

Could you help lead the NHS in your area?

University Hospitals Plymouth NHS
Trust

Chair

Candidate information pack

Reference: S2554



We value and promote diversity and are committed to equality of opportunity for all and appointments made on merit. We believe that the best boards are those that reflect the communities they serve.

We particularly welcome applications from women, people from the local black and minority ethnic communities, and people with disabilities who we know are under-represented in chair and non-executive roles.

Our recruitment processes are conducted in accordance with the Code of Governance to ensure that they are made on merit after a fair and open process so that the best people, from the widest possible pool of candidates, are appointed.

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1. Welcome from the Chief Executive – Ann James

I wanted to start by saying thank you for your interest in joining us. Here at University Hospitals Plymouth NHS Trust (UHP), we recognise the privileged part we play in people's lives and our Chair role is at the very head of leading in delivering value and impact.

As I write this, as an organisation rated Outstanding for Caring and Good for Well-Led, we are at the foothills of implementing powerful and compelling change. On our journey of continuous improvement we are:

- ❑ Working to create a population-based and service-led clinical strategy that will provide a framework for all of our services to develop over the next five years.
- ❑ Leading on integrated care at a point when the potential for integration is truly transformational. We understand the needs of the population we serve, are excited about the opportunities for digital transformation and are committed to taking as much expert care as possible out to our communities.
- ❑ Working collaboratively within networks, including linking with Bristol and London, to offer the people of the South West access to highly specialist care.
- ❑ Cognisant of our key role as an anchor institution within the city of Plymouth and beyond, working to not just treat ill health but address the social determinants of health, working hand-in-hand with our community and voluntary sector partners.
- ❑ Committed to translate our belief in taking care of our #1BigTeam of 10,000 staff and volunteers into action, with a full programme to support their wellbeing and personal and team development.
- ❑ Looking forward to building the first phase of our Future Hospital programme; a new Urgent and Emergency Care Centre.
- ❑ Proud to have secured land to build phase two of that programme: a Planned Elective Care Centre.
- ❑ Undertaking deep engagement with our stakeholders currently, which will feed into our future plans and the way we conduct ourselves, putting us in an even stronger position to move into the next, post-pandemic, phase.

The role of Chair requires a visionary and values-based leader who can work collaboratively with a real commitment to impact and delivery.

The Chair is a critical part of our #1BigTeam focussing on the delivery of high quality patient care through compassion and expertise, education, professional development and research.

I hope you enjoy reading more about UHP and that you are inspired to want to join us.

With best wishes

Ann James, Chief Executive

2. About University Hospitals Plymouth NHS Trust

Our Vision

Together with our partners we will develop nationally leading integrated health and care, unlocking better outcomes and reducing inequalities, and develop UHP as a regional specialist centre to improve lives across Plymouth, Devon, Cornwall and the Isles of Scilly.

Our Services

We are responsible for providing care across the widest of spectrums: from within people's homes and working with our voluntary sector partners in local communities, to offering the most specialist hospital care available in our regional centre.

Locally our Trust has a secondary care catchment population of 450,000 with a wider peninsula population of almost 2,000,000 people who can access our specialist services. The population is characterised by its diversity – the rural, coastal and urban, prosperity and pockets of deprivation, and wide variance in health and life expectancy.

We provide services for patients at the following main sites as well as through clinics at other local hospitals and care centres:

Derriford Hospital including The Royal Eye Infirmary (REI)

Derriford Hospital is the largest specialist teaching hospital in the south-west peninsula and the region's major trauma centre. Our staff here offer a range of specialist services including:

- Kidney transplant
- Pancreatic cancer surgery
- Neurosurgery
- Cardiothoracic surgery
- Bone marrow transplant
- Upper gastro-intestinal surgery
- Hepatobiliary surgery
- Neonatal intensive care and high risk obstetrics
- Plastic surgery
- Liver transplant evaluation
- Stereotactic radiosurgery

We are a teaching hospital in partnership with the University of Plymouth and working with Plymouth Marjon University. As host to the Joint Hospital Group South West (JHG(SW)) in a city with a strong military tradition, we have a tri-service staff of nearly 200 military doctors, nurses and allied health professionals who are fully integrated within our facilities.

