

VEREDUS

**Luton and Dunstable
University Hospital NHS
Foundation Trust**

Non-Executive Director(s)
Candidate Information Pack
January 2019

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1. Advertisement

The Luton & Dunstable Hospital NHS Foundation Trust is a successful district general hospital with some specialist services and a national reputation for delivering high quality care. We are a Foundation Trust serving a multi-cultural population of over 350,000 across Bedfordshire and North Hertfordshire. Operating within a very challenged health and care economy, the Trust stands out in having achieved a strong financial performance, being one of the only Trusts to meet the national “A&E targets” despite acknowledged challenges across the NHS, as well as consistently meeting the national targets for cancer treatment.

The Trust seeks to recruit three new Non-Executive directors to join its unitary board; one Non-Executive who will Chair the Finance and Investment Committee, another Non-Executive with experience of major IT programmes and a third who will have experience in primary healthcare combined ideally with an understanding of healthcare commissioning.

As an NED you will:

- Work with fellow directors to set the Trust’s strategic aims, ensuring that resources are in place for these to be delivered and that performance is effectively monitored and reviewed.
- Provide independent judgement and advice, working with colleagues to provide inspiring leadership within a framework of prudent and effective controls, which enable risks to be assessed and managed, promoting the highest standards of probity.
- Act as an ambassador for the Trust, upholding Trust values and engaging with stakeholders, the local community, service users, their carers and relatives, ensuring that the Board is aware of their views.
- Participate in one or more of the Board’s main subcommittees or working groups, including chairing one or more of these committees if required.

For all three vacancies, the Trust requires outstanding individuals, with significant, senior level expertise gained in the private or public sectors ideally at Board level. We are particularly interested in candidates who have experience of leading complex change and an interest in information technology and systems. You will have the credibility to constructively challenge and work collaboratively throughout the organisation to help the Trust develop and deliver its strategic plans. We believe that our Board should reflect the diverse communities that we work in and serve. We therefore welcome applications from any individual with the relevant knowledge and expertise.

For further information please visit www.veredus.co.uk quoting reference 931119 (primary care) or 931128 (finance and investments) and 931130 (IT). For a confidential discussion please contact our retained consultants:

Reece D’Alanno on 07711 779022, reece.d'alanno@veredus.co.uk or Annette Sergeant on 0207 932 4393, annette.sergeant@veredus.co.uk

Closing date: Monday 25th February 2019

2. Welcome from Simon Linnett, Chairman and David Carter, Chief Executive

Dear Candidate,

Thank you for your interest in joining our Board as a Non-Executive Director.

We hope that you enjoy finding out more about our values, our ambitions and these exciting opportunities to join our high performing Board. We are a Foundation Trust serving a multi-cultural population of over 350,000 across Bedfordshire and North Hertfordshire. Operating within a very challenged health and care economy, the Trust stands out in having achieved a strong financial performance, being one of the only Trusts to meet the national standards for emergency care. The Trust also consistently meets the national cancer targets.

These appointments occur whilst the Trust engages in discussions surrounding a proposed merger with Bedford Hospital NHS Trust to create the scale necessary for efficient, high quality care. We have a long history of working together and already provide some joint clinical services to the county and beyond. Looking forward, the merger would enable both hospitals to deliver resilient services given the challenges of national workforce shortages and a move towards health services being available seven days a week and closer to where people live.

These appointments will be made by our Council of Governors and we are seeking three exceptional individuals who will bring constructive challenge, work collaboratively and embrace the values of the Trust.

You may have a background in the public, private or third sector and we are particularly interested in candidates who have experience of leading complex change. We believe that our Board should reflect the diverse communities that we work in and serve. We therefore welcome applications from any individual with the relevant knowledge and expertise.

We hope that what you read in this pack will inspire you to apply for these roles and we encourage you to contact our retained consultants at Veredus:

Reece D'Alanno on 07711 779022 Reece.d'alanno@veredus.co.uk or Annette Sergeant on 0207 932 4393, Annette.sergeant@veredus.co.uk

We look forward to receiving your application.

