

UK Pharmacy Professional Leadership Advisory Board: Independent Chair

Information Pack for Applicants

Closing date: 23:59 on Thursday 31 July 2025

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Section 1 - The Role

1.1 Organisation description

1. The Department of Health and Social Care (DHSC) leads the nation's health and social care to help people live more independent, healthier lives for longer.

2. The UK Chief Pharmaceutical Officers (CPhOs) are the heads of the pharmacist and pharmacy technician professions in England, Scotland, Wales and Northern Ireland, a workforce of highly trained, registered professionals in hospitals, community healthcare, general practices and community pharmacies.

3. The CPhOs are the principal advisors on pharmacy and medicines use in the NHS, which includes supporting the DHSC (and its equivalent in the home nations). They work collaboratively across the healthcare system and with national stakeholder organisations to influence, promote, and support the delivery of the highest possible standards of professional pharmacy practice to continue to drive up the quality of patient care and health and well-being.

4. They provide professional and clinical leadership and advice on policies and programmes across a wide range of healthcare areas involving medicines, pharmacy, education, workforce and professional practice. This includes professional advice on medicines and professional practice to colleagues in government and the regulators.

1.2 Role description and person specification

Background:

5. The DHSC has established a collaborative, independent UK Pharmacy Professional Leadership (PPL) Advisory Board which has developed an inclusive federation of existing UK pharmacy professional leadership bodies (PLBs) and specialist professional groups (SPGs), with an Independent Chair and Expert Members, to lead delivery of the UK Commission on Pharmacy Professional Leadership's [recommendations](#).

6. To effectively carry out its remit and provide future-focused leadership to the pharmacy professions, the Board has been established as an independent public body; and therefore the advice provided is impartial. Working within its remit, the Board sets its own agendas and provides advice to the PLBs and SPGs which are its constituent members. In addition, the Board, led by the Independent Chair, responds in a flexible and agile way to additional requests from the UK CPhOs for expert advice on professional leadership.

7. The appointments process for the Independent Chair and Expert Members of the Board is led by the CPhOs and gives due consideration to how the Board communicates and works effectively at a UK level, and across country and regional levels. The UK Commission report recommended that they, as heads of profession across the four UK nations, make the appointments given their recognised professional leadership role and to ensure independence. The aim is to create the best environment so that PLBs and SPGs focus on and develop stronger effective arrangements for professional leadership to enable delivery of better outcomes for patients.

8. The purpose is to enable the PLBs and SPGs, supported by an Independent Chair and Expert Members with outstanding leadership capabilities, to develop an effective voice for UK PPL in the interests of patients and the public over three years.

9. The appointment of the first Independent Chair, Sir Hugh Taylor, was made in October 2023 and the Board has held quarterly meetings since April 2024. Sir Hugh Taylor is retiring from the role in September 2025.

10. The Board's primary mission and role is advisory: to provide leadership, assurance and support, foster collaboration, and so help ensure high standards of patient safety and quality of care.

Board Membership:

11. The [current Board membership](#) is set out on the website.

12. The Independent Chair advises the UK CPhOs on the appointment of Independent Expert Members.

13. The Board is supported by a Secretariat.

Remit of the Independent Chair:

14. The Independent Chair will lead delivery of an ambitious vision set out by the UK Commission for supporting and enabling collaborative working, and developing the authoritative voice and the future arrangements for PPL, that will contribute to the ambition to realise the future potential of pharmacy professionals in the NHS and other settings, and build and maintain the confidence of the public in their new roles and competencies.

15. In keeping with the recommendations in the UK Commission's report, the Board's functions are:

- To develop and oversee a three-to-five-year programme to implement the five key recommendations of the UK Commission;
- To support and steer the transition to a sustainable and effective structure of PPL across the UK.

16. The outputs required are:

- The Board will provide the UK CPhOs with monthly reports on progress and recommendations.
- The Board will be responsive to wider pressures, changing needs and priorities by reporting in a reactive and agile way when required.
- Reports from the Board will include:
 - A summary of the group's work, including engagement activities;
 - The development of the UK Commission's recommendations into a three- to five-year strategy to be delivered by the professional leadership bodies (PLBs) and specialist professional groups (SPGs) involved in the Board;
 - Transitional arrangements for collaborative working and the future arrangements for PPL, including relevant changes to governance of existing bodies.

