

Non-Executive Directors of the NHS Commissioning Board

Information pack for applicants

Closing date: 12 noon on 10 May 2012

Reference no: SP12-04

Contents

	Page
Overview	3
Annex A: Appointment of Non-Executive Directors	6
Annex B: NHS Commissioning Board role and responsibilities	10
Annex C: Making an application	12

Non-Executive Directors of the NHS Commissioning Board

Overview

The role

The Secretary of State for Health wishes to appoint up to three Non-Executive Directors to the NHS Commissioning Board.

The key elements of the Non-Executive Directors' roles will be:

- supporting the Chair in leading the board, comprising Executive and Non-Executive colleagues;
- actively participating in all board discussions, as well as contributing to the wider governance and leadership of the NHS Commissioning Board;
- contributing in one or more key areas – HR / workforce; communications; clinical leadership, patient representation, performance management and governance, and commercial business development;
- together with the Chair and Chief Executive, developing and maintaining constructive relations with a range of external stakeholders, including clinicians, patients, local and national Government, other Arms Length Bodies and the media to promote and protect the reputation of the NHS Commissioning Board and the NHS more widely.

For further information on the roles of **Non-Executive Directors** see **Annex A**.

The NHS Commissioning Board

The NHS Commissioning Board Authority (a Special Health Authority), was established on 31 October 2011, and plays a key role in the Government's vision to modernise the health service and secure the best possible outcomes for patients. Its role is to make all the necessary preparations for the successful establishment of the NHS Commissioning Board. In the meantime, all current NHS planning and delivery responsibilities remain with the Department of Health, Strategic Health Authorities and Primary Care Trusts.

The Health and Social Care Act 2012 outlines the new commissioning architecture for the NHS, which will devolve responsibility for the majority of commissioning to local clinical commissioning groups. The clinical commissioning groups will be supported and held to account by the NHS Commissioning Board.

For further information on the role of the **NHS Commissioning Board** see **Annex B**.

Indicative timetable

Advert:	29 April 2012
Closing date:	12 noon on 10 May 2012
Shortlisting complete:	by 16 May 2012
Interviews held:	22 May 2012
Appointment start date:	by agreement

Remuneration

£7,882 per annum.

Time commitment

Around two days a month.

Tenure of office

The Secretary of State for Health determines the length of appointments, which will be for up to a maximum of four years.

Accountability

The Non-Executive Directors are appointed by the Secretary of State for Health and will be accountable to the Chair of the NHS Commissioning Board for carrying out their duties and for their performance.

Essential Criteria

- A record of achievement and personal effectiveness in a substantial, high-profile role in a relevant field.
- Commitment to the values of the National Health Service as outlined in the NHS Constitution together with an appreciation of the Government's modernisation agenda for the NHS and the role and purpose of the NHS Commissioning Board.
- The ability to guide the strategic direction of the work of the NHS Commissioning Board supported by a strong understanding of corporate governance and board level financial, risk and performance management and impeccable personal standards of professional behaviour.
- Sound judgement, based on the ability to consider complex issues from an impartial and balanced viewpoint.
- The ability to work as an individual and as part of a team, with a positive and constructive style and good communication skills.

As a member of the board, candidates will be able to draw on the full breadth of their experience from working across and within a range of different sectors, bringing to bear skills from one or more of a range of areas to contribute to the work of the board, including:

- governance and organisational skills, including strategic planning, financial management, risk management, performance management and service development;
- consumer/customer service delivery/patient representation;
- commercial experience, including experience of business development or commercial experience gained in a strong customer focused industry;
- communications including use of new media;
- clinical leadership and governance;
- human resources / workforce development, including a demonstrable commitment to valuing the staff working for an organisation and their health and well-being.

Desirable Criteria

- Previous experience as a Non-Executive Director of a large and complex organisation.

Diversity and equality of opportunity

We value and promote diversity and are committed to equality of opportunity for all and appointments made on merit.

For further information on the role of the Non-Executive Directors and the appointment, see **Annex A**.

