



Hertfordshire and
West Essex Integrated
Care System



Hertfordshire and
West Essex
Integrated Care Board

HERTFORDSHIRE & WEST ESSEX ICS

INTEGRATED CARE BOARD

PARTNER MEMBER NOMINATION PACK



Role Description

Job Title: Integrated Care Board (ICB) Partner Member

Accountable to: Integrated Care Board Chair

Reporting to: Integrated Care Board Chair

Hours: Part time (estimated 2-3 days per month)*

*** Note – the time commitment for primary care service partners members will be different to the other partner members *approximately 8-12 hours per week* which will be reimbursed in line with ICB policy for Clinical Leadership (£85 per hour)**

1. Role Priorities

There are three different constituencies of Partner Members on the ICB:

- a) NHS Trusts/Foundation Trusts providing services in the ICS area (up to 3 roles):
 - One shall have specific knowledge, skills and experience of the provision of acute services;
 - One shall have specific knowledge, skills and experience of the provision of community services; and
 - One shall have specific knowledge and experience in connection with services relating to the prevention, diagnosis and treatment of mental illness.
- b) Providers of Primary Care Services (up to 3 roles). Eligible applicants will operate from a main base within the geographical area covered by NHS Hertfordshire and West Essex ICB. We expect the partner member(s) nominated by providers of primary medical services to bring an understanding of primary care leadership experience. This includes dental, community pharmacy and optometry providers as well as primary care networks and general practice. The post holder will ensure they are able to provide a current perspective of primary care sector and engage across the wider primary care contractors linking with existing forums/clinical leads across ICB and through each place but also strong link with the respective professional groups to ensure there is good engagement across the whole primary care sector.
- c) Local Authorities within the ICS area nominated by the local authorities whose areas coincide with, or include the whole or any part of, the ICB's area (up to 2 roles). Those local authorities are:
 - Essex County Council; and
 - Hertfordshire County Council

The partner member will be a member of the Integrated Care Board (ICB). All members of the ICB will take collective responsibility for working together to ensure the ICB and system partners are well led, successful and supported, enabling integration and delivery through the ICB.

As a member of the unitary board (ICB), each board member is jointly responsible for planning and allocating resources to meet the four core purposes of integrated care systems: 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.

Partner members are expected to bring the perspective of their sector to the work of the Integrated Care Board and in undertaking their Board member duties will be doing so on behalf of the ICB and not as a representative of any other organisation or partnership that they may belong to.

In addition to the Board, Partner members may be asked by the Chair to undertake committee assignments and portfolio responsibilities.

2. Priorities

As a member of a unitary board all board members will:

- Work collaboratively to shape the short, medium and 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 governance arrangements (including with the Integrated Care Partnership (ICP)), collaborative leadership and effective partnership working, including with local government, NHS bodies and the voluntary sector.
- Support the Chair and the wider Board on issues that impact organisations and workforce across the ICS, such as integration, the People agenda, Digital transformation, Emergency Preparedness, Resilience and Response (EPRR) and Covid-19 challenges.
- Play a key role in establishing new statutory arrangements for the ICS to ensure that the ICB meets its statutory duties, building strong partnerships and governance arrangements with system partners, including the ability to take on commissioning functions from Hertfordshire and West Essex ICB and NHS England.

3. Accountabilities

The partner members are:

- Accountable to the ICB Chair.

- May have designated areas of responsibilities as agreed with the ICB Chair.
- Has a collective responsibility with the other members of the ICB to ensure corporate accountability for the performance of the organisation, ensuring its functions are effectively and efficiently discharged and its financial obligations are met.

4. Role responsibilities and competencies

You will work alongside the Chair, non-executives, executive directors and partner members as equal members of a unitary board. You will:

- Bring experience and perspective from your sector [NHS Trusts/Foundation Trusts/ Primary Care Services/ Local Authorities] and respectful challenge to the plans, aims and priorities of the ICB;
- Promote open and transparent decision-making that facilitates consensus aimed to deliver exceptional outcomes for the population.

As system 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:

5. 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.
- Ensuring that major programmes of transformation and capital investment are delivered on plan and achieve real benefits for the population.
- Working with partners through the ICP to devise and agree an integrated care strategy to tackle the root causes of poor health and ensure people experience person centred coordinated care.

