



Non-Executive Director

Candidate briefing pack

July 2024

Welcome from the Chair

Thank you for your interest in joining the Board of NHS Nottingham and Nottinghamshire Integrated Care Board. I hope that this demanding, but very rewarding, opportunity catches your imagination.



This is an exciting time to join our Integrated Care Board. We are now two years post-establishment, and we continue to work hard with our partners across our Integrated Care System to embed the right infrastructure to transform health and care services to meet our population's needs, establishing the right culture, behaviours and values to underpin our work as partners. Together, we have agreed our Integrated Care Strategy for Nottingham and Nottinghamshire, which sets the framework for our work, and we are now focussed on its successful delivery through the five-year Joint Forward Plan that we have developed with local NHS partners.

We are already making great progress in many areas; however, the ICB and other partners within our Integrated Care System continue to experience challenges. Whilst we have received funding increases in the NHS, our costs have risen at a higher rate, and we therefore have a financial deficit that we must address over the next two years. We also have some significant quality, workforce, and performance challenges to address, and we must take steps collectively to improve in all these areas. Finding the right balance for the next two years between operational delivery and longer-term strategic change will be important. Above all, we need to focus our efforts on the prevention of ill health and on addressing the inequities that currently exist, and of course, our new Government will set out expectations for us in due course.

We are currently preparing for the upcoming CQC inspection regime for Integrated Care Systems and taking some time to reflect on our ICB capabilities in line with NHS England's expectations. We are also exploring the opportunities presented to us through our new East Midlands Combined County Authority, working alongside our newly elected Mayor of the East Midlands.

We have an excellent track record in Nottingham and Nottinghamshire of successful collaboration during times of pressure on our health and care system, and we are well positioned with our Provider Collaboration, Place-based Partnerships and Primary Care Networks to continue to work together to support our vision.

Having recently reviewed the composition of our Board and the collective knowledge, skills and experience of members, we are seeking to appoint two new Non-Executive Directors to join the Board of our ICB to help us build on our achievements to date and take forward our ambitions with energy and enthusiasm. The first is a newly created post for someone with expertise in workforce development, people practices and leading organisational and cultural change. The second is an appointment into an existing role, for an individual with relevant finance experience in a large and complex organisation, who is able to chair our Audit and Risk Committee.

The ICS needs diverse, inclusive and compassionate leaders who not only reflect the community they serve, and the staff employed, but who have the leadership style and breadth of perspective to make good collective decisions. There is emphatic evidence that diverse Boards make the best decisions. We are committed to increasing the diversity of NHS Boards, and in non-executive roles nationally, it is known that women, people from local Black Asian and Minority Ethnic communities, LGBT communities, younger people, and those with lived experience of disability are all under-represented. We want a change, and so are really interested in receiving applications from people with different backgrounds, skills and experience.

For an initial conversation about this role please contact our partners at Hunter Healthcare: James McLeod by phone on 07842 424530 or by email at jmcleod@hunter-healthcare.com or Sam Cresswell by phone on 07562 650935 or by email at scresswell@hunter-healthcare.com.

Dr Kathy McLean, OBE

Chair

NHS Nottingham and Nottinghamshire
Integrated Care Board

About us

NHS Nottingham and Nottinghamshire ICB was established by NHS England on 1 July 2022 under powers in the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012 and the Health and Care Act 2022). The ICB is a statutory NHS organisation which covers the geographic areas of Ashfield, Bassetlaw, Broxtowe, Gedling, Mansfield, Newark, Rushcliffe, Sherwood, and the City of Nottingham.

We have four overarching aims:

- To improve outcomes in population health and healthcare.
- To tackle inequalities in outcomes, experience and access.
- To enhance productivity and value for money.
- To help the NHS support broader social and economic development.

