



Joint Non-Executive Director

Application Pack

October 2025

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Foreword

Thank you for your interest in applying to become a Joint Non-Executive Director at Stockport NHS Foundation Trust and Tameside & Glossop Integrated Care NHS FT. This is an exciting time to consider a non-executive role within our organisations.

Our Trusts have been working together in close partnership since 2020, with exceptional leadership from our Joint Chief Executive, Karen James OBE. I was appointed as a Joint Chair, in April 2025, this first Joint Chair role has marked a critical development for our partnership, as we begin to bring our Boards and governance together, and are developing a shared strategic vision for the benefit of our staff and the communities we serve.

Stockport NHS FT is a leading provider of hospital and community health services in Greater Manchester. Its services include acute hospital care, specialist treatments, and community-based services. With an annual budget of around £514m and 6,610 staff, the Trust serves patients across Stockport, as well as patients from neighbouring Cheshire East and the High Peak area of Derbyshire. Tameside & Glossop Integrated Care NHS Foundation Trust also provides acute and community services, supporting around 250,000 patients working across ICBs in both Greater Manchester and neighbouring Derbyshire. It has an annual budget of £375m and 5,033 staff, with a CQC rating of Good overall. Both Trusts are dedicated to improving the health and well-being of the communities we serve.

We are seeking to strengthen our collaborative approach driven by a shared commitment to enhancing patient care, improving health outcomes, and ensuring the sustainability of healthcare services in our communities and we are therefore seeking a Joint Non-Executive Director with responsibility for Chairing our Audit Committees. We have a number of shared executive director roles, but this will be the first time we have advertised for a Joint Non-Executive Director role. This role will be crucial in helping us take us forward to the next phase of our process.

I hope you will consider applying for a role with us, and I look forward to meeting candidates whose ambitions and values support ours.

David Wakefield
Joint Chair, Stockport NHS Foundation Trust
& Tameside & Glossop Integrated Care NHS Foundation Trust



1. The Opportunity

We are looking for a Joint Non-Executive Director to join our Boards. This is an exceptional opportunity to join forward thinking, innovative, friendly organisations with whom you can share your talents and expertise to make a positive difference to the lives of those served by our Trust's. We are seeking a Joint Non-Executive Director who will be the Chair of our Audit Committees and therefore we require someone who has the CCAB qualification and is a member of a recognised professional body, which requires up to date continuous professional development (CPD) and who has financial expertise and a history of senior financial, audit, or commercial leadership in a complex, regulated environment. Ideally you will have an appreciation of public or private sector audit and governance arrangements, and prior experience of being a non-executive in the NHS. In addition to these specific skills, we are looking for people who understand and are committed to the health and wellbeing agenda, and who are passionate about making a positive difference. You will need to be a strong leader with a strategic perspective, and you should be committed to the principles of operating as part of a unitary Board.

We believe that the best Boards are those that reflect the communities they serve. We are therefore seeking to improve the diversity of our Board to make it truly representative of our workforce and local populations. We are committed to equality of opportunity for all, and appointments are based on merit.

We are keen to receive applications from all protected characteristics and those who either have a strong connection to their local community or those with lived experience, either as carers or service users. We would particularly welcome applications from Black, Asian and minority ethnic communities and individuals with a disability, people who we know are under-represented in chair and non-executive roles.

1.1 The Role

You will need to have a genuine commitment to patients and the promotion of excellent health care services. You will need to demonstrate you can use your experience to:

- Work alongside other non-executives and executive colleagues as an equal member of the Board
- Bring independence, external perspectives, skills and challenge to strategy development
- Hold the Executive to account by providing purposeful, constructive scrutiny and challenge
- Shape and actively support a healthy culture for the Trust
- Have the CCAB qualification and an expertise in finance along with a strong background in audit and governance.

A full role description and person specification can be found towards the end of this document on pages 14-17.

