



# Could you help lead the NHS in your area?

**Hull University Teaching Hospitals  
NHS Trust and Northern Lincolnshire  
and Goole NHS Foundation Trust  
Group Chair**

## **Candidate Information Pack**

**Reference: N3483**

**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 actively encourage applications from individuals of all backgrounds, including those from underrepresented groups and people living with disabilities.**

**We value the unique perspectives that come from different life experiences, cultures, and identities. Whether you bring lived experience of using health services, professional expertise, or community insight, your voice matters.**

**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. The Opportunity

NHS England has a specific role in appointing and supporting NHS trust chairs and non-executives. We are looking for an exceptional leader to chair Hull University Teaching NHS Trust (HUTH) and Northern Lincolnshire and Goole NHS Foundation Trust (NLAG)

The Trust Boards of HUTH and NLAG have committed to a Group model under the brand of Humber Health Partnership (the Group). The Humber Health Partnership is one of the largest Groups in the NHS, with a turnover of £1.6 billion, employing 19,000 staff.

Our five main hospital sites are Castle Hill Hospital, Diana, Princess of Wales Hospital in Grimsby, Goole and District Hospital, Hull Royal Infirmary, and Scunthorpe General Hospital. We deliver a wide range of community services across North and North East Lincolnshire, including district nursing, physiotherapy, psychology, podiatry and specialist dental services.

We see well over a million patients every year with around 275,000 attendances at our emergency departments, 214,000 hospital admissions and more than a million outpatient appointments. We deliver around 8,700 babies each year and our community services provide vital healthcare to patients in their own homes.

As Teaching Hospitals working with the Hull York Medical School, we are a UK leader in research and innovation.

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.

## 2. The Person Specification

We are looking for candidates who have the right values and want to use their energy, skills and experience to help drive the delivery of sustainable healthcare services for the people of Hull, Northern Lincolnshire and Goole, and surrounding areas.

***Experience (please directly address these criteria in a supporting statement, to accompany your CV)***

- Prior Board experience (any sector) gained in an organisation of complexity and scale.
- Experience of leading and delivering against a long-term vision and strategy.
- Experience of working in or close to the public sector, or evidence of being able to quickly adapt to new sectors.
- Experience leading transformational change, managing complex organisations, budgets and people

- 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
- Prior experience of designing and leading Board arrangements for major improvement and turnaround
- Experience managing conflict, finding compromise and building consensus across varied stakeholder groups with potentially conflicting priorities
- Demonstrable competence in chairing meetings
- Strong interpersonal, communication and leadership skills

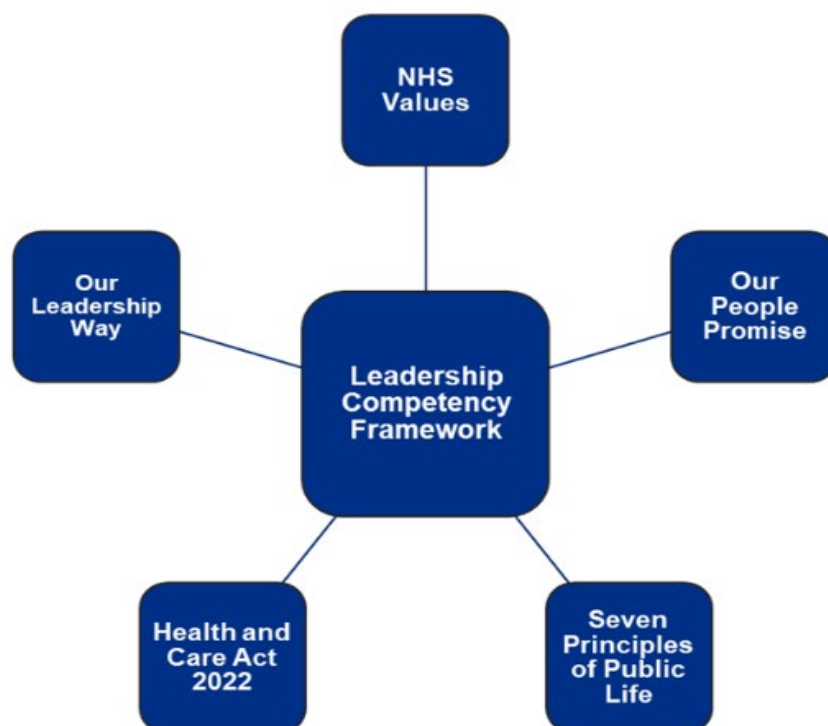
### ***Skills, values and attributes***

- A clear commitment to the NHS and to the Group's values and principles
- Demonstrable self-awareness
- 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
- Evidence in other leadership roles of demonstrating the competencies listed in the NHS Leadership Competency Framework for Board Members, below:

### **NHS leadership competency framework for board members**

Leaders in the NHS help deliver better health and care for patients by setting the tone for their organisation, team culture and performance. We have worked with a wide range of leaders from across the NHS to help describe what we do when we operate at our best.

