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Welcome from our Chair

Dear Colleague,

Thank you for showing an interest in the role of Non-Executive Director. This role is a fantastic opportunity for you if you share our passion for delivering high quality health care for children, young people, women and families and want to join an organisation with a strong reputation locally, nationally and internationally.

Our Trust has committed to four priority areas for improvement, and this role will be vital in delivering the clinical and business strategies to ensure we deliver them, taking the Trust to the next level of maturity and bringing their leadership expertise to our Board, workforce and patients and families.

Our BWC Priorities



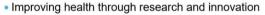
· Growing, nurturing and developing our people



Unlocking potential through technology



Creating comfortable and sustainable spaces for care





We are looking for exceptional candidates to join our Board and specifically someone who has a proven background in quality improvement, evidencing clinical outcomes as well as clear strategic and operational leadership experience throughout their career.

We will offer candidates a clear NHS and health induction if required and a personalised non-executive director development plan, as well as the opportunity to shape the lives of Children and Women and their families in the West Midlands for the years to come.



You'll be joining a Board which is well-established and has a wealth of experience where all board members are committed to continuous improvement. You can meet some of our passionate colleagues and learn more about our Trust in this short video This is YOUR place | Birmingham Women's and Children's NHS Foundation Trust

We welcome applicants who live in Birmingham and Solihull for this important non-executive director role.

If what you've read aligns with your passions and ambitions, then I'd really welcome your `application and look forward to speaking and meeting with you. Please send your CV and covering letter to Professor Sir Bruce Keogh, by Friday 28th August. Interviews are planned for Friday 5th September 2025. Application details are below

Yours sincerely



Sir Bruce Keogh Chair



The Process

Please submit your application by submitting a CV and covering letter to Chairman, Professor Sir Bruce Keogh <u>bruce.keogh1@nhs.net</u>

For a conversation with Sir Bruce, please contact Head of Chair's Office, Jo Vaughan via jo.vaughan1@nhs.net

Closing date Friday 29th August 2025

Interviews Friday 5th September 2025

Personal Data

In line with GDPR, we ask that you do NOT include any information that can identify children or any of your Sensitive Personal Data (racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership, data concerning health or sex life and sexual orientation, genetic and / or biometric data) in your CV and application documentation.

Following this notice, any inclusion of your Sensitive Personal Data in your application documentation will be understood by us as your express consent to process this information going forward. Please also remember to not mention anyone's information or details (e.g. referees) who have not previously agreed to their inclusion.

Contact Details

For an exploratory and confidential conversation about the post, please contact: Barbara Anthony, Associate Director of Corporate Governance Barbara.anthony1@nhs.net



About the Trust

We are Birmingham Women's and Children's NHS Foundation Trust (BWC) proud to bring together the expertise of Birmingham Children's Hospital, Birmingham Women's Hospital and our mental health service, Forward Thinking Birmingham.

Our Trust is the first of its type in the UK, formed in 2017 to drive forward

our commitment to provide the highest quality care for women, children, young people and their families.

We have a clear mission, vision and goal for what we want to achieve.

- Our mission is to provide outstanding care and treatment, to share and spread new knowledge and practice, and to always be at the forefront of what is possible.
- Our vision is to be a world-leading team, providing world-leading care underpinned by research and innovation.
- Our goal is to be the best place to work and be cared for, where research and innovation thrives, creating a global impact.

With more than 641,000 interactions with patients each year, we are a busy Trust and pride ourselves on the commitment of our 6,000 strong team, which works tirelessly to provide the very best treatment and support to our women, children, young people and families where 89% of our services are rated as Good or Outstanding by the Care Quality Commission (CQC) (Feb 2023).

In the year ahead we expect to provide:

- 30,000 day case and elective admissions
- 15,000 emergency admissions
- 91,000 new outpatient contacts
- 529,000 total clinical contacts

In addition to providing care for our local population we host a range of nationally commissioned 'highly specialised' and 'specialised' services which contribute 67% of our clinical care income.





