



Buckinghamshire Healthcare

NHS Trust



Chair

Candidate information pack

October 2021



HUNTER

Executive talent for the healthcare sector

NHS England and NHS Improvement



Welcome

Thank you for your interest in joining Buckinghamshire Healthcare NHS Trust (BHT). We are one of the few integrated acute and community providers in the UK, looking after 550,000 residents of Buckinghamshire and the surrounding area, including Thame (Oxfordshire), Tring (Hertfordshire) and Leighton Buzzard (Bedfordshire), both in our hospitals and in their own homes.



I am proud to work with over 6,000 of our highly trained clinical staff to deliver this care supported by our corporate services. We are a regional specialist centre for burns care, plastic surgery, stroke and cardiac services and dermatology. In addition, we provide specialist spinal services at our world renowned National Spinal Injuries Centre for patients from across England and internationally.

Under the leadership of our current Chair, and the dedication of our colleagues, partners and volunteers, the Trust has been on a remarkable journey from special measures to being awarded good with outstanding for caring in the last CQC inspection in 2019.

We have a long history of working with our system partners and have the ingredients for success – a single unitary council, a largely federated general practice, a thriving voluntary sector and strong partners in mental health and the ambulance service.

This is an exciting time for a talented, visionary, new Chair to join our BHT family as we continue on our journey to achieve outstanding.

Our vision is to deliver outstanding care, healthy communities and a great place to work. To meet the changing needs of the population, especially those living in deprived areas, will require significant transformation of how we and our partners provide care. There is high demand for care and people have increasingly complex needs. In Buckinghamshire alone we are expecting significant population growth. Transforming what we do will involve developing new ways of working, creating new partnerships as well as requiring investment in new facilities, equipment, innovation and new technologies. To achieve this we have just launched a new clinical strategy which is central to the Buckinghamshire Integrated Care Partnership.

We are committed to achieving equality and inclusion by tackling health inequalities in the communities we serve and inequalities within our own workforce. We want to ensure that everyone is treated with dignity and respect and to challenge and root out discrimination. We want the Trust to be a community where our patients and our colleagues feel valued, safe and free from discrimination of any kind. We're proud to be a diversity champion, partnering with Stonewall, Europe's biggest charity supporting, advising and championing lesbian, gay, bisexual, transgender and queer (LGBTQ+) inclusion.

We look forward to reading your application.

Neil Macdonald
Chief Executive,
Buckinghamshire Healthcare NHS Trust
on behalf of Buckinghamshire Integrated Care Partnership



About Us

As an integrated Acute and Community Trust and a leading partner in health and social care across Buckinghamshire, the trust works with patients, partners and the public to maintain and improve the delivery of high quality integrated care.

The trust has around 6,000 highly-trained, qualified doctors, nurses, midwives, health visitors, therapists, health scientists and other support staff caring for more than half a million patients from Buckinghamshire and neighbouring counties every year. There are major differences in terms of health inequalities across these communities.

In line with national policy, the trust is actively working with partner organisations in the local health and social care economy and this system-working will increasingly become a major focus in setting objectives and delivering outcomes. A critical issue will be ensuring that public money is utilised effectively and clinical services are receptive and responsive to the needs of patients in quality and safety terms and providing value and the trust is currently responding to some key financial challenges as part of the transformation.

The trust delivers care in a variety of ways; from community health services provided in people's homes or from one of the local centres to hospitals at Stoke Mandeville, Wycombe and Amersham. The delivery of care through community hubs is an important part of the trust's strategy.

The nationally and internationally renowned National Spinal Injuries Centre is also the birthplace of the Paralympics. The trust's stroke service is one of the best in the region, maintaining the 'A grade' in the latest Sentinel Stroke National Audit Programme (SSNAP) and the trust is a regional centre for burns care, plastic surgery and dermatology. Within Cardiology, the trust has the first nurse angiographer in the UK. Health intelligence specialists, CHKS have ranked the trust as one of the UK's top hospitals.

The patients are at the heart of everything that the trust do, providing patients with safe and compassionate care, every time. The focus is on providing right care, right place, right time, first time and everything is aimed at delivering high quality care when and where patients need it.