Local Care Centre at Mount Gould Hospital

We have 30 beds at the Local Care Centre plus 15 beds for stroke rehabilitation patients.

South Hams Community Hospital

We have 15 beds here and began managing the site in 2021.

Tavistock Hospital

We have 13 beds here and began managing the site in 2021.

Urgent Treatment Centre and Minor Injuries Unites

We run an Urgent Treatment Centre at the Cumberland Centre in Devonport, central Plymouth and minor injury units in Tavistock and Kingsbridge.

Child Development Centre

Developmental services for young children are provided at the Child Development Centre, Scott Business Park.

The Plymouth Dialysis Unit

Patients needing treatment for renal failure are cared for in state-of-the-art, purpose-built facilities in Estover.

Radiology Academy

The Plymouth Radiology Academy is the only purpose-built Radiology Academy in the world and provides an inspirational environment in which to learn radiology.

Home Park Vaccination Centre

We run a COVID vaccination clinic at Home Park, the home of Plymouth Argyle FC.

Our Integrated Care Partnership

In 2021, we came together with Livewell Southwest (LSW) to form Plymouth's Integrated Care Partnership. The aim of the partnership is to bring health and social care providers together to create a place-based model of care for Plymouth and the local area and build on the work that has already taken place to integrate health and social care.

Commissioners identified UHP as the preferred provider, with LSW as a sub-contractor, for integrated care services in June 2021. A ten year contract began on 1 July 2021. We have delivered a successful COVID vaccination programme at Home Park and via outreach clinics, and together, we are transforming care for patients with cardiology, frailty, stroke and respiratory care needs.

After taking feedback from dozens of local people and organisations, the Partnership committed to local people that it will work with them to:

- Build care around you, supporting you to receive appropriate care and treatment in the setting that best suits you. We know this is frequently as close to home as possible.

- Be proactive in planning your care, enabling you to lead a healthy, independent life for longer, with care closer to your home and your community meaning you only have to come into hospital when it's essential
- Ensure you only have to tell your story once, with health and care professional joining up records
- Empower you to take care into your hands, giving you the tools you need to look after your health and wellbeing

Our Improvement Journey

In January 2022 the Care Quality Commission (CQC) published its report on unannounced inspections of urgent and emergency care and medical care services and the planned inspection of Well-Led for the Trust overall. Overall, UHP remains rated as Requires Improvement.

We maintained our rating as **Outstanding for Caring** and **improved** our rating for the domains of **Well-Led and Effective to Good**.

The Trust remains rated *Requires Improvement* for Safe and Responsive.

The CQC inspectors recognised the challenges we face in providing timely urgent and emergency care and placed conditions on UHP's registration. The conditions acknowledge the need for a whole system response, and we are working together across the local health and social care system to improve the situation for local people.

Our comprehensive Improvement Plan incorporates the 'must do' and 'should do' areas for improvement highlighted by the CQC.

System Oversight Framework (SOF4)

