NHS Derby & Derbyshire Integrated Care Board (ICB)

Chief Strategy and Delivery Officer (CSDO)

Employing Organisation: NHS Derby & Derbyshire ICB

Grade: VSM

Hours: WTE

Responsible & Accountable to: The Chief Executive of the NHS Derby & Derbyshire Integrated Care Board (ICB)

Location: Contractual base tbc.

Required to work at any establishment at any time throughout the duration of their contract, normally within the location of the organisation, or as set out under the terms of their contract

Background, Context & Role Summary

NHS Integrated Care Boards (ICBs), as set out in statute, have a fundamental role in facilitating and supporting the development of Integrated Care within the NHS; furthermore, alongside the wider Public Health, Social Care and Local Authority system, support the creation of broader integrated care under the framework of the Integrated Care Partnership (ICP).

Partnership working in Derby & Derbyshire is advanced with a distributed leadership model in place. Across the NHS family we have an "NHS Executive Team" in place and across the ICP, we also have an ICS Executive Team established; as a member of the ICB Executive Team, the CSDO will play an important role in both of these leadership forums.

The "NHS Executive Team" brings together the executive components of the ICB and the NHS Provider Leadership Board (PLB); thus, providing this integrated and holistic senior leadership group for the NHS in Derby & Derbyshire. The PLB itself is a developing entity that brings together the senior NHS provider leadership community contributing to both Provider Collaboration at Scale and Place Partnerships.

In support of the four key purposes of an ICS, the ICB in Derby & Derbyshire has three principal roles, those being to:

- Deliver the statutory duties of the ICB as an NHS organisation
- Act as the convener of the NHS family (statutory and non-statutory NHS providers)
- To be an integral partner in the Integrated Care Partnership (ICP/ICS) and the Health & Wellbeing Boards of Derby & Derbyshire.

Linked to the three core functions of the ICB as set out above, the CSDO role has three broadly corresponding key elements that are listed briefly as follows:

• To deliver the commissioning (Strategic & oversight of devolved responsibilities) statutory duties of the ICB including the advancement of our population health

improvement approach (Strategic planning role) and the oversight and assurance of provider delivery including increased productivity, effectiveness and value.

- Supportive oversight and guidance to the development of integrated care across the NHS family and partners, including support and guidance to Provider Collaboration at Place and Scale and the developing models of Primary Care Networks (PCN).
- To increase the ICB's strategic influence in the broader partnership arenas (ICP & HWBBs) to progress the joint commissioning and partnership agenda with our Local Authorities and VCSE sector.

Job Purpose & Role Outline

All members of the ICB Executive Team will take collective responsibility for working together to ensure the organisation is well led and successful, with strong managerial support. The CSDO will accelerate the development of Strategic Commissioning in Derby & Derbyshire in order to set the direction, align the resources and create the conditions to enable local providers to improve, redesign and innovate; ultimately, to improve health outcomes and reduce health inequalities for local people. This will be achieved through the development of a long term, outcome focused approach to strategic commissioning.

The CSDO will:

- Be responsible for transforming the ICB's approach to commissioning to one which is strategic and focused upon improved outcomes for patients in agreed priority areas. This refinement of approach will be rooted in evidence-based population health management methodologies and will require close working with public health to identify challenges and opportunities for addressing and reducing health inequalities.
- By working with the ICB executive team & Chief Medical Officer (lead Executive) and system colleagues, ensure that the Integrated Care System is able to access high quality strategic Business Intelligence information and support.
- Be accountable for ensuring the Derby & Derbyshire Joint Forward Plan (JFP) response reflects this more strategic approach to commissioning, including an agreed approach to outcomes identification and population health management methodologies, agreed outcomes improvement priorities along with key underpinning enablers such as estates.
- Ensure alignment of the JFP with the Integrated Care Strategy of the ICP and the HWBB strategies together with delivery against those in line with national requirements.
- Ensure focussed 1 to 2 year operational plan delivery against the backdrop of the JFP and Integrated Care Strategy.
- Provide strong transformational and strategic leadership at Board level to ensure the ICB is seen as effective leaders and commissioners by the health and social care system. Integral to this will be the strengthening of the strategic commissioning role of the ICB, developing and translating the vision, aims and objectives in the ICB strategy into programmes that will deliver measurable improvements in local health outcomes, reductions in health inequalities and ensure that strategic objectives and performance targets are met.
- Ensure that specialised and direct commissioning functions, delegated from NHSE, are embedded in the working of the ICB and a whole pathway approach is taken to strategy, planning, transformation and delivery.

