

Chair

Candidate Brief
October 2021



Welcome to our Trust

On behalf of the Council of Governors, we are delighted that you are interested in the Chair role at North West Anglia NHS Foundation Trust. It is an exciting time for the Trust as we continue to grow and develop to meet the needs of the 850,000 population we serve. We are conscious that this recruitment comes at a time of transformational change for our Trust and for the Cambridgeshire and Peterborough system

In leading the board, the Chair must visibly and consistently demonstrate a commitment to developing and maintaining a healthy organisational culture and environment built on trust; openness; honesty; integrity; and inclusivity, and which promotes collaborative, system-level leadership that is focused on the best interests of all patients and service users and the wellbeing of all our staff.

The Trust has an annual turnover of c.£575m. It includes three main hospitals in Peterborough, Huntingdon and Stamford. We also provide Outpatient and Radiology services at Doddington Hospital and Princess of Wales Ely, plus radiology at North Cambs Hospital, Wisbech and the City Care Centre in Peterborough. We are a busy Trust, with nearly 7,000 staff members and c.500 volunteers.

We continuously strive to ensure our patients receive the right care, first time, every time. We are a key partner in the Integrated Care System for Cambridgeshire and Peterborough and the role includes providing system leadership as member of its Partnership Board. The Trust also provides leadership in the North Integrated Care Partnership and we also work closely with neighbouring partners in Lincolnshire and Leicestershire and Rutland.

This is an exciting opportunity to join our board and influence the future of the Trust and the healthcare we provide. Therefore, if you are looking to contribute to delivering outstanding care in an environment which is challenging and growing, we would encourage you to consider becoming the Chair at North West Anglia NHS Foundation Trust.

Yours faithfully,



Rev. Kevin Burdett
Lead Governor



Mr. Rob Hughes
Chairman

Our Vision

“Working together to be the best at providing outstanding care for local communities.”



Our Values

Following feedback from staff, public and patients at our three hospitals we have agreed our shared values for the Trust. From a long list of values, staff selected the most important ones.

Our staff live to these values through our ‘personal responsibility framework’, which outlines how staff are expected to behave.



Our Trust

Three hospitals make up North West Anglia NHS Foundation Trust, whilst retaining their individual names and identity.



Peterborough City Hospital is a state-of-the-art facility built in 2010. It has 701 beds including a Radiotherapy Unit, an Emergency Centre with a separate children's emergency department, a dedicated Won and Children's Unit, an expanded Cardiac Unit, alongside a new respiratory investigations facility.



Hinchingsbrooke Hospital, Huntingdon has 298 general and acute beds, a dedicated Treatment Centre with an additional 21 beds for day cases, alongside 25 cabins in the procedure unit. It has an Emergency Department, Maternity Centre with 40 beds and dedicated facilities for private patients.



Stamford and Rutland Hospital, Rutland has a 22-inpatient bed step-up-step-down unit, outpatient clinic services, a minor injury unit, day-case surgery and is the base for the Trust's chronic pain management services.