Our focus is on relentless improvement in the quality of care we offer. We believe in nurturing and developing the skills of our workforce, through training and education. We use research and innovation to bring the latest advances in healthcare to our patients. We are partnered with both The University of Birmingham and the University of Aston and are members of Birmingham Health Partners, the City's academic health science partnership.

Our 2023 CQC inspection recognised and praised our organisation for:

- Having an open culture where patients, their families and staff could raise concerns without fear.
- Having leaders and staff that actively and openly engaged with patients, staff, equality groups, the public and local organisations to help improve services for patients.
- The compassion, kindness and support demonstrated for patients.
- Having a clear vision and strategy.
- Organisational and individual commitment to continual service improvement.
- The clear commitment to innovation and research.

Our hospitals are popular national training centres dedicated to supporting and developing our teams. Over the last three years we have invested £2.1m in continuous professional development (CPD) for our nurses, midwives, AHPs and other colleagues.

We have highly rated clinical academic training programmes which are being extended to include nurses, midwives and allied health professionals.

Our latest General Medical Training Survey praised the strong teamwork at BWC. Our Postgraduate Doctors report good support, wide clinical exposure and protected weekly teaching time.

Speciality Postgraduate Doctors have praised department level consultant support and the breadth of work available to them. We are committed to listening to our trainees and recently appointed a Post Graduate Doctor Representative as well as establishing a Junior Doctor Forum.

Our recent Health Education Report commented: "Postgraduate Doctors in Training reported positive interactions with the Multi-Disciplinary Teams within the MHS describing them as supportive and offering many opportunities for learning and experience."

I think the individuals that work here are incredible. Every encounter I have had has been friendly and everyone is very knowledgeable and hard working.



Research

Research is a trust priority. We are partners in the Birmingham NIHR Biomedical Research Centre and we have active research programmes with both the University of Birmingham and Aston University. Currently, we are delivering several hundred active clinical trials and next year we are forecasting even more.

At our Women's Hospital, we deliver world-leading research with our partners at the University of Birmingham. Some of the highlights include our genetics programmes testing new technologies in prenatal diagnosis of chromosome abnormalities and maternal health where we host a WHO Collaborating centre for Women's Health and the Tommy's national centre for Miscarriage Research.

At our Children's Hospital, we conduct research in several areas. We host the NIHR Rare Disease Translational Research Collaboration and have delivered new treatments for children with rare diseases. including Wolfram syndrome and monogenic diabetes. We also run one of Europe's largest programmes of clinical trials in childhood cancer and lead the National Children's Cancer Trials Team and we have longstanding research programmes in childhood cancer, liver disease and transplantation. Our research is facilitated by our state of the art NIHR Paediatric Clinical Research Facility, one of the first such facilities to be designed solely for children.

We have an expanding research programme in adolescent mental health and with the University of Birmingham's Institute of Mental Health lead the Midlands Translational Research Centre of Excellence and the adolescent mental health theme in the Oxford Mental Health NIHR Biomedical Research Centre.

Inclusivity empowers the communities we serve

Birmingham Women's and Children's NHS Hospital Trust is centred in Birmingham amongst some of the most deprived and under privileged communities in the country. We believe in creating a culture where differences are valued and the opportunities of diversity of approach are maximised. To do that well, we strive to ensure that we recruit from the communities we serve and we are proud of the community partnerships we have forged. This enables us to foster an inclusive culture that welcomes and supports the diverse voices of our employees, as well as our patients, families and visitors.





Our vision and values

We know that organisations espousing strong values and behaviours perform better across the board and generally offer higher quality care, including better clinical outcomes. We've worked closely with our 6,000 colleagues to develop and embed our values and we will continue to ensure that they underpin the way we care for our patients and each other into the future.

How we live our values

Ambitious

We continually challenge ourselves to improve care and services through innovation, research and education.

Brave

We take personal responsibility to always do our best for our patients, families, and each other, challenging behaviours and attitudes whenever we need to; we speak up and ask for help.