In support of these aims, we have statutory responsibilities to develop a plan to meet the health needs of our population, to allocate NHS funding to deliver our plan, and to arrange for the provision of the following health services in line with our plan:

- Most planned hospital care for the diagnosis and treatment of illness (including responsibility for 59 specialised services, as delegated by NHS England).
- Urgent and emergency care (including out of hours services, accident and emergency services, ambulance services and NHS 111 services).
- Mental health services (including psychological therapies).
- Services for people with learning disabilities and autism.
- Maternity and new-born services.
- Children’s healthcare services (mental and physical health).
- Most community health services.
- Rehabilitative care.
- Palliative care.
- NHS continuing healthcare.
- GP services (responsibility delegated to us by NHS England).

Where we work



- Pharmacy, optometry and dental services (responsibility delegated to us by NHS England).

We are also responsible for making certain that the healthcare provided is of a high standard, delivers quality improvements and offers value for money.

We also have legal duties to safeguard the wellbeing of adults, young people and children who access the services we arrange, and to improve outcomes for looked after children and care leavers, and children and young people with special educational needs and disabilities (SEND).

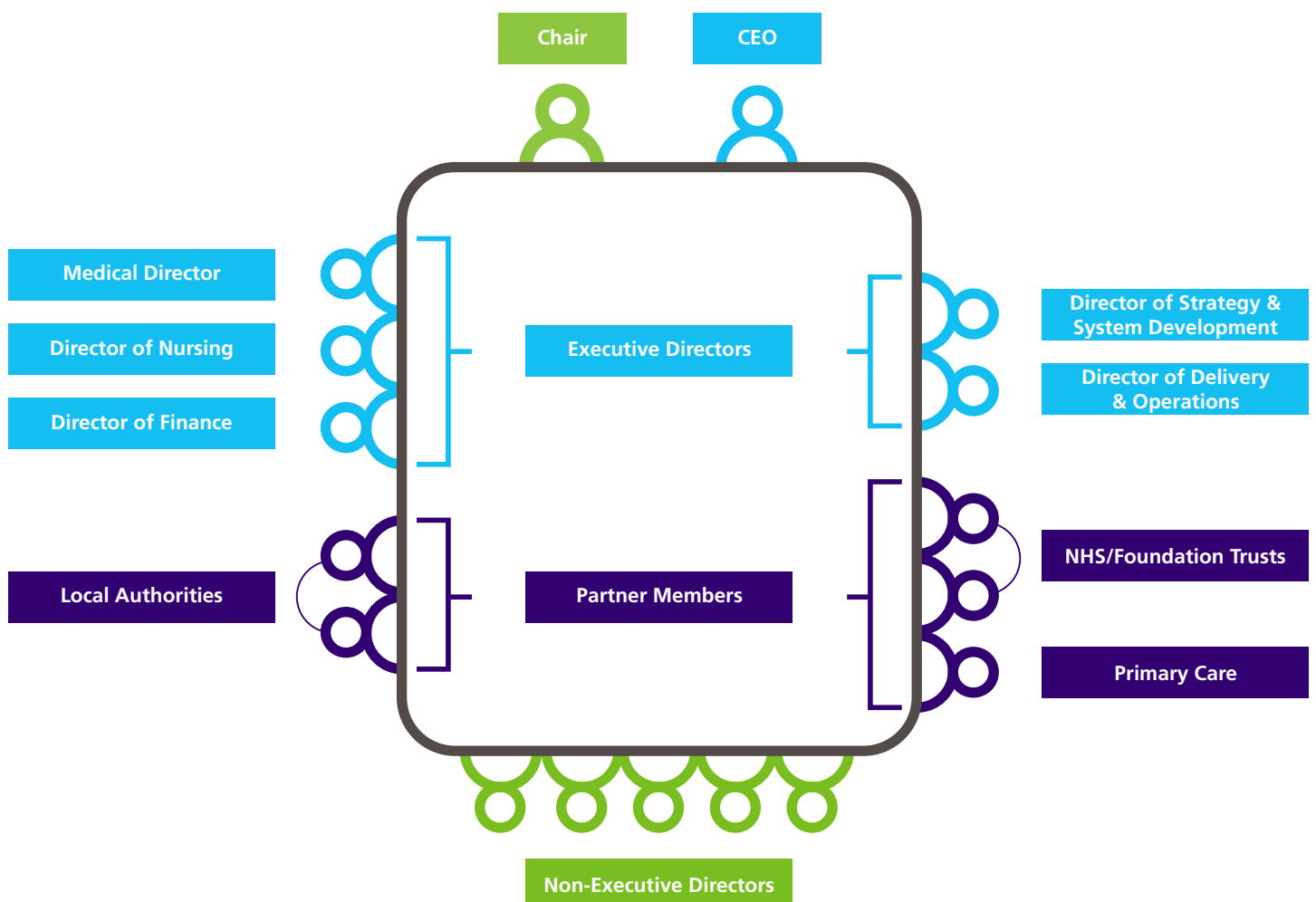
Patients are at the heart of everything we do, and we actively encourage people living in Nottingham and Nottinghamshire to help shape our plans and the work we do to transform services.