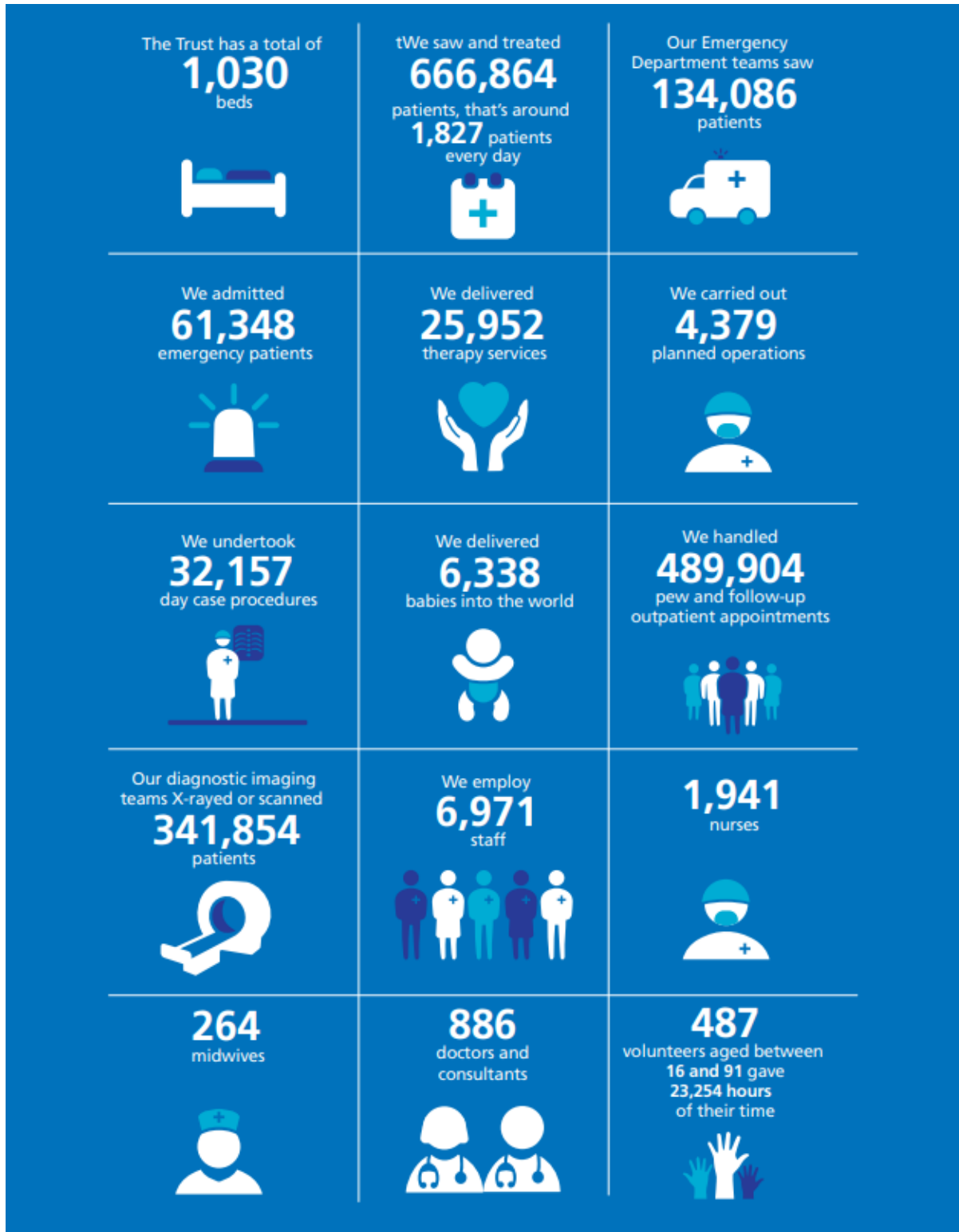
We also provide Outpatient and Radiology services at Doddington Hospital and Princess of Wales Ely, plus radiology at North Cambs Hospital, Wisbech and the City Care Centre, Peterborough.



Our Board and Governance

Find out more about our Board of Directors, Board Committee structure and Council of Governors [here](#)

Our facts and figures (2020/21)



Our Good to Outstanding programme

Our 'Good to Outstanding' Programme has developed from listening events. From these events the ideas were distilled into five workstreams.