Mission, strategy, values and vision

The Board approved a new strategy for 2025 which is due for public launch in September 2021. The Trust’s vision is to deliver outstanding care, healthy communities and to be a great place to work:

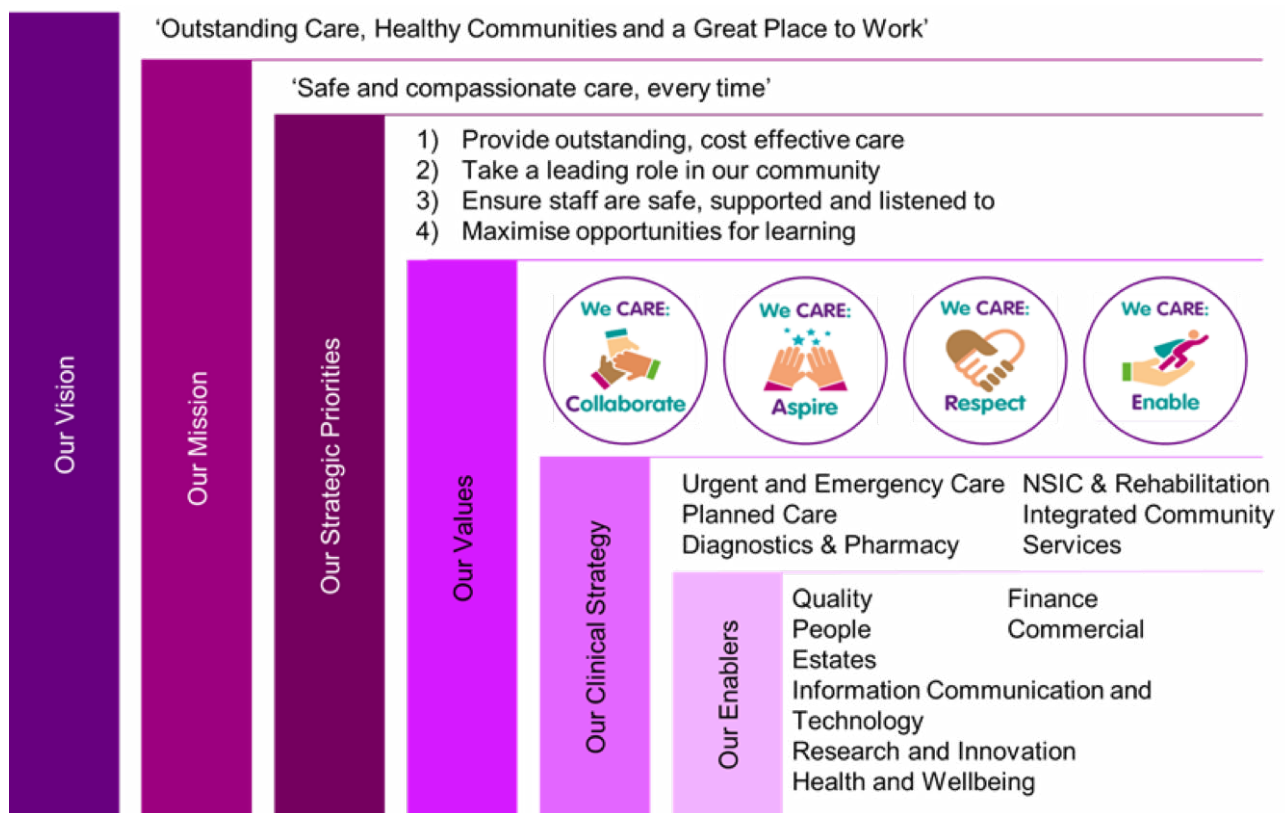
- **Outstanding care** because the trust aspire to be outstanding in everything they do and their patients deserve nothing less.
- **Healthy Communities** because they are responsible for not just patients that are referred to them but to support all communities to have healthy and fulfilling lives.
- **A great place to work** because they know if they take care of their colleagues they will take care of their patients – they want to be a place that is inclusive, diverse and compassionate and a place where they can learn and improve together.

This is underpinned by a commitment to deliver personal and compassionate care every time and a core set of CARE values.

Latest CQC Inspection of BHT

The latest CQC report was published on 18 June 2019 following a series of inspections of a number of services across the Trust. The Trust is now rated as ‘Good’ overall as well as being safe, effective, responsive and outstanding for caring. The rating for Well Led has remained at ‘Requires Improvement’.