17. Objectives:

- The Independent Chair will:
 - a) Leadership, policy and professionalism:** Convene a transitional, collaborative UK PPL Advisory Board tasked with developing an inclusive federation involving existing UK pharmacy PLBs and SPGs, with other independent expert members. The Board will lead delivery of the UK Commission on PPL's vision and recommendations for the benefit of patients and the public. This professional leadership framework will include robust processes for governance and accountability, and outline a clear identity for the Board and its unique proposition and goals.
 - b) Regulatory support:** Through the Board, continue to facilitate the development of professional standards to support the practice of pharmacy to develop in the public interest, with standards on professional values and behaviours a priority. PLBs and SPGs are expected to have a 'duty to collaborate' with each other and the regulators and to manage conflicts of interest effectively. The development of standards would include a process to quality assure, accredit, update or endorse professional standards including standards developed by special interest groups or faculties.
 - c) Regional, country and international relations and engagement:** Through the Board, lead an approach to develop a coordinated and authoritative voice for PPL, enabling Board members to work together to support and develop greater engagement with priority audiences including:
 - Patients, the public, governments and third parties.
 - Pharmacy PLBs, SPGs and individual pharmacy professionals across all career stages.
 - Across countries (including internationally) and with other professions.
 - d) Scope of practice for future pharmacy professionals:** Through the Board, enable PLBs and SPGs to be aspirational for and optimise the contribution of pharmacy professionals, supporting the vital role and expertise of pharmacy professionals in the safe and effective use of medicines, promoting excellence,

and championing research, clinical academic development, innovation and the development of new areas of practice, and supporting their adoption. This includes putting in place the infrastructure to keep abreast of current and emerging research, medicines and practice; and commissioning scopes of practice, best practice standards and guidance. The work would need to include and represent the diversity of patient- and non-patient facing practice within the professions across the continuum of pharmacy and medicines practice, supported by visible role models.

e) Professional education and training: Through the Board, contribute to the collaborative development of aligned UK curricula for post-registration education and training for integrated pharmacist and pharmacy technician practice. This will include: post-registration practice standards; credentialing or its equivalents, linked to the further development of career pathways including specialisms; and an assessment process aligned to current and future service need. There is a need to facilitate a UK educational infrastructure to support recording and assessment of post-registration education and training activities for pharmacists and pharmacy technicians and ensure equity of access for both professions to enhance professional mobility.

f) Structure of PPL: Over time through the Board consider a range of options for this which may include:

- No change, but continue the federal framework and Board. The advantage of this is that it is low cost, and does not cause disruption; however, it may maintain the status quo and risks stagnation of progress – and fail to secure the collaboration necessary to achieve what is needed for the public, and pharmacy professions, emphasised as important by the UK Commission.
- A single PLB offers to provide the infrastructure to host others on more equal terms. This may lead to a more formal amalgamation of existing bodies in due course in the form of faculties.
- A new PLB or royal college, with formal representation from all PLBs and SPGs of adequate size and governance. This could develop into a UK College of Pharmacy, or a UK Academy of Pharmacy Professionals; such a body could seek formal Royal status from the Privy Council in due course.

18. Scope of the role:

- The Board's primary mission and role is advisory: to provide leadership, assurance and support, foster collaboration, and so help ensure high standards of patient safety and quality of care. Constituent bodies remain sovereign; they choose to join and could choose to leave. PLB and SPG members comprise organisations that have as their primary purpose one or more professional leadership functions for a group of pharmacy professionals for the benefit of patients and the public.
- The Board involves a formal collaboration of pharmacy PLBs and SPGs, rather than a merger, and is accountable to the professions via the PLBs and SPGs.
- In this context, the term 'federal' does not imply concentration of power in a central body, but an arrangement to enable organisations to work together effectively, while

maintaining their separate identities and undertaking their own activities independently. The Board ensures a single authoritative voice for the professions when needed, but also allows for individual voices and requirements of the different professions and specialist groups. With respect to its ways of working, governance, accountability and reporting arrangements, it has a robust governance framework in place to ensure objectives are delivered.

- All organisations, which are part of the Board, are equal partners and have appropriate representation on the Board, having their views and opinions considered in the development of a common identity and goals.
- Membership is broad and balanced, includes under-represented groups, and comprises people with outstanding expertise and credibility in their area of professional expertise or practice. Members have the appropriate leadership skills and experience.
- The Board works collaboratively with stakeholders across the UK and internationally to foster authoritative, credible and high-quality leadership, which is vital for the public, patients and the pharmacy professions and the UK pharmacy, medicines and public health agenda.
- An inclusive Pharmacy Stakeholder Forum has been created to ensure pharmacy bodies and others with a direct interest in the work of the Board are heard, including regulators, pharmacy trade bodies, trade unions, patient groups, education bodies.
- The necessary culture change will take time so a three to five-year transition period will be needed to deliver on the Commission's recommendations and create consensus on important issues.