- Patient care and experience
- People
- Communications
- Leadership
- Health and Wellbeing



Outstanding Communications



Outstanding Health and Wellbeing



Outstanding Leadership



Outstanding People



Outstanding Patient Care



Peterborough City Hospital

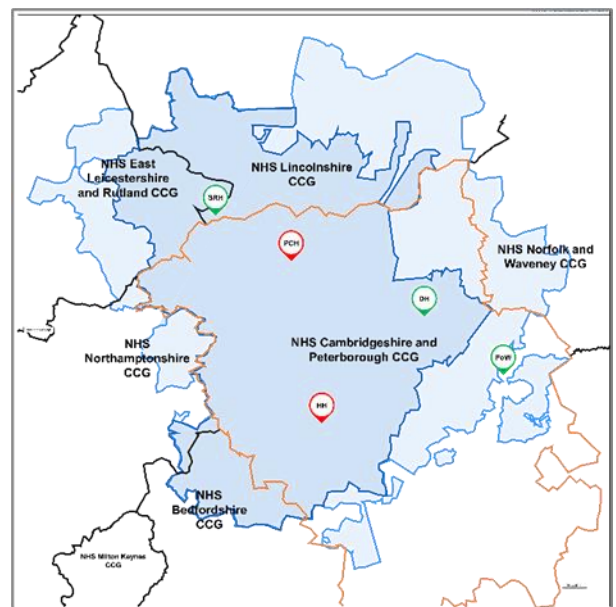


Hinchingbrooke Hospital



Stamford & Rutland Hospital

- The map on the right is an illustration of the Trust's membership area.
- Serving a diverse and growing population of 850,000
- 3 main clinical commissioning groups – Cambs and Pboro CCG, Lincs CCG, and East Leics and Rutland CCG
- 6,971 staff
- 487 volunteers, aged between 16 and 91 who gave 23,254 hours of their time in 2020-21



Cambridgeshire and Peterborough ICS

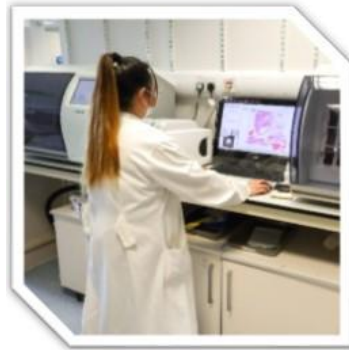
Our Integrated Care System covers all of Cambridgeshire and Peterborough. Partner organisations are committed to working together to meet health and care needs across the area and have developed a comprehensive Development Plan to support the ICS journey, within which a number of key themes and priorities have been identified. These include the prioritisation of transformation that will support backlog management and the development of an agreed clinical strategy and priorities to support better delivery of transformation.

The partners within the Cambridgeshire and Peterborough ICS include:

- Two upper tier local authorities: Cambridgeshire County Council and Peterborough City Council
- Five district councils: Cambridge City Council, East Cambridgeshire District Council, South Cambridgeshire District Council, Fenland District Council, and Huntingdonshire District Council
- Three hospital providers: North West Anglia NHS Foundation Trust (NWAAnliaFT), Cambridge University Hospitals NHS Foundation Trust (CUH) and Royal Papworth Hospital NHS Foundation Trust (RPH)
- Two community providers: Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) and Cambridgeshire Community Services NHS Foundation Trust (CCS)
- East of England Ambulance Service NHS Foundation Trust (EEAST)
- 85 GP practices
- Cambridgeshire Local Medical Committee
- Healthwatch Cambridgeshire and Peterborough
- The Cambridgeshire and Peterborough Health and Wellbeing Board
- Other partners, including parish councils as well as voluntary, community and faith organisations

More information about the Cambridgeshire and Peterborough ICS can be found [here](#).





Equality, Diversity and Inclusion

The Trust launched the Inclusion as Standard accreditation scheme in 2018. The scheme is a commitment that any patient, visitor or staff member can expect the Trust’s facilities to meet their needs regardless of disability, race, religion, additional need or any other protected characteristic.