Simon Linnett, Chairman

David Carter, Chief Executive

3. Terms of appointment

Appointment and Tenure

The Chair and Non-executives will be appointed for an initial period of 3 years from the date of the resolution to appoint by the Council of Governors. Re-appointments may be made at the end of the period of appointment, subject to the approval of the Council of Governors and satisfactory appraisal.

Personal Development Review

The Chair will undertake an annual personal development review. In the event of an individual's performance not being satisfactory, the Council of Governors can terminate the appointment.

Conflict of Interest

The Chair and Non-executives are required to declare any conflict of interest in respect of relevant business interests, other appointments or connections with commercial or NHS bodies. The declaration is required on appointment and at any time during the execution of the Trust's business, where a conflict of interest may arise. A Register of Interests will be presented to the Board of Directors on an annual basis and minuted. The Register will be published in the Foundation Trust's Annual Report and will be available for public inspection.

Time Commitment

The time commitment for a Non-Executive is approximately four days a month; there are 12 Board of Directors' meetings per year in addition to which there are regular directors' strategy sessions; committee meetings meet either monthly or quarterly. The Council of Governors meets monthly and the Chair and Non-executives are required to attend.

Remuneration

The remuneration level for the Non-executives will be £12,000 per annum. Remuneration is taxable under Schedule E and subject to Class 1 National Insurance contributions. It is not pensionable.

Travel and Subsistence

Claims for travel and associated expenses are payable in accordance with Trust Regulations in respect of expenses actually and necessarily incurred whilst engaged on Trust business.

Independence Requirements

These new board members must be independent in character and in judgement, with no relationships or circumstances which are likely to affect, or could appear to affect, their judgement. Additionally they must demonstrate that they have no:

- conflict of interest;
- material interests;
- related party transaction; or
- transfer of resources, services, or obligations between related parties, regardless of whether a price is charged.

Eligibility

To be eligible to be appointed or to continue to serve as Chair or Non-executive Director, an individual must meet the criteria set out in the person specification. Additionally to be considered for a Non-Executive role, s/he must be a member of the Trust at the time of appointment. Trust membership is open to any individual residing in Bedfordshire or Hertfordshire. Details of how to become a member can be obtained from Anne Thevarajan the Trust's membership manager who can be contacted by

01582 718333.

Fit and Proper Persons Test

Candidates will be expected to fully disclose any reasons why they may not meet the requirements of the Fit and Proper Persons Act and to sign a statement accordingly if they are interviewed by Veredus. Veredus will explicitly check candidates' qualifications, right to work and any other factors which impact of a candidate's ability meet the requirements of the role. Candidates require commitment to Nolan Principles

4. 2018/19 Strategic Approach

This section of the annual report provides a summary of the strategic plans for the Trust. More detail is contained within the Operational Plan 2018/19.

The Luton and Dunstable Hospital's strategy has been developed to reflect its context and position. It serves a highly diverse geography close to London, is a highly performing Trust with flagship emergency services and a reputation for consistent operational and financial delivery.

However, the context and structures are changing with the development of new networks for care (STPs, ICSs, ACOs) but also with the needs and expectations of our population.

We will continue to participate actively in these changes whilst at the same time focussing our energy on maintaining our record of delivering the best care to our community.

Against this changing environment the Trust's strategy has a number of different drivers:

- we have a highly deprived young urban population in Luton with a life expectancy of one year less than the average for England, and a dispersed, ageing, more affluent population in Bedfordshire;
- the continued population growth, twice the national average, will have 150,000 (20-25%) more people living in the STP area by 2032;
- we have a national reputation for our delivery of emergency care but there is increasing recognition, locally and nationally, that the future of emergency care is much more integrated between organisations and needs to be more focussed on the complete emergency pathway;
- as a medium sized Trust we are increasingly identifying the need to develop critical mass to deliver the care that is required, e.g. services over seven days, consultants in-reaching into admission wards, sufficient elective work within a specialty to service efficient theatre lists and to allow sub-specialisation);
- we are in an area of the South East which has the most acute workforce challenges and we are disadvantaged by being positioned just beyond the area which receives outer London weighting;
- we are at the forefront of IM&T developments in the NHS;
- we have a poor estate that needs redevelopment to support the significant growth in demand and address high backlog maintenance;
- we have a complex geography serving three CCGs, three local authorities over two STPs with three community providers and two mental health providers.

