

Could you help lead the NHS in your area?

**1 Non-executive director &
1 Associate Non-executive director**

Reference: [M1135](#)





Improvement

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.

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. Background to the Walsall Healthcare NHS Trust

Walsall Healthcare NHS Trust provides local general hospital and community services to around 260,000 people in Walsall and the surrounding areas. They are the only provider of NHS acute care in Walsall, providing inpatient and outpatient services at the Manor Hospital as well as a wide range of services in the community.

Walsall Manor Hospital houses the full range of district general hospital services under one roof. The £170 million development of their Pleck Road site was completed in 2010 and the continued up-grading of existing areas ensures the Trust has state of the art operating theatres, treatment areas and equipment.

They provide high quality, friendly and effective community health services from some 60 sites including health centres and GP surgeries. Covering Walsall and beyond, their multidisciplinary services include rapid response in the community and homebased care, so that those with long term conditions and the frail elderly, can remain in their own homes to be cared for.

The Trust's Palliative Care Centre in Goscote is their base for a wide range of palliative care and end of life services. Their teams, in the centre and the community, provide high quality medical, nursing and therapy care for local people living with cancer and other serious illnesses, as well as offering support for their families and carers.

Their extensive Lifestyle Management service provides smoking cessation, drug and alcohol support, a Physical Activity team and a Health Training service. Working with all areas of the Trust, the team ensure lifestyle management features across a range of healthcare services. Walsall Healthcare NHS Trust formed on 1 April 2011, bringing together the teams at Walsall Hospitals NHS Trust and NHS Walsall Community Health.

1.1. Strategic objectives:

Looking forward, 2016/17 will be another important year for Walsall Healthcare NHS Trust, its patients and their families and the c. 4,000 colleagues who work for the Trust. A year ago the Trust set out plans to start to improve the quality and safety of the care it provides, restore operational performance and develop its 2020 service strategy. Through this approach the Trust has have made some important progress:

- Established a new model of care for community services based on five locality teams, a new Rapid Response Team in the community setting, and a new Frail Elderly Service at the front door of the hospital.
- Delivered it's best-ever infection control performance.
- Begun the process of clearing its elective backlog by halving the number of patients waiting over 18 weeks and treating all of the very longest waiting patients.

- Delivered these improvements within the financial plan set at the start of the year of a deficit of no more than £17.7m.

Everyone who works for the Trust, however, knows that there is still a lot more to do in 2016/17 to deliver the service the Trust wants for its patients. The Trust's CQC inspection rated it "Inadequate" and the Trust is in Special Measures as a result. Staff and patient survey results were also well below average reinforcing the extent of improvement that is still required.

The plan for 2016/17 is therefore designed to build on the start made and to accelerate improvement, and to meet the triple aims of the Five Year Forward View requirements as follows:

- Improving for Patients
 - Quality and Safety – delivering their Patient Care Improvement Plan to ensure they provide safe, high quality care especially in maternity and emergency care
 - Tackling Long Waits for Care – clearing their elective backlog and ensuring they achieve the cancer 62 day standard whilst also reducing long waits in ED to achieve national standards in line with the NHS Constitution
 - Care at Home – continuing their service redesign work with partners to care for more of our patients at home and further shifting activity from hospital to community-based care with greater emphasis on prevention.
- Improving for Colleagues
 - Changing the Culture – embedding a clinically-led approach to their services alongside a culture focussed on quality and safety
 - Engagement – using Listening into Action to deliver a step-change in engagement with their colleagues
 - Developing their leadership and senior management teams and equipping them with the skills required to achieve the necessary improvements in quality and safety that will see the Trust taken out of special measures within the year.
- Improving for the Long-Term
 - Ensure that their financial deficit does not get worse whilst they deliver the quality and operational improvement that they need
 - Progressing capital developments in ITU, maternity and ED to ensure their hospital estate is fit for purpose.

There is a lot to do in 2016/17 in order to continue to progress the improvement journey started in 2015/16. This plan is designed to ensure that the Trust is able to successfully take the next significant steps in that journey to deliver its vision to become Your Partners for First Class Integrated Care.

2. The opportunity

2.1. Person specification:

We are recruiting a non-executive director for Walsall Healthcare NHS Trust.

The Trust is also looking to recruit an Associate Non-executive Director. This is part of the Board's approach to succession planning. The Associate Non-executive Director will be identified by NHS Improvement through our selection processes but will be appointed by the Trust. Although you will not be appointed formally as a Board member and will therefore be ineligible to vote, in every other respect you will be expected to play an active role in Board meetings, Board Thinking Days and meetings of Board Committees. The successful candidate may be appointed as a full Non-executive Director, without further competition, if a suitable vacancy arises.