6. Partnerships and communities

- Promoting dialogue and consensus with local government and other partners, to deliver the four core purposes of the ICS, ensuring effective joint planning and delivery for system working.
- 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.

- Providing strategic leadership and experience in the establishment and success of place-based Health and Care Partnerships across the ICS footprint to provide place-based leadership and accountability for delivering ICP strategy and ICB plans, transformation and improved health and health care outcomes.

7. Social justice and health equalities

- Advocating diversity, inclusivity and a sense of belonging, health equity and social justice to close the gap on health inequalities and achieve the service changes and actions to address the wider determinants 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 the ICB's plans and activities.
- Leading by example, 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.

8. 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. Supporting the Share Commitment to Quality agreed by the National Quality Board.
- Ensuring the NHS plays its part in social and economic development and achieving environmental sustainability, including the Carbon Net Zero commitment.

9. Governance and assurance

- Collectively ensuring that the ICB is well led, 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 its statutory duties, and that compliance with the expected standards of the regulatory bodies is maintained.

10. 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 and wider ICS, 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.

11. General

- This role description describes responsibilities, as they are currently defined. It is anticipated that they will change over time and the role description may need to be reviewed in the future.

Individual Responsibilities

- You will be expected to adhere to relevant organisational policies as outlined in your Contract for Services and procedures and relevant legislation including any requirements of your professional body (as applicable). You will maintain satisfactory personal performance and professional standards and to achieve agreed objectives for the role. You will represent and conduct yourself in line with the Nolan Principles and standards of working in public life. You will attend mandatory training and participate in an annual Performance Appraisal Scheme and to contribute to your own development by investing appropriate time.

Confidentiality

- All ICB Board Members have both a common-law duty and a statutory duty of confidentiality to protect patient (and indeed any personally identifiable) information and only use it for the purposes for which it was intended. The disclosure and use of confidential patient information needs to be both lawful and ethical.

Information Governance & Data Protection

- (Confidentiality, IT Security, Data Protection, Cyber Security and Freedom of Information).
- All Board Members must comply with legal obligations and statutory requirements in relation to the above, (including, but not limited to, the General Data Protection Regulations (GDPR), Data Protection Act 2018), the ICB's IT Security Policies, Information Governance Policies and procedures and IG Guidelines which are available on the Intranet.
- The post holder is required to respect the confidentiality of all individuals (including, but not limited to, clients, patients, carers, colleagues etc.), by not disclosing any information

obtained, accessed or used during the course of your duties to anybody who does not have a legitimate reason to receive it.

- All Board Members have an obligation to report any non-compliance by themselves or others, through the Incident Reporting process.
- For details of how the ICB processes your identifiable information please see the 'Staff Privacy Notices' on the public website or ask a member of the People Team or IG Team for a copy.
- The ICB is registered as a data controller under the Data Protection Act 2018. All the personal information we hold, obtain, record, use and share as an organisation is governed by this Act. As a Board Member of the ICB you have a legal responsibility for all personal information you handle and must not at any time use the personal data in a way incompatible with the guidelines stipulated in this act. If you are in any doubt regarding what you should or should not do in connection with the Data Protection Act then you must contact the ICB Chair.

Records Management

- As an ICB Board Member, you have a legal responsibility for all records you work with e.g. patient records, financial records, personal, administrative etc, that you gather or use as part of your work within the ICB. The records may be held in a variety of formats such as paper, electronic, microfiche, audio and video tapes etc. You must consult the Chair of the ICB if you have any doubt as to the correct management of the records with which you work. At the end of your term you will appraise and archive the records you have created in line with the ICB Records Management Policy.

Freedom of Information

- The role-holder will follow the ICB's Freedom of Information Policies and Procedures in line with the Freedom of Information Act 2000.

Health & Safety

- Board Members must not do anything to compromise the health and safety of either their colleagues or themselves. They should also be aware of the responsibilities placed on them by legislation to ensure agreed safety procedures are carried out. The ICB is committed to a no smoking policy and offers support to staff who wish to stop smoking.

Equal Opportunities Policy

- It is the aim of the ICB to ensure that no patient, employee or job applicant receives less favourable treatment on grounds of age, gender, religion, race, colour, sexuality, nationality, disability, ethnic or national origins and is not placed at a disadvantage by conditions or requirements which cannot be shown to be justifiable. To this end, the ICB has an Equal Opportunities Policy and it is for each Board Member to contribute to its success, promoting equality of opportunity and good working relationships in employment and service delivery.