Key contacts:

Russell Reynolds Associates have been engaged to help identify potential candidates for these important roles. For information regarding these posts, they can be contacted at:

Patrick Johnson
Managing Director
Russell Reynolds Associates
Almack House
28 King Street
London SW1Y 6QW
T: 020-7830-8052
E: fiona.birkmire@russellreynolds.com

For information regarding the selection process, please contact:

Holly Wainwright

Appointments Team
Department of Health
3E44
Quarry House
Quarry Hill
Leeds
LS2 7UE

Tel: 0113 254 6135
Email: holly.wainwright@dh.gsi.gov.uk

For information regarding the role of the NHS Commissioning Board and its Non-Executive Directors please contact:

Jason Yiannikou
Email: Jason.Yiannikou@dh.gsi.gov.uk

Please quote reference SP12-04 on all correspondence.

For further details on how to make an application, please see **Annex C**.

Appointment of Non-Executive Directors

Role and responsibilities of Non-Executive Directors

The NHS Commissioning Board Special Health Authority will have at least 5 Non-Executive Directors, and these appointments will be rolled forward as the NHS Commissioning Board transitions from its Special Health Authority status into an Executive Non-Departmental Public Body.

The primary role of Non-Executive Directors will be to contribute to the work of the board, both in the context of the board meetings themselves, and more widely. Appropriate governance and performance management will be key elements of the work of the board, along with the development of strategy. Non-Executive Directors will also need to play a part in representing the NHS Commissioning Board externally, alongside the Chief Executive, the Chair and the Executive Director team.

The responsibilities of the Non-Executive Directors of the NHS Commissioning Board are envisaged as:

- ensuring the board assesses the values of the organisation and sets a high standard for ethics and responsible business, establishing the NHS Commissioning Board's reputation as an open and independent body, which puts the interests of the public and patients first;
- contributing to the board and its meetings, taking an active part in discussions, helping the board to develop its priorities and contributing to an environment of constructive debate on key issues and harnessing the board's input to build consensus;
- providing counsel, advice and support to the executive team; playing the role of mentor/coach and "critical friend" where necessary, acting as a sounding board;
- ensuring that the NHS Commissioning Board's senior management team is held to account for the performance of the organisation, particularly with regard to compliance with the HM Treasury and Department of Health's requirements of a Special Health Authority and an Executive Non Departmental Public Body. The board will also provide feedback to the Department of Health when it periodically reviews the NHS Commissioning Board;
- with the Chief Executive, Chair, and other members of the leadership team, ensuring the establishment and maintenance of good working relationships with a range of key stakeholders including the Department of Health, Monitor, CQC, Public Health England, the wider NHS, local authorities, public and independent sector providers, the media and the main patient and public constituencies.
- Through this stakeholder engagement develop, maintain and promote the work of the NHS Commissioning Board, demonstrating commitment to, and an understanding of, the role that excellent communication and engagement plays in high-performing organisations and utilises intelligence gained through this to help the board to formulate its corporate strategy;

- Non-Executive Directors will be expected to contribute across a range of specific areas, including: setting and maintaining an appropriate clinical agenda for the NHS Commissioning Board; ensuring the board listens to the patient voice; ensuring appropriate financial controls are in place, and risks managed accordingly; contributing to the change management agenda; ensuring that best practice is followed in all workforce and leadership policies and behaviour.

Qualities required for the role of Non-Executive Directors

The Non-Executive Directors of the NHS Commissioning Board are key appointments in Government. They are high-profile appointments and require outstanding individuals with first-class reputations.

The Non-Executive team will each have achieved prominence in their field and be recognised and respected by their peers.

Candidates must be able to demonstrate the leadership skills necessary to fulfil the responsibilities of these key roles and develop them in a way that is in keeping with the evolving NHS landscape. They must be confident in the Whitehall environment and be familiar with the main challenges in the health service.

To be considered you must be able to demonstrate that you have the qualities, skills and experience to meet all the essential criteria, set out in the overview section on page 3.