The Trust adopts a co-production model of working to help staff develop practices and policies which affect them. In 2019, staff with care responsibilities were able to help design a new policy for staff carers which has now been sent for approval. Our staff networks are open to all staff and we have the following networks available:

- BAME staff network
- Disabled staff network
- Carers staff network
- LGBTQIA+ staff network
- Armed Forces Community

The Trust’s work and initiatives related to Equality, Diversity and Inclusion have been recognised as follows:



About the Role of the Chair

The Chair has a unique role in leading the Trust board and Council of Governors. The role combines the duty to lead effective governance, consistent with the Nolan principles and NHS values, with securing a long-term vision and strategy for the organisation. The role of Chair is a full statutory role and as such the Chair has full voting rights as a member of the Trust's Board of Directors. The Chair will be a public voice of the Trust, exemplifying our values and representing the best interests of our patients, staff and communities.

Fundamentally, the Chair is responsible for the effective leadership of the Board and the Council of Governors. They are pivotal in creating the conditions necessary for overall board and individual director effectiveness.

Central to the Chair's role are 6 key competencies:

- **Strategic:** ensuring the board sets the trust's long-term vision and strategic direction and holding the Chief Executive to account for achieving the trust's strategy; having regard to the Council of Governors' views.
- **People:** creating the right tone at the top, encouraging diversity, change and innovation, and shaping an inclusive, compassionate, patient-centred culture for the organisation.
- **Professional Acumen:** leading the board and Council of Governors, both in terms of governance and managing relationships internally and externally.
- **Outcomes Focus:** achieving the best sustainable outcomes for patients/ service users by encouraging continuous improvement, clinical excellence and value for money.
- **Partnerships:** building system partnerships and balancing organisational governance priorities with system collaboration; this role will become increasingly more important as local organisations move to delivering integrated care, prioritising population health in line with the NHS Long Term Plan.
- **Leading for Social Justice and Health Equality:** Advocates and champions for diversity, health equality and social justice. Fosters strong partnership arrangements with local government and wider partners to deliver these aims. Ensures the ICS is responsive to people and communities – and that public, patient and carer voices are embedded in all of the ICS's/ICB's plans and activities. Promotes the values of the NHS Constitution and role models the behaviours embodied in Our People Promise and forthcoming Leadership Way to ensure a collaborative, inclusive and productive approach across the system.

The relationship between the Chair and the Trust's Chief Executive is key to the role's success. The Chair must cultivate an effective working relationship with the Trust's Chief Executive. Many responsibilities in the role description will be discharged in partnership with the Chief Executive. It is important that the Chair and Chief Executive are clear about their individual and shared roles, and their respective responsibilities towards the unitary board.

The fundamental difference between these roles is that the Chair leads the board and is responsible for the non-Executive Directors' effectiveness and the board as a whole. The Chief Executive leads the organisation and is responsible for managing the Executive Directors. As a



foundation trust, the Chair also chairs the Council of Governors. This special relationship between the Chair and the Chief Executive sets the tone for the whole organisation.

Role Description

To carry out their role effectively, the Chair must cultivate a strong, collaborative relationship with the Chief Executive. Many responsibilities in this role description will be discharged in partnership with the Chief Executive. It is important the Chair and the Chief Executive are clear about their individual and shared roles, and their respective responsibilities towards the unitary board.

Together, the Chair and the Chief Executive set the tone for the whole organisation. They are ultimately responsible for ensuring that the population the trust serves and the wider system in which the organisation sits receive the best possible care in a sustainable way.

As Chair of the Council of Governors the Chair must also cultivate a strong collaborative relationship with the Lead Governor.

As member of the Cambridge and Peterborough Partnership Board the Chair must cultivate strong collaborative relationships with board members who represent Healthcare Providers, Local Government, Healthwatch and the Voluntary Sector

Responsibilities of the Chair

This detailed description of the Chair's role has been aligned with the competency framework's Six domains. While each set of responsibilities has been aligned with the competency domain most relevant to discharging that element of the role, **a good Chair will demonstrate competence in all six domains across all their responsibilities**, maintaining, for example, an outcomes focus while discharging their role as the board's facilitator.