Safeguarding Children and Adults at risk

- All Board Members must be familiar with and adhere to ICB's child protection procedures and guidelines. All Board Members are required to attend child protection and adult protection awareness training, additional training and supervision regarding child protection and adult protection relevant to their position and role, including Prevent training and awareness.

Mobility

Board, Committee and other ICB meetings may be held at various locations across Hertfordshire and West Essex.

Smoking and Health

- The organisation has a no smoking policy throughout its premises, including buildings and grounds.

Equality and Diversity

- The organisation is committed to promoting equal opportunities to achieve equity of access, experience, and outcomes and to recognising and valuing people's differences. This applies to all activities as a service provider, as an employer and as a commissioner.

Flexible Working

- The organisation is committed to offering flexible, modern employment practices, which recognise that all staff need to strike a sensible balance between home and work life. All requests to work flexibly will be considered.

Reasonable Adjustments

- The organisation is seeking to promote the employment of people with disabilities and will make any adjustments considered reasonable to the above duties under the terms of the Equality Act 2010 to accommodate a suitable disabled candidate.

12. ICB partner member: person specification

Competency	Knowledge, Experience and Skills required
Setting strategy and delivering long-term transformation	<ul style="list-style-type: none"> • Knowledge of either NHS Trusts/Foundation Trusts/ Primary Care Services/ Local authorities within Hertfordshire and West Essex. • 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.
Promoting equality and inclusion, and reducing health and workforce inequalities	<ul style="list-style-type: none"> • The importance of continually reviewing plans and strategies to ensure their delivery leads to improved services and outcomes for all communities, narrows health and workforce inequalities, and promotes inclusion.
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.
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 with a high degree of personal integrity.

	<ul style="list-style-type: none"> • Experience contributing effectively in complex professional meetings at a very senior level
<p>Creating a compassionate and inclusive culture for our people</p>	<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

13. Eligibility

You will be able to demonstrate that you meet the requirements of the “fit and proper” person test and that you are able to meet the time commitment required by the role (attending 75% of Board and Committee meetings as required by the constitution).

NHS Trust/Foundation Trust partner members must:

- a) Be a Chief Executive Officer or an Executive Director of one of the NHS Trusts or FTs within the ICB’s area. For the Partner Member meeting point (f) below, following guidance by NHS England, this role shall be held by a Chief Executive Officer.
- b) Meet criteria as may be set out in any NHS England guidance
- c) As a member of the Board - consider the effect of their recommendations or proposals on the better health and wellbeing of everyone, the quality of care for all patients, and the sustainable use of NHS resources. Referred to as the “Triple Aim”.
- d) One shall have specific knowledge, skills and experience of the provision of acute services;
- e) One shall have specific knowledge, skills and experience of the provision of community services; and
- f) One shall have specific knowledge and experience in connection with services relating to the prevention, diagnosis and treatment of mental illness.

Primary Care Services partner members must:

- a) Be a healthcare professional who is either actively working within a provider of primary care services operating from a main base within the geographical areas covered by the ICB, or who has done so in the ICB catchment area

within a reasonable period to ensure they are able to provide a current perspective of their sector.

- b) The post holder(s) will meet any other criteria set out in NHS England guidance or supporting legislation.
- c) As a member of the Board - consider the effect of their recommendations or proposals on the better health and wellbeing of everyone, the quality of care for all patients, and the sustainable use of NHS resources. Referred to as the “Triple Aim”.
- d) Each Primary Care Services partner members will bring broad experience and leadership across primary care. Primary Care includes general practice, community pharmacy, dental and optometry services. They will provide leadership across primary care working across ICB and ensuring connectivity with through primary care leadership through each of the three place Health and Care Partnership and the Mental Health and Learning Disability .
- e) It is anticipated for one of the three Primary Care Services Partners to chair the ICB wide Primary Care Transformation Group with the others supporting as vice/deputy as well other committees or subgroups of the ICB Board as deemed appropriate.
- f) All three primary care partner members will be members of the ICB Clinical Senate but also will play a role in how it links with each of the three places linking with the strategic clinical leadership at place, locality leads and the wider primary care leaderships across system and place. This may include participating, leading, engaging ICB wide primary care governance meeting and also engaging via certain Health and Care Partnership governance as appropriate to provide the strong leadership from bottom up.
- g) It is envisaged for Primary Care Service Partners to commit to a minimum of 8-12 hours a week (2-3 sessions).

