



Appointment of Chair in Common for the four North West London Acute Provider Trusts

Candidate information pack

Reference: ZASALA



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.

Our 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.

Contents

1. The opportunity	4
2. About the Trusts	6
3. About North West London ICS	8
4. Role of the NHS Board and Chair in Common for the four acute trusts	9
6. Role description	9
7. Chair competencies	14
8. The person specification	15
9. London Leadership Values	17
Appendices	18
Appendix 1: Terms of appointment	
Appendix 2: More information	
Appendix 3: Making an application	
Appendix 4: Key dates	

The opportunity

If you would like to embrace the challenge to shape care delivery by improving the quality and operational performance of hospital services in a major sector of London, we hope to hear from you. This will be one of the largest and most complex roles in the NHS, with the opportunity to improve the health and life outcomes of London's population as a key player in the North West London Integrated Care System.

Working across a large and diverse population, North West London Integrated Care System's (NW London ICS's) ambition is to significantly improve the health and life expectancy of those living across eight London boroughs and to reduce inequalities in health. To achieve these goals, NW London ICS, working with its health and care partners, will plan and deliver joined up services to improve the health of the 2.4m people who live and work in the area. While the pandemic has put significant pressure on resources, staff and leadership across the NHS and North West London, it has also accelerated collaborative working to improve care for patients and to support staff. Throughout the pandemic, the four acute trusts within NW London ICS: Chelsea and Westminster NHS Foundation Trust, Hillingdon NHS Foundation Trust, Imperial College Healthcare NHS Trust, and London North West University Healthcare NHS Trust have collaborated to address long-standing issues of inequality of access, variation in quality of care and operational performance, and the financial deficits across the acute sector. While there is more work to be done, this progress has increased partners' appetite to build on this successful collaboration. With around 30,000 staff working in the four trusts, there is also an opportunity to improve wellbeing and career opportunities for the wider workforce. Success requires acute trusts to make decisions based on a culture of continual improved outcomes for the whole population, tackling inequality and enhancing productivity collectively rather than a culture of 'organisation first'.

With the ambition to build upon this deepening collaboration and consistent with national policy for all acute trusts to be part of formal collaborative arrangements, it has been agreed that this increased partnership working can be positively facilitated by the appointment of a single Chair in Common for the four acute trusts, together with such changes to governance arrangements that support delegated decision making and collective oversight of quality, financial and service performance as may be required. The Chair will arrive at a critical point for the four trusts, securing and implementing those appropriate governance arrangements that imbed collaborative working to deliver the best outcomes for patients. This will require working in partnership with the current executive, non-executive and clinical leaders of the organisations and the governing bodies of the foundation trusts involved as well as with the wider NWL ICS and the London Region of NHS England.

A guardian of the Trusts' values with patients' best interests as their core driver, the Chair will provide dynamic leadership, growing the existing partnership between the acute Trusts to build a formal alignment between organisations, harnessing efficiencies and driving best-in-class partnership working and integrated clinical education and research capabilities for the benefit of North West London's population. They will be able to shape, influence and articulate the purpose and goals of this collaborative working at a trust, ICS, regional, and national level, and ensure the Trusts' impact is greater than the sum of their parts.

An outstanding communicator and relationship builder, the incoming Chair will bring experience leading and transforming organisations to deliver a step change in performance. Working supportively with a large workforce, they will bring an outstanding track record of partnership working and influencing skills, inspiring the confidence of key stakeholders at the highest levels across multiple organisations. With low ego and high EQ alongside well-attuned political antennae, they will be comfortable operating in a complex, ambiguous environment at a time of significant organisational and systemic change. Bringing a natural authority and earned respect, candidates will also have strong operational experience and a history of compassionate leadership; they will be as credible with leaders in the health and care sectors as they are in local and central government and in the Higher Education sector, given the Trusts' academic links with education and research. Candidates will bring outstanding chairing skills with significant understanding of how to work successfully within boards of large, complex organisations, operating in a highly regulated environment. All candidates will bring a demonstrable commitment to diversity and inclusion, and to the wider values and beliefs for which the Trusts and NW London ICS stand. The role is competitively remunerated. It is expected that there will be an initial transitional period of intense activity for the post-holder developing and implementing new partnership and governance arrangements before stabilising at an overall time commitment of around 3 days per week once operational.

