Could you help lead the NHS in your area?

Adviser to the Board (Patient Experience)

Candidate information pack

Reference: L1567
We value and promote diversity and are committed to equality of opportunity for all and appointments made on merit. We believe that the best boards are those that reflect the communities they serve.

We particularly welcome applications from women, people from the local black and minority ethnic communities, and disabled people who we know are under-represented in chair and non-executive roles.
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1. The opportunity

We are recruiting an Advisor (Patient Experience) to the Trust Board for Lewisham and Greenwich NHS Trust. This is an exceptional opportunity to share your experience and insight to make a positive difference to the experience of people in your community who use our services.

The Associate non-executive director role is used successfully in the NHS to support Board succession strategy and achieving a balance of Board level skills. Although not legally a member of the Board and does not participate in any formal vote, the individual is an integral member of the wider Board team-comprising executive and non-executive roles and attending Board and key committee meetings as required.

We are also recruiting two non-executive directors. Please see vacancy reference L1422 for further information.

2. The person specification

Essential criteria

You will need to be either a current patient of the Trust (or their carer), or to have been a patient of the Trust in the last three years

Applicants should live in or have strong connections with the area served by the Trust (currently the London Boroughs of Lewisham, Greenwich, Bexley and Bromley). We will accept applications from those with the appropriate experience living in the surrounding areas.

Applicants for this post must not be employees of LGT, current or previous healthcare professionals, or members or employees of any health related organisation or lobby group.

You will need to be able to demonstrate you can use your experience to:

- work alongside non-executive and executive colleagues as an adviser to the board
- bring independence, external perspectives, skills, and challenge to strategy development
- shape and actively support a healthy culture for the trust

All Board Advisers must champion the standards of public life – by upholding the highest standards of conduct and displaying the principles of selflessness, integrity, objectivity, accountability, openness, honesty, and leadership.
• On average this role will require the equivalent to approximately 1-2 days a month.

• The remuneration payable for this role is £6,157 per annum.

Given the significant public profile of Advisers to NHS Boards, it is vital that those appointed inspire confidence of the public, patients and NHS staff at all times. NHS Improvement make a number of specific background checks to ensure that those we appoint are “fit and proper” people to hold these important roles. For more information please visit the website or contact leslie.horn@nhs.net.

3. About Lewisham and Greenwich NHS Trust

Lewisham and Greenwich NHS Trust (LGT) was formed in October 2013 by the merger of Lewisham Healthcare NHS Trust and the Queen Elizabeth Hospital Greenwich (formerly part of South London NHS Trust).

LGT is responsible for:

■ Queen Elizabeth Hospital in Woolwich
■ University Hospital Lewisham
■ A range of community services in Lewisham
■ Some services at Queen Mary’s Hospital in Sidcup.

LGT provides a comprehensive range of high quality acute healthcare services to more than 526,000 people living across the London Boroughs of Lewisham, Greenwich and Bexley. Community services are provided primarily, but not exclusively, to those living in Lewisham. This is an area of high deprivation (the 30th most deprived of 326 local authorities) and life expectancy is lower than the national average, so LGT provides services that are of critical importance to the health and wellbeing of the local community.

Queen Elizabeth Hospital (QEH) serves the populations of Greenwich, Bexley and other neighbouring boroughs. It provides a wide range of inpatient and outpatient services, as well as emergency and planned care. University Hospital Lewisham (UHL) provides elective and emergency healthcare to residents of Lewisham and other local boroughs, including Greenwich, Bexley and Bromley. The Trust is also a centre for the education and training of medical students enrolled with King’s College London’s School of Medical Education.

In Lewisham, the Trust also provides care to adults and children in a range of health centres, community clinics and in patients’ own homes. Adult services include community matrons, district nurses, the diabetes team, the home enteral nutrition team and a sexual and reproductive health team. Services for children and young
people include health visiting, occupational therapy, physiotherapy and speech and language services.