Role and responsibilities of the Independent Chair:

19. The role of the Chair is to lead and steer the Board, provide leadership, support and guidance to the organisations involved, and enable collaborative delivery of the UK Commission's recommendations and the remit of the Board.

20. The Chair has the following responsibilities:

- Inform the appointment of the Independent Expert Members of the Board;
- Deliver the agreed tasks of the Board;
- Set the Board's agendas and work programme, informed by input from other Board members;
- Steer the discussions according to the Board's overall role and individual meeting agendas;
- Ensure the Board functions and acts in an inclusive manner, and delivers in the interests of patients and the public;
- Undertake meetings with third parties to encourage the strongest sense of broad involvement of pharmacy professionals and other stakeholders;

- Keep the group discussion unified, inclusive of all members and discourage disruption or dominance by any members;
- Encourage constructive debate, without forcing agreement;
- Prevent repetitive debate;
- Summarise the main points and key decisions from the debate;
- Sign off meeting minutes once approved by the Board;
- Sign off communications from the Board, including the annual report;
- Report to the CPhOs on a monthly basis and to the PLBs and SPGs, as necessary, in addition to the regular communication between the Board and the PLBs and SPGs through their respective representative on the Board.

Essential Criteria:

21. It is essential that the individual appointed to this role is of the highest calibre, with appropriate experience of healthcare leadership and professional practice, with the required skillset for negotiating and establishing the governance framework needed for effective collaboration, working in the interests of patients, and with the ability to lead the professional engagement that is required. To be considered for appointment, you must be able to demonstrate that you have the qualities, skills and experience to meet all the essential criteria.

22. Lead Criteria: Outstanding track record in healthcare leadership in the UK, nationally within government, the NHS or the wider healthcare sector.

23. Other essential criteria:

- Experience as a Board-level Chair or Deputy Chair (including voluntary positions), involving establishing comprehensive governance frameworks.
- Extensive negotiating and influencing skills and experience of successfully leading partnership-based, collaborative initiatives involving a diverse range of partners.
- Proven track record of securing engagement and respect within the health professions to achieve constructive collaboration and the delivery of effective, sustainable pharmacy leadership arrangements for the future.
- Ability to provide constructive challenge and feedback to bring an independent perspective to the Board's work.
- Experience of ensuring a board functions and acts in an inclusive manner, and delivers in the interests of patients and the public.
- Ability to represent a high-profile board across different stakeholders in national settings.

24. In order to ensure the independence of the Chair's role, those who are currently registered, or have been registered, as pharmacists and pharmacy technicians will not be eligible for the role.

1.3 Remuneration

25. Remuneration will be at a rate of £2,000 per month, payable for 4-6 days' work, plus expenses, in accordance with Cabinet Office guidance.

26. Payment will be made within two weeks of receipt of an invoice or payment request which will include expenses (with receipts) and VAT if applicable. The Independent Chair will be asked to provide the relevant details to NHS England's CPhO Office team in order to be entered onto NHS England's payment system.

27. The individual is not an employee of NHS England. You will not become a member of the Civil Service. You will not be subject to the provisions of employment law.

28. This does not attract any benefits under any Pension Scheme. You will not be eligible for redundancy pay as you are not an employee. No other arrangements have been made for compensation upon termination because an office holder who is appointed for a limited duration would have no expectation of serving beyond that period.

1.4 Accountability

29. The Independent Chair reports to the UK CPhOs.

30. The Board is established as a Public Body, in keeping with Cabinet Office Guidance¹, as a Non-Administratively Classified Government Entity akin to an Expert Committee. Working within its remit, the Board is able to set its own agendas and provide advice, without seeking Government approval. The advice provided is impartial and apolitical.

31. The Board is independent of but established by a government department. As such, ultimately accountability for the Board to parliament is through ministers. The Board will report through the Independent Chair to the four UK CPhOs, as government officials, and on to their respective government departments.