Compassionate

We deliver care and services, with respect and kindness, for our patients, families, ourselves and each other; we listen and are inclusive.









Our Values

Our mission:

To provide outstanding care and treatment, to share and spread new knowledge and practice, and to always be at the forefront of what is possible.

Our vision:

To be a world-leading team providing world-leading care.

Our goal:

To be the best place to work and be cared for, where research and innovation thrive, creating a global impact.

Our values:

- Ambitious
- Brave
- Compassionate



Our rich history

We are very proud of the achievements of our two main hospitals, the services we deliver from Parkview, our mental health in-patient service for 0-25 year olds, and our wide range of community services we have delivered over the last 160 years. We've changed the face of healthcare with pioneering research that has improved outcomes for many hundreds of thousands of women, children, young people and families across the globe.

We have a great history of firsts. We:

- Conducted the first operation for ectopic pregnancy and caesarean section for haemorrhage in late pregnancy.
- Fitted the world's first pacemaker into a three-day-old baby.
- Were the first in the world to separate twins conjoined at the spine.
- Performed the first triple transplant of liver, pancreas and small bowel in the UK.
- Established the first colposcopy clinic in the UK.

- Established the first premature baby unit in the country.
- Were the first to successfully treat two patients with over 90% burns in the UK.
- Delivered the first baby born after pregenetic implantation diagnosis.
- Were the first in Europe to rebuild a section of a child's missing spine with metal rods.
- Developed the first Miscarriage Leave policy in the NHS which was then rolled out to 1.6 million people
- Were the first hospital trust in the region to appoint a Consultant in Public Health to increase our contribution to the public health agenda and prioritise the issues facing our children and young people, such as childhood obesity.



Birmingham Women's Hospital

Birmingham Women's Hospital, rated "Good" by the CQC in 2017 and 2023. is one of only two dedicated women's hospitals in the UK and provides specialist services to more than 50,000 women and their families every year from our city and beyond.

We are the busiest single site maternity unit in the UK, delivering more than 8000 babies a year.

We offer a full range of gynaecological, maternity and neonatal care and will receive 3,000 urgent gynaecological cancer referrals in the year ahead. Our Fertility Centre is one of the best in the country.

Our foetal medicine centre receives regional and national referrals, and we are home to the West Midlands Regional Genetics Laboratory – the largest in the UK.

The hospital has a strong reputation for research with a research budget of more than £3 million per year.





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Birmingham Children's Hospital

Birmingham Children's Hospital is a general and specialist hospital for children offering care in over 50 different clinical specialties supported by cutting-edge research. Its services were rated "Outstanding" by the CQC in 2017 and 2023.

We provide national services as well as core services for our local community. In the year ahead we expect to:

 Care for 69,000 attendees at our Emergency Department, in top ten in NHS for ED performance.

- Care for sicker children in our 253 ward beds.
- Deliver 6,200 MRIs and 3,000 CT scans plus thousands of other diagnostics across multiple modalities.





Forward Thinking Birmingham

We are a key partner in one of the largest Child and Adolescent Mental Health Services in the country. Forward Thinking Birmingham (FTB) was a unique, community and inpatient mental health partnership offering mental health assessment and treatment for young people from 0–25-years-old. Many of our services have staff have transferred to our partners at BSMHT and BWC retain Tier 4 inpatient services in the Parkview Hospital in Moseley.







Our Integrated Care System

Our Integrated Care System (ICS) brings together local NHS, councils, voluntary, community and faith sector colleagues so we can better serve the 1.3 million people in Birmingham and Solihull.

Together we are Birmingham and Solihull ICS, united by our vision to make Birmingham and Solihull the healthiest place to live and work, driving equity in life chances and health outcomes for everyone.

With more and more people needing care across a range of different settings, we need to work together better than ever before. This is not just about achieving coordinated and joined up care but is about preventing ill health and tackling the factors that contribute to some people experiencing poorer health outcomes than others.

