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# **Appointment of Trust Chair**

## **Information pack for applicants**

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**Advert posted: 15 April 2024**

**Closing date for applications: 8<sup>th</sup> May 2024**

**Assessment and interviews for all shortlisted candidates:  
Friday 21<sup>st</sup> June 2024**



Dear Candidate,

Thank you for your interest in the role of Trust Chair at South Western Ambulance Service NHS Foundation Trust (SWASFT).

At SWASFT we have nearly 6,000 colleagues, 950 volunteers and over 800 students in training. This enables us to provide emergency and urgent care services, in the most demanding of circumstances, across 10,000 square miles, to the people of South West England. Covering the counties of Cornwall and the Isles of Scilly, Devon, Dorset, Somerset, Wiltshire, Gloucestershire, and the former Avon area (Bristol, Bath, North and North East Somerset and South Gloucestershire), we serve a population of over 5.5 million with an estimated 23 million visitors each year.

The pressures being felt by ambulance services up and down the country are well documented; SWASFT is no exception. SWASFT is a values led organisation, striving to be Compassionate, One Team and Innovative. We have a deep-seated commitment to *'provide compassionate, quality, and timely, Urgent and Emergency Care to everyone in the South West.'*

We are looking to appoint an experienced Chair who will continue to develop the Trust's external relationships, provide excellent support and challenge to the organisation and lead the Board of Directors and Council of Governors to ensure the continued success of the Trust, both for the patients we serve and the staff we employ.

We are committed to ensuring our Board represents our workplace population and the communities we serve. We would love to hear from candidates from a diverse and wide range of backgrounds and strongly encourage applications from people with a disability, Black, Asian and minority ethnic people, LGBTQIA+ people, and women.

We hope you will consider applying and thank you for taking time to consider applying to join the Board of South Western Ambulance Service NHS Foundation Trust.

Yours faithfully,



**Luke March**  
Lead Governor



**John Martin**  
Chief Executive



## Contents

Introduction .....	4
South Western Ambulance Service NHS Foundation Trust: Chair Role Description .....	4
Responsibilities of the chair .....	5
Required skills, experience, and attributes .....	10
Desirable experience .....	11
Eligibility .....	12
Remuneration and time commitment.....	12
Appointment and Tenure of Office .....	12
Fit and Proper Persons Test.....	13
Application process .....	13
About South Western Ambulance Service NHS Foundation Trust.....	13
Our Trust Strategy, Vision and Values, Purpose, and Objectives.....	14



## Introduction

South Western Ambulance Service NHS Foundation Trust is seeking to recruit a Chair. The post is being advertised and the appointment will be considered by the Trust's Council of Governors, following a formal selection process.

## South Western Ambulance Service NHS Foundation Trust: Chair Role Description

NHS Trusts and Foundation Trusts are primarily responsible for delivering safe, high-quality services and outcomes for patients, service users and the wider community.

**The Chair has a unique role in leading the NHS Trust Board.** The role combines the duty to lead effective governance, consistent with the Nolan principles and NHS values, with securing a long-term vision and strategy for the organisation.

Fundamentally, the Chair is responsible for the effective leadership of the Board and the Council of Governors. They are pivotal in creating the conditions necessary for overall Board and individual director effectiveness.

Central to the Chair's role are five key responsibilities:

1. **Strategic:** ensuring the Board sets the Trust's long-term vision and strategic direction and holding the Chief Executive to account for achieving the Trust's strategy
2. **People:** creating the right tone at the top, encouraging diversity, change and innovation, and shaping an inclusive, compassionate, patient-centred culture for the organisation
3. **Professional acumen:** leading the Board, both in terms of governance and managing relationships internally and externally
4. **Outcomes focus:** achieving the best sustainable outcomes for patients/ service users by encouraging continuous improvement, clinical excellence, and value for money
5. **Partnerships:** building system partnerships and balancing organisational governance priorities with system collaboration; this role will become increasingly more important as local organisations move to delivering integrated care, prioritising population health in line with the NHS Long Term Plan<sup>1</sup>.

**The relationship between the Chair and the Trust's Chief Executive is key to the role's success.**

The fundamental difference between these roles is that the Chair leads the Board and is responsible for the Non-Executive Directors' effectiveness and the Board as a whole. The Chief Executive leads the organisation and is responsible for managing the Executive Directors. In foundation Trusts, the Chair also chairs the Council of Governors. This relationship between the Chair and the Chief Executive sets the tone for the whole organisation.