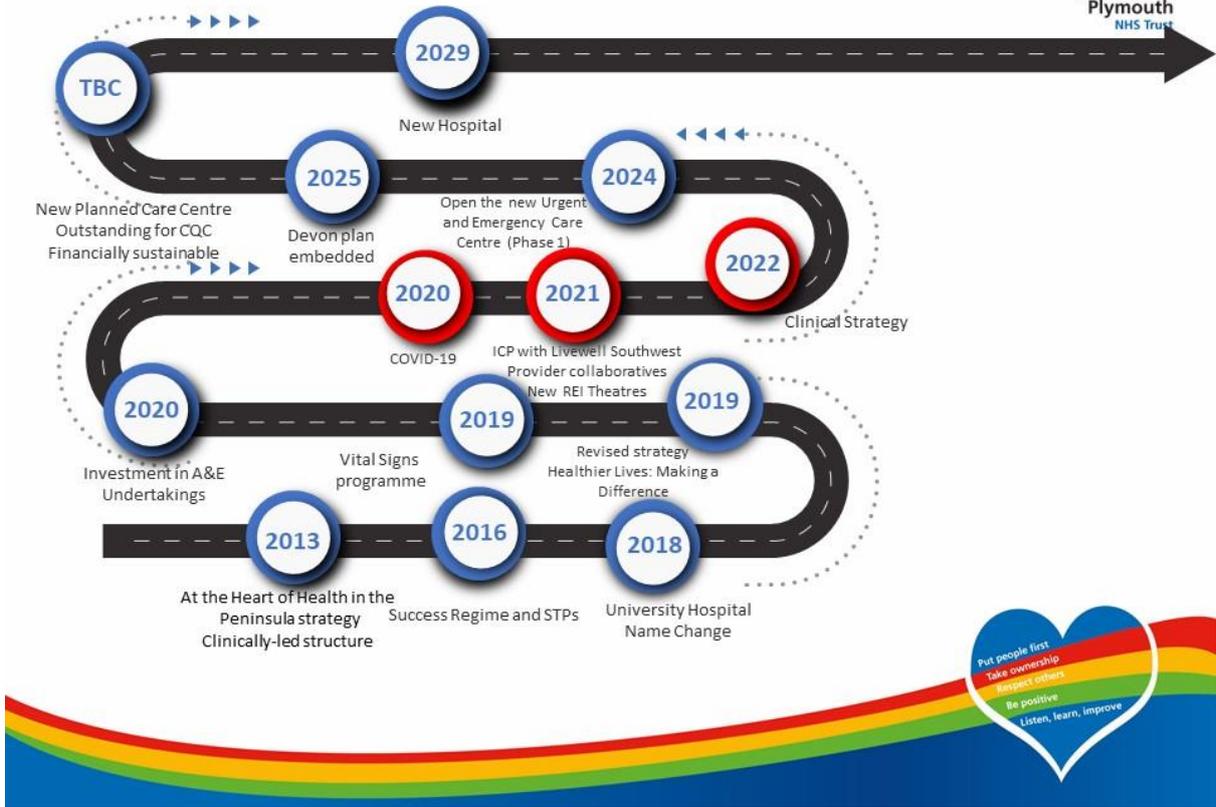
In August 2021 the Trust entered Segment 4 under NHSEI's System Operating Framework (SOF4). Segment 1 reflects highly performing, Segment 4 applies to those organisations with serious and complex issues. Devon as a system is also rated SOF4.

Trusts in Segment 4 are described as being "in actual or suspected breach of the licence (or equivalent) with very serious, complex issues manifesting as critical quality and/or finance concerns that require intensive support".

The exit criteria approved by the Trust at a public Board meeting in December 2021 will need to be met in order to move to Segment 3. Exit from SOF4 will be decided by NHSE/I System Oversight Committee on the recommendation of the Region and on the basis that the agreed exit criteria have been met in a sustainable way.

This will require a focus on quality and the urgent and emergency pathway, as well as elective care and our contribution to the wider Devon strategy and is being addressed in our comprehensive Trust Improvement Plan.

Our Improvement Journey - where we're heading



3. Key challenges

Like many other large healthcare providers, we face a number of key challenges, however we have set out in some detail our draft Improvement Plan for 2022/23 and beyond.