The ICB is a category one responder under the Civil Contingencies Act (2004), which requires us to plan for, and respond to, a wide range of incidents and emergencies that could cause large numbers of casualties and affect the health of our communities or the delivery of patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. We work to the requirements of the NHS Emergency Preparedness, Resilience and Response Framework to demonstrate that we can deal with such incidents while maintaining services.

We have a leadership role, working with other local NHS organisations, to improve workforce and cultural development, deliver digital transformation, drive forward environmental sustainability, and ensure a more effective use of the NHS estate. Working together in this way, helps us to deliver our roles as ‘anchor organisations’, supporting social and economic development within the area we serve.

We are governed by a unitary Board, comprised of a Chair and Chief Executive, further non-executive and executive members, along with partner members that bring the perspectives of a range of different health and care sectors to the work of the Board. You can read more about the composition of our Board and individual Board members [here](#).

We employ approximately 675 people, including staff, clinical and professional advisors and Board members. This includes staff who work on behalf of our ICB and the other four ICBs across the East Midlands (NHS Derby and Derbyshire ICB, NHS Leicester, Leicestershire and Rutland ICB, NHS Lincolnshire ICB and NHS Northamptonshire ICB) to commission pharmacy, optometry, and dental services and in support of the East Midlands Cancer Alliance.



Our organisational structure will soon be divided into five directorates:

- A **Strategy and System Development Directorate**, responsible for strategy development, strategic planning, health needs assessments, integration of health, social care and health-related services, and system development.
- A **Delivery and Operations Directorate**, responsible for commissioning of hospital and other health services, development of new care models, performance and system oversight arrangements, and emergency planning, resilience and response.
- Our **Medical Directorate** is responsible for medicines management, health inequalities, clinical prioritisation and transformation, population health management and system intelligence, data, digital and technology, clinical and care professional leadership and engagement, research, evidence and evaluation, and innovation.
- Our **Quality and Nursing Directorate** is responsible for quality improvement, infection prevention and control, safeguarding, continuing healthcare and personalisation, individual funding requests, people and culture, equality, diversity and inclusion, corporate governance, risk management and assurance, and information governance.
- Our **Finance Directorate** is responsible for financial planning and stewardship, resource allocation, capital planning, operational planning, estates, social and economic development and environmental sustainability, and audit and counter fraud arrangements.



Our Integrated Care System (ICS)

The ICB is part of the Nottingham and Nottinghamshire Integrated Care System (ICS), which is a partnership of local health and care organisations that have come together to plan and deliver joined up services to improve the health of people who live and work in our area.

By working together and collaborating as an ICS, we are better able to tackle complex challenges, such as: improving the health of children and young people; supporting people to stay well and independent; acting sooner to help those with preventable conditions; supporting those with long-term conditions or mental health issues; caring for those with multiple needs as populations age; and getting the best from collective resources so people get care as quickly as possible.

During 2023/24, the leaders of partner organisations across our ICS established a Partnership Agreement to demonstrate our collective commitment to working effectively together for the benefit of our communities and residents; this means working across organisational boundaries to maximise the use of our energies and resources.

The Partnership Agreement sets out the core values that underpin our work as partners. These include being open and honest with each other, being respectful in working together, and being accountable in doing what we say we will do.