On Appointment

Remuneration

- £7,882 per annum. Non-Executive remuneration may be subject to review.
- Remuneration is taxable and subject to National Insurance contributions. It is not pensionable.
- Those appointed will also be eligible to claim allowances, at rates set centrally, for travel and subsistence costs necessarily incurred on NHS Commissioning Board business.
- Note: Impact of appointment on people in receipt of benefits. Your appointment may have an effect on your entitlement to benefits. If you are in receipt of benefits you should seek advice from the Department for Work and Pensions.

Time commitment

Time commitment is expected to be around two days per month.

Tenure of office

The Secretary of State for Health determines the length of appointments, which will be for up to a maximum of four years. Appointments will initially be as Non-Executive Director of the NHS Commissioning Board Special Health Authority and then as Non-Executive Director of the Executive Non-Departmental Public Body.

Accountability

The Non-Executive Directors are appointed by the Secretary of State for Health and will be accountable to the Chair of the NHS Commissioning Board for carrying out their duties and for their performance.

Disqualification from appointment

It is important that you declare in your application where you hold another executive / non-executive post with another NHS body. Any potential conflict of interest will be considered as part of the application process. Should you be successful, you may be asked to step down from any existing post. There are circumstances in which an individual will not be considered for appointment. They include:

- people who have received a prison sentence or suspended sentence of 3 months or more in the last 5 years;
- people who are the subject of bankruptcy restrictions order or interim order;
- anyone who has been dismissed by a health service body within the past five years, other than by reason of redundancy;
- in certain circumstances, those who have had an earlier term of appointment terminated;
- anyone who is under a disqualification order under the Company Directors Disqualification Act 1986;
- anyone who has been removed from trusteeship of a charity;
- anyone who is disqualified from a primary care list;
- anyone who is, in addition, a Chair, Non-Executive Director or employee of an NHS Trust or NHS Foundation Trust – the individual would be expected to step down from this position;
- anyone who is, in addition, chair, Non-Executive Director or employee of the Independent Regulator of Foundation Trusts or the Care Quality Commission – the individual would be expected to step down from this position.

Further advice about disqualification for appointment can be given by contacting Holly Wainwright on 0113 254 6135 or by email at holly.wainwright@dh.gsi.gov.uk.

Conflict of Interests

You should note particularly the requirement to declare any conflict of interest that arises in the course of NHS Commissioning Board business and the need to declare any relevant business interests, positions of authority or other connections with organisations relevant to the business of the NHS Commissioning Board.

If you are aware of any potential conflicts prior to your appointment you should raise these during the process of your application. If an issue arises following your appointment you should ensure that you alert the Chair, to whom you will be accountable for your performance.

Standards in public life

You will be expected to demonstrate high standards of corporate and personal conduct. All successful candidates will be asked to subscribe to the *Code of Conduct for Board Members of Public Bodies*, you can this document at:

<http://www.bl.uk/aboutus/governance/blboard/Board%20Code%20of%20Practice%202011.pdf>

Diversity

We value and promote diversity and are committed to equality of opportunity for all and appointments made on merit.

NHS Commissioning Board role and responsibilities

The Government has set out a clear vision for a modernised NHS driven by a new commissioning system focused relentlessly on improving outcomes for patients. The cornerstone of the proposed system will be local Clinical Commissioning Groups, which will put GPs – using their knowledge and understanding of patients’ needs – at the heart of the commissioning process.

Clinical Commissioning Groups are expected to be supported across the country by clinical networks, bringing together experts on particular conditions and service areas, and by clinical senates, bringing together a range of clinical voices across particular parts of the country.

At national level, the NHS Commissioning Board will ensure the new architecture is fit for purpose and provides clear national standards and accountability – it will put the ‘N’ in NHS. The Board will lead at a national level the delivery of more choice and control for patients, and of improvements in health outcomes for patients against the NHS Outcomes Framework.

The proposed system gives pride of place to clinical leaders, from top to bottom and across the country. And it has the needs and wishes of patients, underpinned by the NHS Constitution, at its heart.