The trust’s turnover is £511m, employs over 6,000 staff and in 2016/17 had

- Over 545,000 outpatient attendances
- Over 275,000 ED attendances
- Over 55,000 emergency admissions and 5,000 planned admissions
- Over 8,500 births, and
- Around 600,000 face to face contacts with patients in the community

LGT has an established partnership with King’s Health Partners (KHP), the Academic Health Science Centre for South East London, to deliver local clinical services research, education and training activities. LGT is also part of the London (South) Comprehensive Local Research Network and the South London Academic Health Science Network and plays a part in many clinical networks across South East London, predominantly for specialist services including cancer, cardiac, stroke, maternity and neonatal services. Participation in these networks gives local people access to a wide range of specialist care.

3.1. Key Achievements Already Secured

Since the Trust was formed in 2013, it has worked hard to create one organisation across the two hospitals and community health services in Lewisham. The Trust has also been working with its local CCGs to ensure that the services and facilities out of hospital meet the needs of its patients on discharge.

Key service delivery improvements have included:

At Queen Elizabeth Hospital:

- A new Birth Centre
- Centralisation of Pathology
- A new Clinical Decision Unit alongside the Emergency Department
- Establishment of frailty model, including a new acute frailty unit

At Lewisham Hospital:

- A new Ambulatory Care Centre
- A Kidney Treatment Centre under construction
- Additional theatre capacity to accommodate the repatriation of urology
• Consolidation of stroke services, with an expanded stroke unit

Across both hospital sites good progress is being made in improving delivery of performance targets - notably ED performance, cancer waiting times and Referral to Treatment – although resilience is not yet as robust as the trust would wish.

Following inspection by the CQC in March the trust's community services were rated “Outstanding”, with particular praise for children’s community services.

LGT has established a good record for delivering its annual plans and securing investment for improvement, such as those described above. The trust is developing exciting plans to meet the challenges we face, with estates development a key enabler for this work.

4. Key challenges

Despite the track-record of success, substantial challenges remain, including:

• The recent CQC report, published in August 2017, rated the Trust as “Requires Improvement” across both acute sites even though a wide range of hospital services at both Queen Elizabeth Hospital and University Hospital Lewisham were rated as “Good”.

• Increasing demand for the trust’s services which are being provided in cramped, sometimes even inadequate facilities, particularly at QEH. The hospital buildings have been mostly unchanged since they were commissioned by the NHS in 2001 but the profile of service demand has changed significantly. The number of patients attending the Urgent Care Centre and Emergency Department (ED) has increased dramatically, and this clinical space is now much too small. The ED was removed from the admitting wards, and patients attending an outpatient appointment have to walk some distance.

• Infrastructure problems at QEH - basic failings with power and water, as well as heating and ventilation.

• Difficulty in recruiting and retaining the staff needed. The trust has increased its staffing establishment to ensure we can meet safety and quality standards but, faced with difficulties recruiting and retaining sufficient staff, and has had to use temporary staff including agency staff with higher costs as a result.

• Questions about the trust’s financial viability and the challenge of securing capital for investment. The trust’s deficit has increased over recent years, with a range of contributing factors. The trust’s estate is expensive to run and while an annual payment of support is received for the QEH PFI, there is no such financial support for the UHL estate which consists of a PFI and old, expensive-to-maintain premises. There have also been significant increases
in the contributions the trust has to pay in to the clinical negligence scheme for trusts (CNST) over the last 2-3 years due to a change in the formula used to determine LGT’s charges.

- A shortage of appropriate provision in the community for local people who need care, but not a hospital bed.

The Trust has plans to address many of these issues, including:

- A major safety and quality improvement plan that was launched immediately after the CQC inspection in March. This is a joint plan with the trust’s health and social care partners to make the improvements needed across the whole system to address the issues identified by the CQC. Significant progress has already been made in key areas and work with the trust’s partners is ongoing.

- A programme of service transformation has started with the development of frailty units at both acute sites, improved flow to support the emergency pathway and improved theatre utilisation. LGT recognises this is just the beginning and a trust wide programme of quality improvement is being established to ensure all services consistently strive to reduce variation, implement best practice and improve clinical outcome and patient experience.

- Ongoing focus on staff recruitment and retention. This includes reducing the time to hire, enabling newly qualified nurses to gain experience in a range of roles within the trust and initiatives to ensure equality of opportunity for career progression and development for all staff.

- Further development of a financial sustainability plan to enable the trust’s finances to return to balance. The trust has a clear understanding of the key drivers of their deficit and as their financial sustainability is inextricably linked with the plans of the South East London STP, will include joint initiatives with the trust’s STP partners.

