



NHS England Non-Executive Directors

Information pack for applicants

Closing date: 5:00pm on Tuesday, 28th June 2022

Reference no: VAC-1820



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Section 1 – The Role

Letter from Richard Meddings, Chair of NHS England

Dear Candidate,

Thank you for expressing an interest in the Non-Executive Director roles on the ‘new’ NHS England Board. ‘New’ because you would be joining us at a time of opportunity when, from 1 July 2022, following legislation the structure of the NHS will see significant transformation. This will involve the merger of a number of the central organisations into the new NHS England and separately the emergence of 42 Integrated Care Systems (ICS) across England.

The NHS today faces deep challenges, many of which have been building for several years and a number of which have been worsened by the pandemic. The NHS arguably faces its greatest test. Immediate pressures come from the extent of the waiting lists, from urgent and emergency care performance, in accessing primary care and from acknowledged shortages in our workforce.

There exist questions over the physical capacity, be it estate and infrastructure, bed numbers and diagnostic scanners or indeed the shape and capacity of the workforce. And there exists a range of potential solutions, including investment programmes, potential changes in working practices, the application of technology and both immediate and longer-term workforce planning.

Additionally, continued strong focus on mental health, on maternity services, on the evolving model of primary care, on cancer, on cardiovascular, on the enabling potency of Life Sciences, on the digital agenda and its capacity to transform delivery, to name just a few of the other issues the NHS pursues, remains essential.

The NHS is perhaps better understood as a whole industry, rather than as an organisation, of different interests and where successful collaboration and agreed prioritisation are key to improving performance. This is why we in the new NHS England will empower and support ICS going forward. Putting the patient first and at the heart of our thinking is an essential ‘cut through’ to our processes and programmes.

So, the agenda is broad, there is plenty to do and the importance of delivery but also efficiency are key. The Board needs individuals with a range of specific skills but as important a deep commitment to improving health and care in England and a desire to contribute to collective deliberations that will ensure that NHS England is fit for the challenges ahead. The Board needs individuals who will not only be effective participants at Board and committee levels but who are also committed to proactive engagement outside the Board to the NHS and to its front line. Our people are key and therefore understanding directly the challenges they face is hugely important.

One of the essential foundations of a good society is how well it looks after the whole of its population and their health. At the heart of the NHS is the central tenet “accessible to all, free at the point of the delivery”. To do this we rely upon a passionate, multi skilled, committed workforce. As the population grows, as people live longer, and as medical science discovers ever new ways to improve outcomes so the demands on the NHS

continue to grow but also to change. Keeping the interests of the patient as the key determinant of our decisions is key.

Thank you for taking the time to apply and I look forward to meeting you in due course.

1.1 Role description and person specification

Role Description

The primary role of NHS England's Non-Executive Directors is, as a team, to lead in developing the strategy for, and overseeing the work of NHS England by participating fully in the work of the board, both in the context of the board meetings themselves, and more widely.

Non-Executive Directors also play a part in representing NHS England externally, alongside the Chief Executive, the Chair and the wider Executive team.

The responsibilities of the Non-Executive Directors of NHS England are:

- working with the Chair and the Executive Board members to develop NHS England's strategy to ensure that it carries out its statutory responsibilities and delivers its mandate, meeting its targets and objectives, and ensuring that the Executive Team is held to account for doing so
- ensuring the board reinforces the values of the organisation by setting a high standard for ethics and responsible business, and by maintaining and enhancing NHS England's reputation as an open and independent body, which puts the interests of the public and patients first
- contributing to the meetings of the Board, taking an active part in discussions, providing counsel, advice, challenge and support to the Executive Team; contributing to an environment of constructive debate on key issues in order to build consensus
- ensuring that the Executive Team develops and maintains strong working relationships with the Department of Health and Social Care, the other health arms-length bodies and other stakeholders
- promoting the Government's health policy, with an understanding of the value of strategic communication and engagement
- contributing across a range of specific areas, including: setting and maintaining an appropriate clinical agenda for NHS England and ensuring an appropriate level of resource is dedicated to preventing disease as well as treating disease; ensuring the board drives strong integration between health and care; ensuring the Board listens to the patient voice; ensuring appropriate financial controls are in place, and risks are managed accordingly; contributing to the change management agenda; and ensuring that best practice is followed in all workforce and leadership policies and behaviour
- ensuring that the Executive Team is held to account for putting in place appropriate financial controls and ensuring compliance throughout the organisation.