To achieve our vision, we will need to make important and difficult decisions about how and where resources are spent in order to best meet the health and care needs of our diverse population.

The ICB will shortly merge with Black Country ICB, meaning stronger partnerships across the West Midlands for the good of our patients and communities.

To find out more about our ICS and our ambitions, please click here.





National Excellence

- We have 63 'highly specialised' and 'specialised' services that are commissioned nationally by NHS England.
- Our 12 highly specialised services include liver disease, liver and small bowel transplants, retinoblastoma (a type of eye cancer), craniofacial surgery, Epidermolysis Bullosa (a rare skin condition) and a number of rare diseases.
- We lead the way for the treatment of major trauma, neonatal and paediatric intensive care, burns, cancer, epilepsy surgery, kidney disease, foetal medicine, genetics services and many others.
- Our leading work led to the development of National Institute of Clinical Excellence (NICE) guidelines for the care of twin and triplet pregnancies.
- We lead the NIHR Rare Disease Translational Research Collaboration project.
- Our NIHR Wellcome Clinical Research Facility supports more than 100 studies, of which more than 60 are in rare diseases.
- We were the first NHS Trust in the country to offer additional paid leave to members of staff who suffer miscarriage, and to their partners.

- This pioneering approach has now been adopted by many other organisations covering 400,000 members of staff in the NHS nationally.
- We deliver an international programme in neuro-imaging and spectroscopy in childhood brain tumours and inborn errors of metabolism
- Our Genetics Lab is playing a central role in the West Midlands Genomic Medicine Centre as part of the national 100,000 genome project and has pioneered new technology that allows prenatal diagnosis of genetic diseases.





Global Impact

We have a strong track record of global impact through our pioneering care and research that has changed clinical practice and improved health outcomes for some of the poorest countries in the world.

- Our research has led to improvements in timely diagnosis of congenital heart defects through pulse oximetry – an approach now used globally.
- We're home to a WHO Collaborating Centre in Women's Health and host the Tommy's National Early Miscarriage Centre for research into miscarriage, stillbirth and premature birth – the largest such centre in the UK.
- Through our WHO Centre our clinicians are researching new approaches to treat two of the main causes of death during pregnancy and childbirth in poor countries – post-partum haemorrhage and sepsis. This included a large Medical Research Council funded clinical trial to define the role of prophylactic antibiotics in miscarriage surgery to prevent fatal infections, a common cause of death in low-income countries.
- Our expertise and work with the Royal College of Obstetricians and Gynaecologists and International Society of Ultrasound in Obstetrics and Gynaecology has led to guidelines and international statements on the management of identical twins who share a placenta (monochorionic twins).





Sharing our skills to improve world health

Our teams:

- Share knowledge and expertise to set up a pioneering liver transplantation programme for young children at Pakistan's Rawalpindi's Military Hospital, equipping doctors, nurses and surgeons with the skills to run a range of their own services to care to some of the poorest people in Pakistan.
- Support craniofacial reconstructive surgery for children suffering from the devastation skin condition, Noma, and those with tumours, trauma and congenital abnormalities in Ethiopia.
- Have a long-standing educational partnership with the Queen Elizabeth Central Hospital in Malawi to enhance learning and best practice in healthcare for thousands of children and young people.
- Have helped develop paediatric kidney services in Trinidad, which have resulted in several life changing transplants.
- Have supported the urology team in Zanzibar and operated on children with congenital and traumatic genital abnormalities.
- Worked with teams in Ukraine in 2021 to help treat children from Ukraine and support them and their families.
- Have led the Malaysian Cardiac Partnership since 2008 to help develop services, operate on complex cases, train and mentor their staff in partnership

- with Children's Heartlink (a world leader in heart surgery, medical device development and global philanthropy) and the Department of Health and Social Care.
- Have worked with hospitals in Spain, Germany, India and the Philippines to perform heart operations on some of their most complex young patients.
- Helped the Australian Health Authority review its national Hypoplastic Left Heart Syndrome service provision.
- Have supported Germany with its review of its cardiac surgery programme.
- Through the ECMO Programme (Extracorporeal Membrane Oxygenation) we are recognised as an International Centre of Excellence by the world governing body ELSA. Our experts have helped train new teams in essential life support skills at hospitals in the UK, South Africa, Malaysia and Belgium.