The competency domains reflect the [NHS values](#) and the following diagram shows how they are aligned:



<b>Working together for patients*</b>	<b>Compassion</b>
Building a trusted relationship with partners and communities	Creating a compassionate, just and positive culture
<b>Respect and dignity</b>	<b>Improving lives</b>
Promoting equality and inclusion and reducing health and workforce inequalities	Setting strategy and delivering long term transformation Driving high quality sustainable outcomes
<b>Commitment to quality of care</b>	<b>Everyone counts</b>
Driving high quality and sustainable outcomes Setting strategy and delivering long term transformation	Promoting equality and inclusion and reducing health and workforce inequalities Creating a compassionate, just and positive culture
Providing robust governance and assurance	

The competency domains are aligned to [Our NHS People Promise](#), [Our Leadership Way](#) and the [Seven Principles of Public Life](#) (Nolan Principles).

## **The six NHS leadership competency domains:**

### **Driving high-quality and sustainable outcomes**

The skills, knowledge and behaviours needed to deliver and bring about high quality and safe care and lasting change and improvement – from ensuring all staff are trained and well led, to fostering improvement and innovation which leads to better health and care outcomes. Candidates will have:

- 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

### **Setting strategy and delivering long-term transformation**

The skills that need to be employed in strategy development and planning, and ensuring a system wide view, along with using intelligence from quality, performance, finance and workforce measures to feed into strategy development. Candidates will have:

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

### **Promoting equality and inclusion, and reducing health and workforce inequalities**

The importance of continually reviewing plans and strategies to ensure their delivery leads to improved services and outcomes for all communities, narrows health and workforce inequalities, and promotes inclusion. Candidates will have:

- A clear commitment towards issues of equality, diversity and inclusion
- Significant experience of engaging with the diverse social, economic and cultural groups served by the organisation

### **Providing robust governance and assurance**

The system of leadership accountability and the behaviours, values and standards that underpin our work as leaders. This domain also covers the principles of evaluation, the significance of evidence and assurance in decision making and

ensuring patient safety, and the vital importance of collaboration on the board to drive delivery and improvement. Candidates will have:

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

### **Creating a compassionate, just and positive culture**

The skills and behaviours needed to develop great team and organisation cultures. This includes ensuring all staff and service users are listened to and heard, being respectful and challenging inappropriate behaviours. Candidates will have:

- A clear commitment to the NHS and the trust's values and principles
- 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
- Experience managing conflict, finding compromise and building consensus across varied stakeholder groups with potentially conflicting priorities

### **Building a trusted relationship with partners and communities**

The need to collaborate, consult and co-produce with colleagues in neighbouring teams, providers and systems, people using services, our communities, and our workforce. Strengthening relationships and developing collaborative behaviours are key to the integrated care environment. Candidates will have:

- A desire to engage with the local population and to collaborate with senior stakeholders across the health and care system
- Strong interpersonal, communication and leadership skills

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 individuals of all backgrounds, including those from underrepresented groups and people living with disabilities, who we know are all under-represented in these important roles.



### 3. 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 Chair also ensures the Board is focused on improving outcomes in population health and healthcare, and fosters a culture of learning and continuous improvement, with a particular focus on quality, safety, access, patient experience.

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.

### 4. 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 **the six NHS leadership competency domains**.

Working closely with the Foundation Trust Office, the postholder is a principal point of contact for our **governors and members of NLAG**. The Group Chair chairs the Council of Governors meetings and meets regularly with the Lead Governor.

## 5. The Move to a Group Leadership Model

In 2022, the Trust boards of HUTH and NLAG and the Council of Governors of NLAG agreed to form a group model leadership structure with joint leadership and aligned governance and decision-making. Since that time, appointments have been made to the role of Group Chief Executive and other group executive roles have been established. Under these arrangements, whilst individual boards are retained in statute, as much decision-making as possible will take place via boards and committees using an 'in-common' approach.

Both trusts are committed to working collaboratively in this way to achieve the 10 Year Health Plan for England and the ICB objectives; deliver more for the populations we serve with a focus on improving clinical outcomes, reducing inequalities of access and addressing the known workforce and infrastructure challenges whilst leveraging better environmental and sustainable approaches in the long term.