The NHS Commissioning Board’s role will include leading a commissioning system to improve the health outcomes achieved by the NHS while securing value from budgets totalling around £80 billion and supporting, developing and holding to account an effective and comprehensive system of Clinical Commissioning Groups. It is not possible to devolve all commissioning to Clinical Commissioning Groups (eg national specialised commissioning), so the NHS Commissioning Board itself will be part of a comprehensive commissioning system for healthcare services. Clinical Commissioning Groups will form the key part of the new structure and they will be responsible for commissioning the majority of healthcare services. The Board will have a dual role in that it will both deliver its own commissioning functions and ensure that the whole of the architecture is cohesive, coordinated and efficient.

The relationship between the Board and Clinical Commissioning Groups will be critical to the success of the new system. Clinical Commissioning Groups and the Board will have to work together closely at local level and Clinical Commissioning Groups will have a clear collective voice at national level. The Board will support Clinical Commissioning Groups and hold them to account whilst ensuring they have the freedom to deliver improvements in outcomes for their local populations in a clinically led and bottom up way.

In addition, the NHS Commissioning Board will be able to host clinical networks of strong multidisciplinary teams to enable the delivery of integrated care and provide advice on distinct areas of care, such as cancer or maternity services. The Board will

also be able to host new clinical senates which will provide multi-disciplinary input to strategic clinical decision making to support commissioners, and embed clinical expertise at the heart of the Board.

The NHS Commissioning Board was established in preparatory form as a Special Health Authority on 31st October 2011. It will become an Executive Non Departmental Public Body in October 2012 and is expected to be fully operational by 1st April 2013. The NHS Commissioning Board has its main headquarters in Leeds, with an additional office in London and a presence in key locations in other areas of the country.

The Board's overarching role is to ensure that the NHS delivers better outcomes for patients within its available resources. When fully established, the Board's statutory responsibilities will include: supporting continuous improvements in quality and outcomes of NHS funded services; promoting choice and patient engagement; ensuring a comprehensive system of Clinical Commissioning Groups, and supporting and holding them to account; directly commissioning certain services including: primary medical care, other family health services, specialised commissioning, offender and some military health; allocation of, and accounting for, NHS resources; and reducing inequalities in access to healthcare.

For further information, please see the "*Developing the NHS Commissioning Board*" via the link: <http://healthandcare.dh.gov.uk/commissioning-board/> the NHS Constitution via the link

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_113613 and the Health and Social Care Act 2012 via the link <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted/data.htm>

The Secretary of State remains responsible for promoting a comprehensive health service; and retains the ultimate accountability for securing the provision of services, through his relationship with NHS bodies, for example, through the NHS Commissioning Board by way of a mandate. Ministers are responsible, not for direct operational management, but for overseeing and holding to account national bodies such as the NHS Commissioning Board and the regulators, backed by extensive powers of intervention in the event of significant failure. The Act provides that Secretary of State will have powers of direction over the entire system in the event of an emergency, and powers to direct national bodies if they fail to perform their functions.

The Department of Health will have a role in sponsoring and overseeing the NHS Commissioning Board. There is a published framework agreement setting out its relationship with the Department, and there will be periodic transparent assessment of how the NHS Commissioning Board, and other national bodies, have performed. The Secretary of State will have explicit powers to report on the performance of all of the national NHS bodies, as part of the Department of Health's annual report on the health service.

Making an application

Overview

The appointments of Non-Executive Directors are Secretary of State appointments. The Department of Health will manage the recruitment process in a way that is open and fair to all applicants and the appointments will be made on merit.

The interview panel will make recommendations to the Secretary of State on candidates they believe are 'appointable'. Taking into account feedback from the panel, the Secretary of State will make the final decision on who he believes best meets the criteria for the roles and will make the appointments.

How to apply

All applicants are required to complete an application form. This is available online by visiting the DH website: www.dh.gov.uk/appointments and searching for the vacancy reference (**SP12-04**).

Alternative formats such as braille, large print and tape versions of this information pack and the application forms are available from Holly Wainwright on 0113 254 6135 or by email at holly.wainwright@dh.gsi.gov.uk, again quoting the reference number.