- ensuring the Executive Team is held to account for performance management across the major interfaces for patients with the service.
- reducing waste and driving efficiencies to enable as much taxpayer's money as possible is directed towards patient care.

Person specification

The Department of Health and Social Care values and promotes diversity and encourages applications from all sections of the community. The boards of public bodies should reflect the population they are there to serve. Boards also benefit from fresh perspectives, and we are always keen to encourage candidates new to public appointments to consider applying for our roles.

To be considered, you must be able to demonstrate that you have the qualities, skills and experience to meet all the essential criteria for appointment.

Essential Criteria

- A career record of achievement, with skills and senior experience in one or more of the following areas:
 - Clinician (from any professional background, including doctors, nurses, allied health professionals - and from any setting, including acute, primary care, research, etc)
 - Life Sciences
 - Voluntary/charity sector connected to healthcare
 - Local government
- able to operate effectively on the board of a high-profile national organisation, with an understanding of corporate governance, and an ability to guide NHS England's strategic direction
- sound judgement, with the ability to consider and provide challenge on complex issues from an impartial and balanced viewpoint and to hold the executive team to account
- strong strategic skills, with a bias towards effective delivery and implementation
- good communication skills, with a positive and constructive style, able to work as part of a team and take collective responsibility.

Remuneration and status of appointment

- NHSE NEDs are remunerated at the standard rate of £7,883 per annum.
- Remuneration is taxable, and subject to National Insurance contributions, both of which will be deducted at source under PAYE before you are paid. This is an office holder appointment and not a position of employment and as such will not be subject to the provisions of employment law. You will not become a member of the Civil Service. The role does not attract any pension benefits, including under any Civil Service Pension Scheme.

- As you are not an employee you will also not be eligible for redundancy pay. No other arrangements have been made for compensation at the end of your term of appointment, as there is no commitment to you serving beyond that point.
- You may claim travel and subsistence expenses, which are properly and necessarily incurred in carrying out your role and responsibilities as a NED of NHS England, in line with travel and subsistence policy and rates for NHS England. A copy of the policy and rates can be obtained from NHS England.

Time commitment

Two to three days per month.

Location

National

Future Board Meetings will take place on the following days:

7 July 2022

6 October 2022

1 December 2022

2 February 2023

30 March 2023

18 May 2023

6 July 2023

5 October 2023

7 December 2023

Tenure of office

Ministers will determine the length of the appointment, which will be for up to 3 years.

Any re-appointment for a second term will be subject to the requirements of the board at that point and in the future, the skills and experience the appointee brings and their performance in their first term and will be at the discretion of Ministers. The norm for all public appointments is for the time served in post to not exceed two terms or ten years in total.

Accountability

Non-Executive Directors are appointed by the Secretary of State for Health and Social Care and are accountable to the Secretary of State via the Chair for carrying out their duties and for their performance.

For a discussion about the role

For further information regarding the role please contact:

Clare Perry
Head of Office to the Chairs
Tel: 07730 376303
Email: clare.perry1@nhs.net

Helen Bullers
Director of HR and OD Tel: 07876 857 276
Email: helen.bullers@nhs.net

1.2 NHS England's role and responsibilities

NHSE shares responsibility with the Secretary of State for promoting a comprehensive health system in England, for securing improvements in physical and mental health, and for the prevention, diagnosis and treatment of ill-health. NHSE's role is to lead the NHS in delivering better health, better care and the efficient use of NHS resources. In so doing, NHSE oversees the provision of health services and an integrated system between health and social care. NHSE has a budget of over £150 billion and oversees a health system employing around 1.2 million people.

As the NHS emerges from the pandemic, NHSE will play a leading role in delivering improvements in patients' care, value for money and broader health reforms. This will include elective service recovery and creating a new integrated system between health and social care, focused on improving outcomes required as a result of the recent health and social care levy.

NHSE was established in 2012 (by the NHS Act 2006, as amended by the Health and Social Care Act 2012) and its remit and duties are shortly to be further expanded through implementation of the Health and Care Act 2022.