2. About Us

Our Trusts have a long history of partnership working as geographical neighbours. We have a Joint Chief Executive, Joint Chair and some of our Executive Directors sit across both Boards, driven by our shared commitment to enhancing patient care, improving health outcomes, and ensuring the sustainability of services for the benefit of our patients and communities. Both Trusts provide integrated acute and community services for the populations they serve.

Stockport NHS Foundation Trust delivers acute hospital services across the Stockport locality of Greater Manchester, supporting around half a million patients every year from across Stockport, East Cheshire, and the High Peak area of Derbyshire. We have an annual budget of £514m and 6,610 staff. Our latest CQC rating was "Requires Improvement" overall, with a rating of "Good" in the Caring domain, and we continue to make progress in our transformation journey.

Tameside & Glossop Integrated Care NHS Foundation Trust supports around 250,000 patients in Tameside, Glossop working across the ICBs in both Greater Manchester and in neighbouring Derbyshire. We have an annual budget of £375m and 5,033 staff, with a CQC rating of "Good" overall. Our strategy is focused on reducing inequality and improving the population health of our communities.

2.1 Our Strategy

The Trusts are embarking on a new future together that will see the development of a new joint organisational strategy. This pivotal work between the Trusts is focused on strengthening collaboration, driven by NHS policy and the opportunities that exist with greater integrated care.

The joint strategy aims to maximise potential for working together while the Trusts remain legally separate entities. This strategic collaboration builds on the shared corporate objectives that exist. Key elements of the strategy are likely to include:

- A focus on delivering improved access to services, reduced waiting times, financial sustainability and a focus on the workforce alongside working towards a single service model for specific clinical areas as the joint clinical strategy takes shape.
- A consideration of the impact and opportunities that exist within the 10 Year Health Plan, the three shifts and the wider development of
 collaborative partnerships across Stockport, Tameside, and Greater Manchester. The 2020-25 Strategic Plan includes five strategic
 objectives.

Details on each Trust's current strategies can be found on their respective websites. We have a number of objectives, improvement measures and details of how we will monitor these. Each reflects our intention to continue as an integrated, acute and community provider of services.

2.2 Our values

Our organisational values say who we are and what we stand for. They also help our people to deliver the commitments that we make to our patients, service users and each other. It is therefore important that our organisational values are simple to grasp, motivational, aspirational and authentic all at the same time. We have a joint set of values across both Stockport NHS Foundation Trust and Tameside & Glossop NHS Integrated Care NHS Foundation Trust.

Staff told us what values and behaviours are important to them, what behaviours they would like colleagues to display more and what behaviours they do not want to see. We distilled the feedback into a refreshed set of values and behaviours, designed around the acronym 'CARE: Compassion, Accountability, Respect, and Excellence' These will now feature in all aspects of the employee life cycle, performance management and appraisal documents and are supported by our hugely ambitious OD & People Plan.



2.3 Corporate Objectives – 2025/26

In seeking to achieve our vision, we set ourselves a number of objectives which help to define what success for the organisation will look like over the coming year. These objectives cover 'business as usual' – continuing to provide high quality care to people in our area – as well as transformational objectives which will help us to achieve our approach to health and care which better meets the needs of the local population. These are the specific priorities of the organisation for 2025/26.

- 1. Deliver personalised, safe and caring services
- 2. Support the health and wellbeing needs of our community and colleagues
- 3. Develop effective partnerships to address health and wellbeing inequalities
- 4. Develop a diverse, talented and motivated workforce to meet future service and user needs
- 5. Drive service improvement through high quality research, innovation and transformation
- 6. Use our resources efficiently, effectively and sustainably
- 7. Develop our Estate and Digital infrastructure to meet service and user needs

2.4 Challenge and Context

Like many other NHS organisations, both Trusts have their challenges in terms of improving the quality and performance of its services, as well as managing our finances. Both Trusts face historic issues of underfunding and financial deficits and it is remarkable that we have delivered a financial outturn close to breakeven during 2024/25.