Within the plan we have a series of priority areas, namely Workforce, Urgent and Emergency Care, Financial Sustainability, Recovering Elective Care and creating Space to Care which are summarised below:

NHS
University Hospitals
Plymouth
NHS Trust

Our 2022/23 Plan on a Page

Our Impact	Staff who feel supported and valued	Patients access high quality care in a timely way and have a good experience	Services which are more financially and operationally sustainable	We are a strong and effective system partner	We are well-led with strong governance
Our Outcomes	<ul style="list-style-type: none"> Reduce our vacancy rate to 3% Reduce staff sickness to <4% Reduce turnover to <10% NHS Staff Survey engagement and wellbeing at or > national average Say Thank You and LfE nominations >3,000 per year 	<ul style="list-style-type: none"> Reduce ambulance handover times and 12 hour waits Deliver more assessment and treatment through Same Day Emergency Care Address 'Must Do' actions in CQC Report Make progress against culture review 	<ul style="list-style-type: none"> Eliminate 104 week waits Reduce 52 week waits Achieve 62-day faster diagnostic standard for cancer patients Deliver timely and accurate diagnostic tests Development and delivery of a financial plan which achieves net balance 	<ul style="list-style-type: none"> Create future hospital blueprint including Planned Care Approved Future Hospital Phase 1 Outline Business Case Expand bed and theatre capacity, including relocating the REI off-site Agreed digital strategy and digital investment programme 	
Our Year 1 Priorities					
Our Strategic Objectives	Valuing our people	Delivering safe, high quality services	Providing sustainable services	Working with partners	Strengthening our governance
Our Enablers	<ul style="list-style-type: none"> ★ Clinical strategy ★ People Plan ★ People First Improvement Approach ★ Integrated Care Partnership and system working ★ Digital strategy 				

More information regarding our Improvement Plan is appended to this pack. We are in the process of working with over 50 key stakeholders to finalise some of the detail over the coming weeks.

Underpinning our work is a very clear understanding of the drivers for improvement and we are using 'People First' as our systematic methodology to embed a culture of team-driven improvements which matter to patients, families, and staff. This builds on our involvement in the national Vital Signs three year programme.

We are focused on delivering identified internal improvements, although a range of independent opinion highlights that UHP cannot solve some major challenges alone,

without appropriate system, regional and national support – for urgent and emergency care especially.

We are an active and committed system player including work with partners on emergency pathway development, elective recovery, financial recovery and clinical strategy, ensuring Trust developments are aligned with wider system plans.

4. The opportunity

NHS England / NHS Improvement has a specific role in appointing and supporting NHS trust chairs and non-executives. We are looking for an exceptional leader to chair University Hospitals Plymouth NHS Trust (UHP). This is a unique opportunity to help shape the future of local services by sharing your talents and expertise to help transform the hospital and make a positive difference to your community.

5. The person specification

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

Required skills, experience, and 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 of 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 in managing conflict, finding compromise and building consensus across varied stakeholder groups with potentially conflicting priorities

Desirable experience

- Prior experience as a non-executive director (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 we know are all under-represented in these important roles.

6. 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.