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<sup>1</sup> [www.longtermplan.nhs.uk](http://www.longtermplan.nhs.uk)



To carry out their role effectively, the Chair must cultivate a strong, collaborative relationship with the Chief Executive. Many responsibilities in this role description will be discharged in partnership with the Chief Executive. It is important the Chair and the Chief Executive are clear about their individual and shared roles, and their respective responsibilities towards the unitary Board.

Together, the Chair and the Chief Executive set the tone for the whole organisation. They are ultimately responsible for ensuring that the population the Trust serves and the wider system in which the organisation sits receive the best possible care in a sustainable way.

## Responsibilities of the Chair

This detailed description of the Chair's role reflects the NHS Leadership competency framework's five domains. While each set of responsibilities has been aligned with the competency domain most relevant to discharging that element of the role, **a good Chair will demonstrate competence in all five domains across all their responsibilities**, maintaining, for example, an outcomes focus while discharging their role as the Board's facilitator.

### 1. Strategic

1.1. In their **strategic leadership** role, the Trust Chair is responsible for:

- Ensuring the whole Board of directors plays a full part in developing and determining the Trust's **vision, values, strategy, and overall objectives** to deliver organisational purpose and sustainability and having regard to the Council of Governors' views.
- Ensuring the Trust's strategy aligns with the principles guiding the NHS and the NHS values.
- Ensuring the Board identifies the key risks the Trust faces in implementing its strategy; determines its approach and attitude to **providing effective oversight** of those risks and ensures there are **prudent controls** to assist in managing risk.
- Holding the Chief Executive to account for delivering the strategy and performance.

### 2. People

2.1. In their role **shaping organisational culture** and setting the right tone at the top, the Trust Chair is responsible for:

- Providing visible leadership in developing a **healthy, open, and transparent patient-centred culture for the organisation**, where all staff have equality of opportunity to progress, the freedom to speak up is encouraged, and ensuring that



this culture is reflected and modelled in their own and in the Board's behaviour and decision-making.

- Leading and supporting a **constructive dynamic** within the board, enabling grounded debate with contributions from all directors.
- Promoting the highest standards of **ethics, integrity, probity, and corporate governance** throughout the organisation and particularly on the Board.
- Demonstrating **visible ethical, compassionate, and inclusive personal leadership** by modelling the highest standards of personal behaviour and ensuring the Board follows this example.
- Ensuring that **constructive relationships based on candour, Trust and mutual respect** exist between Executive and Non-Executive Directors, between elected and appointed members of the Council of Governors and between the board and the Council.
- Developing **effective working relationships** with all the Board Directors, particularly the Chief Executive, providing support, guidance, and advice.

2.2. In their role **developing the board's capacity and capability**, the Trust Chair is responsible for:

- Ensuring the Board sees itself as a team, has the **right balance and diversity of skills, knowledge and perspectives**, and the confidence to challenge on all aspects of clinical and organisational planning; this includes:
  - Regularly **reviewing the Board's composition and sustainability** with the Chief Executive and the Nominations Committee
  - Considering **succession planning** and remuneration for the Board, including attracting, and developing future talent, working with the Board, Council of Governors and Nominations and Remuneration Committees as appropriate
  - Considering the **suitability and diversity** of Non-Executive Directors who are assigned as Chairs and members of the Board's Committees, such that as far as possible they reflect the workforce and respective communities served by the Board.
  - Where necessary, leading in seeking the removal of Non-Executive Directors and giving counsel in the removal of Executive Directors.



- Leading on **continual Director and Governor development** of skills, knowledge and familiarity with the organisation and health and social care system, to enable them to carry out their role on the Board/Council effectively, including through:
  - Induction programmes for new Directors/Governors.
  - Ensuring **annual evaluation** of the Board/Council's performance, the Board's Committees, and the Directors/Governors in respect of their Board/Council contribution and development needs, **acting on the results** of these evaluations and supporting personal development planning.
  - Taking account of their **own development needs** through, for example, personal reflection, peer learning and mentoring/reverse mentoring as part of the wider NHS provider Chair community.
- Developing a Board that is genuinely connected to and assured about staff and patient experience, as demonstrated by appropriate feedback and other measures, including the Workforce Race Equality Standard (WRES); Workforce Disability Equality Standard (WDES); and Equality Delivery System (EDS).