About the Acute Trusts in North West London



Chelsea and Westminster Hospital NHS Foundation Trust

Chelsea and Westminster Hospital NHS Foundation Trust is one of the top ranked and top performing hospital trusts in the UK, working over two main hospital sites: Chelsea and Westminster Hospital and West Middlesex University Hospitals, and across 12 community-based clinics within North West London. It prides itself on delivering outstanding care to a community of over 1.5m people.

It is the second largest maternity service in England, delivering over 11,000 babies every year. The Trust's specialist care includes the world-renowned burns service, which is the leading centre in London and the South East, as well as an award-winning Sexual Health care services.

At a Glance:

Staff: over 6,000

CQC Rating: Good (January 2020)

Expenditure: £755m

To find out more: <https://www.chelwest.nhs.uk/about-us>



The Hillingdon Hospitals NHS Foundation Trust

The Hillingdon Hospitals NHS Foundation Trust delivers high-quality healthcare to the residents of the London Borough of Hillingdon, and increasingly to those living in the surrounding areas of Ealing, Harrow, Buckinghamshire and Hertfordshire, amounting to a total catchment population of over 350,000.

The Trust has recently launched Brunel Partners Academic Centre for Health Sciences, a new centre providing the perfect setting for research and developing new methods of healthcare delivery across allied health, nursing, social care and medicine. It is also developing plans to build a new academic health campus that would include a new hospital.

At a Glance:

Staff: over 3,300

CQC Rating: Requires Improvement (July 2018)

Expenditure: £301.4m

To find out more: <https://www.thh.nhs.uk/index.php>



Imperial College Healthcare NHS Trust

Imperial College Healthcare NHS Trust provides acute and specialist healthcare in North West London for over one million people every year. Formed in 2007, it is one of the largest NHS trusts in the country, with more than 14,500 staff.

The Trust has five hospitals in Central and West London: Charing Cross, Hammersmith, Queen Charlotte's & Chelsea, St Mary's and The Western Eye – which have a long track record in research and education, influencing care and treatment nationally and worldwide. The Trust is developing a growing range of integrated and digital care services and offers private healthcare in dedicated facilities on all sites, including at the Lindo Wing at St Mary's Hospital.

At a Glance:

Staff: over 14,500

CQC Rating: Requires Improvement (February 2019)

Expenditure: £1.4bn

To find out more: <https://www.imperial.nhs.uk/about-us>



London North West University Healthcare NHS Trust

London North West University Healthcare NHS Trust cares for a population of over one million people in Brent, Ealing and Harrow, and beyond.

The Trust is active in research - over 5,000 people each year take part in its clinical trials. The Trust's commitment to research, education, and training, was recognised in 2017 when it became a university trust; meaning that London North West is training the nurses and doctors of tomorrow.

At a Glance:

Staff: over 8,200

CQC Rating: Requires Improvement (November 2019)

Expenditure: £822m

To find out more: <https://www.lnwh.nhs.uk/about-us>

About North West London ICS

The Chair of the four acute Trusts will also be a key player within the NW London ICS, which is described below:

The NHS, social care and public health in North West London are working together to transform health and social care services to meet the health and care needs of local people. An ICS brings together all parts of the NHS and local authorities in an area to focus on improving the health of the local population. The NWL ICS is focused on how best to encourage and support better health and well-being and provide improved and sustainable health and care services for the population of North West London. In February 2021, the government published proposals to make ICSs statutory bodies across the country. This would mean that the NHS and local councils work together legally as part of ICSs, to plan and deliver health and care services around residents' needs. The ICS is led by an independent Chair, Penny Dash, who will chair the statutory Integrated Care Board from April 2022 and an interim CEO pending a substantive appointment presently in train.

NW London ICS is made up of a range of diverse partners including:

- Central and North West London NHS Foundation Trust
- Central London Community Healthcare NHS Trust
- Chelsea and Westminster NHS Foundation Trust
- The Hillingdon Hospitals NHS Foundation Trust
- Imperial College Healthcare NHS Trust
- London North West University Healthcare NHS Trust
- West London NHS Trust
- Hounslow and Richmond NHS Trust
- Eight borough based partnerships based around the eight boroughs in NW London: Brent, Harrow, Hillingdon, Hounslow, Westminster, Ealing, Hammersmith and Fulham and the Royal Borough of Kensington and Chelsea

To learn more please click [here](#)

Role of the NHS Board and Chair in Common for the four acute trusts

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. Additionally, for foundation trusts, the council of governors help to shape services and reflect the needs and priorities of patients, staff and local communities.