- Our estates redevelopment plans will both improve facilities and enable more services to be provided outside an acute hospital environment.
Appendix 1: LGT’s Draft Corporate Objectives 2017/18

The Trust’s Vision "One Trust – serving our local communities"

The Trust’s vision is to be a consistently high performing and financially sustainable Trust by 2020. Objectives in 2017/18 for delivering this vision are:

1. Deliver all aspects of our Emergency Care Improvement Plan. The trust’s key objectives include:
   - Improving the flow of patients through their emergency care pathways at both of the trust’s hospitals
   - Developing the frailty pathway further to meet the needs of the trust’s older patients
   - Improving the discharge experience for all the trust’s patients.

2. Improve the safety and quality of the trust’s care and actively respond to identified risks ensuring they are focused on getting the best results for patients every time by:
   - Delivering the key national performance standards, such as the 4-hour A&E standard, the 18 week referral to treatment standard and the national cancer targets
   - Improving the safety of the trust’s patients in critical care through improved multi-disciplinary working and governance processes
   - Fostering a continuous learning environment through regularly reviewing how we can improve
   - Working with our staff and patients to make safety and quality the focus of all improvements and change.

3. Engage the trust’s workforce to deliver their Safety and Quality Improvement Programme by:
   - Ensuring the trust’s workforce is resourced and deployed effectively to enable the Plan’s delivery
   - Empowering staff to make the improvements they know are needed and to take responsibility for their personal practice
   - Improving staff experience to help the trust attract and retain staff and reduce the trust’s agency use
   - Improving the engagement of the trust’s clinical staff and increasing visibility of the trust’s clinical leaders
   - Implementing a Clinical Leadership Development Programme.
4. Ensure the **financial stability** of the organisation:
   - Making the best use of resources in the interests of safe and quality patient care
   - Taking part in the NHS Financial Improvement Programme and implementing plans for financial improvement, targeting a plan to return to financial balance.

5. Commence the **delivery of the Trust clinical service strategy** with estate development as a key enabler. The trust will:
   - Begin to implement the plans for the trust’s hospital sites to ensure that they make the best use of local NHS estate for the benefit of the trust’s patients
   - Deliver the planned improvements to the trust’s facilities, including starting the programme of infrastructure upgrades to improve the clinical facilities at QEH
   - Continue the work with partners in Lewisham to develop integrated care and new ways of working, including improvements to community facilities.

6. **Use Information Technology to support improvements to patient care** by:
   - Getting the right information to the right people, at the right time and place
   - Using information to help the trust plan and provide the most appropriate prevention and treatment programmes for the trust’s patients.

7. **Work effectively with partners** to deliver the South East London Sustainability and Transformation Plan to optimise the resources available for patient care.
Appendix 2: LGT’s values and behaviours

LGT has a set of values and behaviours which encompass the values of the NHS Constitution, as follows:

Respect our patients and colleagues
- Actively engage patients, carers and staff in decision-making at every level

Commitment to quality of care
- Provide high quality, safe and effective care
- Use resources effectively and efficiently to deliver excellent patient experience
- Be open and transparent about the trust’s performance

Compassion
- Put patients, their families and carers at the heart of everything the trust does
- Listen and respond to feedback from patients, GPs and other stakeholders

Improving lives
- Deliver the right care in the right place at the right time
- Encourage innovation in all that the trust does
- Work together for patients

Working together for patients
- Work creatively with local partners to secure benefits for local people
- Support the trust’s staff and ensure they have access to the education, training and development opportunities they need to do their job well

Everyone counts
- Be respectful of everyone’s views
- Ensure the trust is open minded and willing to change and do things differently
Appendix 3: The South East London Sustainability and Transformation Plan

Our Healthier South East London (OHSEL) is the NHS Sustainability and Transformation Plan (STP) for south east London.