NHSE leads commissioning of healthcare services in England. Most commissioning has historically been done by Clinical Commissioning Groups (CCGs) throughout England although some is undertaken directly by NHSE. The commissioning done directly by NHSE covers primary care (general practice, community pharmacy, dentistry, optometry), some specialised services including for the justice system and the military, and for other services that require such advanced teams/technology, or relate to rare clinical conditions, and that are therefore more effectively commissioned nationally rather than locally. Under the new framework of the Act, Integrated Care Boards (ICBs) will take on the abolished CCGs' functions and NHSE can delegate more of its direct commissioning to these local systems.

The Secretary of State also delegates responsibility to NHSE for certain public health services – including for example, national immunisation programmes, cancer and non-cancer screening programmes, Child Health Information Services and public health services for adults and children in secure settings. Since October 2021, additional public health functions were conferred upon NHSE following the abolition of Public Health England.

In practice, reflecting the forthcoming expansion in its remit (see below), this means that NHSE should lead and support the NHS in England and take the action necessary to:

- deliver the statutory mandate that the Government sets for it and will update from time to time, as well as deliver the aims of the NHS Long Term Plan, and stimulate ongoing development of services to address the changing needs of populations in a way that seeks to reduce inequalities in access, experience, and outcomes
- maintain and improve health care services in a way that is financially and operationally sustainable within the resource limits set by the government
- oversee and support Integrated Care Systems, NHS trusts and NHS foundation trusts
- commission specialised health services that cannot be effectively commissioned at local level and deliver national infrastructure to facilitate the delivery of services
- support the long-term sustainability of the NHS, including its workforce, digital and physical infrastructure and progress to deliver a net zero NHS
- perform any functions of the Secretary of State which have been delegated to it.
- deliver other specific duties, regulatory functions and powers that cover:
 - promoting the NHS Constitution
 - improving the quality of services
 - innovation and research
 - reduce inequalities in access to and outcomes from health services as well as in patient experience
 - protecting patient choice
 - promoting education and training
 - promoting integration between health services and health related services
 - promoting and securing public involvement in its decisions
 - seeking to achieve objectives and comply with requirements set for it by Government
 - meeting the new 'triple aim' of better health, better care and efficient use of NHS resources.

Forthcoming Changes

This is a year of change for NHSE following the Health and Care Act 2022. The Act will abolish the constituent parts of NHS Improvement (Monitor and the NHS Trust Development Authority) and transfer its functions to NHS England. At the local delivery level, the Act will abolish Clinical Commissioning Groups (CCGs) and create 42 new Integrated Care Boards (ICBs) to lead localities in arranging services. This change in legal framework will also bring an operational shift as the relationships between the centre and localities will change, and importantly so will those with local government.

At the end of 2022/23 NHSE also anticipates it will take in the functions of NHS Digital and Health Education England following the Secretary of State's announcement on 22 November 2021 ([Major reforms to NHS workforce planning and tech agenda - GOV.UK \(www.gov.uk\)](#)). This will significantly broaden NHSE's remit and opportunities to join up key enablers (workforce and digital) for leading the NHS in England.

NHS Long Term Plan and NHSE mandate

NHSE and NHS Improvement had already moved to a single leadership model in March 2019. The [NHS Long Term Plan](#), published in January 2019, set out an ambitious ten-year transformation programme for the NHS. NHSE is now in the process of reviewing the Long Term Plan taking into account the new challenges the NHS faces.

NHSE has a mandate from government ([The government's 2022 to 2023 mandate to NHS England \(publishing.service.gov.uk\)](#)), which brings together the annual mandate to NHSE and the annual remit for NHS Improvement. For 2022/23 the mandate prioritises the recovery and restoration of NHS services, tackling health and healthcare disparities, driving innovation, and continuing progress to integrated ways of working for health and care and implementation of the Health and Care Act 2022 ([Health and Care Act 2022 \(legislation.gov.uk\)](#))

NHSE is also currently supporting local systems to prepare for the implementation of the Health and Care Act 2022, including through the establishment of ICBs and Integrated Care Partnerships (together known as 'Integrated Care Systems'). As part of this, NHSE must continue to drive the delivery of closer integration and partnership working between the different health and care institutions and professionals in each Integrated Care System.