1. Strategic

In their **strategic leadership** role, the Trust Chair is responsible for:

- ensuring the whole board of directors plays a full part in developing and determining the trust's **vision, values, strategy and overall objectives** to deliver organisational purpose and sustainability, having regard to the Council of Governors' views.
- ensuring the Trust's strategy aligns with the principles guiding the NHS and the NHS values
- ensuring the Trust's strategy informs and aligns with the Cambridge and Peterborough Integrated Care System Strategy
- ensuring the board identifies the key risks the trust faces in implementing its strategy; determines its approach and attitude to **providing effective oversight** of those risks and ensures there are **prudent controls** to assist in managing risk
- holding the Chief Executive to account for delivering the strategy and performance.

2. People

In their role **shaping organisational culture** and setting the right tone at the top, the Trust Chair is responsible for:



- providing visible leadership in developing a **healthy, open and transparent patient-centred culture for the organisation**, where all staff have equality of opportunity to progress, the freedom to speak up is encouraged, and ensuring that this culture is reflected and modelled in their own and in the board's behaviour and decision-making
- leading and supporting a **constructive dynamic** within the board, enabling grounded debate with contributions from all directors
- promoting the highest standards of **ethics, integrity, probity and corporate governance** throughout the organisation and particularly on the board
- demonstrating **visible ethical, compassionate and inclusive personal leadership** by modelling the highest standards of personal behaviour and ensuring the board follows this example
- ensuring that **constructive relationships based on candour, trust and mutual respect** exist between Executive and Non-Executive Directors and between elected and appointed members of the Council of Governors and between the board and the council)
- developing **effective working relationships** with all the board directors, particularly the Chief Executive, providing support, guidance and advice.
- promoting and developing **collaborative working relationships** in the Cambridge and Peterborough Integrated Care System with all the board directors, particularly the Chief Executive, providing support, guidance and advice.

In their role **developing the board's capacity and capability**, the trust Chair is responsible for:

- ensuring the board sees itself as a team, has the **right balance and diversity of skills, knowledge and perspectives**, and the confidence to challenge on all aspects of clinical and organisational planning; this includes:
 - regularly **reviewing the board's composition and sustainability** with the Chief Executive and the nominations committee
 - considering **succession planning** and remuneration for the board, including attracting and developing future talent (working with the board, Council of Governors and remuneration committee and Non-Executive Appointments & terms of service Committee as appropriate)
 - considering the **suitability and diversity** of non-Executive Directors who are assigned as Chairs and members of the board's committees, such that as far as possible they reflect the workforce and respective communities served by the board
 - formally appraising the Chief Executive and the Non-Executive Directors against their objectives and ensuring their personal learning and development
 - where necessary, leading in seeking the removal of non-Executive Directors and giving counsel in the removal of Executive Directors
- leading on **continual director and governor development** of skills, knowledge and familiarity with the organisation and health and social care system, to enable them to carry out their role on the board/council effectively, including through:
 - induction programmes for new directors/governors.



- ensuring **annual evaluation** of the board/council's performance, the board's committees, and the directors/governors in respect of their board/council contribution and development needs, **acting on the results** of these evaluations.
- taking account of their **own development needs** through, for example, personal reflection, peer learning and mentoring/reverse mentoring as part of the wider NHS provider Chair community.
- developing a board that is genuinely connected to and assured about staff and patient experience, as demonstrated by appropriate feedback and other measures, including the Workforce Race Equality Standard (WRES); Workforce Disability Equality Standard (WDES); and Equality Delivery System (EDS).