It is no exaggeration to say that both Trusts face an unprecedented demand for their services. Our Emergency Departments have seen increases in demand which means meeting targets for ambulance delays and long waits in A&E prove difficult. Our clinicians work heroically in dealing with the unrelenting stresses and pressures including a significant strain on the availability of beds especially over winter and the need to improve the experience and outcomes for patients. The challenging environment facing us presents an opportunity for us to deliver our services in new ways; working across traditional boundaries and seeking innovative solutions that will help all parts of our health and social care system become truly integrated around the needs of our communities. We also know that the role of the hospital is changing, with one of the three priorities within the 10

Year NHS Plan being a shift from treatment to preventative health. We recognise the part we must play in preventing ill health and that more services will be provided closer to or at patients' homes, with many provided via digital technologies in the future.

We are not content to just deal with the challenges of the here and now. We have ambitious plans for major changes to how and where care is delivered. We are working on a Joint Business Case for a Joint Electronic Patient Record (EPR) which will help us transform some of our working practices and bring further efficiencies associated with the digital world.

We recognise that our workforce is at the heart of our strategy, ensuring there are sufficient staff with the right skills and experience is an ongoing challenge for many NHS organisations, and it is one that rightly concerns our Board of Directors. We have a hugely ambitious OD & People plan that aims to build a compassionate and inclusive culture.

2.5 Workforce

We continue to take positive steps forward in recruiting to some traditionally difficult to fill consultant roles, and we have made good improvements in the reduction of agency staff as a result. Safe staffing levels are monitored closely and regularly reported to the Board of Directors.

We continue to strengthen our leadership and management development offer to support organisational performance and culture. Activity includes the relaunch of Appraisals with Impact training following the refresh of our Let's Talk Appraisal process and the commencement of two new cohorts of the Aspire Leadership Development Programme.

A new overarching framework, aligned with the Trust's C.A.R.E. values, has been developed around three interconnected strands:

- People Management Excellence focused on everyday line management aligned with the NHS Expectations of Line Managers, supported by practical 'Know-How' sessions on HR systems.
- Operational Management Excellence developed in collaboration with Corporate Services colleagues, this strand enhances technical capabilities including data analysis, project management, financial acumen, and digital literacy.
- Leadership Excellence includes the Aspire Programme and regular development sessions for senior leaders, with the most recent session focussing on strategic alignment, collaboration, and innovation
- Development opportunities are designed to be flexible and person-centred, supported by a self-assessment tool for all managers.
- The Our C.A.R.E. Leadership Way was launched in July 2025 and will evolve to meet organisational needs. Uptake and impact will be monitored, with concerns escalated as appropriate.

Each Trust has an Equality, Diversity & Inclusion (EDI) Strategy which sets out the Trust's EDI ambitions and key objectives for the next 3 years. As we come to the end of our Equality, Diversity & Inclusion (EDI) Strategy we have embarked on a consultation with our staff, Staff Side and Staff Networks regarding a new Joint EDI Strategy which we hope to launch in the new year. In January this year we were successful at both Trusts in achieving the key deliverables for Bronze status against the NW BAME Assembly Anti-Racism framework. We are one of four Trusts in Greater Manchester (GM) that have achieved the Bronze award.

We remain committed to working with local partners to attract community talent into the Trusts and work in partnership with local authorities, schools and colleges with a view to increasing the education and employment opportunities within the Trusts and the localities.