Our ICS structure includes:

- An Integrated Care Partnership (ICP), which is a statutory committee jointly formed between the ICB and the Nottingham City and Nottinghamshire County Councils. The ICP brings together a broad alliance of partners concerned with improving the care, health and wellbeing of the population. The ICP is the 'guiding mind' of our local health and care system, and it is responsible for producing an integrated care strategy on how to meet the health and wellbeing needs of the population we serve.
- Four place-based partnerships to lead the detailed design and delivery of integrated services across their localities and neighbourhoods. The partnerships involve the NHS, GP practices, local councils, community and voluntary organisations, local residents, people who use services, their carers and representatives and other community partners with a role in supporting the health and wellbeing of the population.
- 24 Primary Care Networks (PCNs), which are partnerships between General Practice surgeries who care for neighbourhoods of between 20,000 to 100,000 people. They work together to provide services designed for the specific needs of their communities.

A key focus of our PCNs is helping residents to look after their own health, empowering people to live well by supporting them to achieve personal health and wellbeing goals.

- A provider collaborative at scale that brings local statutory NHS providers together to achieve the benefits of working at scale across multiple places, to improve quality, efficiency and outcomes and address unwarranted variation and inequalities in access and experience across different providers.

In line with our fourth aim to help the NHS support broader social and economic development, our ICS acts as an 'anchor system'. This means that we work together with our partners to address the physical, social and environmental factors that can cause ill health; sometimes called the wider determinants of health.

We are an active strategic partner in the Universities for Nottingham Civic Agreement, which sets out a commitment to enhance the economic, social, and cultural life, and the health and wellbeing for the people and place of Nottingham and Nottinghamshire.

Our strategy

To make the best decisions for our population, we must understand the health and care needs of people living across Nottingham and Nottinghamshire.

Joint Strategic Needs Assessments (JSNAs) provide the ICB with key information about the health and wellbeing of our local population. These demographics vary significantly between the City and County districts, including by age, by ethnicity, by disability, and by levels of deprivation. You can read more about the demographics and health needs of our population [here](#) and [here](#).

The Nottingham and Nottinghamshire ICB has used this information, along with other evidence and data, to develop an Integrated Care Strategy to improve health and care outcomes and experiences for local people. The Strategy covers health and social care and addresses the wider determinants of health and wellbeing. It is based on three guiding principles:

- **Prevention is better than cure** – by focusing on prevention, we can make sure we use our limited resources most efficiently and improve people’s health and wellbeing. This can mean that people need less treatment, we can stop more serious illness and can stop diseases getting worse.
- **Integration by default** – local people have told us that they want joined up and seamless services. By making collaboration between all the workforce and teams the normal way of working, and by harnessing our resource and ingenuity, we can re-shape services to become more integrated, treating the ‘whole person’.
- **Equity in everything** – the principle of equity recognises that not all people have equal health and care access, experience or indeed outcomes. The strategy sets out that for some people and communities more support and resource might be required to achieve similar outcomes to others.

In March 2024, the ICP approved a refreshed Integrated Care Strategy, which can be read in full [here](#).

The Strategy builds on existing system strategies, including the Joint Local Health and Wellbeing Strategies for Nottingham and Nottinghamshire, and sets out our system’s priorities to improve life expectancy and healthy life expectancy and to reduce health inequalities for the people of Nottingham and Nottinghamshire.

The ICB and its five NHS Trust and NHS Foundation Trust partners (Sherwood Forest Hospitals NHS Foundation Trust, Nottingham University Hospitals NHS Trust, Nottinghamshire Healthcare NHS Foundation Trust, East Midlands Ambulance Services NHS Trust, and Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust) have developed a Joint Forward Plan that describes how the local NHS organisations will implement the NHS Mandate, tackle key issues and contribute to the delivery of the Integrated Care Strategy and the Joint Local Health and Wellbeing Strategies.

Guided by the principles of prevention, integration and equity, the Plan focusses on four key areas:

- Reducing physical and mental illness and disease prevalence.
- Proactive management of long-term conditions and frailty.
- Improving navigation and flow to reduce emergency pressures in both mental and physical health settings.
- Timely access and early diagnosis for cancer and planned care.