## 6. About NHS Humber Health Partnership

The Group is one of the largest in the NHS, with a turnover of over £1.6 billion, employing 19,000 staff.

Made up of two Trusts – Hull University Teaching Hospitals NHS Trust (HUTH) and Northern Lincolnshire and Goole NHS Foundation Trust (NLAG) – the Humber Health Partnership is committed to delivering world-class services for the 1,500,000 people we serve.

Its five main hospital sites are Castle Hill Hospital, Diana, Princess of Wales Hospital in Grimsby, Goole and District Hospital, Hull Royal Infirmary, and Scunthorpe General Hospital. The Group also delivers a wide range of community services

across North and North East Lincolnshire, including district nursing, physiotherapy, psychology, podiatry and specialist dental services.

The Group sees well over a million patients every year with around 356,700 attendances at our emergency departments, 155,000 hospital admissions and more than 1.3 million outpatient appointments. The Group delivers around 8,100 babies each year and our community services provide vital healthcare to patients in their own homes.

The Group has also been recognised for its work in supporting veterans, newly qualified nurses and our international recruitment programme.

The Group has 14 Care Groups, working jointly with Northern Lincolnshire and Goole NHS Foundation Trust and Hull University Teaching Hospitals NHS Trust to deliver Clinical services to both sides of the Humber Estuary. These are supported by Corporate Services, Estates, Facilities and Development, Strategy and Planning, Finance, Human Resources including education and Development, Quality Governance, Corporate Governance, Information Management and Technology.

## Our Vision and Values

Our staff charter is based on the four values of the Group: Compassion, Honesty, Respect and Teamwork. These were developed on consultation with over 3,000 of our staff working across the Group. We expect all staff to work and live by these values while at work with an expectation that board members are role models for the values at all times.

<div>  <b>Staff charter</b>   Humber Health Partnership </div>			
COMPASSION	HONESTY	RESPECT	TEAMWORK
Put the safety and care of patients and colleagues at the heart of everything you do	Take responsibility for your actions, decisions and behaviours	Trust and appreciate your colleagues - say thank you and well done	Meet regularly as a whole team, discuss goals, actions and ideas for improvement. Commit to being good team members
Listen to your colleagues and patients, understand, empathise and take action to help	Report concerns about safety, quality and negative behaviours as quickly as possible	Talk to everyone in a respectful and polite manner and listen when others want to speak	Include all colleagues in key discussions about the team or service
Treat everyone with kindness and support those who need assistance or guidance	Communicate constantly and clearly at all times; create and respond to a constant loop of honest feedback	Understand and appreciate the perspectives, choices and beliefs of others and never discriminate against anyone	Tackle poor behaviours as they arise
Do the right thing, even if this is more difficult to do	Be open about mistakes, apologise, learn and improve	Respect and use <u>each others'</u> strengths; act respectfully by giving, receiving and acting on constructive feedback	Agree high professional standards as a team; give yourselves time to reflect on how to constantly improve

Our vision statement is **United by Compassion - Driving for Excellence**, reflecting our values and our ambition to improve and transform the care we provide for our local population.

## Regional context

We operate as part of an integrated care board – NHS Humber and North Yorkshire (HNY). The ICB's objective is to narrow the gap in healthy life expectancy by 2030 – increasing healthy life expectancy by five years by 2035. The Group also provides services for significant numbers of patients who reside in the County of Lincolnshire which is in a separate ICB area.

We have a number of major challenges:

- The HNY population is aging at a faster rate than anywhere else in the country (by 2043, there will be 75% more people aged 75 and over) - healthy life expectancy is actually decreasing in some areas.
- Many of our specialist and most experienced staff are going to be retiring in the next 10 years
- Inequalities between different groups of patients will worsen if we don't take action
- Too many people in the area are having to wait longer to see a health and / or care professional and get the advice, support and / or treatment they need

## Key Challenges

The Group faces a number of significant regulatory and performance challenges. It is currently in Segment 4 of the NHS Oversight Framework and has incurred potential breaches in its provider licence. Also attracting Board attention and scrutiny are a range of safety concerns, a workforce that is under stress and a need to stabilise and enhance its Board capacity.

An immediate response is underway to address pressures coupled with support from an Improvement Team to the Board. The Group is also developing an Improvement Plan to deliver better services for patients and address regulatory concerns. Its priorities for 2025/26 and beyond consist of three phases that aim to:

### **Stabilise** - and fix critical operational delivery and governance

The Stabilise phase focuses on identifying and addressing a range of critical issues that will have an immediate, positive impact on the delivery of safe care. This includes addressing CQC, regulatory and professional standards action plans, organisational governance and supporting individual specialities, services and cross-cutting safety and quality issues that require significant and timely interventions.