Hear from some of our staff what it's like to work at Birmingham Women's and Children's NHS Foundation Trust and meet some of the colleagues you would be joining in the BWC Family:

- Our website
- Board of Directors
- Publications and Reports
- CQC Report
- Our ICS



Job Description

Title: Non-Executive Director

Remuneration: £14,500

Commitment: 4 days per month

Term: 3 years

NON-EXECUTIVE DIRECTOR ROLE DESCRIPTION AND PERSON SPECIFICATION

ROLE DESCRIPTION

Purpose of the Role

Birmingham Women's and Children's NHS Foundation Trust has a national and international reputation as one of the leading providers of services for children, young people, women and their families and is a centre of excellence, providing a range of specialist health care services.

The Trust is led by a unitary Board of Directors whose expertise and skills will drive the vision and mission of the organisation.

Accountable to the Council of Governors, the Non-Executive Directors play a pivotal role in the success of the Trust, having responsibility for holding the Executive members of the Board to account and providing independence within the Board of Directors.

The Non-Executive Directors participate in the Board's development of the Trust's vision, strategies and objectives, holding the Executive Board (Chief Officer) members to account for their delivery. They work with their colleagues on the Board of Directors to establish networks and partnerships to support the delivery of the Trust's strategy and development of the Trust's role as a key national lead in the delivery of women's, children's and young people's health services.

The Non-Executive Directors demonstrate and promote high standards of probity, integrity and governance and are subject to both the Nolan Principles and the NHS Fit and Proper Person's Test.

The role requires a time commitment, in and outside of business hours, of an average monthly commitment of 4 days. This is both face to face and remote requirements, and we welcome applications from people who live in Birmingham and Solihull and wish to be involved in the life of the Trust.

Main Duties and Responsibilities

Leadership and Strategy

The Non-Executive Directors are responsible for:

- Supporting the chair, chief executive and executive directors in promoting the Trust values.
- Supporting a positive culture throughout the Trust and adopting behaviours in the boardroom and
 elsewhere that exemplify that culture. This role will have a particular focus on strategic and operational
 leadership development and accountability in the organisation.
- Providing support, advice and guidance for setting the strategic direction of the Trust and holding the
 executive directors to account for the effective management and delivery of the Trust's strategic aims
 and objectives.
- Demonstrating visible and ethical personal attributes by modelling the highest standards of personal behaviour, safeguarding the Trust's values and supporting colleagues on the Board of Directors in emulating this example.
- Building productive working relationships based on candour, trust and mutual respect with executive directors and staff members, providing support, guidance and advice to them and specific coaching and development from their own career and personal experience.
- Supporting the delivery of the Trust's obligations to its key stakeholders, communities and regulators.
- Actively contributing to the Board of Directors' setting of the Trust's values and standards, in particular for this role, strategy and leadership development.
- Promoting the vision of the Trust to capitalise on the freedoms it enjoys as a result of its Foundation Trust status.
- Promoting an understanding of the role of the Board, the scheme of reservation and delegation, the role
 of non-executive directors and executive directors.