You can read the full Joint Forward Plan [here](#).

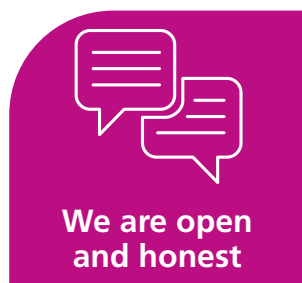
Values and behaviours

The key values and behaviours that the ICB aims to reflect as an organisation are:

- We are open and honest
- We are compassionate and respectful
- We work collaboratively
- We are empowered to be innovative

The ICB believes that by incorporating these values and behaviours into our everyday work we can ensure that NHS Nottingham and Nottinghamshire ICB can always:

- Create an environment where people feel safe and empowered to be open and honest
- Build relationships by listening, respecting differences of opinion, and always seeking to understand
- Encourage joint working and partnership with shared goals and a reduction in barriers
- Empower people to embrace creativity through experience, expertise and finding new solutions



ICB Organisational behaviours

We will create an environment where people feel safe and empowered to be open and honest.

We will build relationships by listening, respecting differences of opinion, and always seeking to understand.

We will encourage joint working and partnership share goals and a reduction in barriers

We will empower people to embrace creativity through experience, expertise and finding new solutions.

Individual behaviours

I will:

- use accessible, clear, and honest communication.
- listen and acknowledge other viewpoints and be willing to share information, ideas and provide supportive feedback.
- offer constructive feedback to support ICB values being demonstrated.

I will not:

- withhold information, or feedback, or make it inaccessible with jargon or complicated language.

I will:

- treat others fairly and listen carefully.
- be mindful of how I communicate and its effect on others.
- proactively support others and promote their health and well-being.

I will not:

- make assumptions, blame other people, only get one perspective or discriminate against people.

I will:

- work with other people and involve them in plans and decision making.
- acknowledge and celebrate the contributions of other people.
- encourage integrated working across the health and care system.

I will not:

- restrict my expertise and advice to my own team, be inflexible or unhelpful.

I will:

- embrace new ideas and share my creativity, expertise, and experience.
- be open to change and learning new skills.
- work with people in different organisations to find the best way forward.

I will not:

- be unsupportive or block ideas; or unwilling to change or challenge the way we do things.

Equality, Diversity and Inclusion

The Public Sector Equality Duty (PSED) of the Equality Act 2010 requires the ICB to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation
- Advance equality of opportunity
- Foster good relations.

These are often referred to as the three general aims of the PSED. Having “due regard” requires the ICB to consider removing or minimising disadvantages, taking steps to meet people’s needs, tackling prejudice, and promoting understanding. In addition, we must publish equality information annually, demonstrating how we have met the general aims of the Public Sector Equality Duty and prepare and publish one or more equality objectives at least every four years.

The ICB recognises and values the diverse needs of the population we serve, and we are committed to reducing health inequalities and improving equity in health outcomes for local people. We are committed to embedding equality and diversity considerations into all aspects of our work, including policy development, commissioning processes, and employment practices.

We recognise that equality is about ensuring that access to opportunities is available to all and that no one should have poorer life chances because of the way they were born, where they come from, what they believe, or whether they have a disability. We believe diversity is about recognising and valuing differences by being inclusive, regardless of age, disability, gender, marriage or civil partnership status, pregnancy or maternity status, race, religion or belief, sex, or sexual orientation.

We are committed to:

- Improving equality of access to health services and health outcomes for the diverse population we serve.
- Building and maintaining a diverse, culturally competent ICB workforce, supported by an inclusive leadership team.
- Creating and maintaining an environment where dignity, understanding and mutual respect, free from prejudice and discrimination, is experienced by all and where patients and staff feel able to challenge discrimination and unacceptable behaviour.