Our strategy represents a response to these drivers.

Our staff are central to our strategic vision and all the evidence suggests that L&D is a place people want to work. However, the need to recruit and retain more high quality staff has never before been so important or urgent as the growth and challenges faced mean workforce shortages continue to open up across all staff groups. The recognition of the importance of putting our people at the heart of the strategic vision has been an emerging theme from the discussions regarding merging with Bedford Hospital and workforce is one of the primary drivers behind the proposed reconfiguration.

This has led to the development of our revised vision statement:

To attract the best people, value and develop them so that the teams they work in deliver outstanding care to our patients

This vision statement is based on the idea that we will deliver outstanding care through a sequence of events – we will recruit the best people, we will nurture them when they are here, and we will support them to create high performing teams. Outstanding care will not be delivered without this sequence. Ongoing work in 2017/18 also began a process to develop a revised set of Trust values. Through the ‘Good Better Best Event’ in July 2017, over 2000 staff were asked to select the words that they identified with the L&D. The value which was most important to our staff was ‘teamwork’ and this now is a key part of our vision statement.

The vision complements the structures upon which the Trust is built - a commitment to service line management and a belief that high quality services are only possible through decision making close to the frontline and the accountability and responsibility that is devolved in line with this autonomy. To enable this type of approach to flourish, the development of clinical leadership is key.

But patient care is our business. One should feel cared for even as one arrives at the hospital – even while looking for a car parking space – right until one leaves.

Our patients – we have launched our Quality Strategy to set out the Trust’s path to ‘outstanding’ and created a new position of Director of Quality to give Board leadership to its delivery. We want to deliver care in the right place (our development of Arndale House is the biggest development outside the hospital walls in its history). We want to deliver that care in a timely way (2018/19 will see our third MRI scanner in place as well as a new SPECT-CT). We want to deliver that care in a safe way (the ‘Baywatch’ initiative to prevent falls is in its second year). Our communication with our patients needs to be better. The Global Digital Exemplar (GDE) programme will deliver a patient portal allowing patients to better manage their own care. Our medical model needs to meet the changing needs of our patients. We are changing from an age based model of inpatient care to one where the patient is seen by the right specialist team, irrespective of their age, with focus on continuity of clinical staff to the patient.

Our services –our service portfolio (core acute services organised around a major emergency centre and specific tertiary services) meets the needs of our population, makes the Trust an attractive place to work, facilitates recruitment and retention of the best clinical staff and adds scale and resilience to our operations. We will therefore continue to be a provider of core district general hospital services with a major emergency centre but continue with our more specialist services (e.g. hyper acute stroke, bariatric surgery, tier 3 neonatal, head & neck cancer).

Our future – we will create critical mass in the provision of our services by merging with Bedford Hospital to provide a new Trust for the people of Luton and Bedfordshire, creating the scale necessary for efficient, high quality care. This is a proposed merger of two good hospitals and we have committed to maintaining the core services of A&E, paediatrics and maternity on the Bedford site. We have a long history of working together and already provide some joint clinical services to the county and beyond, such as vascular surgery, head and neck cancer services, cervical cancer screening services, neonatal

intensive care, and stroke services.

Looking forward, the merger would enable both hospitals to deliver resilient services given the challenges of national workforce shortages and a move towards health services being available seven days a week. At the same time, it is predicted that the demand for healthcare in the area will grow at almost twice the national average over the coming years. These two factors have been a catalyst for the organisations to consider merging to help us make the most of our combined resources by creating single clinical teams, delivering economies of scale and making the case for capital investment to deliver high quality sustainable healthcare.