Governance

The Non-Executive Directors are responsible for:

- Scrutinising performance of the executive Board members in meeting agreed goals and objectives.
- Participating in all formal and informal meetings of the Board of Directors and complying with approved procedures.
- Effectively contributing to the Board of Directors and constructively challenging colleagues before taking significant decisions. This role should have a particular focus on governance expertise in their careers and backgrounds, and on measuring and demonstrating outcomes.
- Satisfying themselves that the Board of Directors is focused on strategy, performance, quality and accountability, and measuring outcomes effectively
- Satisfying themselves that financial and clinical quality controls and systems of risk management and governance are sound and that they are being utilised effectively

- Ensuring that they receive adequate information in the form that they specify and to monitor the reporting of performance, including outcomes using data, trends and challenging as appropriate
- Effectively contributing to Board committees of which they may be members or chair.
- Participating in the Board of Directors' identification of the key risks faced by the Trust in implementing
 its strategy and supporting prudent processes and controls in place to appropriately monitor and
 manage those risks. In particular, focus on quality improvement, clinical outcomes and leadership
 development
- Seeking internal and external advice as necessary.
- Complying with the conditions of the Trust's Licence, the Constitution and any other applicable legislation and regulations, highlighting failures of compliance and monitoring actions taken to address this.

Council of Governors

The Non-Executive Directors should:

- Engage with the Council of Governors and in particular give recognition to governors so that they can be held to account for the performance of the Board by the Council.
- Attend regular meetings of the Council of Governors to ensure that they understand the views of the governors in relation to Trust strategy, performance and quality issues and in order to facilitate the Council of Governors' contribution to strategy development by the Board.
- Be an expert to the Council of Governors on quality improvement, clinical outcomes and strategic leadership matters as directed and delegated by the Chair or other Board Members.
- Effectively communicate with the Council of Governors in relation to the progress made by the Board in delivering the Trust's strategic objectives and the priorities and outcomes of the Trust.
- Build productive working relationships based on candour, trust and mutual respect with Council of Governors, appropriately providing support, guidance and advice to them.

Appointments, Succession Planning and Development

The Non-Executives are responsible for:

- Appointing the executives and Chief Executive, the latter with the approval of the Council of Governors, through the Trust's Appointments and Remuneration Committee.
- Determining appropriate levels of remuneration for the executive directors through the Appointments and Renumeration Committee.
- Considering succession planning for key executive posts to meet the needs of the Trust and ensuring the continual improvement in quality and calibre of executives.
- Where necessary, participating in the process for the performance management of executive directors, ensuring application of the Fit and Proper Person's Test and other NHS Board Principals.

- Be a sounding board for the Chief Executive regarding development and management of the executive directors.
- Participating in regular performance evaluations, taking personal responsibility for acting on any results and feedback.
- Contributing to the performance appraisals of executive directors, fellow non-executive directors and the chair.

External relations

The Non-Executives are responsible for:

- Promoting effective communications with members and other stakeholders.
- Where necessary, maintaining constructive and appropriate relations with NHS regulators and other NHS organisations.
- Supporting the organisation with key relationships and partners in the region, nationally or internationally
- Working with the Board to establish and develop partnerships and networks to support the furtherance of the Trust's strategy and reputation, in particular on quality improvement, leadership and clinical outcomes.