32. Given the responsibility of the Board to facilitate the strengthening of pharmacy professional leadership through the collaboration of the PBLs and SPGs to implement the

¹ [Cabinet Office - Public Bodies Handbook - Part 1](#): The Board is a Non-Administratively Classified Government Entity akin to an expert committee.

UK Commission report, formally the independent Chair will also report to the PLBs and SPGs that form the Board. On a day-to-day basis, communication between the Board and the PLBs and SPGs will be through their respective representative on the Board.

33. In practice, the provision of UK advice to Government would be an occasional function, as and when needed, and only where other, existing bodies do not already suffice.

1.5 Time commitment

34. The role is intended to begin in September 2025, to allow a handover with the current Independent Chair, and following the successful completion of onboarding, including pre-appointment checks and security clearance. The role is conducted on a part time basis involving 4-6 days' work per month.

1.6 Location

35. The postholder must be UK based and able to conduct Board meetings in person in London each quarter, but will also be able to work remotely/from their usual working location.

1.7 Tenure of office

36. The role will be from September 2025 to March 2027, but could be subject to extension or renewal.

Section 2 - The Recruitment

2.1 How to apply

37. Thank you for your interest in the appointment of the Independent Chair for the UK PPL Advisory Board. NHS England is managing this recruitment.

38. If you wish to express your interest in the role, please email your CV and a supporting Letter in one document to england.cpho-office@nhs.net – please put “UK PPL Advisory Board” in the subject line of your email application.

39. Applications must be received by: 23:59 on Thursday 31st July 2025.

40. In making an application, please note the following:

CV

Please ensure your CV includes:

Your full name, title, home address, personal contact telephone numbers (mobile and, if applicable, a land line), personal email address and details of any social media accounts and LinkedIn accounts, including your social media handles/usernames.

Brief details of your employment and other experience (e.g. voluntary roles) and details of any past or present Ministerial appointments.

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. Referees would be approached prior to formally offering you the role.

Please limit your CV to two sides of A4 in size 12 font.

Supporting Letter

The supporting letter is your opportunity to demonstrate how you meet each of the essential criteria set out in the person specification, what you will bring to the role and your ambition for the role.

We recommend that you are clear which specific evidence you provide relates to which criterion. Providing separate paragraphs in relation to each criterion is common practice. Please ensure your full name and the role you are applying to are clearly noted at the top of your letter. Please write all acronyms in full first, and limit your letter to two sides of A4 in size 12 font.

Conflicts of Interest

If you or a party related to you have any interests which could lead to a real or perceived conflict of interest if you were to be appointed, please provide details in your supporting letter. This can be in addition to the two-page limit.

Conflicts of interest may include (without limitation), any personal or business interests (including direct and indirect financial interests), positions of employment, other appointments or other positions of authority, that you or any party related to you have and which may influence your judgement in performing your appointment or may be perceived by a reasonable member of the public as having scope to do so.

A 'party related to you' could include for example (but without limitation) a spouse/partner, a business partner, a close family member or a person living in the same household as you or a close family member.

Failure to declare a potential conflict of interest may become grounds for withdrawing an offer of appointment. If offered the role, you will also be required to make a Declaration of Interests and to keep the Declaration up to date throughout the tenure of your appointment. The requirement to declare interests will also be included in your Terms and Conditions of appointment. Failure to disclose an interest may, subject to the interest and the circumstances, become grounds for suspension or termination of your appointment.

Standards in public life and ensuring public confidence

If there are any issues in your personal or professional history (including any convictions or bankruptcy) that could, if you were appointed, be misconstrued, cause embarrassment to Ministers or cause public confidence in the appointment to be jeopardised, it is important that you bring them to our attention and provide details of the issue/s in your supporting letter.

In considering whether you wish to declare any issues, you should also reflect on any public statements you have made, including through social media and blogs. Due diligence may be carried out on any publicly available information.

Failure to disclose such information could result in an appointment offer being withdrawn or the appointment being terminated, as the person appointed to this role will be expected to demonstrate the highest standards of corporate and personal conduct and in line with principles set out in the Code of Conduct for Board Members of Public Bodies, which includes the Nolan Principles regarding conduct in public life. As part of agreeing to the Terms and Conditions of appointment you will be expected to agree to meeting the principles set out in this Code. You can access this document at

<https://www.gov.uk/government/publications/board-members-of-public-bodies-code-of-conduct>.

Security Clearance

An offer of appointment will be conditional until relevant security checks have been completed. This process is referred to as BPSS (Baseline Personnel Security Standard) and is undertaken by HR and the Government Recruitment Service as part of the onboarding process.