3. Partnerships

In their role as an **ambassador**, leading in developing **relationships** and **partnership working**, the Chair is responsible for:

- promoting an **understanding of the board's role**, and the role of Non-Executive and Executive Directors.
- representing the organisation externally, developing and facilitating strong partnerships, and promoting **collaborative, whole-system working** through engagement with:
 - patients and the public
 - members and governors of the foundation trust
 - all staff
 - key partners across public, private and voluntary sectors
 - regulators
 - other Chairs in the Cambridge and Peterborough Integrated Care system and the wider NHS provider Chair community, including where appropriate, through:
 - o integrating with other care providers
 - o identifying, managing and sharing risks
 - o ensuring decisions benefit the local population, prioritising the needs of the citizens served by the organisation at a system level
- ensuring that **effective communication with stakeholders** creates board debate encompassing diverse views, and giving sufficient time and consideration to **complex, contentious or sensitive issues**.
- facilitating the Council of Governors' work on **member engagement**, so the governors can carry out their statutory duty to represent the interests of trust members and the general public to the Trust.
- ensuring that governors have the dialogue with directors they need to hold the non-Executive Directors (which includes the trust Chair), individually and collectively to account for the board's performance.

4. Professional Acumen

In their role as **governance lead** for the board and for the Council of Governors, the Chair is responsible for:

- making sure the board/council operates effectively and understands its own **accountability** and compliance with its approved procedures – for example, meeting statutory duties relating to annual reporting.



- personally **doing the right thing**, ethically and in line with the NHS values, demonstrating this to and expecting the same behaviour from the board.
- leading the board in **establishing effective and ethical decision-making processes**.
- **setting an integrated board/council agenda** relevant to the trust's current operating environment and taking full account of the **important strategic issues and key risks** it faces; aligned with the annual planner for Council of Governors meetings, developed with the lead governor.
- ensuring that the board/council receives **accurate, high quality, timely and clear information**, that the related assurance systems are fit for purpose and that there is a good flow of information between the board, its committees, the council and senior management.
- ensuring board committees are properly constituted and effective.
- for foundation trusts: leading the board in being accountable to governors and leading the council in holding the board to account.

In their role as **facilitator** of the Board and of the Council of Governors the Chair is responsible for:

- providing the environment for agile debate that considers the big picture.
- ensuring the board/council collectively and individually applies **sufficient challenge**, balancing the ability to seize opportunities while retaining robust and transparent decision-making.
- facilitating the **effective contribution** of all members of the board/council, drawing on their individual skills, experience and knowledge and in the case of non-Executive Directors, their independence.
- working with and supporting the **trust board secretary** in establishing and maintaining the board's annual cycle of business.
- liaising with and consulting the **senior independent director**

5. Outcomes Focus

In their role as a **catalyst for change**, the Chair is responsible for:

- ensuring all board members are well briefed on **external context** – e.g. policy, integration, partnerships and societal trends – and this is reflected in board/council debate.
- fostering a **culture of innovation and learning**, by being outward-looking, promoting and embedding innovation, technology and transformation through the board/council's business, debate and learning and development
- promoting **academic excellence and research** as a means of taking health and care services forward.
- ensuring performance is accurately measured against constitutional and Care Quality Commission 'well-led' standards.
- ensuring performance on equality, diversity and inclusion for all patients and staff is accurately measured and progressed against national frameworks, including WRES, WDES and EDS.



- above all, ensuring the board maintains an unrelenting interest in and focus on the continuous improvement and self-assessment of patient safety, experience and clinical outcomes.

6. **Leading for Social Justice and Health Equality**

- Understanding of different sectors, groups, networks and the needs of diverse populations.
- An awareness and appreciation of social justice and how it might apply within the NHS and in our Trust.
- Ability to remain independent and neutral to provide independent and unbiased leadership of the board.
- Creates and lives by the values of openness and transparency.



Person Specification

This describes the skills, experience and attributes required or desirable for fulfilling the role of Chair of an NHS provider trust.

Required Skills, Experience and Attributes

Values

- A clear commitment to the NHS and the Trust's values and behaviours.