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.

Role description

This is one of the largest and most complex roles in the NHS, with the opportunity to shape the health and life outcomes of close to a third of London's population by addressing how secondary care is delivered. To carry out their role effectively, the Chair in Common of the four acute trusts must cultivate a strong, collaborative partnership with the boards of the four acute trusts, building strong relationships with the executive, non-executive and clinical leadership of the four organisations as well as key external stakeholders in the NWL ICS and the London Region of NHS England.

Together, the Chair in Common of the four acute trusts and the chief executives set the tone for the respective trusts. They are ultimately responsible for ensuring that the population the trusts serve and the wider system in which the organisations sit receive the best possible care in a sustainable way.

Responsibilities of the Chair in Common for the four acute trusts

The Chair in Common of the four acute trusts has a unique role in leading the NHS trust and NHS foundation trust boards. The role combines the duty to lead effective governance, consistent with the Nolan principles and NHS values, whilst delivering against the vision agreed within the wider ICS.

Fundamentally, the Chair is responsible for the effective leadership of the boards. The Chair in Common will be pivotal in creating the conditions necessary for overall board and individual director effectiveness. Central to the Chair's role are four key responsibilities:

In their **strategic leadership** role, the Chair in Common of the four acute trusts is responsible for:

A. Working with the ICS and the boards of individual organisations to develop a strategy to improve the health of the population of NW London. This person will do this by leading the organisations collectively and holistically, acting as a catalyst for change. Priorities will be:

1. making sure the boards operate effectively and understand their own **accountability** and compliance with approved procedures – for example, meeting statutory duties relating to annual reporting.
2. personally **doing the right thing**, ethically and in line with the NHS values, demonstrating this to and expecting the same behaviour from the boards.
3. **setting board agendas with a focus on collective and integrated working** relevant to the trusts' current operating environment and taking full account of the **important strategic issues and key risks** trusts face.
4. ensuring that the boards receive **accurate, high quality, timely and clear information**, that the related assurance systems are fit for purpose and that there is a good flow of information between the boards, committees, the council and senior management teams.
5. ensuring performance is accurately measured against constitutional and Care Quality Commission 'well-led' standards.

B. Determining and implementing **sustainable and appropriate collaborative arrangements** between the organisations that can develop and evolve over time. To do this, the Chair in Common will:

1. develop and extensively communicate (along with other members of the Boards) a single shared narrative to the public, and internally within organisations.

2. ensure the boards view themselves as a team, have the right balance and diversity of skills, knowledge and perspectives, and the confidence to challenge on all aspects of clinical and organisational planning; this includes:
 - a. regularly reviewing the boards' composition and sustainability with the chief executives and the nominations committees, ensuring board committees are properly constituted and effective, set up to strategically deliver integrated and high quality secondary care across North West London.
 - b. considering succession planning for the boards, including attracting and developing future talent.
 - c. considering the suitability and diversity of non-executive directors who are assigned as chairs and members of the board's committees, such that as far as possible they reflect the workforce and respective communities served.
 - d. where necessary, leading in seeking the removal of non-executive directors and giving counsel in the removal of executive directors.
3. Lead on continual development of governance, skills, knowledge and familiarity with the organisation and health and social care system, to enable them to carry out their role on the boards effectively with a focus on delivering first class secondary care across North West London, including through:
 - a. induction programmes for new directors.
 - b. ensuring annual evaluation of the boards' performance, the boards' committees, and the directors in respect of their contribution and development needs, acting on the results of these evaluations and supporting personal development planning.
 - c. taking account of their own development needs through, for example, personal reflection, peer learning and mentoring/reverse mentoring as part of the wider NHS provider chair community.
 - d. developing boards that are genuinely connected to and assured about staff and patient experience, as demonstrated by appropriate feedback and other measures, including the Workforce Race Equality Standard (WRES); Workforce Disability Equality Standard (WDES); and Equality Delivery System (EDS).