Local Authority partner members must:

- a) Be the Chief Executive or hold a relevant Executive level role of Essex County Council; and Hertfordshire County Council
- b) The post holder(s) will meet any other criteria set out in NHS England guidance or supporting legislation; and
- c) As a member of the Board - consider the effect of their recommendations or proposals on the better health and wellbeing of everyone, the quality of care for all patients, and the sustainable use of NHS resources. Referred to as the “Triple Aim”.

Elected officials including MPs are excluded from the ICB partner member role.

Given the significant public profile and responsibility members of NHS Boards hold, it is vital that those appointed inspire confidence of the public, patients and NHS staff at all times. We will undertake a number of specific background checks to ensure that those we appoint are “fit and proper” people to hold these important roles.

Applications will be assessed on merit, as part of a fair and open process. 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. Interviews will take place if there are more candidates short-listed than roles available.

We value and promote diversity and are committed to equality of opportunity for all. We believe that the best boards are those that reflect the communities they serve.

- 50% of the working age population and 77% of the NHS workforce are women
- 14% of the working age population and 23% of the NHS workforce are from ethnic minorities
- 16% of working age population and 5% of the NHS workforce are disabled
- 2% of the population over 16 and 3% of the NHS workforce identify as LGBT
- 82% of working age adults and 79% of the NHS workforce are under 55¹

We want to increase the diversity of our NHS leadership and encourage applications from groups we know are all under-represented in these important roles. We prioritise Equality, Diversity and Inclusion, team health and wellbeing and the principles of kind leadership in our 'ways of working'. The successful applicants will have a key role in nurturing this culture.

14. Terms of appointment

This section may be subject to change due to development of the legislation.

- The term of office for this Partner Member is two years, with a maximum of two terms being held by the same individual.
- All NHS Board members are required to comply with the [Nolan Principles of Public Life](#) and meet the [Fit and Proper Persons requirements](#).

15. Making an application

For more information, you can get in touch with:

¹ Population data source gov.uk/ons.gov.uk (2011 Census). NHS source: Workforce NHS Digital - Hospital and Community Health Services workforce statistics: Equality and Diversity in NHS Trusts and CCGs in England (2020 September data used)

Please contact hweicbenh.hweboard@nhs.net to arrange an informal conversation with Chair, Paul Burstow.

If you wish to be considered for one of the ICB partner member roles, please provide:

- Completion of a nomination form. This includes:
 - A supporting statement of no more than 250 words that highlights your skills and experience and allows insights on your values and motivations for applying for the role. You should outline your personal responsibility and achievement within previous roles that demonstrates you have the knowledge, skills and competencies to deliver this role, as outlined in the person specification (Nomination form).
 - A completed Equal Opportunities Form
 - A completed Declarations of Interest Form (found at page 2 of the nomination form)
 - A completed Fit and Proper Person self-declaration Form (Found at page 6 of the nomination form)

16. Preliminary selection & eligibility testing: (if required) 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 outlined in the person specification. Long-listed applicants may be invited for a preliminary conversation. Feedback from any preliminary assessment will be given to the selection panel who will agree the applicants invited to interview. **Please contact [insert name] for this conversation.**

Note: the next stages will only apply if there are more eligible candidates than roles available.

17. Stakeholder Panel: (if required) prior to interview stakeholder panel/s will be organised to provide an opportunity for candidates to engage with key stakeholders and demonstrate their sector experience and their skills in working collaboratively with colleagues from their sector. [Note: for PMS Partner Members the PCN CDs will all be invited to join the stakeholder panel]

18. Shortlisting: (if required) the selection panel will use the information provided by the applicants and feedback from any preliminary assessment to agree applicants invited to interview. Assessment will be based on merit against the competencies experience, skills and values outlined in the person specification.

19. Interviews: (if required) applicants will be asked to make a 5 - 10 minute presentation to help the selection panel draw out the competencies, experience, skills and values outlined in the person specification. The formal interview will be 45 minutes to an hour of open questions from the selection panel to showcase past experience and explore applicant's values, motivations, creativity and ability. These are planned for [insert dates] at our Bletchley office.

20. Appointment: Selection panels will be asked to identify appointable candidates based on merit against the competencies experience, skills and values outlined in the person specification.