Strategic

- Experience of leading and delivering against long-term vision and strategy
- Experience leading transformational change, leading complex organisations, budgets and people

People

- Strong interpersonal, communication and leadership skills
- Experience of building effective teams, encouraging change and innovation and shaping an open, inclusive and compassionate culture through setting the right tone at the top and championing diversity at, and across, all levels
- Strongly focused on the experience of all staff and patients
- Fully attentive towards issues of equality, diversity and inclusion

Professional acumen

- Prior board experience (any sector, executive or Non-Executive role)
- Evidence of successfully demonstrating the NHS provider Chair competencies in other leadership roles
- An ability to identify and address issues, including underperformance, and to scrutinise and challenge information effectively for assurance

Outcomes focus

- A demonstrable interest in health and social care and a strong desire to achieve the best sustainable outcomes for all patients and service users through encouraging continuous improvement, clinical excellence and value for money
- Strong understanding of financial management, with the ability to balance the competing objectives of quality, operational performance and finance
- An appreciation of constitutional and regulatory NHS standards

Partnerships

- Experience in building effective partnerships and collaborative relationships outside the organisation
- A desire to engage with the local population and to collaborate with senior stakeholders across the health and care system



- Experience managing conflict, finding compromise and building consensus across varied stakeholder groups with potentially conflicting priorities

Desirable experience

- Prior experience as Chair of a Board or Non-Executive Director in any sector
- Professional qualification or equivalent experience
- Prior senior experience of complex organisations outside the NHS, i.e. private sector, third sector or other public sector providers of similar complexity.

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

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

Essential Criteria

Below are the essential criteria that all candidates must meet:

1. Independence
On appointment by the Council of Governors, the Chair must meet the independence criteria set out in B.1.1 of the Foundation Trust Code of Governance.
2. Fit and Proper Persons Test
Appointment as a Non-Executive Director including as Chair is subject to Condition G4 of the Trust's NHS Provider Licence concerning 'Fit and Proper Persons'.
3. Connection to Local Community
Preference will be given to candidates living within the Trust's membership area. Exceptional candidates living outside the membership area will be considered.
4. Required Skills, Experience and Attributes
The person specification above details the skills, experience and attributes required for this role.

Time Commitment Required for the Role

You will be expected to devote whatever time is reasonably necessary to carry out Trust business and which is appropriate to the role of Chair. On average, this role requires a minimum of three days per week; but a degree of flexibility is necessary. This will include attendance of the following:

- i. meetings of the Board of Directors and relevant Board committees;
- ii. meetings of the Council of Governors;
- iii. meetings of the Cambridge and Peterborough Integrated Care Partnership Board
- iv. oversight meetings with NHSE/I



- v. any relevant training and/or induction sessions;
- vi. representing the Trust at multi-agency events and meetings; and
- vii. participating in a programme of visits throughout the Trust.

Remuneration

Remuneration is set by a delegated committee of the Council of Governors and ratified by the Council of Governors. It is currently set at **£58,500 per annum** and is subject to periodic review by the Non-Executive Directors Appointments and Terms of Service Committee; a standing committee of the Council of Governors.

Remuneration is taxable and subject to class 1 National Insurance contributions. It is not pensionable.



Process & Timescales

Closing date	Monday 15 th November 2021
Preliminary Interviews with GS	Monday 22 nd November 2021
Final panel interview	Thursday 9 th December 2021

Please note that at first interview with GatenbySanderson, you will be required to provide proof of identity and, where necessary, permission to work in the UK.



How to Apply

For a confidential discussion please contact our recruitment advisers at GatenbySanderson:

Melanie Shearer, Partner

E: melanie.shearer@gatenbysanderson.com

T: +44 (0) 7785 616 548

The closing date for applications is **Monday 15th November 2021**

Candidates will be selected for interview based on how closely they demonstrate their skills and experience in relation to the job description and person specification.