### 3. Partnerships

3.1. In their role as an **ambassador**, leading in developing **relationships** and **partnership working**, the Chair is responsible for:

- Promoting an **understanding of the Board's role**, and the role of Non-Executive and Executive Directors.
- Representing the organisation externally, developing and facilitating strong partnerships, and promoting **collaborative, whole system working** through engagement with:
  - Patients and the public
  - Members and Governors
  - All staff
  - Key partners across public, private, and voluntary sectors
  - Regulators



- Other Chairs in the system and the wider NHS provider Chair community, including where appropriate, through:
  - Integrating with other care providers
  - Identifying, managing, and sharing risks
  - Ensuring decisions benefit the local population, prioritising the needs of the citizens served by the organisation at a system level.
- Ensuring that **effective communication with stakeholders** creates Board debate encompassing diverse views, and giving sufficient time and consideration to **complex, contentious or sensitive issues**.
- Facilitating the Council of Governors' work on **member engagement**, so the Governors can carry out their statutory duty to represent the interests of Trust members and the general public to the Trust.
- Ensuring that Governors have the dialogue with directors they need to hold the Non-Executive Directors (which includes the Trust Chair), individually and collectively to account for the Board's performance.

#### 4. Professional acumen

- 4.1. In their role as **governance lead** for the Board and for the Council of Governors, the Chair is responsible for:
- Making sure the Board/Council operates effectively and understands its own **accountability** and compliance with its approved procedures – for example, meeting statutory duties relating to annual reporting.
  - Personally, **doing the right thing**, ethically and in line with the NHS and Trust values, demonstrating this to and expecting the same behaviour from the Board.
  - Leading the Board in **establishing effective and ethical decision-making processes**.
  - **Setting an integrated Board/Council agenda** relevant to the Trust's current operating environment and taking full account of the **important strategic issues and key risks** it faces and aligned with the annual planner for Council of Governors meetings, developed with the Lead Governor.



- Ensuring that the Board/Council receives **accurate, high quality, timely and clear information**, that the related assurance systems are fit for purpose and that there is a good flow of information between the Board, its Committees, the Council and senior management.
- Ensuring Board Committees are properly constituted and effective.
- Leading the Board in being accountable to Governors and leading the Council in holding the Board to account.
- Accountable for taking all reasonable steps to ensure the **fit and proper persons test (FPPT)** process is effective and that the desired culture of their NHS organisation is maintained to support an effective FPPT regime.

4.2. In their role as **facilitator** of the Board and of the Council of, the Chair is responsible for:

- Providing the environment for agile debate that considers the big picture.
- Ensuring the Board/Council collectively and individually applies **sufficient challenge**, balancing the ability to seize opportunities while retaining robust and transparent decision-making.
- Facilitating the **effective contribution** of all members of the Board/Council, drawing on their individual skills, experience, and knowledge and in the case of Non-Executive Directors, their independence.
- Working with and supporting the **Company Secretary** in establishing and maintaining the Board's annual cycle of business.
- Liaising with and consulting the **Senior Independent Director**

## 5. Outcomes focus

5.1. In their role as a **catalyst for change**, the Chair is responsible for:

- Ensuring all Board members are well briefed on **external context** – e.g. policy, integration, partnerships, and societal trends – and this is reflected in Board/Council debate.
- Fostering a **culture of innovation and learning**, by being outward-looking, promoting and embedding innovation, technology and transformation through the Board/Council's business and debate.



- Promoting **academic excellence and research** as a means of taking health and care services forward.
- Ensuring performance is accurately measured against constitutional and Care Quality Commission 'well-led' standards.
- Ensuring performance on equality, diversity and inclusion for all patients and staff is accurately measured and progressed against national frameworks, including WRES, WDES and EDS
- Above all, ensuring the Board maintains an unrelenting interest in and focus on the continuous improvement and self-assessment of patient safety, experience, and clinical outcomes.

## Person Specification

This describes the skills, experience and attributes required or desirable for fulfilling the role of Chair of an NHS provider Trust.

### Required skills, experience, and attributes

#### Values

- A clear commitment to demonstrate and uphold the NHS and the Trust's values and principles.

#### Strategic

- Experience of leading and delivering against long-term vision and strategy.
- Experience leading transformational change, managing complex organisations, budgets and people.