7. 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

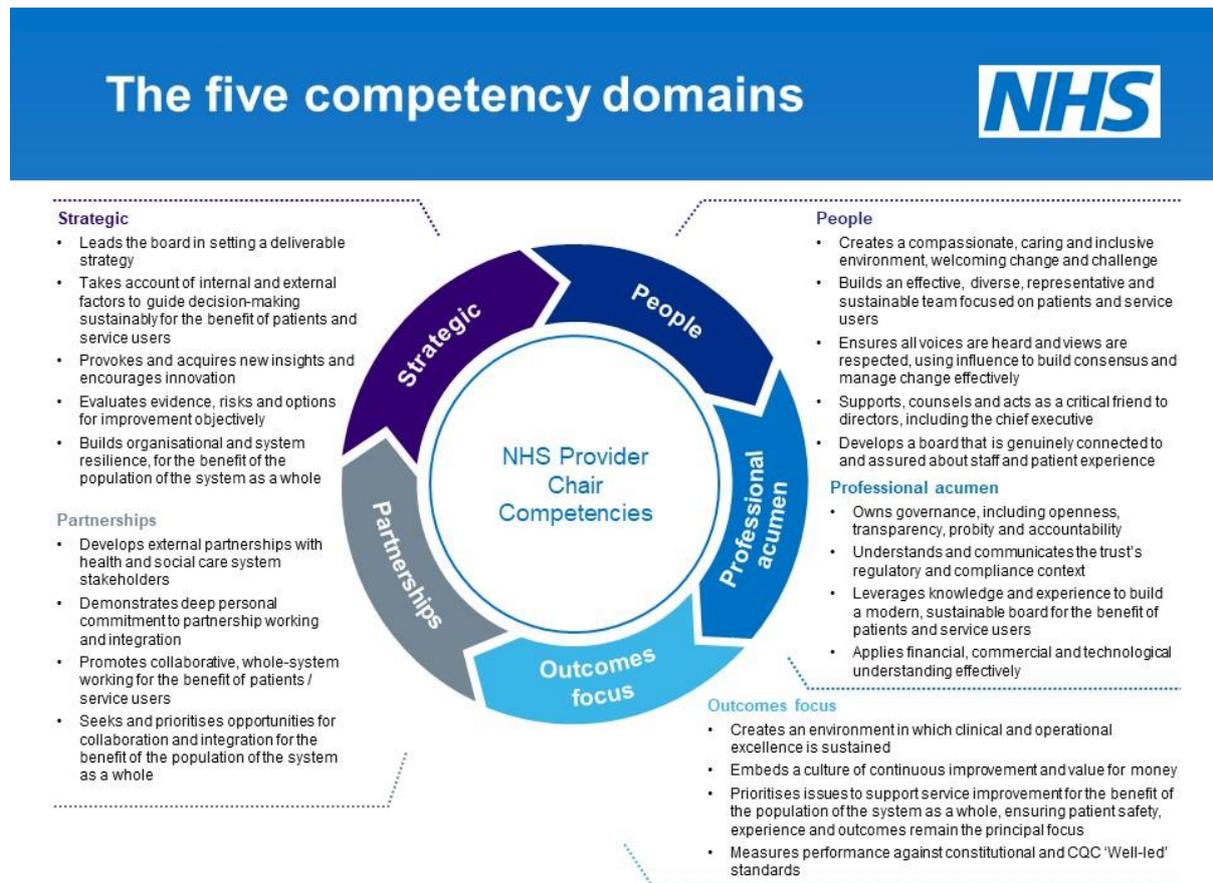
Outcomes focus

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.

8. 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.



Appendix 1: Terms of appointment

- The remuneration for this role is £55,000 per annum.
- 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 the Trust

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 UHP, such as business plans, annual reports, and services, visit their [website](#).

Other sources of information include:

- [Care Quality Commission](#)
- [Integrated Care System for Devon](#)
- [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:

- **University Plymouth Hospitals NHS Trust** - for an informal and confidential discussion with Ann James, Chief Executive, please contact Lucy Demuth, Executive Office Manager on 01752 439084 or via email lucy.demuth@nhs.net
- **Odgers Berndtson** are helping us to identify potential candidates, if you would like a confidential discussion about the role contact Carmel Gibbons on 020 7529 1128 or email carmel.gibbons@odgersberndtson.com
- **NHS England / NHS Improvement** – for general enquiries contact Miriam Walker 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 **S2554** in the subject line.

Appendix 4: Key dates

Closing date for receipt of applications: 24 May 2022 at 12 noon

Preliminary interviews: Long-listed candidates will be invited for a preliminary interview with Carmel Gibbons from Odgers Berndtson. To facilitate this, we will share your application with Odgers Berndtson. 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 during mid-June 2022

Interview date: 23 June 2022 in Taunton

Proposed start date: 1 August 2022

NHS England / NHS Improvement

E: NHSI.Chairsandneds@nhs.net

W: england.nhs.uk