Applications should be made via the GatenbySanderson website:

www.gatenbysanderson.com

Applications should include:

- A **Supporting Statement** explaining why the appointment interests you, how you meet the appointment criteria and what you specifically would bring to the post (no more than 2 sides of A4).
- Your response to the competency questions.
- A **Curriculum Vitae (CV)** with education and professional qualifications and full employment history. It is also helpful to have daytime and evening telephone contact numbers and e-mail addresses, which will be used with discretion. The CV should include names and contact details of three referees. References will not be taken without applicant permission.
- All candidates are also requested to complete an **Equal Opportunities Monitoring form** which will be available upon submission of your online application. This will assist North West Anglia NHS Foundation Trust in monitoring their selection decisions to assess whether equality of opportunity is being achieved. The information you give us will be treated as confidential and is for monitoring purposes only; it will not form part of the application process.
- The successful applicant will be subject to Occupational Health and Disclosure and Barring Service checks and is subject to the Fit and Proper Persons Requirement (FPPR). All organisations regulated by the Care Quality Commission need to ensure that successful candidates meet the Fit and Proper Persons Requirement (Regulation 5, The Health and Social Care Act 2008 Regulated Activities) Regulations Act. This means that the care provider must not appoint a director unless:
 - The individual is of good character;
 - The individual has the qualifications, competence, skills and experience which are



necessary for the relevant office or position or the work for which they are employed;

- The individual is able by reason of their health, after reasonable adjustments are made, to properly perform tasks which are intrinsic to the office or position for which they are appointed or to the work for which they are employed;
- The individual has not been responsible for, been privy to, contributed to or facilitated any serious misconduct or mismanagement (whether lawful or not) in the course of carrying on a regulated activity or providing a service elsewhere which, if provided in England, would be a regulated activity; and
- None of the grounds of unfitness specified in Part 1 of Schedule 4 apply to the individual (e.g. bankruptcy, sequestration and insolvency, appearing on barred lists and being prohibited from holding directorships under other laws);
- Good character is measured by the criteria set out in Part 2 of Schedule 4 of the Regulations;
- Whether the person has been convicted in the UK of any offence or been convicted elsewhere of any offence which if committed in any part of the UK would constitute an offence; and
- Whether a person has been erased, removed, or struck off a register maintained by a regulator of a health or social work professional body.

Find out more about us

Find out more on our website www.nwangliaft.nhs.uk

Twitter: [@NWAngliaFT](https://twitter.com/NWAngliaFT)

Facebook jobs: [North West Anglia NHS Foundation Trust Recruitment](#)

LinkedIn: [North West Anglia NHS Foundation Trust](#)

Meet the Board of Directors: <https://www.nwangliaft.nhs.uk/about-us/trust-board/>



Principles and Values Guiding the NHS

NHS Principles:

Seven key principles guide the NHS in all it does. They are underpinned by core NHS values derived from extensive discussions with staff, patients and the public. Both the principles and the values below are described in further detail in the NHS Constitution.

1. The NHS provides a comprehensive service, available to all.
2. Access to NHS services is based on clinical need, not an individual's ability to pay.
3. The NHS aspires to the highest standards of excellence and professionalism.
4. The patient will be at the heart of everything the NHS does.
5. The NHS works across organisational boundaries.
6. The NHS is committed to providing best value for taxpayers' money.
7. The NHS is accountable to the public, communities and patients that it serves.

NHS Values:

The principles above are underpinned by six core NHS values. Patients, public and staff have helped develop this expression of values that inspire passion in the NHS and that should underpin everything it does. Individual organisations will develop and build on these values, tailoring them to their local needs. The NHS values provide common ground for co-operation to achieve shared aspirations, at all levels of the NHS:

- working together for patients
- compassion
- respect and dignity
- improving lives
- commitment to quality of care
- everyone counts.

NB. Fulfilling the seven principles in line with NHS values is the responsibility of local NHS boards and the Chair has a central role in ensuring that this responsibility is fulfilled.



The 7 Principles of Public Life

NHS board members, in their capacity as public office holders, are expected to abide by the 'Nolan principles' as defined by the Committee on Standards in Public Life:

1. Selflessness

Holders of public office should act solely in terms of the public interest.

2. 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.

3. Objectivity

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

4. 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.

5. 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.

6. Honesty

Holders of public office should be truthful.

7. 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 wherever it occurs.