The proposed merger is supported by a clinical vision for the people of Bedfordshire and beyond:

- A **full range of ‘outstanding’ hospital services** to be provided to the people of Bedfordshire and surrounding counties
- **Excellent clinical services** that take the best from each hospital and will deliver consistently high quality standards
- The **highest standards of clinical leadership and innovation** made possible through responsive and efficient support functions
- **Integration of care with GP partners** and closer working in specialist teams to support and develop out of hospital care
- **Specialist services** that are currently delivered elsewhere e.g. plastic surgery and specialist cardiac imaging, to be delivered safely and effectively within Bedfordshire
- Practices and processes which continue **to focus on delivering safe care** to patients
- **Common service standards** to be developed **to bring equal care to all**, based on industry best practice
- **Better use of technology and information** to support the delivery of the best possible experience for patients and clinicians
- Teaching, training and research activities to support **continuous service improvement and employment of the highest quality staff.**

One aim of the merger is to end the uncertainty which has hampered the development of services in the area for many years. However, there are **required enablers** which are necessary to allow services to be delivered to the right standard: transaction costs, including the costs of IT integration, a solution to the accumulated debt at Bedford, an achievable financial target and sufficient capital to ensure the new organisation has solid foundations by improving and extending our current capacity.

Our approach – the L&D has a dynamic and innovative culture. We believe in the need to continue this approach to maintain the levels of high performance and good financial stewardship. Two key enablers are (i) IT, with the Trust at the forefront of technology through the GDE and Fast Follower programmes and (ii) service line management with devolution and autonomy, with accountability, to allow clinically led fast and safe decision-making and drive value. We will continue to give our staff the tools, incentives and support to deliver not just high quality care, but to promote a culture of continuous improvement.

Our community – the Trust recognises that, increasingly, the needs of elderly complex patients can only be met by service provision which is truly integrated across the hospital and community divide. There is more recognition that staying in hospital beyond the time when a patient’s medical needs are met is not just sub-optimal but is dangerous and increases the long term cost of care. Our complex geography and multiple partners makes genuine integration more difficult. We have made some early gains, for example the co-location of our hospital based social workers, community nurses and discharge teams, but we need to go much deeper and further.

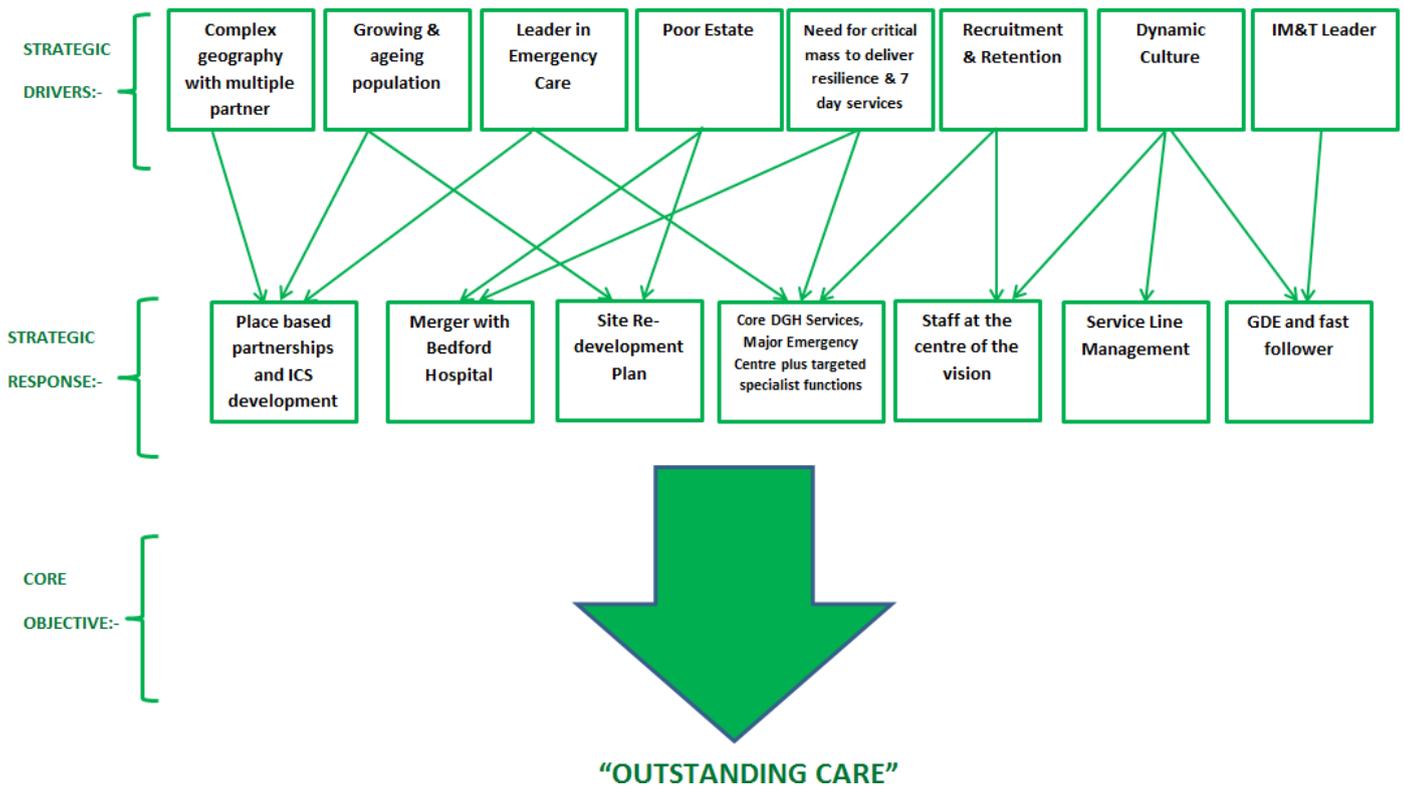
Currently services provided out of hospital have not developed quickly enough to meet the needs of a growing and ageing population. We have seen the consequences of this in recent months over the 2017/18 winter as the hospital has struggled to cope with rising activity (often of inappropriate attendances and admissions).