Mode of operation

The NHS England Board is a unitary board in which both non-executive and executive members work as a team. Formal business meetings are held in public and are broadcast live on the internet. Each meeting takes place alongside a private meeting for reserved business as required. Much preparatory work for the meetings is done by Board members in informal development sessions or 'deep dives'.

Further details about NHSE and its role in leading the healthcare system can be found here:

- [NHS Long Term Plan](#)
- [NHS England » NHS: People Plan for 2020/2021](#)
- [NHS England » NHS Commissioning Board: Annual report and accounts 2020 to 2021](#)
- [NHS England » NHS Operational Planning and Contracting Guidance](#)

Section 2: The recruitment

2.1 Making an application

Thank you for your interest in the role of Non-executive Director of NHS England.

The Department of Health and Social Care's Appointments and Honours Unit is managing this recruitment.

In order to apply, you will need to provide:

1. A **Curriculum Vitae**, which includes contact details for you and referees, and details of your education and qualifications, employment history, directorships, membership of professional bodies and any relevant publications or awards.
2. A **Supporting statement**, setting out how you meet the criteria for appointment as set out in the person specification for the role; and providing details on any potential conflicts of interest or reputational issues.
3. A **Monitoring form**, which includes different sections covering diversity information, conflicts of interest, standards in public life, whether you would like reasonable adjustments to be made to support your application and whether you wish to apply under the Disability Confident Scheme. Please note that whilst **the form must be completed in full**, you can select "prefer not to say" to any question you do not wish to answer regarding your diversity characteristics. The information you provide on your characteristics will not be used as part of the assessment process and will not be seen by the assessment panel.

Completed applications should be submitted to appointments.team@dhsc.gov.uk – please quote **ref: VAC-1820** in the subject field.

If you are unable to apply by email, please contact Kully Kanda on 0113 254 6277.

Applications must be received by **5:00pm on Tuesday, 28th June 2022**.

The Department reserves the right to only consider applications that contain all of the elements listed above, and that arrive before the published deadline for applications.

In completing an application, please firstly note the following in relation to:

- Disqualification from appointment
- Conflicts of interest
- Standards in public life and ensuring public confidence.

Disqualification from appointment

The Cabinet Office sets out the following regarding all public appointments:

In general, you should have the right to work in the UK to be eligible to apply for a public appointment. There are a small number of specialist roles that are not open to non-British citizens. Any nationality requirements will be specified in the vacancy details.

The Government expects all holders of public office to work to the highest personal and professional standards. You cannot be considered for a public appointment if:

- you are disqualified from acting as a company director (under the Company Directors Disqualification Act 1986)
- have an unspent conviction on your criminal record
- your estate has been sequestrated in Scotland or you enter into a debt arrangement programme under Part 1 of the Debt Arrangement and Attachment (Scotland) Act 2002 (asp 17) as the debtor or have, under Scots law, granted a trust deed for creditors.

In addition, legislation related to NHS England sets out how individuals are disqualified from appointment as an NHS England NED, if they are:

- A member of the House of Commons
- A Chair or Non-executive Director of an NHS Trust
- The Chair or a Non-officer member of the NHS Business Services Authority, NHS Resolution, or the NHS Counter Fraud Authority

The above is only intended to act as a summary and you should consider the full legislation, which is attached for your ease at **Annex A** to this document.

For further advice please contact Kully Kanda on 0113 254 6277.

Conflicts of interest

Before you apply you should carefully consider if you or a party related to you have any interests which could lead to a real or perceived conflict of interest if you were to be appointed.

When you apply you should declare in your Supporting Statement the details of any relevant interests, highlighting any that you think may call into question your ability to properly discharge the responsibilities of the role you are applying for, or may be perceived as having scope to do so by a reasonable member of the public.

Conflicts of interest may include, without limitation, any outside personal or business interests (including direct and indirect financial interests, such as shares in a company providing services to government) or any positions of employment, other appointments or other positions of authority, that you or any party related to you have and which may influence your judgement in performing your public appointment or may be perceived by a reasonable member of the public as having scope to do so. This should include declaring any political roles you hold or political campaigns you have supported.

