



Department
of Health



National Joint Registry

www.njrcentre.org.uk

Working for patients, driving forward quality

2 Members of the National Joint Registry Steering Committee (NJRSC)

Information pack for applicants

Closing date: Midday on 28 April 2017

Reference no: EC16-21



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SECTION 1 – The Role

1.1 Role and Responsibilities of a Member of the NJRSC

Introduction

NHS England is seeking to appoint 2 Members to the NJRSC. One Member will be an orthopaedic surgeon, and the other an Allied Health professional (AHP) or a practitioner with a special interest in orthopaedics.

Role and Responsibilities of a Member

As a Member of the National Joint Registry Steering Committee you will:

- engage fully in collective consideration of the issues, taking account of the full range of relevant factors, including any guidance issued by NHS England and ensure that the Freedom of Information Act is adhered to
- respond appropriately to complaints, if necessary with reference to NHS England
- contribute to the preparation of advice, as needed, to NHS England
- contribute to discussion in the Steering Committee on dealing with issues of Parliamentary, media and national interest
- attend meetings of the Steering Committee, including any held in public, and (as agreed) sit on its sub committees, and working groups
- ensure that the Committee does not exceed its powers or functions.

Qualities required for the role of an NJRSC Member

To be considered, you must be able to demonstrate that you have the qualities, skills and experience to meet all the essential criteria for appointment.

Essential Criteria

Criteria for Orthopaedic Surgeon Member

Essential

- Currently a practising surgeon with experience of joint replacement surgery in the NHS or independent sector clinical setting, in England, and/or Wales and/or Northern Ireland and/or Isle of Man
- Be aware of the views of the profession and have direct links and network well with the orthopaedic surgical profession

Desirable

- Be a member of the British Orthopaedic Association and/or specialist orthopaedic Society i.e. British Hip Society, British Association of Surgery of

the Knee, British Elbow and Shoulder Society, British Orthopaedic Foot and Ankle Society

- Have experience of outcome measurement following joint replacement surgery (hip/knee/shoulder/ankle/elbow) and have contributed to scientific/clinical literature and/or conferences on joint replacement

Criteria for an AHP or Practitioner with Special Interest in Orthopaedics Member

Essential

- Currently practising as a AHP/Nurse/General Practitioner with an interest in orthopaedics
- Working at a senior level within your area of work
- Currently work or have worked in the management of patients during or following joint replacement and/or have a specialist interest in joint replacement surgery
- Be qualified and registered according to the requirements of your profession

Desirable

- Be a member of your professional body
- Be a member of an orthopaedic special interest professional group

Remuneration

- There is no remuneration but you may claim travel and subsistence expenses, which are properly and necessarily incurred in carrying out your role and responsibilities as a Member of the NJRSC, in line with travel and subsistence policy and rates for the NJRSC. A copy of the policy and rates can be obtained from NJRSC

Time commitment

Up to 4 days per year

Location

London

Tenure of office

The NHS England Senior Responsible Officer determines the length of the appointment, which can be for up to a maximum of 3 years.

Accountability

Members are appointed by the Departmental Senior Responsible Officer and are accountable to the Senior Responsible Officer via the Chair for carrying out their duties and for their performance.

For further information regarding the role of the NJRSC and the role of Member please contact:

Tel: 0207 997 7353

Email: elaine.young@hqip.org.uk copying lisa.town@hqip.org.uk

1.2 NJRSC role and responsibilities

Body Role and Responsibilities

Background to the National Joint Registry

1. The National Joint Registry (NJR) for England, Wales, Northern Ireland and the Isle of Man was set up in 2002 to protect patient safety by monitoring the performance of joint replacement implants and variation in and the relative effectiveness of surgical technique.
2. The NJRSC was established in the same year to oversee its work and strategic development. Membership of the committee is multi-disciplinary with representatives of orthopaedic surgery; epidemiology/public health; practitioners with a specialist interest in orthopaedics; patients; NHS and independent sector healthcare management and implant manufacturers.
3. Over the past decade, the NJR has grown to hold more than 2 million records and is currently the largest arthroplasty register of its type in the world. It has collected hip and knee replacement data since 2003 and it extended to ankle replacement surgery in 2010, followed by elbow and shoulder surgery in 2012. The service extended to Northern Ireland in 2013 and the Isle of Man in 2015.
4. The NJR's data, analysis and reporting now stimulate quality improvement through stakeholder-specific services as well as patient- and public-facing information. Equally, national and international collaboration has also grown with active engagement in new policy initiatives and international registry development.

The National Joint Registry Steering Committee (NJRSC) has a responsibility to ensure:

- that appropriate advice is provided to the Healthcare Quality Improvement Partnership (HQIP) which manages the NJR on behalf of NHS England, on operational and financial matters associated with the NJR
- that effective management and monitoring arrangements apply to the provision of all Lots sub-contracted by the NJR
- the NJR budget is effectively managed/monitored
- that outcomes achieved by brand of prostheses, hospital and surgeon are monitored and where these fall below expected performance are highlighted to enable prompt investigation and follow-up by relevant implant suppliers, regulators, commissioners and providers of orthopaedic care
- that appropriate stakeholders (patients, clinicians, providers and commissioners of healthcare, regulators and implant suppliers) are involved in and consulted on the work of the National Joint Registry as appropriate; and are informed of the outcomes achieved in joint replacement surgery
- that patient awareness of joint replacement outcomes is enhanced to better

inform patient choice and patient's quality of experience through engagement with patients, patient organisations and providers of care

- that evidence-based purchasing (quality and cost effectiveness) of joint replacement implants for healthcare providers is supported
- that post-market surveillance of implants by key stakeholders (implant suppliers, the regulator and Beyond Compliance Advisory Group) is supported
- that the codes of conduct applied to NJR Contractor(s) in their relationship with other key stakeholders (orthopaedic units within NHS and independent healthcare organisations and with the orthopaedic implant industry) are monitored
- that the delivery and quality of the work of the National Joint Registry is effectively contract managed by HQIP
- that accurate, relevant and timely data collected by the National Joint Registry is made available to relevant regulators, commissioners and providers of orthopaedic care in an appropriate format in order to support clinical governance and contract management
- that an annual report on the work of the National Joint Registry is published and made available in both the English and Welsh languages (and languages appropriate to countries which may be incorporated into the NJR in the future)
- that appropriate governance and monitoring arrangements are in place to facilitate the use of NJR data to support and enable related research

The NJRSC should adhere to the terms of the Code of Practice for National Joint Registry Steering Committee Members and Member Register of Interests.

The NJRSC also has responsibility to provide NHS England (and devolved administrations as appropriate) with advice on:

- the strategic direction of the National Joint Registry
- the annual work programme for the National Joint Registry
- the performance of prostheses and good surgical practice
- the NJR financial position on an annual basis to ensure that the levy is set appropriately
- international collaboration and work with other national orthopaedic joint registries

Section 2: How to Apply

2.1 Making an application

Thank you for your interest in the appointment of a Member to the NJRSC.

The Department of Health's Appointments Team is managing this recruitment campaign on behalf of NHS England. To make an application please email your CV, a supporting letter and completed monitoring forms to:

appointments.team@dh.gsi.gov.uk – please quote ref: EC16-21 in the subject field.

If you are unable to apply by email you may send your application by post to:

Permjeet Butler, Department of Health, Room 1N09, Quarry House, Quarry Hill, Leeds, LS2 7UE

Applications must be received by **midday on 28 April 2017**.

In making an application please note the following:

Supporting letter

The supporting letter is your opportunity to demonstrate how you meet each of the criteria set out in the person specification. It will benefit the Advisory Assessment Panel if you can be clear which particular evidence you provide relates to which criteria. Providing separate paragraphs in relation to each criterion is common practice. Please write all acronyms in full first.