The Trust fully supports the objectives of the community and primary care programme of the Integrated Care System (ICS), developing more services out of hospital and ensuring that the local populations needs can be met in a different way in future. This will require change: primary care delivered at scale, integration of IT systems, more proactive and reactive community interventions and L&D is determined to play its part in the leadership and delivery of out of hospital care. We will continue to be a full partner in place-based developments (e.g. the Luton Provider Alliance) and the wider STP and ICS programme and look to outreach more of our services (e.g. Arndale House and the proposals for a Dunstable community 'Hub'). The partnership with Bedford Hospital will act as a springboard to a deeper participation in the broader local health economy.

Our estate – the hospital estate has grown up over many decades, responding to changing need through piecemeal development and has now reached a critical juncture where the approach of 'patch and mend' has become a serious impediment to strategic objectives and operational delivery. Clearly a new hospital build would provide the best solution but there is an acceptance that this is not a practical or affordable proposition. We have exhausted all options in the search to find a solution which is deliverable, affordable and makes the most impact on the most pressing needs of the services but also provides the best solution of growth and resilience. The current 'Acute Services block' proposal concentrates on those services on which the ageing deteriorating estate is having most impact but which will need to be provided on the hospital site now, and in the future: maternity delivery suite and theatres, NICU, critical care and operating theatres. We are also developing a strategy to refurbish the wards most in need of development with a linked helipad to further enhance our emergency services.

Summary

We can only succeed in the future if we continue to recruit and retain highly talented individuals that can work as a team and maintain the harmonious, highly committed and professional relationship between staff, management, the Board, Governors, volunteers and Members. The L&D is a collection of such people delivering remarkable things; we are determined to invest all that is necessary to keep it that way as we face and overcome the strategic challenges ahead.



5. Foundation Trust Status

Luton and Dunstable University Hospital is a foundation trust, which is:

- established as independent public benefit corporations;
- free from central government control with local responsibility and accountability for operating within a clear regulatory framework;
- a provider of healthcare according to core NHS principles – free care, based on need and not ability to pay;
- accountable to local people, who can become members and governors;
- free to innovate for the benefit of their local community and patients;
- free to retain any surpluses they generate and to borrow in order to support this investment; and
- able to decide for themselves what capital investment is needed in order to improve their services.