A 'party related to you' could include for example (but without limitation) a spouse/partner, a business partner, a close family member or a person living in the same household as you or a close family member.

Many conflicts of interest can be satisfactorily resolved and declaring a potential conflict does not prevent you from being interviewed.

If you are shortlisted, the panel will discuss any potential conflicts with you during your interview, including any proposals you may have to mitigate them, and can record that in their advice to Ministers. If Ministers wish to appoint you, an offer of appointment may be subject to you giving up any unmanageable conflicts of interest. Any interests that are deemed manageable will need to be formally declared and may be published in line with NHS England's organisational policy regarding Declarations of Interest.

Failure to declare a potential conflict of interest may become grounds for withdrawing an offer of appointment. If offered the role, you will also be required to make a Declaration of Interests and to keep the Declaration up to date throughout the tenure of your appointment. The requirement to declare interests will also be included in your Terms and Conditions of appointment. Failure to disclose an interest, subject to the interest and the circumstances, may become grounds during the tenure of your appointment, for suspension or termination of your appointment.

Standards in public life and ensuring public confidence

If there are any issues in your personal or professional history that could, if you were appointed, be misconstrued, cause embarrassment to Ministers or NHS England or cause public confidence in the appointment to be jeopardised, it is important that you bring them to the attention of the Advisory Assessment Panel and provide details of the issue/s in your Supporting statement.

This should include declaring in your supporting statement if:

- you are, or have been, bankrupt or you have made an arrangement with a creditor at any point, including the dates of this
- you are subject to a current police investigation
- there are any previous or pending personal conduct issues where:
 - i) a complaint/ personal conduct issue has either been upheld or partly upheld
 - ii) an investigation that relates at least in part to your personal conduct, is to take place but it is yet to start, or a similar such investigation is underway, but it is yet to conclude
 - iii) a complaint/personal conduct issue is current, but at the time of your application it is yet to be confirmed whether or how it will be investigated further.
- there are any possible reputational issues arising from your past actions or public statements that you have made (including through social media and blogs)
- there are any other matters which may mean you may not be able to meet the requirements of the Code of Conduct for Board Members of Public Bodies. You can

access this document at: <https://www.gov.uk/government/publications/board-members-of-public-bodies-code-of-conduct>

Alongside your own declaration, we will conduct appropriate checks, as part of which we will consider anything in the public domain related to your conduct or professional capacity. This may include searches of previous public statements and social media, blogs or any other publicly available information. This will be shared with the Panel.

The Panel may explore any issues you have raised or have been identified in Due Diligence checks with you as part of assessing your application.

Failure to disclose relevant information requested could result in an appointment offer being withdrawn or the appointment being terminated, as the person appointed to this role will be expected to demonstrate the highest standards of corporate and personal conduct and in line with standards set out in the Code of Conduct for Board Members of Public Bodies, which includes the Seven Principles of Public Life. As part of agreeing to the terms and conditions of appointment you will be expected to agree to meeting the standards set out in this Code.

CV

Please ensure your CV includes:

- Your full name, title, home address, personal contact telephone numbers (land line and mobile), personal email address and details of any Twitter accounts and LinkedIn accounts, including your Twitter handle/username.
- Details of your education and qualifications, employment history, directorships, membership of professional bodies and any relevant publications or awards.
- Contact details for at least two referees. One referee should be the person to whom you are/were accountable in your current/most recent appointment or position of employment. Please indicate the relationship of each referee to you. References will be requested for short-listed candidates prior to interview.
- Brief details of your current or most recent post and the dates you occupied this role, and any past or present Ministerial appointments.

Supporting Statement

The Supporting Statement is your opportunity to demonstrate how you meet each of the criteria set out in the person specification. It will benefit the Advisory Assessment Panel if you can be clear which specific evidence that you provide relates to which criterion. Providing separate paragraphs in relation to each criterion is common practice.

Please also set out details regarding any potential conflicts and/or reputational issues (see above guidance on Conflicts of Interest and Standards in Public life).

Please ensure your full name, the role to which you are applying and the corresponding reference number for the post are clearly noted at the top of your Statement.

Please write all acronyms in full first, limit your statement to two pages and type or write clearly in black ink.