#### People

- Strong interpersonal, communication and leadership skills
- Experience of building effective teams, encouraging change and innovation and shaping an open, inclusive, and compassionate culture through setting the right tone at the top and championing diversity at, and across, all levels.
- Strongly focused on the experience of all staff and patients
- Fully attentive towards issues of equality, diversity, and inclusion

#### Professional acumen

- Prior Board experience (any sector, Executive or Non-Executive role)



- Prior experience as a Non-Executive Director (any sector)
- Evidence of successfully demonstrating the [NHS provider chair competencies](#) in other leadership roles.
- An ability to identify and address issues, including underperformance, and to scrutinise and challenge information effectively for assurance.

### **Outcomes focus**

- A demonstrable interest in health and social care and a strong desire to achieve the best sustainable outcomes for all patients and service users through encouraging continuous improvement, clinical excellence, and value for money.
- Strong understanding of financial management, with the ability to balance the competing objectives of quality, operational performance, and finance.
- An appreciation of constitutional and regulatory NHS standards

### **Partnerships**

- A desire to engage with the local population and to collaborate with senior stakeholders across the health and care system.
- Experience managing conflict, finding compromise, and building consensus across varied stakeholder groups with potentially conflicting priorities.

### **Desirable experience**

- Prior experience on an NHS Board (Executive, Non-Executive, or associate role)
- Professional qualification or equivalent experience
- Prior senior experience of complex organisations outside the NHS, i.e. private, voluntary, or other public sector providers of similar scale.

Applications will be assessed on merit, as part of a fair and open process, from the widest possible pool of candidates. The information provided by applicants will be relied on to assess whether sufficient personal responsibility and achievement have been demonstrated in previous/other roles, to satisfy the experience being sought.

The best Boards are those that reflect the workforce and communities they serve. We particularly welcome applications from women, people from local black, Asian and minority ethnic communities, and people with disabilities, who we know are all under-represented in these important roles.



## Eligibility

The Chair must be a member of South Western Ambulance Service NHS Foundation Trust. Details of how to become a member can also be found on our website: [Become a member | SWAST Website](#)

Full details of eligibility criteria and exclusions for membership can be found in the Trust's Constitution: [download.cfm \(swast.nhs.uk\)](#)

## Remuneration and time commitment

The level of remuneration paid to the Chairs of Integrated Care Boards (ICBs) and NHS trusts is set by the Secretary of State for Health. The Chair of South Western Ambulance Service NHS Foundation Trust will receive remuneration in line with this, as determined by the Council of Governors. The remuneration range for a Trust of our size, per the national guidance, is £44,100 (lower quartile) to £50,000 (upper quartile).

The Chair is also eligible to claim allowances for travel and subsistence costs necessarily incurred on Trust business.

A degree of flexibility will be required. The time commitment will comprise a mixture of set commitments (such as a monthly Board meetings and development sessions, Council of Governor meetings and Committee meetings) and more flexible arrangements for ad hoc events, reading and preparation. Most of the time commitment will be during the working day. However, some evening work will be required including meeting with staff and stakeholders. The average weekly commitment is estimated at two to three days per week.

## Appointment and Tenure of Office

It is anticipated that this appointment will be effective from August 2024, with the final date confirmed once all recruitment and fit and proper persons checks are complete.

This appointment will be for an initial term of up to three years and will be subject to annual performance review. Annual appraisal for the Chair is undertaken by the Senior Independent Director, on behalf of the council of Governors.

A further term of appointment can be considered at the end of the first period of office subject to consistently good performance and the needs of the organisation. A degree of change is often sought on Boards and there should therefore be no expectation of automatic re-appointment.

You should also note that this post is a public appointment rather than a job and is therefore not subject to the provisions of employment law. To ensure that public service values are maintained at the heart of the National Health Service, Non-Executive Directors are required to act in accordance with the Code of Conduct and Standing Orders and Standing Financial instructions for the Foundation Trust.

As Chair you must demonstrate high standards of corporate and personal conduct. Details of what is required of you and the NHS Board on which you serve are set out in the Codes of Conduct as outlined above.



You will be required to declare any conflict of interest that arises in the course of Board business and also declare any relevant business interests, positions of authority or other connections with commercial, public, or voluntary bodies. These will be published in the annual report with details of all Board members' remuneration from NHS sources.

## Fit and Proper Persons Test

The appointment of Chair is subject to the Fit and Proper Persons Test. The Trust will undertake a Fit and Proper Persons Test in accordance with the Care Quality Commission's requirements and NHS England guidance. This will include bankruptcy and director disqualification checks. It will also include self-declaration regarding any previous misconduct, or other relevant matters.