**Develop** - a 12–18-month clinical plan to strengthen community, acute, surgical and tertiary services

The Develop phase will see the development of a 12-18 months clinical plan, centred on four priorities: unlocking community services to reduce admissions and support discharge; strengthening acute medicine through improved flow, ward right-sizing and workforce review; maximising surgical and elective capacity across all our hospitals; and safeguarding Humber's specialist tertiary services to meet enduring population needs.

**Connect** - establish clinically-led reviews to join up primary, secondary and tertiary care pathways

The Connect phase will focus on a rolling programme of specialty reviews designed to bring clinicians together across primary, secondary and tertiary care. These clinically-led reviews will use best-practice evidence, research and patient insights to strengthen integration, reduce variation and ensure patients experience safe, seamless and high-quality care across the Group and with system partners.

The foundations for achieving these priorities will be:

**Living within our finances** – achieve financial savings plan, deliver a sustainable financial future and productivity gains

**A Digital future** - to transform digital, data and technology approaches to enable smarter working and transformational change

**Clinical Leadership Development and Culture** - to build a truly engaged clinical workforce with capacity and capability at every level

**Safety Culture** - become a learning organisation, psychologically safe, with an inclusive and just culture that encourages creativity and collaboration

For details about our Board composition visit: <https://www.nlg.nhs.uk/about/how-we-are-run/board>

## 7. About Hull University Teaching Hospitals NHS Trust (HUTH)

The Trust is situated in the geographical area of Kingston upon Hull and the East Riding of Yorkshire. It employs approximately 9,000 staff, has an annual turnover of £886 million (2023/2024) and operates from two main sites - Hull Royal Infirmary and Castle Hill Hospital – whilst delivering a number of outpatient services from locations across the local health economy area.

The Trust's secondary care service portfolio is comprehensive, covering the major medical and surgical specialties, routine and specialist diagnostic services and other

clinical support services. These services are provided primarily to a catchment population of approximately 600,000 in the Hull and East Riding of Yorkshire area.

HUTH provides specialist and tertiary services to a catchment population of between 1.05 million and 1.25 million extending from Scarborough in North Yorkshire to Grimsby and Scunthorpe in North East and North Lincolnshire, respectively. The only major services not provided locally are transplant surgery, major burns and some specialist paediatric services.

It is designated as a Cancer Centre, Cardiac Centre, Vascular Centre and a Major Trauma Centre. HUTH is a university teaching hospital and working with the Hull York Medical School, we are a UK leader in research and innovation.

In 2023/2024 the Trust provided the following services:

- Assessed over 130,000 people who attended the Emergency Department at Hull Royal Infirmary
- Had over 880,000 attendances at outpatient clinics
- Admitted over 94,000 patients to its wards totalling 1,311 beds

The Trust is currently rated 'Requires Improvement' by the CQC.

HUTH was formed in October 1999 through the merger of the former Royal Hull Hospitals and East Yorkshire Hospitals NHS Trusts and became the Hull and East Yorkshire Hospitals NHS Trust.

On 1 March 2019, the Trust formally changed name to Hull University Teaching Hospitals NHS Trust in order to strengthen links with Hull University, particularly in respect of teaching and academic opportunities, and to bring about positive benefits in respect of recruitment, especially in relation to clinical posts across medical, nursing and professions allied to health. Research and innovation features as one of the Trust's seven organisational goals as it reflects the organisation's aspiration to be a research centre of excellence, engendering an innovation culture.

## **8. About Northern Lincolnshire and Goole NHS Foundation Trust (NLAG)**

The Trust provides acute hospital services and community services to a population of more than 450,000 people across a wide geographical area which includes North and North East Lincolnshire, East Riding of Yorkshire and West and East Lindsey in the County of Lincolnshire.

The Trust has three hospitals: Diana, Princess of Wales Hospital in Grimsby, Scunthorpe General Hospital and Goole and District Hospital. The Trust also delivers community services in North Lincolnshire.

The Trust was established as a combined hospital and community Trust on April 1, 2001, by the merger of North East Lincolnshire NHS Trust and Scunthorpe and Goole Hospitals NHS Trust. The Trust achieved Foundation Trust status on May 1, 2007, and on April 1, 2011, it took over community services in North Lincolnshire under the Transforming Community Services agenda. In 2013 the Trust dropped the word 'hospitals' from its name to reflect that it offers a wide range of services out in the community as well as at its three hospitals.