These are exceptional opportunities to share your talents and expertise to make a positive difference to the lives of people in your community.

Essential criteria

You will need to have a genuine commitment to patients and the promotion of excellent health care services. You will have senior board level experience in one of the following areas:

Non-executive director post;

- Recent, relevant finance experience in a large and complex organisation with the ability to Chair the Audit Committee, preferably with a financial qualification.

Associate Non-executive director post;

- Governance experience; bringing experience of strategic planning, financial, risk, performance management and partnership working. The successful candidate will have ideally worked within the NHS.

2.1.1. Board level behaviours

The NHS Leadership model describes nine behaviours which together contribute towards strong and effective NHS leaders. If you are invited to interview, you will also need to demonstrate the range of behaviours required to contribute effectively in this board level role:

- **Inspiring shared purpose** - create a shared purpose for diverse individuals doing different work, inspiring them to believe in shared values so that they deliver benefits for patients, their families and the community
- **Leading with care** - understand the underlying emotions that affect their team, and care for team members as individuals, helping them to manage

unsettling feelings so they can focus their energy on delivering a great service that results in care for patients and other service users

- **Evaluating information** - are open and alert to information, investigating what is happening now so that they can think in an informed way about how to develop proposals for improvement
- **Connecting our service** - understand how things are done in different teams and organisations; they recognise the implications of different structures, goals, values and cultures so that they can make links, share risks and collaborate effectively
- **Sharing vision** - convey a vivid and attractive picture of what everyone is working towards in a clear, consistent and honest way, so that they inspire hope and help others to see how their work fits in
- **Engaging the team** - promote teamwork and a feeling of pride by valuing individuals' contributions and ideas; this creates an atmosphere of staff engagement where desirable behaviour, such as mutual respect, compassionate care and attention to detail, are reinforced by all team members
- **Holding to account** - create clarity about their expectations and what success looks like in order to focus people's energy, give them the freedom to self-manage within the demands of their job, and deliver improving standards of care and service
- **Developing capability** - champion learning and capability development so that they and others gain the skills, knowledge and experience they need to meet the future needs of the service, develop their own potential, and learn from both success and failure
- **Influencing for results** - are sensitive to the concerns and needs of different individuals, groups and organisations, and use this to build networks of influence and plan how to reach agreement about priorities, allocation of resources or approaches to service delivery
- **Championing the standards of public life** – uphold the highest standards of conduct and displaying the principles of selflessness, integrity, objectivity, accountability, openness, honesty, and leadership

More information at the NHS Leadership Academy's [Healthcare Leadership Model](#)

3. Role and responsibilities

3.1. 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.

3.2. 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.

3.3. Responsibilities of audit committee chairs

Audit committee chairs should have recent and relevant financial experience. They share the functions of the other non-executives, and in addition have responsibilities to:

- Bring independent financial acumen to the work of the audit committee across its governance, risk management, assurance and internal control functions
- Provide leadership to the audit committee to ensure that it is effective in its role and that internal control systems are in place and operating
- Ensure that the audit committee is well informed and has timely access to all the information it requires
- Facilitate the contribution of all members of the audit committee, auditors and other invited participants
- Ensure that the board receives sound advice, assurance and useful and timely reports from the committee

4. 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](#).

5. Terms and conditions of appointment

- The remuneration payable for this role is £6,157 pa.
- You will have flexibility to decide how you manage the time needed to undertake this role. On average, it will require 2 to 3 days a month, and you may also be asked to represent the trust at external events and those designed to support your continuous development.

- 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.
- You should have strong connections with the West Midlands area.

6. 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](#)
- [Term 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](#)

7. Making an application

If you wish to be considered for these roles 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.

8. Key dates

- **Closing date for receipt of applications:** **Thursday 2nd June 2016 at 11am.** Please forward your completed application to public.appointments@nhs.net
- **Meet the team:** There will be a stakeholder event on **Thursday 26th May 2016** from 1.00pm to 3.00pm at Walsall Manor Hospital where potential candidates will be able to meet key stakeholders to learn more about the organisation.
- **Interview date:** **Tuesday 21st June 2016**
- **Start date:** **1 July 2016**

9. Getting in touch

- **With the trust** - for an informal and confidential discussion with Danielle Oum, the chair of the trust regarding the role, or to register to attend the stakeholder event, please contact Amy Parton, PA to the Chair, on 01922 656263.
- **With NHS Improvement** – for general enquiries contact Sharon Davies on 0300 123 2068 or by emailing Sharon.davies19@nhs.net



Improvement

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This publication can be made available in a number of other formats on request.