To safeguard patients by identifying unsuitable candidates, all appointments will be dependent upon the satisfactory completion of checks carried out with the Disclosure and Barring Service. Checks will be carried out by the Trust after appointment and before the individual takes up their full duties.

## Application process

To apply please complete the application, setting out how you meet the person specification, and attach a curriculum vitae (CV) on the Trac system, **no later than 11.59pm on Wednesday, 8 May 2024.**

- We will acknowledge receipt of your application shortly after the closing date.
- Your application will first be checked for completeness and eligibility.
- Your application and CV will be assessed to determine the extent to which you have the qualities and expertise for the role, as part of long-listing.
- Candidates will be informed on or around **4 June 2024** if they have been shortlisted for interview.
- Shortlisted candidates will be required to attend an interview and assessment day with members of the Remuneration and Nomination Panel, Directors, Governors, and other external stakeholders, on **Friday, 21 June 2024**. Confirmed details will be advised to shortlisted candidates.
- The Interview Panel will make a recommendation on a preferred candidate for consideration by the Remuneration and Nomination Panel. The Panel will subsequently make a recommendation for appointment to the Trust's Council of Governors. The Council of Governors will meet on **Wednesday, 3 July 2024**. Candidates will be informed after interview whether they have been identified as the preferred candidate and offered feedback.
- Please note this is a confidential recruitment process and any announcement on the successful candidate will be made following the Council of Governors meeting on **3 July 2024**.



## About us



We manage around  
**1 million**  
incidents a year



We manage on average  
**2650**  
incidents a day



We travel over  
**22 million**  
miles a year



We received  
**£366 million**  
income in 22/23

We employ over  
**6000**  
people



We manage on average  
**67**  
attendances a day at  
our Tiverton Urgent  
Treatment Centre

We're supported by over  
**2700**  
volunteers including first  
responders, BASICS doctors  
and fire co-responders



We maintain over

**1000**

defibrillators across  
the South West

We have over

**670**

vehicles in our fleet

We also have

**2**

Hazardous Area Response  
Teams (HART) providing the  
ambulance response to major  
and critical incidents



We have

**2**

Emergency Operations  
Centres



We occupy over

**100**

buildings



# Our Trust Strategy, Vision and Values, Purpose, and Objectives

Our Strategy represents a renewal of our commitment to continuously improving the care we give to patients across the South West. In 2022 we started on the journey of improving patient safety by recovering our performance. This new Strategy builds on this work and confirms a new vision, new values and sets four clear strategic objectives for the next five years.

Our Strategy explains what we will focus on in the short and longer term. For the next two years we aim to deliver effective patient care, safety, and performance, while also strengthening our partnership working. During the later years, we will use patient insights to continuously improve our service, and enhanced partner working to deliver, integrated, and coordinated care for our 999 patients.

We are part of seven Integrated Care Systems, and an important part of our Strategy is achieving our ambition to become a valued partner, to collectively improve overall health outcomes for people in our region. Our vision is that together, we will deliver the best care when you need us most.

## Our Objectives:

- Our Patients To consistently achieve quality driven, high performing, patient centred care.
- Our People To create the conditions for our people to thrive.
- Our Partners To be a valued partner improving health outcomes together.
- Our Organisation To create a sustainable and progressive organisation that's data and digitally driven.

Full information can be found here: [Our plans for the future | SWAST Website](#)

# Our Purpose, Vision, Values & Objectives

As part of our Strategy development we have reviewed and re-stated our purpose, created a clear vision and new values, and developed short and long-term strategic objectives to deliver the vision.

## Our Purpose

To provide compassionate, quality and timely emergency and urgent care to everyone in the South West.

## Our Vision

Together, we will deliver the best care when you need us most.

## Our Values

We will achieve our vision by working together to a shared set of values that will be our guiding principles for how we interact with our people, our patients, partners, and all other stakeholders.



## Our Strategic Objectives and Outcomes

### Our Patients

To consistently achieve quality driven, high performing, patient centred care



### Our People

To create the conditions for our people to thrive



### Our Partners

To be a valued partner improving health outcomes together



### Our Organisation

To create a sustainable and progressive organisation that's data and digitally driven



## Our Promise To...

### Our Patients

Our patients will know that they come first, are in safe hands and trust that we will be there when needed. They will receive the care that is right for them and are communicated with in a way that best meets their needs.