The Trust is currently rated 'Requires Improvement' by the CQC.

The Trust has invested significantly in its estate. This includes two new Accident & Emergency (A&E) departments, a £40 million investment in a greener future and an upgrade to our critical infrastructure. It has recently invested heavily in diagnostic capability with new MRI and CT scanners and are putting digital at the forefront of what it does, having recently rolled out electronic prescribing, digital appointment letters and virtual consultations.



## Appendix 1: Values and concepts from NHS Leadership Competency Framework

### Our people promise:

- We are compassionate and inclusive
- We are recognised and rewarded
- We each have a voice that counts
- We are safe and healthy
- We are always learning
- We work flexibly
- We are a team

### NHS values

- Working together for patients
- Respect and dignity
- Commitment to quality of care
- Compassion
- Improving lives
- Everyone counts

### Our leadership way

We are compassionate

- We are inclusive, promote equality and diversity, and challenge discrimination
- We are kind and treat people with compassion, courtesy and respect.

We are curious

- We aim for the highest standards and seek to continually improve, harnessing our ingenuity
- We can be trusted to do what we promise

We are collaborative

- We collaborate, forming effective partnerships to achieve our common goals
- We celebrate success and support our people to be the best they can be

### Health and Care Act 2022

- Collaborate with partners to address our shared priorities and have the core aim and duty to improve the health and wellbeing of the people of England.



- Improve the quality, including safety, of services provided.
- Ensure the sustainable, efficient use of resources for the wider system and communities

### Seven principles of public life

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

## Appendix 2: Terms of Appointment

- The current remuneration for this role is £70,000 per annum. This will be subject to a 12-month review with the region and Council of Governors.
- 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 Trusts.

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 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 the NHS England [website](#).

### **Appendix 3: More information**

For information about the Group and the Trusts, such as business plans, annual reports, and services, visit their websites:

- [NHS Humber Health Partnership](#)
- [Hull University Teaching Hospitals NHS Trust](#)
- [Northern Lincolnshire and Goole NHS Foundation Trust](#)

## Appendix 4: Making an application

For more information, you can get in touch with:

- **The Group** - for an informal and confidential discussion with Lyn Simpson, Interim Chief Executive, please contact Sarah Meggitt on 03033 3049882 or by emailing [sarahmeggitt@nhs.net](mailto:sarahmeggitt@nhs.net)
- **GatenbySanderson** - are helping us to identify potential candidates, if you would like a confidential discussion about the role, please contact Robin Staveley, Partner and Practice Lead on 07789 273 778 or [robin.staveley@gatenbysanderson.com](mailto:robin.staveley@gatenbysanderson.com) or Niamh Blair, Delivery Consultant on 07747 207 285 or [niamh.blair@gatenbysanderson.com](mailto:niamh.blair@gatenbysanderson.com)
- **Governor** - for an informal and confidential discussion with Ian Reekie, NLAG's lead governor, please contact Suzanne MacLennan on 03033 302859 or by emailing [suzanne.maclennan@nhs.net](mailto:suzanne.maclennan@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 as well as previous employer(s) from the past six consecutive years. They should also cover any regulated health or social care activity or where roles involved children or vulnerable adults. Your references may be taken prior to interview and may be shared with the selection panel.
- If you have previously held a Director, Chair or Non-executive Director position in an NHS funded organisation or a regulated services organisation (see list below), a Board Member Reference (BMR) will also be requested from your former organisation(s), for posts ending after September 2023:
  - NHS Trusts and Foundation Trusts
  - Integrated Care Boards
  - NHS England (national and regional teams)
  - Arm's Length Bodies if they deliver regulated services

- Independent providers commissioned by the NHS (e.g. private hospitals, social enterprises)
- Community Interest Companies (CICs) delivering NHS-funded care
- Joint ventures or partnerships involving NHS statutory bodies
- In accordance with NHSE's FPPT framework if appointed your references and other background checks will be shared with the Group.
- please complete and return the monitoring information form which accompanies this pack
- tell us about any dates when you will not be available.

## Appendix 5: Key dates

**Closing date for receipt of applications: Thursday 29 January 2026 at 12 noon**

**Preliminary interviews:** Shortlisted candidates will be invited for a preliminary interview with Robin Staveley, Partner and Practice Lead from GatenbySanderson w/c 9 February 2026. Feedback from these interviews will be shared with the panel.

**Interview date:** w/c 16 February 2026

**Proposed start date:** We anticipate that the successful candidate will commence their role as Group Chair from 1 April 2026