6. The Board of Directors and the Council of Governors

Foundation trusts are led by a Board of Directors and a Council of Governors. The Chair of a foundation trust is a chair of both these bodies. The Board of Directors is a corporate board and has a business and quality focus, developing strategic plans, monitoring and delivering those plans, and managing risk. The Board consists of the Chair, the Chief Executive, the Non-executive Directors and the Executive Directors. Its role includes:

- determining the Trust's strategic direction, having regard to the views of the Council of Governors acting on behalf of the members;
- making sure the Trust performs economically and efficiently and within legal and statutory requirements;
- making sure the Trust complies with its Terms of Authorisation;
- discharging specific duties relating to audit, remuneration, clinical governance, charitable funds and risk assurance; and
- working in partnership with the Council of Governors.

The *Board of Directors* includes up to eight executives and up to eight non-executives, including both the Chair and CEO. A profile of each of the Board members can be found on the Trust website.

The *Council of Governors* is responsible for the appointment, remuneration and removal of the Chair and Non-executive Directors, and for the appointment and removal of the external auditors. The Council is responsible for approving the strategic direction of the Trust as defined by the Board, and other matters of significance to the Trust's future plans. It does not however have any role in the day-to-day management of the Trust.

The Council of Governors represents the Trust's 15,000+ members and the wider local community in the stewardship of the Trust. It is made up of 39 Governors comprising of elected public, patient and staff governors as well as appointed governors from partner organisations.

As a result of changes brought about by the Health and Social Care Act 2012 the Council of Governors is also now responsible for holding the Chair and Non-executive Directors to account for the performance of the Board, and for approving significant transactions, mergers, acquisitions, separations and dissolutions.

Currently, the Board sub-committees are:

- Clinical Outcome, Safety and Quality
- Audit and Risk
- Finance, Investment and Performance
- Remuneration and Nominations
- Charitable Funds
- Hospital Redevelopment

Further Reading

The following websites and documents will provide you with useful background into the NHS and the Trust:

- www.ldh.nhs.uk – the Trust's website includes information such as business plans, annual reports and further information about services.
- www.nhs.uk – the official NHS website from a patient/public perspective. Contains information about availability of services and also a useful link entitled 'About the NHS'.

7. Person Specification

Job Title: Non-Executive Director

Applicants should be able to demonstrate their ability to meet the criteria and skills as outlined below

PERSON SPECIFICATION	Essential	Desirable
Knowledge		
• An understanding of the NHS core values, ethos and the external environment in which it operates in UK Healthcare	X	
• An understanding of the Foundation Trust, its organisation and purpose	X	
• An understanding of the health needs of the population served by Luton and Dunstable Hospital NHS Trust.		X
• An understanding of public service values and accountability	X	
Skills		
• High level commercial skills		X
• Ability to work as an effective member of the Board	X	
• Excellent interpersonal and communication skills	X	
• A good understanding of corporate governance, including finance, risk and monitoring of performance	X	
• A good understanding of finance, budgeting and control	X	
• The ability to understand and absorb complex data and information and reach informed judgment.	X	
• Well developed political awareness	X	
• High level of personal and business integrity	X	
• Commercial or public sector experience	X	
• Ability to evaluate and critically appraise complex data	X	
• Ability to think strategically	X	
• Ability to work with people of all levels and disciplines within and outside the organisation	X	
• Specific knowledge and skills linked to this vacancy	X	
• Clinical and commissioning skills		X
• Estate and asset management		X
Experience		
▪ Senior or board level	X	
▪ Experience of working with public sector or voluntary bodies		X
▪ Demonstrate an understanding of how to achieve positive organisational change		X
▪ Working in a pressurised and challenging environment	X	
Specific Knowledge & Skills For this appointment – one or more of the following:		
• Financial knowledge and acumen		X
• Accountant		X
• Capital developments		X
• Information Technology		X

8. Role Specification

Non-Executive Director

Overall purpose

As a member of the Board of Directors, you will work alongside other Non-Executive directors, the Chairman and executive directors as an equal member of the Board of Directors. You will be responsible for the strategic development of the Trust and its performance management to enable the Trust to deliver a high quality service for patients.

You will be expected to use your expertise to contribute to the work of the Foundation Trust. You will demonstrate a strong commitment to the NHS and an interest in healthcare issues both locally and nationally.