### Our People

Our people will be empowered to deliver the best care and are equipped with the skills, resources and development they need. We will create a safe and healthy working environment, recognising and rewarding everyone's contribution.

### Our Partners

Our partners will feel we understand how our services integrate, we will share insights and learning to continuously improve and innovate together, and ensure our patients receive the most appropriate care.

### Our Organisation

Everyone will benefit from our improved infrastructure, enhanced digital tools and data insights, and our organisation will be recognised as a great place to work.



## Our Board – voting

[Our Board | SWAST Website](#)

Martin Holloway



Interim Chair

Dr John Martin



Chief Executive

Amy Beet



Executive Director  
of People / Deputy  
Chief Executive  
(currently on  
Maternity Leave)

Jess  
Cunningham



Executive Director  
of Operations /  
Deputy Chief  
Executive

Andrew Rosser



Executive Director  
of Finance and  
Infrastructure

Jane Chandler



Executive Director  
of Quality Patient  
Care

Tina Cantelo



Executive Director  
of Strategy and  
Transformation

Matthew  
Thomas



Executive Medical  
Director



Raz Akbar



Non-Executive  
Director

Margaret Batty



Non-Executive  
Director

Margaret Arnold



Non-Executive  
Director

Chris Perry



Non-Executive  
Director

Sarah James



Non-Executive  
Director

## Directors in attendance

Neil Lentern, Director of Paramedic Practice

Tim Bishop, Chief Digital Information Officer

Clare O’Gorman, Director of Communications and Public Affairs

Clare Melbourne, Director of Strategy and OD

Lucy Manning, Director of People Operation



## Additional sources of information

The Trust is rated by the Care Quality Commission (CQC) as overall 'Good' – last full inspection was in 2018. The full report can be found here: [Trust HQ - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk)

The Trust has around 19,000 members, including service users, staff, and public members. Our aim is to review our Membership and Engagement Strategy annually, allowing us to concentrate on developing a truly engaged and representative membership. We encourage our members to become involved with the business of the Trust by use of websites, social media, and its Annual Members Meeting.

Further information about South Western Ambulance Service NHS Foundation Trust can be found at the following links:

- Constitution - [download.cfm \(swast.nhs.uk\)](https://www.swast.nhs.uk/download.cfm)
- Publication scheme - [Publication Scheme | SWAST Website](https://www.swast.nhs.uk/publication-scheme)
- Scheme of Reservation and Delegation - [download.cfm \(swast.nhs.uk\)](https://www.swast.nhs.uk/download.cfm)
- Board Papers - [Board Meeting Schedule and Public Papers | SWAST Website](https://www.swast.nhs.uk/board-meeting-schedule)
- Annual Report and Accounts - [download.cfm \(swast.nhs.uk\)](https://www.swast.nhs.uk/download.cfm)
- Quality Account - [swast.nhs.uk/download.cfm?doc=docm93jjm4n1529.pdf&ver=1160](https://www.swast.nhs.uk/download.cfm?doc=docm93jjm4n1529.pdf&ver=1160)

NHS England's (the independent Regulator of foundation trusts) website contains information on the governance of foundation trusts and other useful references: [NHS England](https://www.nhs.uk)

## Further Information and Discussions

For any general queries about the process or timeline please contact Danielle Casey, Corporate Governance Business Manager or Siân Millard, Company Secretary, at [Corporate.meeting@swast.nhs.uk](mailto:Corporate.meeting@swast.nhs.uk)

**Prior to the application closing date:** Informal conversations with our Senior Independent Director (SID), Maggie Arnold, are available for interested candidates, prior to application closure on the 8<sup>th</sup> of May 2024. Candidates can request a discussion with the SID by contacting [Corporate.meeting@swast.nhs.uk](mailto:Corporate.meeting@swast.nhs.uk).

**After shortlisting:** Opportunity for informal discussions with the Lead Governor, Chief Executive and/or the Senior Independent Director, will be made available for shortlisted candidates, prior to interview. Information on the dates and times available for these meetings will be made available to shortlisted candidates.

The Interview Panel will comprise:

- Luke March, Lead Governor
- Elizabeth O'Mahony, NHS England South West Regional Director
- Jenni Douglas-Todd, Chair of Dorset Integrated Care Board
- Mike Jones, Staff Governor
- Anna Perry, Appointed Governor



## Appendix 1

# The Seven Principles of Public Life

### **Selflessness**

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

### **Integrity**

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

### **Objectivity**

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

### **Accountability**

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

### **Openness**

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

### **Honesty**

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

### **Leadership**

Holders of public office should promote and support these principles by leadership and example.