If you wish to submit a paper copy of your application, or one in an alternative format, please send to:

Holly Wainwright
Appointments Team (Room 3E44)
Department of Health
Quarry House
Quarry Hill
Leeds
LS2 7UE

All applications will be acknowledged by email and you will be contacted again after the closing date.

The Appointments Team must receive your completed application form **before 12 noon on 10 May 2012**.

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 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; and
- only use your information for the purposes you have authorised.

We ask that you:

- provide us with accurate information; and
- 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 applying, so that your application form and CV can be assessed.

Panel members are identified in the section below on “How we will handle your application”. The ‘monitoring information’ you provide will not be used in the selection process and will therefore not be shared with the selection panel assessing your application.

The Commissioner for Public Appointments regulates and monitors appointments to public bodies to ensure procedures are fair. The Department of Health is required by the Commissioner for Public Appointments to retain information about the people who apply for public appointments within his remit, and make this information available to him for audit purposes, if requested to do so. Information you provide in your application may therefore be made available to the Commissioner for Public Appointments and the Commissioner’s auditors on a confidential basis in order to help fulfil either the Commissioner’s formal complaints investigation role or for audit purposes.

How we will handle your Application

We will deal with your application as quickly as possible and will advise you of the likely timetable at each stage. After the closing date for applications:

- your application and CV will be assessed to see whether you have the expertise required at the appropriate level for the post for which you have applied. We will rely on only the information you provide on your application form and CV to assess whether you have the experience required. Please ensure that you provide evidence to support how you meet all of the relevant criteria, which are identified in the overview section;
- the selection panel will be Una O’Brien, Permanent Secretary, Department of Health (Panel Chair), Malcolm Grant, Chair, NHS Commissioning Board (Panel Member), Ed Smith, Audit Chair, NHS Commissioning Board (Panel Member), Sally Brearley, Lay Member, National Quality Board (Panel Member) and Moira Rankin as External Panel Member;

- if you are invited to interview but are unable to attend on the set date then an alternative date can only be offered at the discretion of the panel;
- your application may be “long-listed”, subject to the volume of applications received, before it is passed to the shortlisting panel for consideration. You should be aware that in this situation, your application might not be considered in full by all of the panel;
- we anticipate that by 16 May 2012 the panel will have decided who will be invited for interview on 22 May 2012;
- the panel will select the people who have demonstrated that they best meet the essential criteria. If there is a strong field of candidates the panel may then look at who in addition, meets any desirable criteria for the role in order to differentiate between those who would otherwise be of similar merit;
- we will write 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 panel will question you about your experience and expertise and ask questions to find whether you meet the specific criteria set out for the posts;
- candidates who the panel believe are ‘appointable’ will be recommended to the Secretary of State for Health who will make the final decision. The Secretary of State for Health may choose to meet with appointable candidates before making a decision. If he does, he will meet all candidates and in the presence of the panel chair (or their nominated representative);
- if you are successful, you will receive a letter from the Secretary of State for Health appointing you as a Non-Executive Director of the NHS Commissioning Board; and
- if you are unsuccessful, you will be notified by the Appointments Team. The letter will provide the details of who you may approach for feedback on your application.

Queries

For queries about your application, please telephone Holly Wainwright on 0113 254 6135 or at holly.wainwright@dh.gsi.gov.uk.

Regulation by the Commissioner for Public Appointments

We noted above the role of The Commissioner for Public Appointments regarding audit. The Commissioner regulates and monitors appointments to public bodies to ensure procedures are fair. More information about the role of the Commissioner and his Code of Practice is available from www.publicappointmentscommissioner.org

If you are not completely satisfied

The Department of Health 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 Jacky Cooper in the Department of Health by emailing Jacky.Cooper@dh.gsi.gov.uk

If, after receiving a comprehensive response you are still concerned, you can write to the Commissioner for Public Appointments. Please contact:

The Commissioner for Public Appointments
1 Horse Guards Road
London SW1A 2HQ

Tel: 0207 271 0849

Email: enquiries@publicappointmentscommissioner.org