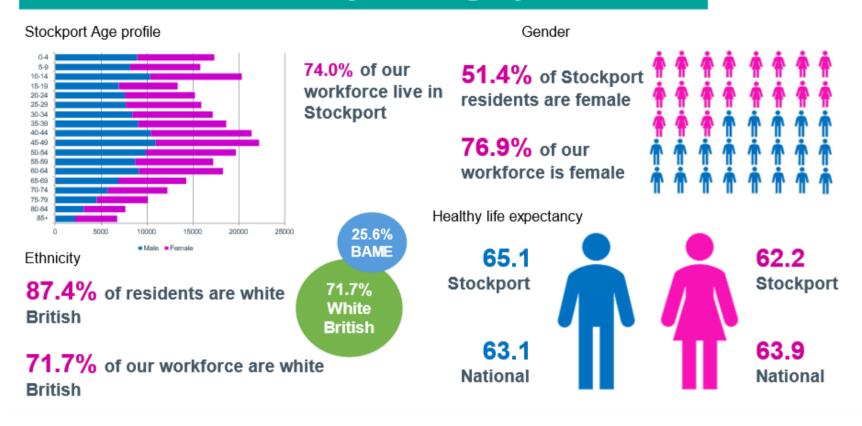
3. About Stockport

Overall, Stockport is one of the healthiest places to live in Greater Manchester, and the wider North West, with health outcomes broadly in line with national averages. Rates for deaths from cardio-vascular disease, road injuries, childhood obesity and physical activity in adults are all better than national averages. However, rates of alcohol harm, breast feeding initiation, and infant mortality are all below the national average.

While health and wellbeing in Stockport is, on average, among the best in the North West, we know that this is not the experience of all of our communities. We want to give everyone in Stockport the best possible start in life and support them to live well and age well with equal opportunities and access to quality services, in the right place and at the right time.

These borough wide figures mask significant health inequalities between different parts of the borough, for example life expectancy is 11 years longer for men in the most affluent parts of the borough than for those living in the most deprived. Declining health starts earlier in the more deprived parts of the Borough; 55 years compared to 71 years.

The Health Economy Demographics



The Health Economy Demographics

Prevalence

18.15% have a disability, compared to 17.53% nationally



Long Term Conditions

53,310 residents have a long-term condition

21,700 have two LTCs

9,040 have 3 LTCs

3,840 have 4 or more LTCs



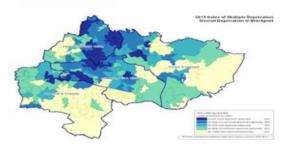
Deprivation

Stockport is the 8th most polarised borough in England - estimated population of Stockport 291,775 people.

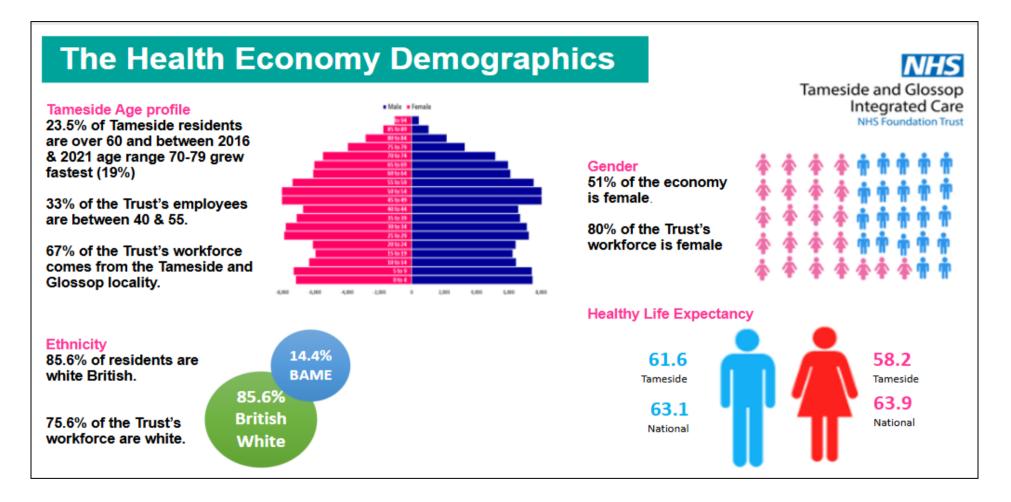
17.4% live in our most deprived quintile and

25.6% in the most affluent quintile.