We will commission a pre-assessment of candidate applications which will then be provided to the Panel for consideration and to inform the shortlisting process. By applying, you are agreeing to your application being shared with another party for pre-assessment. It is the responsibility of the panel to determine who it believes best meet the criteria for the role, and who should be invited to interview.

You must inform the Department if, *during the application and assessment process*, your circumstances change in respect to any information that has been or should have been provided by you in your application.

Monitoring form

Please complete in full and return the Monitoring form with your CV and Supporting Statement.

The form is split into sections, covering

- A – Disqualification; Conflicts; and Standards in Public Life.
- B – Diversity
- C – Political activity
- D – Reasonable Adjustments
- E – Disability Confident

Section A - Disqualification; Conflicts; and Standards in Public Life.

The form asks to you to confirm and declare any potential issues and directs you to provide further detail in your Supporting Statement. Further guidance on these topics is set out earlier in this information pack.

Section B – Diversity

We encourage applications from talented individuals from all backgrounds and across the whole of the UK. Boards of public bodies are most effective when they reflect the diversity of views of the public they serve and this is an important part of the Government's levelling up agenda.

We collect data about applicants' characteristics and backgrounds so that we can make sure we are attracting a broad range of people to these roles and that our selection processes are fair for everyone. Without this information, it makes it difficult to see if our outreach is working, if the application process is having an unfair impact on certain groups and whether changes are making a positive difference.

The data you provide is used to produce anonymised management information about the diversity of applicants. You can select "prefer not to say" to any question you do not wish to

answer. **The information you provide will not be seen by the Advisory Assessment Panel.**

Section C – Political activity

Political activity information is primarily for monitoring purposes only, however if you are shortlisted for interview, this information will be shared with the Assessment Panel. The reason for this, is that it is appreciated that such activities may have given you relevant skills, including experience gained from committee work, collective decision-making, resolving conflict and public speaking. If you have had such experience and you consider it relevant to your application for this post, you should also take the opportunity to include it separately in your Supporting statement. If possible, you should not, however, identify the relevant political party in your statement.

If you are appointed to this role, please note that any political activity you declare will be published in accordance with the Governance Code on Public Appointments. Political activity is not a bar to appointment, but it must be declared.

Section D - Reasonable Adjustments

We are committed to making reasonable adjustments to make sure applicants with disabilities, physical or mental health conditions, or other needs are not substantially disadvantaged when applying for public appointments. This can include changing the recruitment process to enable people who wish to apply to do so.

Some examples of adjustments are:

- ensuring that application forms are available in different or accessible formats
- making adaptations to interview locations
- allowing candidates to present their skills and experience in a different way
- giving additional detailed information on the assessment process to allow candidates time to prepare themselves
- allowing support workers, for example sign language interpreters
- making provision for support animals to attend.

When you apply you will have the opportunity to request reasonable adjustments to the application process in Section D of the form.

Section E - Disability Confident Scheme

The Department of Health and Social Care values and promotes diversity and is committed to equality of opportunity for all and to the appointment of disabled people. We are a member of the Government's Disability Confident Scheme. We use the Disability Confident Scheme symbol, along with other like-minded employers, to show our commitment to good practice in appointing people with a disability. The Scheme helps recruit and retain disabled people.

As part of implementing the Scheme, we guarantee an interview to anyone with a disability whose application meets all the essential criteria in the person specification for the role and who has asked that their application is considered under the Scheme. Indicating that you

wish your application to be considered under the Scheme will in no way prejudice your application.

What do we mean by a disability?

To be eligible for the Disability Confident Scheme you must have a disability or long-term health condition, which could be physical, sensory or mental and must be expected to last for at least 12 months. You do not have to be registered as a disabled person to apply under this Scheme.

If you wish to apply under the Scheme, please ensure you complete Section E of the Monitoring form.

2.2 The Assessment Process

We will deal with your application as quickly as possible and will advise you of the likely timetable at each stage.

Following closure of the advert and an initial assessment of all applications, the panel will review applications, shortlist and interview candidates in two cohorts. The first group to be shortlisted and interviewed will be clinicians who have applied, the second group will be non-clinicians.

