using the available resources to deliver healthcare and improve the health of local people. They will bring independent and objective judgement to bear on issues relating to the strategy, direction and performance of the hospital.

KEY RESPONSIBILITIES:

- To ensure that the Foundation Trust establishes clear objectives to deliver against the terms of the licence as a Foundation Trust in accordance with Monitor's Compliance Framework and to regularly review performance against these objectives.
- To ensure that the Foundation Trust has in place governance and assurance systems to fulfil its role and meet its key duties.
- To provide independent judgement and advice to Executive Directors on corporate plans and the strategic vision of the Foundation Trust.
- To pursue the opportunities and freedoms offered by Foundation Trust status.
- To support and constructively challenge the Chairman, Chief Executive and other Directors to ensure that the Board conforms to the highest standards of corporate governance and makes appropriate decisions.
- To ensure key performance targets and goals are met.
- To uphold the values of the Trust, be an appropriate role model and to ensure that the Trust promotes equality and diversity for all its patients, staff and other stakeholders.
- To represent the Trust's views with national, regional or local bodies or individuals and to be an ambassador for the Trust.
- To participate in committees of the Board and other key NED roles/duties, in accordance with service needs as determined by the Chairman. The post holder may be asked to chair the Audit Committee.



5.1 Person specification

	Essential	Desirable
Eligibility and Commitment		
Ability to commit average of 4-5 days per month to Trust business; and flexibility to commit more if required for defined periods	X	
You are, or are eligible and willing to become, a Member of the Trust- <ul style="list-style-type: none"> Resident in England and Wales Not otherwise disqualified 	X	
Ensure you meet the criteria for eligibility for appointment as a member of the Board of Directors including the criteria for Fit & Proper Person in accordance with NHS Improvement and CQC principles.	X	
Background and Experience		
Have experience of operating at a senior leadership team or board level a large and complex public or private sector organisation or highly regulated industry	X	
Have an awareness of the current challenges and opportunities in the National Health Service	X	
Have previous service as a Non-Executive Director within the public or private sector		X
Have an awareness of developments in the Tameside and Glossop local health economies		X
Are able to engage in strategic thinking and development for organisations	X	
Able to demonstrate a strong connection to their local community or have lived experience, either as carers or service users.		X
Knowledge		
Have experience of working as part of a diverse Board or equivalent to reach consensus		X
Have an awareness of the differing roles of a Non-Executive Director and executive management	X	
Have strong emotional intelligence	X	
Have an understanding of accountability for actions, including collective accountability for Board decisions	X	
Have experience of engagement with a diverse and large group of stakeholders and interested parties, including the general public; and feeding that intelligence back into the work of the organisation		X
Have an awareness of the principles of effective corporate governance and effective Boards	X	

Abilities		
Capable of chairing a committee, have an understanding of the needs of our local patient community, the roles and responsibilities of the Council of Governors, statutory and regulatory requirements, risk management and board assurance processes	X	
You are able to participate in a unitary Board, balancing challenge and collective responsibility, to deliver statutory responsibilities	X	
You are able to both support and challenge the Chief Executive and the Executive team	X	
You are able to successfully engage with a range of statutory regulators and local stakeholders	X	
You are able to exercise judgements independently of Trust management, discuss them robustly with colleagues, and reach a final view	X	
You are able to engage with and constructively challenge complex proposals and arguments	X	
Good interpersonal skills. Able to work as a team to meet common goals and willingness to utilise skills and experience for the good of the organisation	X	
Able to assess strategies and plans of action to achieve objectives	X	



6. Other Information

6.1 Time commitment

The expected commitment is 4-5 days per month on average. Directors are expected to attend the Board meetings and informal Board Seminars, and are likely to be appointed to sit on one or two Committees.

6.2 Induction and Training

A detailed induction programme has been developed for newly appointed Non-Executive Directors. In addition, there is access to a number of nationally-organised training events.

6.3 Remuneration

Remuneration is set at £13,000 per annum, taxed through payroll under PAYE. It is not pensionable.

The role holder would be required to Chair Board committee meetings, though this will be discussed on appointment.

Non-Executive Directors are also eligible to claim allowances, currently in line with national rates, for travel and subsistence costs necessarily incurred on Trust business.

6.4 Appointment, tenure and termination of office

Non-executive Directors are appointed for an initial period of three years, subject to a satisfactory appraisal. They are eligible to be considered for a second term, but there is no expectation of automatic re-appointment.