Role Description

Post title:	Non Executive Director
Accountable to:	ICB Chair
Time commitment:	On average, these roles will require a time commitment of between 3 and 4 days per month. This includes meeting preparation time, occasional evening engagements and events designed to support your continuous development.
Term of office:	The normal term of office will be three years; however, this may be varied at the discretion of the Chair, based on the ICB's requirements at the time of appointment and to facilitate Board continuity.
Remuneration:	£16,000 per annum

Role Summary

Non-Executive Directors have a shared responsibility with other members of the ICB's Board to ensure corporate accountability for the performance of the organisation, ensuring its functions are effectively and efficiently discharged and its financial obligations met.

Non-Executive Directors provide an external view of the work of the ICB that is removed from the day-to-day running of the organisation; providing purposeful, constructive scrutiny and challenge to Board and/or committee discussions, and bringing their unique perspective, informed by their expertise and experience.



Key Responsibilities

Non-Executive Directors will:

- Work collaboratively as part of a unitary Board to shape the long-term, viable plan for the delivery of the functions, duties and objectives of the ICB and for the stewardship of public money.
- Ensure that the Board is effective in all aspects of its role and appropriately focused on the four core purposes, to: improve outcomes in population health and healthcare; tackle inequalities in outcomes, experience and access; enhance productivity and value for money and help the NHS support broader social and economic development.
- Be champions of good governance arrangements, collaborative leadership and effective partnership working, including with local government, NHS bodies and the voluntary sector.
- Promote open and transparent decision-making that facilitates consensus aimed to deliver exceptional outcomes for the population.

Personally, you will bring a range of professional expertise as well as community understanding and experience to the work of the Board. We are interested in your life experience and personal motivations that will add valuable personal insights such as: being a patient, carer or service user; experience of gender and women's issues; engaging with diverse social, economic and cultural groups and communities; experiences and challenges of younger people; and those with lived experience of mental health issues and/or living with physical chronic conditions or disability.

As an NHS leader, you will demonstrate a range of leadership competencies outlined below. Corporately, as members of a unitary board, you will contribute to a wide range of areas, including:

Strategy and transformation

- Setting the vision, strategy and clear objectives for the ICB in delivering on the four core purposes of the ICS, the triple aim of improved population health, quality of care and cost-control.
- Aligning partners in transforming the Long Term Plan and the People Plan into real progress

Partnerships and communities

- Promoting dialogue and consensus with local government and broader partners, to ensure effective joint planning and delivery for system working and mutual accountability.
- Supporting the establishment of the ICP, developing strong relationships between the ICB Board and the ICP.
- Supporting the success of the ICP in establishing shared strategic priorities within the NHS, in partnership with local government, to tackle population health challenges and enhance services across health and social care.

Social justice and health equalities

- Advocating diversity, health equality and social justice to close the gap on health inequalities and achieve the service changes that are needed to improve population health.
- Ensuring the ICB is responsive to people and communities and that public, patient and carer voices are embedded in all of the ICB's plans and activities.
- Promoting the values of the NHS Constitution and modelling the behaviours embodied in Our People Promise and forthcoming Leadership Way to ensure a collaborative, inclusive and productive approach across the system.

Sustainable outcomes

- Oversight of purposeful arrangements for effective leadership of clinical and professional care throughout the ICB and the ICS.
- Fostering a culture of research, innovation, learning and continuous improvement to support the delivery of high quality services for all.
- Ensuring the NHS plays its part in social and economic development and achieving environmental sustainability, including the Carbon Net Zero commitment.

Governance and assurance

- Collectively ensuring that the ICB is compliant with its constitution and contractual obligations, holding other members of the ICB and the ICS to account through constructive, independent and respectful challenge.
- Maintaining oversight of the delivery of ICB plans, ensuring expected outcomes are delivered in a timely manner through the proportionate management of risks.
- Ensuring that the ICB operates to deliver its functions in line with all of its statutory duties, and that compliance with the expected standards of the regulatory bodies is maintained.

People and culture

- Supporting the development of other board members to maximise their contribution.
- Providing visible leadership in developing a healthy and inclusive culture for the organisation, which promotes diversity, encourages and enables system working and which is reflected and modelled in their own and the Board's behaviour and decision-making.
- Ensuring the Board acts in accordance with the highest ethical standards of public service and that any conflicts are appropriately resolved.