13.4% of children live in low income families



4. About Tameside & Glossop



The Health Economy Demographics



Prevalence



21% have a disability, compared to 17.53% nationally

Long Term conditions

34,000 residents have one long-term condition

14,500 have two LTCs

6,000 have 3 or more LTCs



Deprivation

Tameside is the 23rd out of 317 most deprived local authorities in England

24.9% (11,429) of children live in low income families.



5. Role specification

JOB TITLE: Joint Non-Executive Director (Chair of Audit Committee)

RESPONSIBLE TO: Joint Chair

ROLE SUMMARY:

The Non-Executive Directors work alongside the Chairman and Executive Directors of the Foundation Trust Board to advise on the development of strategy and to oversee the performance of Stockport NHS Foundation Trust.

They share responsibility with other Directors for the success of the organisation using the available resources to deliver healthcare and improve the health of local people. They will bring independent and objective judgement to bear on issues relating to the strategy, direction and performance of the Trust.

KEY RESPONSIBILITIES:

As members of a unitary Board, Non-Executive Directors (NEDs) have a duty to act with a view to promoting the success of the organisation, maximising the benefits for its patients and the public.

The Board is collectively responsible for the performance of the NHS Foundation Trust. Non-Executive Directors constructively challenge and scrutinize the Trust's performance against agreed goals and objectives.

They should satisfy themselves as to the integrity of financial, clinical and other information, and ensure that systems of governance and risk management are robust.

In addition to any specific knowledge, experience and skills they may have non-executive directors play a crucial role in providing an independent perspective. Furthermore, it is the duty of Non-Executive Director to uphold the highest standards of probity and integrity as per the Trust's values, as well as encouraging good relations within the Boardroom.

The post holder will be expected to chair the Audit Committee and participate full as a member of other assigned committees.

Main duties of the role of Non-Executive Directors

- · Provide input in setting the strategic direction of the organisation whilst considering the views of the Governors
- Support the Chair, Chief Executive and Executive Directors in the governance and stewardship of the Trusts
- Provide support and constructive, considered and appropriate challenge to the Executive Directors holding them to account for the delivery of the strategy and the performance of the Trusts
- Ensure the Trusts place patient safety at the heart of their work and that mechanisms are in place to ensure staff are able to speak up
- Ensure as part of the Board that the Trusts manage risk effectively
- Participate in Board service visits and report findings back to through the appropriate committee in line with procedures
- As a member of the Board work with local communities and collaborate with partner organisations to address health inequalities and ensure that the Trusts provide the best possible care for local communities.
- · Promote and support the equality, diversity and inclusion agenda
- Attend the formal Council of Governors meetings including the Annual Members Meeting and take part in any Governor and NED working groups as required.
- Promote and uphold the Trust values and fulfill any assigned Non-Executive Director champion roles

Specific role responsibilities – Chair of Audit Committees

As well as the general responsibilities noted above the postholder will chair the Audit Committees. They will:

- Bring independent financial acumen to the work of the committee across its governance, risk management, assurance and internal control functions.
- Escalate any issues as appropriate to the Board of Directors providing assurance on the management of areas within its remit and/or to advise the Board of issues of concern or additional mitigations and assurances it has sought on specific matters.
- Work effectively with the Chief Finance Officer and internal and external auditors and counter fraud specialists to ensure comprehensive oversight of the Trusts' financial activity.
- Look for assurance around the effectiveness of internal control, governance and risk management systems and processes and that financial information is accurate and controls and systems are robust in order to provide assurance on this to the Board of Directors