- Contribute to the formulation of the overall strategic direction and development of the organisation.
- To monitor and support the performance management of the L&D in meeting its goals and objectives.
- Uphold the duty of trust invested in the position, undertaking such duties in a way that adds to public confidence and trust, and ensures that at all times the L&D supports the principles of equality and diversity
- Ensure that the organisation functions within its legal and regulatory framework.
- Participate on various Board of Directors' and other committees. For example, some Non-Executive Directors will be involved in the Appointments Committees for senior staff.
- Demonstrate a strong commitment to the NHS and an interest in health care issues both locally and nationally.
- Contribute to constructive debate regarding issues; able to exercise sound judgement at all times using strategic thinking. Understanding of complex issues, making decisions and prioritisation.
- Establish effective networks to connect the organisation and the Board of Directors to potentially useful external organisations and individuals, including the Council of Governors.
- Provide assurance to the Council of Governors on the activities and decisions taken by the Board of Directors.
- Be fully briefed on issues the Board of Directors is required to make decisions on.
- Satisfy themselves on the integrity of financial information and that financial controls and systems of risk management are robust and defensible.
- Represent the Trust at official occasions.
- Development and familiarisation of challenging targets and goals

Key Functions and Responsibilities

It is likely that a non-executive director will have considerable experience at a senior level of one or more functional areas such as (but not necessarily restricted to) finance, commerce, legal, property, central or local government or health. While their particular expertise may be a key reason for their appointment, they are, above all, members of a unitary board not specialist advisors. They are also likely to have strong external connections, but they are in no sense representatives of any external body.

All Non-Executive Directors are expected to:

- Maintain absolute confidentiality about all sensitive/confidential information received.
- Participate in annual performance appraisal and review.
- Act and behave in accordance with the Luton and Dunstable Hospital NHS Foundation Trust Policies/Procedures and any codes/protocols
- Act in accordance with the Constitution of Luton and Dunstable University Hospital NHS Foundation Trust.

9. How to apply and timetable

All applications will be acknowledged. Candidates are encouraged to submit their applications as soon as possible; preliminary interviews will begin as soon as expressions of interest begin to be received. The latest dates for applications is 25th February 2019, but if you have missed this date, please contact Veredus, as it may be possible to consider late applications.

Element	Date
Closing date	25 th February 2019
Preliminary interviews with Veredus	As soon as applications are received
Shortlist meeting	To be confirmed
Final selection interview	To be confirmed

Long listed candidates will be invited to preliminary interview with Veredus at our London office. Please note you will be asked to bring to your preliminary interview: evidence of your identity; right to work; and original certificates relating to any qualification that you reference in your CV, and to complete a form enabling us to check these at source.

To apply, please send:

- A comprehensive CV which demonstrates your ability to meet the criteria contained in the person specification;
- A short (no more than 2 pages) supporting statement highlighting your motivation for the role of NED and how your experience matches the requirements of the position;
- Names, positions, organisations and telephone contact numbers and email addresses for at least two business referees. If you do not wish referees to be approached without permission, please indicate this.

Equality & Diversity

You are invited and encouraged to complete the Equality and Diversity Monitoring Form which can be found by accessing this link or by pasting or typing the following into your web browser: <https://form.jotformeu.com/81192851485362> This will help our client to follow the recommendations of the Equality and Human Rights Commission, that employers should monitor selection decisions to assess whether equality of opportunity is being achieved. The information on the form will be treated as confidential, and used for statistical purposes. The form will not be treated as part of your application.

Finally, please ensure you include your telephone contact numbers and email address, as well as any dates when you will not be available.

Applications should be emailed to veredushealthteam@veredus.co.uk quoting ref 931119 (primary care) or 931128 (finance and investments) and 931130 (IT).

If you have any queries on any aspect of the appointment process, need additional information or wish to have an informal and confidential discussion, please contact our advising consultants Veredus: Reece D'Alanno on 07711 779022, reece.d'alanno@veredus.co.uk or Annette Sergeant on 0207 932 4393, annette.sergeant@veredus.co.uk