In addition, additional checks may be required in order to access restricted systems, information or sites. These checks form the National Security Vetting (NSV) process and provide an individual with an additional clearance level. However, where this applies, candidates will be notified during the appointment process. Further information on National Security Vetting can be found on the Gov.uk website [here](#).

Eligibility Criteria

In general, you should have the right to work in the UK to be eligible to apply. There are a small number of specialist roles that are not open to non-British citizens. Any nationality requirements will be specified in the vacancy details.

The Government expects all holders of public office to work to the highest personal and professional standards.

You cannot be considered for appointment if:

- You are disqualified from acting as a company director (under the Company Directors Disqualification Act 1986);
- Have an unspent conviction on your criminal record;
- Your estate has been sequestrated in Scotland or you enter into a debt arrangement programme under Part 1 of the Debt Arrangement and Attachment (Scotland) Act 2002 (asp 17) as the debtor or have, under Scots law, granted a trust deed for creditors.

When you apply, you should declare if:

- You are, or have been, bankrupt or you have made an arrangement with a creditor at any point, including the dates of this.
- You are subject to a current police investigation.
- You must inform the sponsor department if, during the application process, your circumstances change in respect of any of the above points.

When you apply you should also declare any relevant interests, highlighting any that you think may call into question your ability to properly discharge the responsibilities of the role you are applying for. You should also declare any other matters which may mean you may not be able to meet the requirements of the Code of Conduct of Board Members.

2.2 Application process

41. We will deal with your application as quickly as possible and will advise you of the likely timetable at each stage.

Planned timetable:

Closing date: 23:59 on Thursday 31st July 2025.

Panel Sift: W/c 4th August 2025.

Panel Interviews: Monday 18th and Wednesday 20th August 2025.

Confirmed appointment: from September 2025.

42. All applications will be assessed against the essential criteria in the published person specification in this document. The applications will be sifted and shortlisted, and successful candidates will be invited to interview. The assessment panel for the interviews will include:

- David Webb, Chief Pharmaceutical Officer for England
- Liz Fidler, Senior Professional Lead – Pharmacy Technician Practice, NHS England
- Natalie Grosvenor, HR Advisor, NHS England
- Cathy Harrison, Chief Pharmaceutical Officer for Northern Ireland
- Nonyelum Okonkwo, Healthcare consultant and former President of the British Pharmaceutical Students' Association.

43. We will notify you of the status of your application. We regret that due to the volume of applications received, we are only able to offer feedback to candidates who have been unsuccessful at the interview stage.

2.3. How we will manage your personal information

44. Your personal information will be held in accordance with the General Data Protection Regulation. You will not receive unsolicited paper or electronic mail because of sending OLS any personal information. No personal information will be passed on to third parties for commercial purposes.

45. 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.

46. 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.

2.4. Diversity

47. We are committed to increasing the diversity of our leadership and bringing in talent, regardless of its origins. We encourage applications from all candidates regardless of ethnicity, religion or belief, gender, sexual orientation, age, disability or gender identity. We particularly welcome applications from people with ethnicity, gender and disability characteristics currently underrepresented.

48. We are a member of the Government's Disability Confident scheme. We use the Disability Confident scheme symbol, along with other like-minded employers, to show our commitment to good practice in employing people with a disability. The scheme helps recruit and retain disabled people.

49. As part of implementing the scheme, we guarantee an interview for anyone with a disability whose application meets the minimum criteria for the role and who has asked that their application is considered under the scheme. Indicating that you wish your application to be considered under the scheme will in no way prejudice your application. By 'minimum criteria,' we mean that you must provide evidence which demonstrates that you meet the level of competence required under each of the essential criteria, as set out in the job-advert. When you apply you should indicate if you would like your application considered under this scheme.

50. Adjustments: All candidates are entitled to request reasonable adjustments at any stage of the application process. If you would like to discuss reasonable adjustments prior to submitting your application, please contact: england.cpho-office@nhs.net

2.5. Contact details

51. We aim to process all applications as quickly as possible and to treat all applicants with courtesy.

52. If there is anything further you would like to discuss or if you require further assistance when making this application, please email: england.cpho-office@nhs.net

53. If you would like to make a complaint regarding your application, please contact the Chief Pharmaceutical Officer's Team at NHS England at: england.cpho-office@nhs.net. They will acknowledge your complaint upon receipt and respond within 15 working days.

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