5.1 Person Specification

	Essential	Desirable
Eligibility and Commitment		
Ability to commit average of 4-5 days per month to Trust's business; and flexibility to commit more if required for defined periods	Х	
You are, or are eligible and willing to become, a Member of the Trusts Resident in England and Wales Not otherwise disqualified	x	
Ensure you meet the criteria for eligibility for appointment as a member of the Board of Directors including the criteria for Fit & Proper Person in accordance with NHS Improvement and CQC principles.	X	
Background and Experience		
Have experience of operating at a senior level or board level in a public or private sector organisation	Х	
Hold the CCAB qualification and have recent and relevant expertise in finance, evidenced through membership of a professional body	Х	
Have a strong background in audit and governance.	Х	
Have an awareness of the current challenges and opportunities in the National Health Service	Х	
Have previous experience as a Non-Executive Director within the public or private sector		Х
Have an awareness of developments in the local health economies of Stockport and Tameside & Glossop		X
Are able to engage in strategic thinking and development for organisations	Х	
Able to demonstrate a strong connection to their local community or have lived experience, either as carers or service users.		х
Knowledge		
Have experience of working as part of a diverse Board or equivalent to reach consensus		Х

Have an awareness of the differing roles of a Non-Executive Director and executive management	Х	
Have strong emotional intelligence	Х	
Have an understanding of accountability for actions, including collective accountability for Board decisions	Х	
Have experience of engagement with a diverse and large group of stakeholders and interested parties, including the general public; and feeding that intelligence back into the work of the organisation		х
Have an awareness of the principles of effective corporate governance and effective Boards	Х	
Abilities		
Capable of chairing a committee, have an understanding of the needs of our local patient community, the roles and responsibilities of the Council of Governors, statutory and regulatory requirements, risk management and board assurance processes	Х	
You are able to participate in a unitary Board, balancing challenge and collective responsibility, to deliver statutory responsibilities	Х	
You are able to both support and challenge the Chief Executive and the Executive Team	Х	
You are able to successfully engage with a range of statutory regulators and local stakeholders	Х	
You able to exercise judgements independently of Trust management, discuss them robustly with colleagues, and reach a final view	Х	
You are able to engage with and constructively challenge complex proposals and arguments	Х	
Good interpersonal skills. Able to work as a team to meet common goals and willingness to utilise skills and experience for the good of the organisation	Х	
Able to assess strategies and plans of action to achieve objectives	Х	

6 Other Information

6.1 Time commitment

The expected commitment is 4-5 days per month on average. Non-Executive Directors are expected to attend the Board meetings and informal Board development sessions and are likely to be appointed to sit on two Committees.

6.2 Induction and Training

A detailed induction programme has been developed for newly appointed Non-Executive Directors. In addition, there is access to a number of nationally-organised training events.

6.3 Remuneration

Remuneration is set at £15,000 per annum, taxed through payroll under PAYE. It is not pensionable.

Non-Executive Directors are eligible to claim travel expenses, currently in line with national rates, for travel and subsistence costs incurred on Trust business. This does not include travel expenses for travelling to or from home to your normal place of work, e.g. Trust Headquarters, which may change from time to time.

6.4 Appointment, tenure and termination of office

Non-Executive Directors are appointed for an initial period of three years, subject to a satisfactory appraisal. They are eligible to be considered for a second term, but there is no expectation of automatic re-appointment.

These posts are statutory offices and are not subject to the provisions of employment law: a Non-Executive Director is an office-holder, not an employee. To ensure that public service values are maintained at the heart of the NHS, all Chairs and Directors of NHS Boards are required, on appointment, to agree to comply with standards for members of NHS boards.

6.5 Criteria for Disqualification (Including Fit and proper Persons Test)

It is a statutory requirement that all Directors meet the 'Fit and Proper Person' test set out in Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This requires that -

- a. You are of good character;
- b. Have the qualifications, skills and experience necessary to undertake your Trust role;

- c. Your health enables you (after reasonable adjustment, if required) to undertake the role;
- d. You have not been involved with or aware of any serious misconduct or mismanagement in relation to the provision of services regulated by the Care Quality Commission
- e. You are not subject to certain other matters related to bankruptcy, being on a Barred Person's List, or having been stuck-off by a health or social care regulator.