Planned timetable

- Closing date: 5:00pm on Tuesday 28th June 2022
- Shortlisting: Clinical applicants: 6th July 2022
Non-clinical applicants: late July/August 2022 (TBC)
- Interviews: Clinical applicants: 20th and 21st July 2022
Non-clinical applicants: September/October 2022 (TBC)

Advisory Assessment Panel

Advisory Assessment Panels are chosen by Ministers to assist them in their decision-making. They include a departmental official, the Chair of the public body (when Non-executive Directors /Members are recruited) and an independent member.

The panel performs a number of functions, including agreeing the assessment strategy, undertaking sifting, carrying out interviews and deciding objectively who meets the published essential criteria for the role before advising Ministers which candidates they find appointable. It is then for the Minister to decide who to appoint to the role.

The panel will include:

- Matthew Style, Director General for NHS Policy and Performance
- Richard Meddings, Chair of NHS England
- Professor Dame Helen Stokes-Lampard, Chair of the Royal College of General Practitioners
- Independent Panel Member, TBC

Assessment

- Ministers are responsible and accountable to Parliament for the public appointments made within their department. As a result, they must be consulted at every stage of the appointments process.
- At the shortlisting meeting, the Panel will select for interview only the strongest applicants who it feels have demonstrated that they best meet all the criteria set out in the person specification. However, if you have applied under the Disability Confident Scheme and you meet all the essential criteria, then you will also be invited for interview.
- If you apply under the Disability Confident Scheme and you are not shortlisted for interview, we can provide a summary of the assessment of your written application, if you choose to request feedback. However, we regret that due to the volume of applications received, we are only able to offer feedback to candidates who have been unsuccessful at the interview stage.
- After shortlisting, Ministers will then be consulted on the Panel's recommended shortlist. We will email you to let you know whether you have been invited to be interviewed. Interviews will be conducted either face-to-face, in central London or by video/teleconference. We will confirm arrangements to shortlisted candidates in due course.
- If you are invited to interview and are unable to attend on the set date, then an alternative date can only be offered at the discretion of the Panel.
- If invited to interview, the Panel may invite you to make a brief presentation at the start of the interview and will go on to question you about your skills and experience, including asking specific questions to assess whether you meet the criteria set out for the post
- The Panel will also explore with you any potential conflicts of interest or any other issues arising from your personal and professional history which may impact on an appointment decision (see section 2.1 for further details).
- Details of the panel's assessment of interviewed candidates are provided to Ministers, including whether they have judged a candidate to be appointable to the role. It is then for Ministers to decide who should be appointed. In some circumstances, Ministers may choose not to appoint any candidates and re-run the competition.
- Ministers may choose to meet with candidates before making a decision. Candidates should therefore be prepared for a short time gap between interview and a final

appointment decision being made. Candidates who have been interviewed will be kept informed of progress.

- If following interviews your application is unsuccessful, we will notify you. We appreciate it takes a lot of time and effort to apply for roles, and prepare for and attend an interview, and that feedback is a valuable part of the process. Following interviews, the letter which confirms the outcome of the appointment process will provide the details of who you may approach for feedback on your interview and application, if you so wish.

Offer of appointment

If you are successful, you will be contacted by Officials to inform you of the offer and to confirm if you would be willing to accept. If you would, then the next step will be to ask you to complete a Declaration of Interests form, which will be required to be signed-off by you and a senior official.

Appointment

On completion of your Declaration of Interests you will receive a letter from Ministers appointing you as a NED of NHS England, which will confirm the terms and conditions on which the appointment is offered.

Announcement

All public appointments are announced on GOV.UK. The announcement is required to include the length of your appointment, the remuneration for the role and whether you have declared any political activity. We will share the draft announcement with you before it is made.

Queries

For any queries about your application status or the assessment process, please contact Kully Kanda in DHSC's Public Appointments and Honours Unit:

Email: Kuldeep.Kanda@dhsc.gov.uk

If you choose to apply, please ensure you return your CV, a supporting statement and a completed Monitoring form and we would like to thank you in advance for your time and effort in making an application.

All applications will be acknowledged by email after the closing date. If you have not received your application ID reference number within 3 working days of the advertised closing date, please contact us quoting reference VAC-1820.