The new rating from the CQC is an improvement on the Trust’s previous rating of ‘Requires Improvement’.



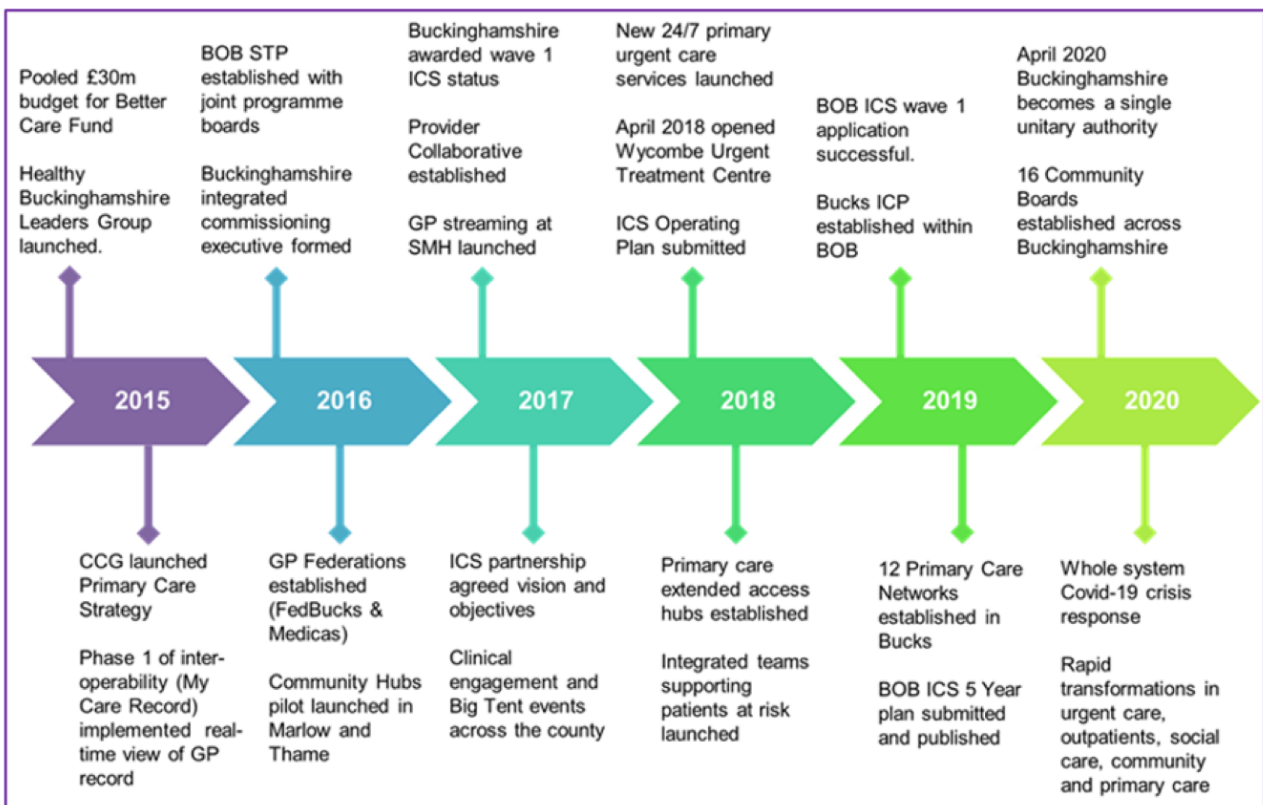
The Partnership System

BHT works within a partnership and system environments consisting of Buckinghamshire, Oxfordshire, Berkshire West Integrated Care System (ICS) and Buckinghamshire Integrated Care Partnership (ICP) consisting of BHT, Buckinghamshire Council, Oxford Health NHS Foundation Trust, the Buckinghamshire Clinical Commissioning Group, FedBucks and the South Central Ambulance Service NHS Trust.

The ICS main functions include setting and leading the overall healthcare strategy, supporting acute collaboration, primary care development, managing collective resources and performance, identifying and sharing best practice to reduce unwarranted variations in care, and leading changes that benefit from working at scale.

The ICP covers the whole of Buckinghamshire population and consists of all providers and commissioners within the county and is where the majority for changes to services are designed and delivered.