PERSON SPECIFICATION

Education and qualifications	Essential	Desirable
Post Graduate Degree	√	
Experience	Essential	Desirable
Recent experience of operating at Board level or equivalent		✓
Strong understanding of the NHS and how the health service operates	✓	
Leadership or Quality Improvement qualification		✓
Knowledge and skills	Essential	Desirable
Effective communication and engagement skills, including the ability to actively listen,	✓	
promote discussion of views, welcome constructive challenge and be approachable.		
Demonstrable understanding and commitment to ensuring appropriate corporate	✓	
governance, holding the Executive to account		
Competent analytical and data-evaluation skills.	✓	
Meets or has the ability to meet through development the NHS Competency	✓	
Framework for Board Members (appendix 1).		
Personal effectiveness and behaviours	Essential	Desirable
Clear commitment to the values of the Trust and the ethical standards of UK public	✓	
service, system and organisational excellence, including fit and proper persons.		
Proven ability to provide independent challenge to the Executive Team and Board to	✓	
ensure development and delivery of strategic vision and objectives.		
Leadership	Essential	Desirable
Significant personal presence and credibility - able to act as a 'role model'.	✓	
Aligned to Trust values and leadership behaviours.	✓	
Demonstrable commitment to promoting and celebrating equality and diversity across	✓	
the organisation and in developing effective working relationships with stakeholders.		
Committed to high performing team working which enables all staff to develop	√	
Performance focus	Essential	Desirable
Passion for healthcare and delivering outstanding outcomes.	√	
Relationships and influencing	Essential	Desirable
Political acumen attuned to different stakeholder interests.	√	
Strategic thinker with highly developed influencing and skills of persuasion.	√	
Able to make both tactical and strategic decisions	√	
Able to use influencing skills to stimulate debate and discussion and use experience to	√	
support innovation and creativity in achievement of strategic objectives.		
Credible ability to work constructively and collaboratively building excellent	√	
relationships across key partners and stakeholders.		
Able to demonstrate clarity of thinking and appropriate challenge to the Board	√	
Communication and engagement skills	Essential	Desirable
Effective communication and engagement skills, including the ability to actively listen,	√	
communicate openly, promote discussion of views, welcome constructive challenge and		
be approachable.		
Able to develop trust.	√	
Other	Essential	Desirable
Able to meet the time commitment to discharge responsibilities including face to face	√	
meetings and onsite presence at Birmingham sites		
No conflicts of interest.	√	
		
Strong link to the West Midlands region and the flexibility to participate in		✓

Appendix 1: NHS Board Member Leadership Competency Framework

Dor	main 1: Driving high quality, sustainable outcomes
1	I contribute as a leader:
1a	to ensure that my organisation delivers the best possible care for patients
1b	to ensure that my organisation creates the culture, capability and approach for continuous improvement, applied systematically across the organisation
2	I assess and understand:
2a	the performance of my organisation and ensure that, where required, actions are taken to improve
2b	the importance of efficient use of limited resources and seek to maximise:
	i. productivity and value for money
	ii. delivery of high quality and safe services at population level
2c	the need for a balanced and evidence-based approach in the context of the board's risk appetite when considering innovative solutions and improvements
3	I recognise and champion the importance of:
3a	attracting, developing and retaining an excellent and motivated workforce
3b	building diverse talent pipelines and ensuring appropriate succession plans are in place for critical roles
3с	retaining staff with key skills and experience in the NHS, supporting flexible working options as appropriate
4	I personally:
4a	seek out and act on performance feedback and review, and continually build my own skills and capability
4b	model behaviours that demonstrate my willingness to learn and improve, including undertaking relevant training

Domain 2: Setting strategy and delivering long term transformation

1	I contribute as a leader to:
1a	the development of strategy that meets the needs of patients and communities, as well as statutory duties, national and local system priorities
1b	ensure there is a long-term strategic focus while delivering short-term objectives
1c	ensure that our strategies are informed by the political, economic, social and technological environment in which the organisation operates
1d	ensure effective prioritisation within the resources available when setting strategy and help others to do the same
2	I assess and understand:

2a	the importance of continually understanding the impact of the delivery of strategic plans, including through quality and inequalities impact assessments
2b	the need to include evaluation and monitoring arrangements for key financial, quality and performance indicators as part of developing strategy
2c	clinical best practice, regulation, legislation, national and local priorities, risk and financial implications when developing strategies and delivery plans
3	I recognise and champion the importance of long-term transformation that:
3a	benefits the whole system
3b	promotes workforce reform
3c	incorporates the adoption of proven improvement and safety approaches
3d	takes data and digital innovation and other technology developments into account
4	I personally:
4a	listen with care to the views of the public, staff and people who use services, and support the organisation to develop the appropriate engagement skills to do the same
4b	seek out and use new insights on current and future trends and use evidence, research and innovation to help inform strategies