We aim to address three problems in local healthcare:

- The health and wellbeing gap – people should be helped to lead healthier and longer lives
- The care and quality gap – variation in the accessibility and quality of care should be improved
- The funding and efficiency gap – the NHS must become more efficient and make better use of the money available

For further information: http://www.ourhealthiersel.nhs.uk/
Appendix 1: Role and responsibilities

Role of the NHS Board

NHS Boards play a key role in shaping the strategy, vision and purpose of an organisation. They hold the organisation to account for the delivery of strategy and ensure value for money. They are also responsible for assuring that risks to the organisation and the public are managed and mitigated effectively. Led by an independent chair and composed of a mixture of both executive and independent non-executive members, the Board has a collective responsibility for the performance of the organisation.

The purpose of NHS Boards is to govern effectively, and in so doing build patient, public and stakeholder confidence that their health and healthcare is in safe hands. This fundamental accountability to the public and stakeholders is delivered by building confidence:

- in the quality and safety of health services
- that resources are invested in a way that delivers optimal health outcomes
- in the accessibility and responsiveness of health services
- that patients and the public can help to shape health services to meet their needs
- that public money is spent in a way that is fair, efficient, effective and economic.

Roles and responsibilities of the Board Adviser

The Board Adviser will work alongside non-executive and executive directors as an associate member of the Board. They will advise the directors on matters pertaining to patient experience so that the Board always puts the patients for whom it provides services at the heart of the decisions it makes to ensure the success of the organisation in leading the local improvement of healthcare services for the communities served by the Trust. The Board Adviser will use their skills and personal experience as a patient, or carer, and member of their community to:

- bring independence, and a patient perspective, to strategy development and all key decisions of the Trust so that the patient is central to trust decision making
- actively support and promote a healthy culture for the organisation which is reflected in their own behaviour
- ensure that the Board acts in best interests of patients and the public
• provide independent judgement and advice relating to the experiences of patients and carers to enable the organisation to fulfil its leadership responsibilities to patients, for healthcare of the local community

• ensure that patients and service users are treated with dignity and respect at all times,

• engage positively and collaboratively in board discussion of agenda items and act as an ambassador for the Trust in engagement with stakeholders including patients and the local community.

The Board Adviser (Patient Experience) will be expected to participate in the following Board and Committee meetings:

• Trust Board Meeting (half day monthly)

• Trust Board seminar (half day monthly, with a full day in June and November)

• Patient Experience committee (2 hours alternate months)

• Other meetings and events as agreed
Appendix 2: More information

For information about the Trust, such as business plans, annual reports, and services, visit their website.

The following information about NHS Improvement and this appointment is available on request from leslie.horn@nhs.net

Becoming a Board Adviser

Eligibility and disqualification from appointment

Terms and conditions of appointment

How your application will be handled

Your personal information

Dealing with concerns

Appendix 3: Making an application

If you wish to be considered for this role please provide:

- a supporting statement that highlights your motivation for applying and your understanding of the NHS and the role. You should briefly outline your personal experience as a patient or carer and how this experience will enable you to advise the Board on the impact on patients of decisions and actions by the Trust

- the names, and contact details for three referees. Your referees should be individuals who can vouch for your personal integrity and your ability to fulfil the requirements of the role. Your references will be taken prior to interview and may be shared with the selection panel

- please complete and return the monitoring information form which accompanies this pack and is available for download

- tell us about any dates when you will not be available for interview and any access requirements
Key dates

- **Closing date for receipt of applications:** 9 November 2017 at 11.00am. Please forward your completed application to public.appointments@nhs.net

- **Interview date:** 23 November 2017

- **Proposed start date:** to be confirmed

Getting in touch

- For an informal and confidential discussion with Val Davison, the Chair of the trust, please contact Sylvie Hogwood or Jo Cleary on 020 3192 6434 prior to the closing date.

- **NHS Improvement** – for general enquiries contact Leslie Horn on 0300 123 2057 or by emailing leslie.horn@nhs.net
About NHS Improvement

NHS Improvement is responsible for overseeing Foundation Trusts, NHS Trusts and independent providers. We offer the support these providers need to give patients consistently safe, high quality, compassionate care within local health systems that are financially sustainable. By holding providers to account and, where necessary, intervening, we help the NHS to meet its short-term challenges and secure its future.

NHS Improvement is the operational name for the organisation that brings together Monitor, NHS Trust Development Authority, Patient Safety, the National Reporting and Learning System, the Advancing Change team and the Intensive Support Teams.

Contact us

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