C. Develop and empower the executive leadership of the organisations to optimise collaboration and outcomes by:

1. providing visible leadership in developing a healthy, open and transparent patient-centred culture for the organisations, where all staff have equality of

opportunity to progress, the freedom to speak up and debate is encouraged, **challenging when needed**, and ensuring that this culture is reflected and modelled in the boards' behaviour and decision-making.

2. leading and supporting a constructive dynamic within the boards, enabling grounded debate with contributions from all.
3. promoting the highest standards of ethics, integrity, probity and corporate governance throughout the organisation and particularly on the boards.
4. demonstrating visible ethical, compassionate and inclusive personal leadership by modelling the highest standards of personal behaviour and ensuring the boards follows this example based on candour, trust and mutual respect.
5. developing effective working relationships with all the board directors, particularly the chief executives, providing support, guidance and advice.
6. fostering a **culture of innovation and learning**, by being outward-looking, promoting and embedding innovation, technology and transformation through the board business and debate.
7. promoting **academic excellence and research** as a means of taking health and care services forward.

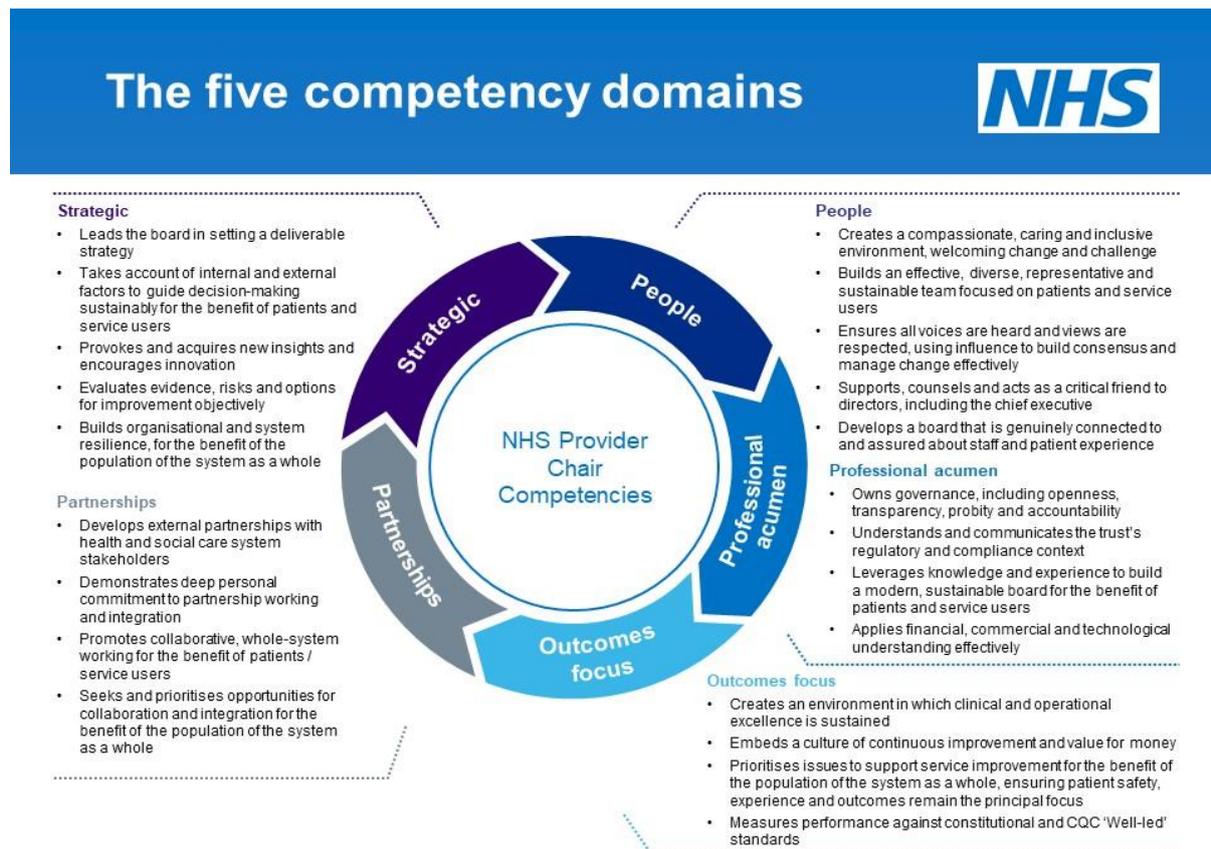
D. Work in partnership with the ICS to support improvement in population health in NW London that will include **ensuring the services delivered by the four trusts are appropriately specified, supported and resourced**. In their role as an **ambassador**, leading in developing **relationships** and **partnership working**, the Chair in Common for the four acute trusts is responsible for:

1. promoting an understanding of the boards' role, and the role of non-executive and executive directors.
2. representing the organisations externally, developing and facilitating strong partnerships, and promoting collaborative, whole-system working through engagement with:
 - a. patients and the public
 - b. all staff
 - c. key partners across public, private, higher education and voluntary sectors
 - d. regulators and
 - e. other chairs in the system and the wider NHS provider chair community, including where appropriate, through:
 1. integrating with other care providers

2. identifying, managing and sharing risks.
3. support and work closely with the ICS leadership to contribute to, advocate for and deliver against the wider ICS strategic agenda to improve health, life expectancy, quality and productivity of care as well as reduce inequalities in access, quality and outcomes, ensuring decisions benefit the local population, prioritising the needs of the citizens served by the organisation at a system level.
4. Work with colleagues across the ICS to champion and ensure a more diverse workforce along with greater equality of opportunity for all colleagues.
5. ensuring that **effective communication with stakeholders** creates debate encompassing diverse views, and giving sufficient time and consideration to **complex, contentious or sensitive issues**.

Chair competencies

The competency framework describes the core competencies required in the NHS provider chair's role, in the context of the NHS principles and values in the NHS Constitution. We envisage that the competency framework will be used to recruit and appraise chairs. The figure below shows this and detail the associated requirements under each competency.



The person specification

We are looking for candidates who want to use their energy, skills and experience to help drive the delivery of sustainable healthcare services for the people of North West London.

Required skills, experience and attributes:

Values

- A clear commitment to the NHS and the trusts' values and principles.

Knowledge and experience

- Experience of leading and delivering against a long-term vision and strategy, delivering a step change in performance.
- Strong understanding of financial management, with the ability to balance the competing objectives of quality, operational performance and finance.
- Comfort working across multiple organisations.
- Outstanding track record of partnership working and influencing skills.
- Experience leading transformational change, managing complex organisations, budgets and people.

Skills and abilities

- Evidence of successful leadership and of holding senior management teams to account, scrutinising and challenging information effectively for assurance while driving continuous improvement in quality and managing change, prioritising competing requests in a politically charged and uncertain environment.
- An enabling style with first class chairing skills, the ability to engender respect from others at all levels of the organisation, fostering an inclusive culture, and successfully demonstrating the NHS provider chair competencies in other leadership roles.
- An ability to influence and persuade at the highest levels in private and public sector contexts, along with experience of building strong alliances and

productive working relationships with a range of stakeholders, securing high quality outcomes for public benefit.

- A desire to engage with the local population and to collaborate with senior stakeholders across the health and care system including external stakeholders and the executive, non-executive (including governors for the foundation trusts), and clinical leadership of the organisations they will chair.
- Sound knowledge of governance, including strategic planning, financial management, risk, performance management and service development.
- Evidence of a commitment to inclusion, diversity and equality of opportunity.
- A demonstrable interest in health and social care and a strong desire to achieve the best sustainable outcomes for all patients and service users through encouraging continuous improvement, clinical excellence and value for money.
- An appreciation of constitutional and regulatory NHS standards.

Desirable experience

- Prior experience as a Chair (any sector).
- Prior experience on an NHS board (executive, non-executive or associate role).
- Professional qualification or equivalent experience.
- Prior senior experience of complex organisations outside the NHS, i.e. private, voluntary or other public sector providers of similar scale.

Applications will be assessed on merit, as part of a fair and open process, from the widest possible pool of candidates. The information provided by applicants will be relied on to assess whether sufficient personal responsibility and achievement have been demonstrated in previous/other roles, to satisfy the experience being sought.

The best boards are those that reflect the workforce and communities they serve. We particularly welcome applications from women, people from local black, Asian and minority ethnic communities, and people with disabilities, who we know are all under-represented in these important roles.