You will be asked to self-certify your eligibility under this Regulation, and the Trust will undertake checks prior to confirming an appointment. All Directors are subject to review, at least annually, to ensure that they continue to meet these requirements.

6.6 Criteria for eligibility for appointment as a member of the Board of Directors

The following paragraphs identify the circumstances where an individual would not be eligible for appointment as a member of the Board of Directors. These are quoted directly from the Trust Constitutions.

A person may not become or continue as a Director of a Foundation Trust if:

- They have been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged;
- They have made a composition or arrangement with, or granted a trust deed for, his / her creditors and has not been discharged in respect of it;
- They have within the preceding five years has been convicted in the British Isles of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on him / her;

6.7 Checks with the Disclosure and Barring Service (DBS)

Non-Executive Directors may occasionally have access to children or vulnerable adults through their work for the Trusts. To safeguard patients by identifying unsuitable candidates, all appointments will be dependent upon satisfactory completion of a disclosure through the DBS. Checks will be carried out by the Trust after the appointment and before the individual takes up their full duties.

6.8 Trust Membership

Part of the legal qualification for serving as a Non-Executive Director is that you are a formal Member of the Foundation Trusts. To qualify for membership, you must-

- a. Be resident in England.
- b. Not be subject to vexatious complainant procedures at the Trusts.
- c. Not have been dismissed from any health service body save for reason of redundancy.

The successful candidate will require to have been accepted into membership prior to assuming office.

7 Applying for the role

The closing date for the role is midnight on the 8th December 2025

To apply for this role, please submit an up to date copy of your CV, along with a Supporting Statement of no more than 2 pages, that addresses the criteria set out in the person specification.

Please provide your telephone and email contact details and let us know of any dates when you are not available or where you may have difficulty with the indicative timetable.

You should also provide the names, positions, organisations and contact details for two referees, one of whom should be your current or most recent employer. If you do not wish us to approach your referees without your prior permission, please state this clearly.

For an initial conversation please contact our recruitment advisor Jonathan Phillips on 07817 988490. You should submit your CV to ip@seymourjohn.com using the Subject Line "T&S NED Application". Once you have submitted your application, you will receive an acknowledgement to confirm that we have received your application.

Your application will be assessed to see the extent to which you meet the necessary criteria and have the qualities and expertise specified for the post before it is passed to the Nominations Committee for consideration.

You may be invited to participate in a preliminary shortlisting interview with Jonathan Phillips, the purpose of which will be to obtain further details about yourself, your interest in the role and to understand your skills and experience in order to inform the Nominations Committee as part of the shortlisting process.

It is anticipated that this preliminary process will be completed between 8th December and 12th December 2025

Shortlisted candidates will be informed by no later than **Friday 19**th **December 2025**, if they have been selected for interview and the interview details will be confirmed by email and letter.

Final Interviews will be held on **7**th **January 2026**. Exact times and venue will be confirmed. As part of the selection process you may be asked to participate in a stakeholder panel consisting of a group of Governors and Executive Directors in addition to the formal interview by the Nomination Committee to assess whether you can demonstrate the qualities and expertise specified. Further details will be provided nearer the time.

The Nominations Committees at each Trust will recommend their preferred candidate to the respective Councils of Governors who will make the final appointment.

The successful candidate will be contacted by the Director of People & OD.

8 Diversity and Monitoring

Stockport NHS Foundation Trust and Tameside & Glossop ICFT are committed to being organisations within which diversity is valued and appreciated, regardless of race, age, disability, gender, sexual orientation, faith or religion and socio-economic status. The Trusts recognise that everyone is different, valuing their unique contribution that individual experience, knowledge and skill can make in the delivering the goals and objectives of the organisation.

The Trusts undertake monitoring of its workforce and that of its applicants and in order to ensure its effectiveness, we will ask that you complete and return the monitoring form to assist us in our diversity monitoring. Please note that this form will not be seen by any members of the interviewing panel. The information will only be held by our recruitment team for monitoring purposes.