Eligibility

- You will be able to demonstrate that you meet the requirements of the fit and proper person test and that you have no substantial conflicts of interests that would interfere with your ability to be independent and offer an impartial perspective.
- You will be willing to uphold the Seven Principles of Public Life (known as the Nolan Principles).
- The successful applicants will not have an ongoing leadership role (hold positions or offices) at an organisation within the same ICS footprint. You will need to stand down from such a role if appointed to the ICB.
- The Disqualification criteria for Board membership are set out at [section 3.2 of the ICB's Constitution](#).
- Applicants should have strong connections with the area served by the ICB.
- 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 competence have been demonstrated in previous/other roles, to satisfy the experience, skills and values being sought.

Person Specification

Competency	Knowledge, Experience and Skills required
Setting strategy and delivering long-term transformation	<ul style="list-style-type: none"> ● Knowledge of health, care, local government landscape and/ or the voluntary sector. ● A capacity to thrive in a complex and politically charged environment of change and uncertainty. ● Experience leading change at a senior level to bring together disparate stakeholder interests.
Building trusted relationships with partners and communities	<ul style="list-style-type: none"> ● An understanding of different sectors, groups, networks and the needs of diverse populations. ● Exceptional communication skills and comfortable presenting in a variety of contexts. ● Highly developed interpersonal and influencing skills, able to lead in a creative environment which enables people to thrive and collaborate. ● Experience working collaboratively across agency and professional boundaries.
Leading for Social Justice and health equality	<ul style="list-style-type: none"> ● An awareness and appreciation of social justice and how it might apply within an ICS. ● Record of promoting equality, diversity and inclusion in leadership roles. ● Life experience and personal motivation that will add valuable personal insights.
Driving high quality, sustainable outcomes	<ul style="list-style-type: none"> ● Problem solving skills and the ability to identify issues and areas of risk, leading stakeholders to effective resolutions and decisions. ● Champion open, frank and disciplined discussion and be prepared to ask the difficult questions.
Providing robust governance and assurance	<ul style="list-style-type: none"> ● An understanding of good corporate governance. ● Ability to remain neutral to provide independent and unbiased leadership Demonstrate independent and proactive leadership with confidence and integrity. ● Experience operating at board level.
Creating a compassionate and inclusive culture for our people	<ul style="list-style-type: none"> ● Models respect and a compassionate and inclusive leadership style with a demonstrable commitment to equality, diversity and inclusion in respect of boards, patients and staff. ● Creates and lives the values of openness and transparency embodied by the principles-of-public-life and in Our People Promise
Chair of the Audit and Risk Committee	<ul style="list-style-type: none"> ● Recent, relevant finance experience in a large and complex organisation, preferably with a financial qualification. ● Have an excellent working knowledge of audit committee practices, risk management frameworks and conflicts of interest management.
Chair of the Remuneration Committee	<ul style="list-style-type: none"> ● Bring expertise of workforce development, people practices and / or leading organisational and cultural change.

How to Apply

The closing date for applications is **26 August 2024**.

Applications should include:

- A covering letter explaining why the appointment interests you, how you meet the appointment criteria and what you specifically would bring to the post.
- A Curriculum Vitae (CV) with education and professional qualifications and full employment history. Please include daytime and evening telephone contact numbers and email addresses. The CV should include names and contact details of three referees. References will not be taken without your permission.
- A completed **Diversity Monitoring Form** and **Fit and Proper Person Monitoring Form**.