## Appendix 2

# Criteria for Disqualification of Directors

We must be able to provide evidence that appropriate systems and processes are in place to ensure that all new and existing Chairs and Non-Executive Directors are, and continue to be, fit for purpose and that none of the criteria of 'unfitness' set out in the regulations apply. As per CQC requirement (regulation 5) and NHSE guidance, you cannot serve on an NHS Board and be:

- a person who has been convicted in the United Kingdom of any offence or been convicted elsewhere of any offence which if committed in any of the United Kingdom, would constitute an offence
- a person who has been erased, removed, or struck off a register of professionals maintained by a regulator of health care or social work professionals
- an undischarged bankrupt, or a person whose estate has had a sequestration awarded in respect of it and who has not been discharged
- the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland
- a person whom a moratorium period under a debt relief order applies under Part VIIA 9 debt relief orders) of the Insolvency Act 1986(40)
- a person who has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it
- included in the children's barred list or the adults' barred list maintained under section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland
- a person who has been responsible for, privy to, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not) while carrying on a regulated activity, or discharging any functions relating to any office or employment with a service provider.

The full criteria of the requirements is available on the [Care Quality Commission website](#)



## Appendix 3

### Area Ambulance Operations South

#### CORNWALL & ISLES OF SCILLY

- 1 Penzance
- 2 Hayle
- 3 Helston
- 4 Falmouth
- 5 Redruth
- 6 Truro
- 7 St. Mary's (Isles of Scilly)
- 8 Newquay
- 9 St. Austell
- 10 Wadebridge
- 11 Bodmin
- 12 Camelford
- 13 Liskeard
- 14 Launceston
- 15 Saltash
- 16 Torpoint
- 17 Bude

#### SOUTH & WEST DEVON

- 18 Derriford
- 19 Tavistock
- 20 Totnes
- 21 Kingsbridge
- 22 Dartmouth
- 23 Brixham
- 24 Paignton
- 25 Torquay
- 26 Newton Abbot
- 27 Dawlish

#### NORTH & EAST DEVON

- 1 Exeter (EDOC)
- 28 Holsworthy
- 29 Bideford
- 30 Okehampton
- 31 Crediton
- 32 Barnstaple
- 33 Ilfracombe
- 34 South Molton
- 35 Tiverton
- 36 Exmouth
- 37 Sidmouth
- 38 Honiton
- 39 Axminster

#### DORSET

- 40 Bridport
- 41 Weymouth
- 42 Dorchester
- 43 Wareham
- 44 Swanage
- 45 Blandford
- 46 Shaftesbury
- 47 Wimborne
- 48 Poole
- 49 Bournemouth
- 50 Christchurch
- 51 St Leonards

### Area Ambulance Operations North

#### SOMERSET

- 52 Minehead
- 53 Taunton
- 54 Ilminster
- 55 Yeovil
- 56 Bridgwater
- 57 Burnham
- 58 Wincanton
- 59 Glastonbury
- 60 Shepton Mallet
- 61 Frome
- 62 Sherborne

#### BNSSG

- 63 Weston-Super-Mare
- 64 Churchill
- 65 Nailsea
- 66 Keynsham
- 67 Bristol
- 68 NBOC
- 69 Almondsbury
- 70 Soundwell
- 71 Yate

#### WILTSHIRE

- 72 Paulton
- 73 Wainminster
- 74 Salisbury
- 75 Bath
- 76 Trowbridge
- 77 Chippenham
- 78 Devizes
- 79 Malmesbury
- 80 Marlborough
- 81 Swindon

#### GLOUCESTERSHIRE

- 82 Dursley
- 83 Lydney
- 84 Stroud
- 85 Cirencester
- 86 Coleford
- 87 Cinderford
- 88 Gloucester South
- 89 Staverton
- 90 Tewkesbury
- 91 Moreton in Marsh