The key role of the Board is to lead and steer the Trusts input into the ICS and ICP in relation to our strategy and partnership working. The below demonstrates the Trust’s journey so far.



Board of Directors

BHT’s Board of Directors is responsible for the management of their hospitals and sets the future direction of the Trust. They are also responsible for monitoring performance against national, regional and local objectives and ensuring the highest levels of standards and performance.

One of the key roles of the NEDs is to obtain assurance that the correct governance, policies and procedures are in place and that performance is being appropriately managed at operational level. One of the ways it does this is through board committees responsible for:

- Audit
- Finance and performance
- Quality and Clinical Governance
- Strategic Workforce

There are two other board committees responsible for appointing and remunerating executive directors and for managing the charitable funds of the Trust.

Key challenges

The key challenges faced by BHT are summarised in the table below and form the case for change at the heart of the 2025 Strategy.

The Trust are experiencing challenges running acute services (including intensive care) as well as resource challenges including workforce, finance and old estates. This is in the context of the significant population growth within Buckinghamshire.

For more information regarding BHT and the BHT 2025 Strategy please visit the Trust website www.buckshealthcare.nhs.uk

 <p>Demand for Services</p> <p>Buckinghamshire’s population is growing, people are living longer with multiple illnesses.</p> <p>New housing developments, HS2 and Oxford-Cambridge Arc are all contributing to rapid population growth.</p>	 <p>Workforce Challenges</p> <p>We need to attract and retain the best people to work in health and social roles.</p> <p>The number of staff retiring, the time to train and competition for people all create workforce pressures.</p>	 <p>Financial Pressures</p> <p>There are significant financial challenges for health and social care organisations.</p> <p>We need to find new ways of working to get the best outcomes at the lowest costs with the funds available.</p>	 <p>New Models of Care</p> <p>New models of care are emerging that will mean people will access services differently.</p> <p>Some services will be delivered in new partnerships or teams and will use new technologies.</p>	 <p>Long Term Conditions</p> <p>More people are living longer with one or more long term medical condition.</p> <p>Many people manage their own conditions but often, multiple illnesses need support from more than one organisation.</p>
 <p>Technology Advances</p> <p>Advances in things like mobile technology and artificial intelligence will mean people access care differently.</p> <p>We need to invest and adapt to these innovations to deliver the best value care.</p>	 <p>Meeting Standards</p> <p>Even as demand rises we need to find ways of diagnosing and treating people as swiftly as possible.</p> <p>We need to transform how we work to meet national waiting time standards.</p>	 <p>Health Inequalities</p> <p>There are wide variations in years of active life and life expectancy across Buckinghamshire between the most and least deprived areas of the county.</p>	 <p>COVID-19</p> <p>The global pandemic has had widespread impacts. Its effects are likely to be felt for a long time in our lives.</p> <p>It has accelerated changes in how services are delivered and changed our behaviours.</p>	 <p>Building Constraints</p> <p>We deliver care from locations throughout the county such as hospitals, GP practices and community centres.</p> <p>Some of our buildings are old, inefficient and too small to meet the growing needs of the population.</p>



The person specification

We are looking for candidates who want to use their skills and experience to help drive the delivery of sustainable healthcare services for the people of Buckinghamshire and some surrounding areas.

These are the required skills, experience & attributes:

Values

- A clear commitment to the NHS and the trust's values and principles

Strategic

- Experience of leading and delivering against long-term vision and strategy
- Experience leading transformational change, managing 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

- 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 NED experience (any sector)
- Prior experience on an NHS board (executive, non-executive or associate role)
- Professional qualification or equivalent experience
- Prior senior experience of complex organisations outside the NHS, i.e. private, voluntary or other public sector providers of similar scale

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 are all under-represented in these important roles.



Role of the NHS Board and Chair

NHS boards play a key role in shaping the strategy, vision and purpose of an organisation. They hold the organisation to account for the delivery of strategy and ensure value for money. They are also responsible for assuring that risks to the organisation and the public are managed and mitigated effectively. Led by an independent chair and composed of a mixture of both executive and independent non-executive members, the board has a collective responsibility for the performance of the organisation.