Governance Code on Public Appointments and the Commissioner for Public Appointments

The Governance Code on Public Appointments, published by the Cabinet Office, sets out the principles that should underpin all public appointments. The Governance Code can be

found at: <https://www.gov.uk/government/publications/governance-code-for-public-appointments>

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The regulation of public appointments against the requirements of the Governance Code is carried out by the Commissioner for Public Appointments.

The Commissioner provides independent assurance that public appointments are made in accordance with the principles set out in the Code. The Commissioner is appointed by the Queen and is independent of the Government and the Civil Service. Further information about the role of the Commissioner is available from:

<http://publicappointmentscommissioner.independent.gov.uk>

If you are not completely satisfied

The Department of Health and Social Care will aim to process all applications as quickly as possible and to treat all applicants with courtesy. If you have any complaints about the way your application has been handled, please contact Perm Butler by emailing Permjeet.Butler@dhsc.gov.uk

If after receiving a comprehensive response from the Department you are still concerned, you can write to the Commissioner for Public Appointments. Please contact:

The Commissioner for Public Appointments
1 Horse Guards Road
London SW1A 2HQ
Tel: 0207 271 8938
Email: publicappointments@csc.gov.uk

2.3 How we will manage your personal information

Your personal information will be held in accordance with the General Data Protection Regulation. You will not receive unsolicited paper or electronic mail because of sending the Department of Health and Social Care any personal information. No personal information will be passed on to third parties for commercial purposes.

When we ask you for personal information, we promise we will:

- Only ask for what we need, and not collect too much or irrelevant information
- Ensure you know why we need it
- Protect it and insofar as is possible, make sure nobody has access to it who shouldn't
- Ensure you know what choice you have about giving us information
- Make sure we don't keep it longer than necessary

Non-Executive Director of NHS England: Information pack for applicants

- Only use your information for the purposes you have authorised

We ask that you:

- Provide us with accurate information
- Inform us as soon as possible of any changes or if you notice mistakes in the information we hold about you

If you apply for a post, we will share some of the information you provide with the members of the selection panel for the post to which you are applying, so that your CV and supporting letter can be assessed.

The diversity information you provide will not be used in the selection process and will therefore not be shared with the Advisory Assessment Panel assessing your application at any stage. However, panels may review the political activity response at the interview stage. This in no way acts as a bar to appointment. Further information on this is provided in the attached Monitoring form.

The Commissioner for Public Appointments regulates and monitors appointments to public bodies to ensure procedures are fair. The Department of Health and Social Care is required by the Commissioner for Public Appointments to retain information about the people who apply for public appointments within his remit and make this information available to him for audit purposes, if requested to do so. Information you provide in your application may therefore be made available to the Commissioner for Public Appointments and the Commissioner's auditors on a confidential basis to help fulfil either the Commissioner's formal complaints investigation role or for audit purposes.

Annex A - NHS England Legislation

Further Information

Disqualification

1. You may be disqualified from being the Chair or a Member of NHS England if you are:
 - (a) A member of the House of Commons
 - (b) A Chair or non-executive Director of an NHS Trust
 - (c) The Chair or a non-officer member of the NHS Business Services Authority
 - (d) The Chair or a non-officer member of NHS Resolution
 - (e) The Chair or a non-officer member of NHS Counter Fraud Authority

Notice and Termination

2. A person may at any time resign from office as a non-executive member by giving notice to the Secretary of State.
3. The Secretary of State for Health and Social Care may at any time remove a person from office as a non-executive member on any of the following grounds:
 - (a) Incapacity
 - (b) Misbehaviour; or
 - (c) Failure to carry out his or her duties as a non-executive member.

Suspension

4. The Secretary of State may suspend a person from office as a non-executive member if it appears that there are or may be grounds to remove that person from office by reason of paragraph 3 above.
5. The initial period of suspension must not exceed six months and the Secretary of State must review the suspension if requested in writing by the person to do so, but need not review the suspension less than three months after the beginning of the initial period of suspension.
6. Following a review during a period of suspension, the Secretary of State may revoke the suspension, or suspend the person for another period of not more than six months from the expiry of the current period.
7. The Secretary of State must revoke the suspension if they decide that there are no grounds to remove the person from office as a result of incapacity, misbehaviour, or failure to carry out his or her duties as a non-executive member; or decides that there are grounds to do so but does not remove the person from office under that provision.

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