### Emergency Operations Centres

#### A - Exeter

Abbey Court, Eagle Way, Exeter, Devon EX2 7HY

#### B - Bristol

Great Park Road, Almondsbury BS32 4QJ

### Ambulance Operations including EPRR & Specialist Practice

#### iii Tiverton Urgent Treatment Centre

#### i EDOC

#### ii NBOC

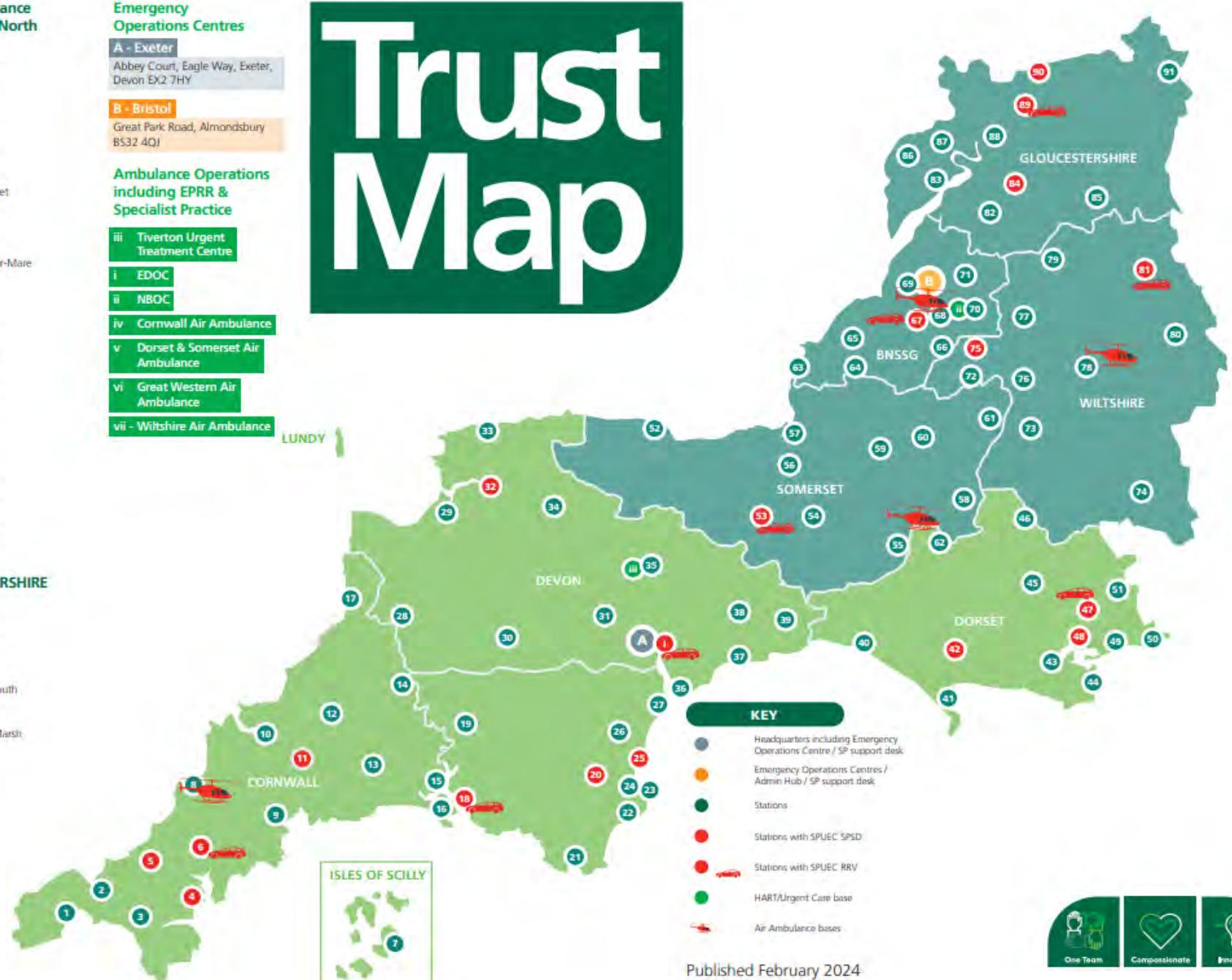
#### iv Cornwall Air Ambulance

#### v Dorset & Somerset Air Ambulance

#### vi Great Western Air Ambulance

#### vii - Wiltshire Air Ambulance

# Trust Map



**KEY**

- Headquarters including Emergency Operations Centre / SP support desk
- Emergency Operations Centres / Admin Hub / SP support desk
- Stations
- Stations with SPUEC SPSD
- Stations with SPUEC RRV
- HART/Urgent Care base
- Air Ambulance bases



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