The purpose of NHS boards is to govern effectively, and in so doing build patient, public and stakeholder confidence that their health and healthcare is in safe hands. This fundamental accountability to the public and stakeholders is delivered by building confidence:

- in the quality and safety of health services
- that resources are invested in a way that delivers optimal health outcomes
- in the accessibility and responsiveness of health services
- that patients and the public can help to shape health services to meet their needs
- that public money is spent in a way that is fair, efficient, effective and economic.



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.

Responsibilities of the chair

The chair has a unique role in leading the NHS trust board. 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.

Fundamentally, the chair is responsible for the effective leadership of the board. They are pivotal in creating the conditions necessary for overall board and individual director effectiveness. Central to the chair's role are five key responsibilities:

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
- ensuring the trust's strategy aligns with the principles guiding the NHS and the NHS values
- 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.

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
- developing **effective working relationships** 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** for the board, including attracting and developing future talent



- 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
- where necessary, leading in seeking the removal of non-executive directors and giving counsel in the removal of executive directors
- leading on **continual director 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 effectively, including through:
 - induction programmes for new directors
 - ensuring **annual evaluation** of the board performance, the board's committees, and the directors in respect of their board contribution and development needs, **acting on the results** of these evaluations and supporting personal development planning
 - 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).

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
 - all staff
 - key partners across public, private and voluntary sectors
 - regulators
 - other chairs in the system and the wider NHS provider chair community, including where appropriate, through:
 - integrating with other care providers
 - identifying, managing and sharing risks
 - 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**



Professional acumen

In their role as **governance lead** for the board, the chair is responsible for:

- making sure the board 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 agenda** relevant to the trust's current operating environment and taking full account of the **important strategic issues and key risks** it faces
- ensuring that the board 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

In their role as **facilitator** of the board, the chair is responsible for:

- providing the environment for agile debate that considers the big picture
- ensuring the board 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, 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

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 debate
- fostering a **culture of innovation and learning**, by being outward-looking, promoting and embedding innovation, technology and transformation through the board business and debate
- 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.



Chair competencies

The competency framework describes the core competencies required in the NHS provider chair's role, in the context of the NHS principles and values in the NHS Constitution.

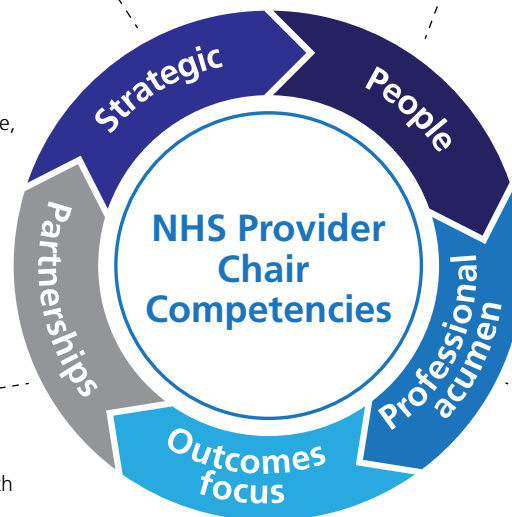
We envisage that the competency framework will be used to recruit and appraise chairs. The figure below shows this and detail the associated requirements under each competency.

Strategic

- Leads the board in setting a deliverable strategy
- Takes account of internal and external factors to guide decision-making sustainably for the benefit of patients and service users
- Provokes and acquires new insights and encourages innovation
- Evaluates evidence, risks and options for improvement objectively
- Builds organisational and system resilience, for the benefit of the population of the system as a whole

People

- Creates a compassionate, caring and inclusive environment, welcoming change and challenge
- Builds an effective, diverse, representative and sustainable team focused on patients and service users
- Ensures all voices are heard and views are respected, using influence to build consensus and manage change effectively
- Support, counsels and acts as a critical friend to directors, including the chief executive
- Develops a board that is genuinely connected to and assured about staff and patient experience



Partnerships

- Develops external partnerships with health and social care system stakeholders
- Demonstrates deep personal commitment to partnership working and integration
- Promotes collaborative, whole-system working for the benefit of patients/service users
- Seeks and prioritises opportunities for collaboration and integration for the benefit of the population of the system as a whole

Professional acumen

- Owns governance, including openness, transparency, probity and accountability
- Understands and communicates the trust's regulatory and compliance context
- Leverages knowledge and experience to build a modern, sustainable board for the benefit of patients and service users
- Applies financial, commercial and technological understanding effectively