Please ensure your full name, the role to which you are applying and the corresponding reference number for the post are clearly noted at the top of your letter.

Please limit your letter to two pages, and type or write clearly in black ink.

Declaration of interests and ensuring public confidence

If you have any business or personal interests that might be relevant to the work of the NJRSC and which could lead to a real or perceived conflict of interest were you to be appointed, please provide details in your supporting letter.

If appointed, you will also be required to declare these interests on appointment which will be entered into a register which is available to the public.

Given the nature of non-executive appointments, it is important that those appointed as members of committees maintain the confidence of the public and Government. If there are any issues in your personal or professional history that could be misconstrued, cause embarrassment to the Department, NHS England or NJRSC or cause wider public confidence to be jeopardised, it is important that candidates bring them to the attention of the Assessment Panel. The panel may explore any such issues with you before they make a recommendation on the appointment.

Failure to disclose such information could result in an appointment being terminated.

Also, please refer to the Eligibility Criteria for appointment section in Annex A.

Should you be successful in your application, is there anything in your personal or professional history.

CV

Please ensure your CV includes:

- your full name, title, home address, personal contact telephone numbers (land line and mobile) and personal email address
- similar contact details for two referees who will support your application. One referee should be the person to whom you are/were accountable in your current/most recent appointment or position of employment. Please indicate the relationship of each referee to you. References will be requested for short-listed candidates prior to interview
- brief details of your current or most recent post and the dates you occupied this role.

Monitoring form

Please complete the monitoring form. Diversity monitoring information will not be seen by the Advisory Assessment Panel assessing your application.

Guaranteed Interview Scheme

The Department of Health operates a Guaranteed Interview Scheme (GIS) for disabled people. The Equality Act 2010 defines a person as disabled if they have a physical or mental impairment and the impairment has a substantial and long term adverse effect on their ability to carry out normal day to day activities. Under the GIS a disabled candidate will be selected for interview if they meet the **essential criteria** for the post.

If you wish to apply under the GIS please complete the GIS form and return it with your application.

All applications will be acknowledged by email after the closing date.

Contacts:

For further information regarding the selection process, please contact:

Permjeet Butler
Appointments Team
Tel: 0113 254 5915
Email: permjeet.butler@dh.gsi.gov.uk

For further information regarding the role of the NJRSC and the role of Member please contact:

Elaine Young
Tel: 0207 997 7353
Email: elaine.young@hqip.org.uk copying lisa.town@hqip.org.uk

Please quote reference EC16-21 on all correspondence.

If you choose to apply, we would like to thank you in advance for your time and effort in making an application.

2.2 The Selection Process

The Department of Health's Appointments Team will deal with your application as quickly as possible and will advise you of the likely timetable at each stage.

Timetable:

- Closing date: Midday on 28 April 2017
- Shortlisting complete: early May
- Interviews held: mid / late May

The selection panel will be:

- Laurel Powers-Freeling, Chair NJRSC as Panel Chair
- Martyn Porter, Medical Director NJR as Panel Member
- Elaine Young, Director of Operations NJR as Panel Member
- Peter Kay, as Independent Panel Member (for the Surgeon role)
- Independent Panel Member (for Special Interest groups) - TBC

After the closing date for applications:

- the Advisory Assessment Panel will assess candidates' CVs and supporting letters to determine who it believes best meet the criteria for the roles, and who will be invited to interview. The Advisory Assessment Panel will rely only on the information you provide in your CV and letter to assess whether you have the skills and experience required. Please ensure that you provide evidence to support how you meet all of the essential criteria
- your application may be "long-listed", subject to the volume of applications received, before it is passed to the Advisory Assessment Panel for consideration. You should be aware that in this situation, your application might not be considered in full by all of the panel
- interviews will be held mid / late May
- the Advisory Assessment Panel will select for interview only the strongest applicants who it feels have demonstrated that they best meet the criteria set out in the person specification. However, if you have applied under the GIS and you meet all of the essential criteria, then you will also be invited for interview
- if you are invited to interview and if you are unable to attend on the set date then an alternative date can only be offered at the discretion of the Advisory Assessment Panel
- the Appointments Team will email to let you know whether or not you have been invited to be interviewed. It is our intention that interviews will take place in a central London location
- if invited to interview, the Advisory Assessment Panel may invite you to make a brief presentation at the start of the interview and will go on to question you about your skills and experience, including asking specific questions to assess whether you meet the criteria set out for the posts

- the Advisory Assessment Panel will also explore with candidates any potential conflicts of interest or any other issues arising from candidate's personal and professional history which may impact on an appointment decision (see section 2.1 for further details)
- candidates who the panel believe are 'appointable', will be recommended to the Senior Responsible Officer who will make the final decision. The Senior Responsible Officer may choose to meet with shortlisted candidates, before or after interview, before making a decision. Candidates should therefore be prepared for a short time gap between interview and a final appointment decision being made. Candidates who have been interviewed will be kept informed of progress
- if you are successful, you will receive a letter from the Senior Responsible Officer appointing you as a Member of the NJRSC, which will confirm the terms on which the appointment is offered
- if you are unsuccessful at interview, you will be notified by the Appointments Team. We appreciate it takes a lot of time and effort to apply for roles and that feedback is a valuable part of the process. As a result, the letter will provide the details of who you may approach for feedback on your interview and application, if you so wish
- for further information on how we will manage the personal information that you have provided to us through your application, see **Section 2.4**

Queries

For queries about your application, please contact Permjeet Butler on 0113 254 5915.

You will be expected to demonstrate a commitment to and an understanding of the value and importance of the key principles of public life. All successful candidates will be asked to subscribe to the Code of Practice for Scientific Advisory Committees (CoPSAC); you can access this document at:

<http://www.bis.gov.uk/assets/goscience/docs/c/11-1382-code-of-practice-scientific-advisory-committees.pdf>

Diversity and equality of opportunity

The Department of Health and NHS England value and promote diversity and encourage applications from all sections of the community.

If you are not completely satisfied

DH will aim to process all applications as quickly as possible and to treat all applicants with courtesy. If you have any complaints about the way your application has been handled, please contact Permjeet Butler in the Department of Health by emailing permjeet.butler@dh.gsi.gov.uk

2.3 Eligibility Criteria

Eligibility criteria

There are circumstances in which an individual may not be considered for appointment. They include:

- a) persons who have received a prison sentence or suspended sentence of 3 months or more in the last 5 years
- b) persons who are the subject of a bankruptcy restrictions order or interim order, or a debt relief order or interim debt relief order under Schedule 4ZB to the Insolvency Act 1986
- c) persons who have had an earlier term of appointment with a health service body terminated on the grounds
 - i. that it was not conducive to the interests or good management of the body that the person should continue to hold office
 - ii. that the person failed to attend a meeting of the body on three consecutive occasions
 - iii. that the person failed to declare a pecuniary interest or withdraw from consideration of a matter in respect of which the person had a pecuniary interest
 - iv. of misconduct or failure to carry out the person's duties
- d) anyone who is under a disqualification order under the Company Directors Disqualification Act 1986; or
- e) anyone who has been removed from trusteeship of a charity.

Further advice about the eligibility criteria can be provided by contacting Elaine Young on 0207 997 7353.

2.4 How we will manage 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 DH 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:

- provide us with accurate information
- inform us as soon as possible of any changes or 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 are applying, so that your CV and supporting letter can be assessed.

The diversity monitoring information you provide will not be used in the selection process and will therefore not be shared with the Advisory Assessment Panel assessing your application at any stage.