These posts are statutory offices, and are not subject to the provisions of employment law: a Non-Executive Director is an office-holder, not an employee. To ensure that public service values are maintained at the heart of the NHS, all Chairs and Directors of NHS Boards are required, on appointment, to agree to comply with Standards for members of NHS boards and Clinical Commissioning Group governing bodies in England, published by the Professional Standards Authority.



6.5 Criteria for Disqualification (Including Fit and proper Persons Test)

It is a statutory requirement that all Directors meet the 'Fit and Proper Person' test set out in [Regulation 5 of the Health and Social Care Act 2008 \(Regulated Activities\) Regulations](#) 2014. This requires that -

- a. You are of good character;
- b. Have the qualifications, skills and experience necessary to undertake your Trust role;
- c. Your health enables you (after reasonable adjustment, if required) to undertake the role;
- d. You have not been involved with or aware of any serious misconduct or mismanagement in relation to the provision of services regulated by the Care Quality Commission
- e. You are not subject to certain other matters related to bankruptcy, being on a Barred Person's List, or having been struck-off by a health or social care regulator.

You will be asked to self-certify your eligibility under this Regulation, and the Trust will undertake checks prior to confirming an appointment. All Directors are subject to review, at least annually, to ensure that they continue to meet these requirements.

6.7 Criteria for eligibility for appointment as a member of the Board of Directors

The following paragraphs identify the circumstances where an individual would not be eligible for appointment as a member of the Board of Directors. These are quoted directly from the Trust's Constitution.

A person may not become or continue as a Director of the Foundation Trust if:

- They have been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged;
- They have made a composition or arrangement with, or granted a trust deed for, his / her creditors and has not been discharged in respect of it;
- They have within the preceding five years has been convicted in the British Isles of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on him / her;



6.8 Checks with the Disclosure and Barring Service (DBS)

Non-executive directors may occasionally have access to children or vulnerable adults through their work for the trust. To safeguard patients by identifying unsuitable candidates, all appointments will be dependent upon satisfactory completion of a disclosure through the DBS. Checks will be carried out by the trust after the appointment and before the individual takes up their full duties.

Trust Membership

Part of the legal qualification for serving as a Non-Executive Director is that you are a formal Member of the Foundation Trust. To qualify for membership, you must-

- a. Be resident in England;
- b. Not be subject to vexatious complainant procedures at the Trust;
- c. Not have been dismissed from any health service body save for reason of redundancy;

The successful candidate will require to have been accepted into membership prior to assuming office.

7. Applying for the role

The **closing date** for the role is **Sunday 13th September 2020**.

To apply for this role, please submit an up to date copy of your CV, along with a Supporting Statement of no more than 2 pages, that addresses the criteria set out in the person specification.

Please provide your telephone and email contact details and let us know of any dates when you are not available or where you may have difficulty with the indicative timetable.

You should also provide the names, positions, organisations and contact details for two referees, one of whom should be your current or most recent employer. If you do not wish us to approach your referees without your prior permission, please state this clearly.

You should submit your CV to recruitment@tgh.nhs.uk. Once you have submitted your application, you will receive an acknowledgement to confirm that we have received your application.



Your application will be assessed to see the extent to which you have the qualities and expertise specified for the post before it is passed to the Nominations Committee for consideration.

A longlisting process will take place and you may be invited to participate in a preliminary shortlisting interview, the purpose of which will be to obtain further details about yourself, your interest in the role and to understand your skills and experience in order to inform the Nominations Committee as part of the shortlisting process.

It is anticipated that this preliminary process will be completed in the weeks commencing 28th September and 5th October 2020.

Shortlisted candidates will be informed by no later than 23rd October if they have been selected for interview and the interview details will be confirmed by email and letter.

Final Interviews will be held on 12th November. Exact times and venue will be confirmed. As part of the selection process you will be asked to participate in a focus group consisting of a group of Governors and Executive Directors in addition to the formal interview by the Nomination Committee to assess whether you can demonstrate the qualities and expertise specified. Further details will be provided nearer the time.

The Nominations Committee will recommend their preferred candidate to the Council of Governors who will make the final appointment.

The successful candidate will be contacted by the HR Director.

8. Diversity and Monitoring

Tameside & Glossop Integrated Care NHS Foundation Trust NHS Foundation Trust is committed to being an organisation within which diversity is valued and appreciated, regardless of race, age, disability, gender, sexual orientation, faith or religion and socio-economic status. The trust recognises that everyone is different, valuing their unique contribution that individual experience, knowledge and skill can make in the delivering the goals and objectives of the organisation.

The Trust undertakes monitoring of its workforce and that of its applicants and in order to ensure its effectiveness, we ask that you complete and return the monitoring form enclosed with your application form. Please note that this form will not be seen by any members of the interviewing panel.