London Leadership Values

Core values

Our core values right now are:

- **Courage**, passion and decisiveness
- **Compassion** (which we define as being open, fair, generous, enabling and responsive)
- **Integrity** (behaving with consistency and doing what we say)

Aspirational values

Over the next 12 months we would also like to demonstrate that we are:

- Consistently hard on the problems but **generous** with people

This will mean we are supportive and selfless and show respect to one another in public and in private

- Effortlessly **inclusive**

Accidental values and behaviours

The most common or most destructive accidental behaviours/values that we see in the system right now and which we would like to eradicate include:

- Putting **institutions** and staff ahead of patients and citizens
- Using power to obstruct or for 'gaming', point scoring, personal attacks and bullying
- Using information and knowledge as a 'bargaining chip' or to shame colleagues instead of sharing information openly and creating opportunities to learn
- Failing to be open and honest not saying things 'in the room'
- Learned helplessness and 'playing safe'

Permission to play values

Alongside honesty and integrity, we expect leaders in the London NHS to be:

- Working collaboratively, and
- Taking accountability for the mandate

Appendix 1: Terms of appointment

- The role will be competitively remunerated.
- a) The initial appointment will be for a 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 in the role.
- b) You will have considerable flexibility to decide how you manage the time needed to undertake this role. Characteristically, Chair roles, even of the most complex Trust organisations, will require on average around 3 days a week, including preparation time away from the Trusts, the occasional evening engagement and events designed to support your continuous development. However, given the relative uniqueness of this role and the intensity of focus expected to develop and implement appropriate governance mechanisms that support a Chair in Common model and recognises the need for functioning board arrangements for the four Trusts, it is expected that initially in this transitional period that the time commitment will be greater.

Given the significant public profile and responsibility members of NHS Boards hold, it is vital that those appointed inspire confidence of the public, patients and NHS staff at all times. NHS England / NHS Improvement makes 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 the [website](#).

Appendix 2: More information

Follow the links for more information about:

- **Support to prepare candidates to apply for a non-executive vacancy including:**
 - Building your application
 - Sources of information and useful reading
 - Eligibility and disqualification criteria
 - Terms and conditions of chair and non-executive director appointments
 - How we will handle your application and information
- **[View all current chair and non-executive vacancies](#)**
- **[Sign up to receive email alerts on the latest vacancies](#)**
- **[Contact details for the Non-executive Appointments Team](#)**

NHS England / NHS Improvement respects your privacy and is committed to protecting your personal data. We will only use personal data where we have your consent or where we need to comply with a legal or statutory obligation. It is important

that you read [this information](#) together with our [privacy notice](#) so that you are fully aware of how and why we are using your data.

Appendix 3: Making an application

For more information, you can get in touch with:

- c) **Saxton Bampfylde** are helping us to identify potential candidates, if you would like a confidential discussion about the role contact Brett Anderson, Consultant, brett.anderson@saxbam.com or Alex Richmond, Consultant, alex.richmond@saxbam.com.
- d) **NHS England / NHS Improvement** – for general enquiries contact Miriam Walker on 0300 123 2059 or by emailing Miriam.walker@nhs.net

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

- e) a CV that includes your address and contact details, highlighting and explaining any gaps in your employment history
- f) 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
- g) 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
- h) please complete and return the monitoring information form which accompanies this pack
- i) tell us about any dates when you will not be available
- j) confirm your preferred email and telephone contact details

Saxton Bampfylde Ltd is acting as an employment agency advisor to NHSE/I and the governing bodies on this appointment. Candidates should apply for this role through our website at www.saxbam.com/appointments using code **ZASALA**.

Click on the 'apply' button and follow the instructions to upload a CV and cover letter, and complete the online equal opportunities monitoring* form.

The closing date for applications is **11.00 on 24th December 2021**.

Appendix 4: Key dates

- **Preliminary interviews:** Long-listed candidates will be invited for a **preliminary** interview with Saxton Bampfylde. Feedback from these interviews will be given to the panel
- **Stakeholder event:** the shortlisted candidates will be invited to meet groups of its key stakeholders on **w/c 17th/24th January 2022**
- **Interview date:** **w/c 24th/31st January 2022**
- **Proposed start date:** no later than the **1st April**

NHS England / NHS Improvement

NHS England
NHS Improvement