Outcomes focus

- Creates an environment in which clinical and operational excellence is sustained
- Embeds a culture of continuous improvement and value for money
- Prioritises issues to support service improvement for the benefit of the population of the system as a whole, ensuring patient safety, experience and outcomes remain the principal focus
- Measures performance against constitutional and CQC 'well-led' standards



Appendix 1: Terms of appointment

- The current remuneration for this role is £45,000 per annum. This is in line with the agreements set out by DHSC for a phased approach to implementing the new **remuneration structure** for chairs and non-executive directors. On this basis the remuneration for the role will increase to £49,500 from 1 April 2022.
- The initial appointment will be for a period of up to four years, after which you may be considered for further terms of office, subject to the needs of the organisation and a good performance in the role.
- You will have considerable flexibility to decide how you manage the time needed to undertake this role. On average, it will require 2 to 3 days a week, including preparation time away from the Trust, the occasional evening engagement and events designed to support your continuous development.

- Applicants should live in or have strong connections with the area served by BHT.

Given the significant public profile and responsibility members of NHS Boards hold, it is vital that those appointed inspire confidence of the public, patients and NHS staff at all times. NHS England / NHS Improvement makes a number of specific background checks to ensure that those we appoint are “fit and proper” people to hold these important roles. More information can be found on our [website](#).



Appendix 2: More information

For information about Trust, such as business plans, annual reports, and services, visit their [website](#).

Other sources of information include:

- Care Quality Commission [website](#).
- Sustainability & Transformation Plan [website](#)
- [Twitter](#)
- [LinkedIn](#)

Follow the links for more information about:

- **Support to prepare candidates to apply for a non-executive vacancy including:**
 - Building your application
 - Sources of information and useful reading
 - Eligibility and disqualification criteria
 - Terms and conditions of chair and non-executive director appointments
 - How we will handle your application and information
- **View all current chair and non-executive vacancies**
- **Sign up to receive email alerts on the latest vacancies**
- **Contact details for the Non-executive Appointments Team**

NHS England / NHS Improvement respects your privacy and is committed to protecting your personal data. We will only use personal data where we have your consent or where we need to comply with a legal or statutory obligation. It is important that you read [this information](#) together with our [privacy notice](#) so that you are fully aware of how and why we are using your data.



Appendix 3: Making an application

For more information, you can get in touch with:

- **Buckinghamshire Healthcare NHS Trust**
– for an informal and confidential discussion with Neil Macdonald, Chief Executive please contact Jessica Gunner on 01296 418186 or by emailing Jessica.Gunner@nhs.net
- **Hunter Healthcare**
– are helping us to identify potential candidates, if you would like a confidential discussion about the role contact Jenny Adrian on 07939 250362 or email jadrian@hunter-healthcare.com
- **NHS England / NHS Improvement**
– for general enquiries contact Miriam Walker on 0300 123 2059 or by emailing miriam.walker@nhs.net

If you wish to be considered for this role please provide:

- a CV that includes your address and contact details, highlighting and explaining any gaps in your employment history
- a supporting statement that highlights your motivation for applying and your understanding of the NHS and the role. You should outline your personal responsibility and achievement within previous roles and how your experience matches the person specification
- the names, positions, organisations and contact details for three referees. Your referees should be individuals in a line management capacity, and cover your most recent employer, any regulated health or social care activity or where roles involved children or vulnerable adults. Your references will be taken prior to interview and may be shared with the selection panel
- please complete and return the monitoring information form which accompanies this pack
- tell us about any dates when you will not be available
- confirm your preferred email and telephone contact details

This information should be emailed to NHSI.chairsandneds@nhs.net quoting reference **S2403** in the subject line.



Appendix 4: Key dates

Closing date for receipt of applications:
5 November 2021 at 12 noon

Preliminary interviews: Long-listed candidates will be invited for a preliminary interview with Rhiannon Smith from Hunter Healthcare. To facilitate this, we will share your application with Hunter Healthcare. Feedback from these interviews will be given to the panel.

Stakeholder event: the shortlisted candidates will be invited to the Trust to meet groups of its key stakeholders in **early December 2021**.

Interview date: **early / mid December 2021**.

Proposed start date: **19 March 2022**





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Safe &
compassionate
care,

every
time

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HUNTER
Executive talent for the healthcare sector

NHS England and NHS Improvement