Domain 3: Promoting equality and inclusion, and reducing health inequalities

1	I contribute as a leader to:
1 a	improve population health outcomes and reduce health inequalities by improving access, experience and the quality of care
1b	ensure that resource deployment takes account of the need to improve equity of health outcomes with measurable impact and identifiable outcomes
1c	reduce workforce inequalities and promote inclusive and compassionate leadership across all staff groups
2	I assess and understand:
2a	the need to work in partnership with other boards and organisations across the system to improve population health and reduce health inequalities (linked to Domain 6)
3	I recognise and champion:
3a	the need for the board to consider population health risks as well as organisational and system risks
4	I personally:
4a	demonstrate social and cultural awareness and work professionally and thoughtfully with people from all backgrounds
4b	encourage challenge to the way I lead and use this to continually improve my approaches to equality, diversity and inclusion and reducing health and workforce
	inequalities

Domain 4: Providing robust governance and assurance

1	I contribute as a leader by:
1a	working collaboratively on the implementation of agreed strategies
1b	participating in robust and respectful debate and constructive challenge to other board members
1c	being bound by collective decisions based on objective evaluation of research, evidence, risks and options

1d	contributing to effective governance and risk management arrangements
1e	contributing to evaluation and development of board effectiveness
2	I understand board member responsibilities and my individual contribution in relation to:
2a	financial performance
2b	establishing and maintaining arrangements to meet statutory duties, national and local system priorities
2c	delivery of high quality and safe care
2d	continuous, measurable improvement
3	I assess and understand:
3a	the level and quality of assurance from the board's committees and other sources
3b	where I need to challenge other board members to provide evidence and assurance on risks and how they impact decision making
3c	how to proactively monitor my organisation's risks through the use of the Board Assurance Framework, the risk management strategy and risk appetite statements
3d	the use of intelligence and data from a variety of sources to recognise and identify early warning signals and risks
4	I recognise and champion:
4a	the need to triangulate observations from direct engagement with staff, patients and service users, and engagement with stakeholders
4b	working across systems, particularly in responding to patient safety incidents, and an understanding of how this links with continuous quality improvement
5	I personally:
5a	understand the individual and collective strengths of the board, and I use my personal and professional knowledge and experience to contribute at the board and support others to do the same
Dor	main 5: Creating a compassionate, just and positive culture
1	I contribute as a leader:
1a	to develop a supportive, just and positive culture across the organisation (and system) to enable all staff to work effectively for the benefit of patients, communities and colleagues
1b	to ensure that all staff can take ownership of their work and contribute to meaningful decision making and improvement
10	to ensure that an stan can take ownership of their work and contribute to meaningful decision making and improvement
1c	to improve staff engagement, experience and wellbeing in line with our NHS People Promise
1d	to ensure there is a safe culture of speaking up for our workforce
2	I assess and understand:

2a	my role in leading the organisation's approach to improving quality, from immediate safety responses to creating a proactive and improvement-focused culture
3	I recognise and champion:
3a	being respectful and I promote diversity and inclusion in my work
3b	the ability to respond effectively in times of crisis or uncertainty
4	I personally:
4a	demonstrate visible, compassionate and inclusive leadership
4b	speak up against any form of racism, discrimination, bullying, aggression, sexual misconduct or violence, even when I might be the only voice
4c	challenge constructively, speaking up when I see actions and behaviours which are inappropriate and lead to staff or people using services feeling unsafe; or staff or people being excluded in any way or treated unfairly
4d	promote flexible working where possible and use data at board level to monitor impact on staff wellbeing and retention
Dor	main 6: Building trusted relationships with partners and communities
Dor 1	nain 6: Building trusted relationships with partners and communities I contribute as a leader by:
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1 1a 1b 2 2a 2b	I contribute as a leader by: fostering productive partnerships and harnessing opportunities to build and strengthen collaborative working, including with regulators and external partners identifying and communicating the priorities for financial, access and quality improvement, working with system partners to align our efforts where the need for improvement is greatest I assess and understand: the need to demonstrate continued curiosity and develop knowledge to understand and learn about the different parts of my own and other systems the need to seek insight from patient, carer, staff and public groups across different parts of the system, including Patient Safety Partners