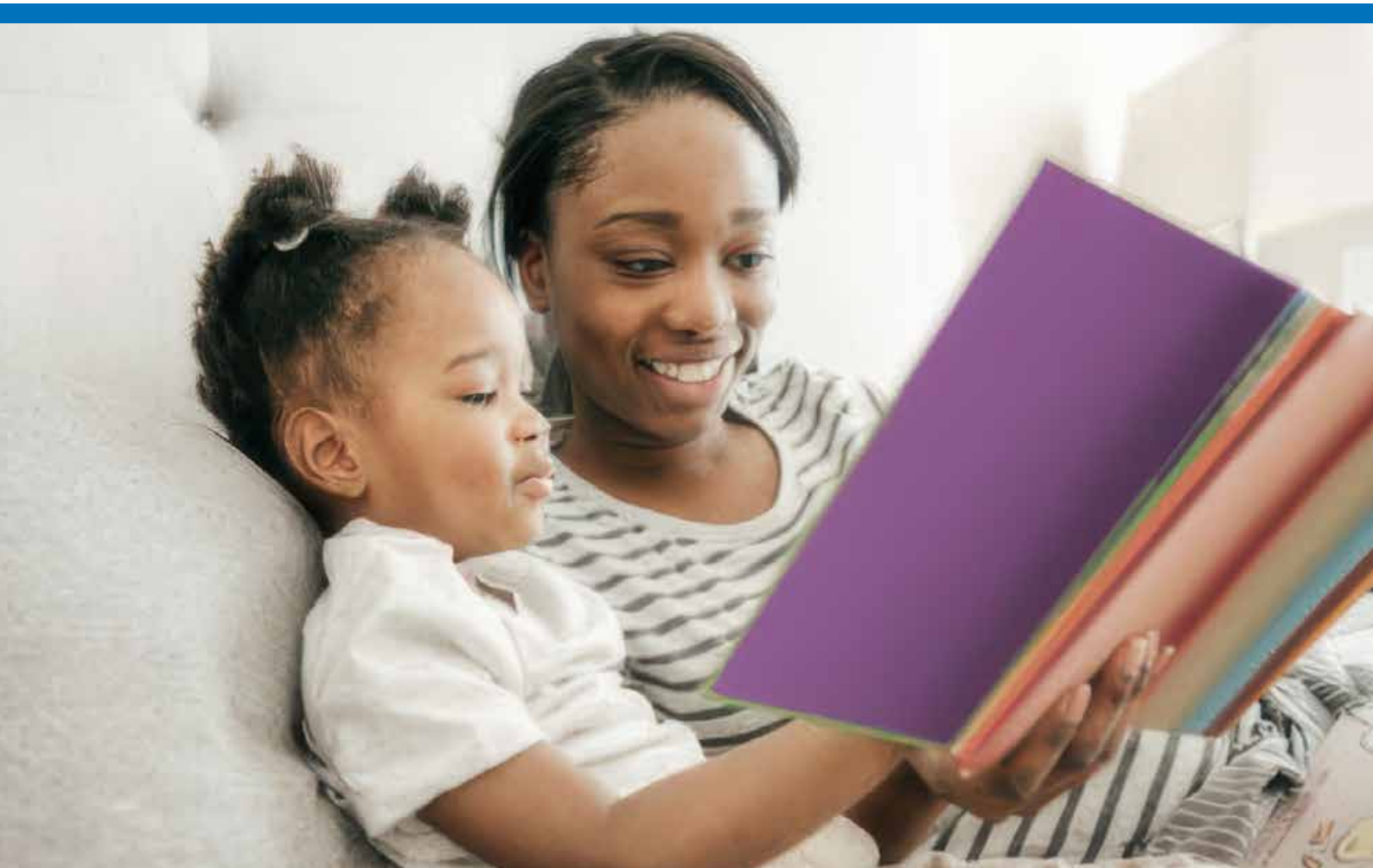
Please note that the information you provide will be treated as confidential and is for monitoring purposes only. It will not form part of the application process.

All applications should be sent to: applications@hunter-healthcare.com. All applications will be acknowledged.

For an initial conversation about this role please contact our partners at Hunter Healthcare: James McLeod by phone on 07842 424530 or by email at jmcleod@hunter-healthcare.com or Sam Cresswell by phone on 07562 650935 or by email at scresswell@hunter-healthcare.com.

KEY DATES

Application closing date	26 August 2024
Stakeholder sessions	w/c 30 September 2024
Interviews	w/c 30 September 2024





Nottingham and Nottinghamshire Integrated Care Board



Floor 2, Berkshire House
168-173 High Holborn, London WC1V 7AA

T: 020 7935 4570
E: enquiries@hunter-healthcare.com