- Be the lead NHS Officer for joint commissioning arrangements with Local Authority
 partners including providing assurance over the effectiveness and performance of
 areas of joint spend (for example the Better Care Fund (BCF)). This will include joint
 working with the ICB Chief Nursing Officer on areas of Individual Patient Level
 commissioning such as Continuing Healthcare and will include working with local
 planning authorities to ensure that health is built into their strategic plans.
- Take overall lead responsibility for commissioning and strategic planning, ensuring alignment between local strategies and plans.
- Work with relevant ICB & NHS provider colleagues on the development and oversight of the ICB/NHS efficiency and productivity plan and the priorities that fall within this portfolio from a strategic commissioning and planning perspective.
- Be the lead officer for ensuring that the "Strategic Intentions" for the ICB & NHS are reflected in novel contracting arrangements that incentivise the right approaches in the system yet deliver against those strategic objectives.
- Provide executive Strategic support to the development of the Integrated Care System (ICS) via the ICP, the ICB and the Health & Wellbeing boards to ensure we are acting to best effect on the full determinants of health and addressing health inequalities.
- To provide senior leadership support to the developing Provider Collaboration at Scale and Place approaches (including PCNs) to ensure we develop an effective integrated care model for the system. This will need to understand and develop areas of devolved responsibility and accountability and provide support to understanding the required infrastructure to these models from across the system.
- Take a lead role on specific corporate priorities, as appropriate.

Specific Role Duties:

- To be the Strategic Planning leader for the ICB and also support the planning requirements for the ICP in partnership with Local Authority leaders.
- To be the Executive Lead for the "Strategic Intent" function of both the ICB & ICP, coordinating the four key components of the Strategic Intent function (working in partnership with the lead Medical Director and Director of Public Health):
 - Strategic Commissioning
 - Health Protection
 - Population Health & Clinical Strategy
 - Clinical Standards, Improvement & Innovation and Learning & Development
- To be the lead Officer advising the ICB on its strategic allocation of resource that best delivers on the ICB's strategic objectives and priorities; this function will need to be undertaken in partnership with the ICB Chief Financial and Chief People Officers.
- To be the lead officer that supports the Chair and the function of the ICB's Strategic Population Health and Commissioning Committee.
- To be the lead executive with regards to the development of joint commissioning opportunities and developments with Local Authorities and NHS England, including being a leading coordinating officer for new delegated commissioning functions that will transfer from NHSE to the ICB. This also includes but is not limited to the strategic oversight of the BCF although the operational delivery of this process may be delegated in the future to Place level.

- To be the lead ICB officer in our role as lead commissioner of 111 and 999 services across the East Midlands.
- To be the lead officer advising and supporting the work of the ICB to discharge its statutory duties with regards to the commissioning of safe and effective health and care services for the population it serves.
- To be the lead officer that provides assurance to the ICB on the strategic performance of those commissions against the outcomes set and in so doing, be a leading ICB officer supporting the Chair and the function of the ICB Quality & Performance Committee; this will require working alongside and in partnership with other ICB and system colleagues including Trust Chief Operating Officers and the Chairs of the system's System Operational & Resilience Group (SORG) & the Provider Leadership Board (PLB).
- To be the lead officer in the development of new mechanisms of allocation to the system with the development of both novel but robust contracting mechanisms that enable the development of the ICS's operating model and support the ICB in the discharge of its duties.
- To work with and support the Chief Nursing Officer and the Chief Medical Officer on their portfolios of individual patient level commissioning.
- To take the overall lead for the commissioning of Primary Care services and by doing so, bring all commissions into a holistic viewpoint.

KEY ACCOUNTABILITIES

SETTING STRATEGY AND DELIVERING LONG-TERM TRANSFORMATION

Strategy

- Take executive leadership and be accountable for the development of a five-year strategic plan supported by a suitable commissioning strategy including how the system will reduce health inequalities and variation in outcomes and experience.
- By working with the Chief Nursing Officer, ensure the use of quality and equality impact assessments and robust evidence bases for all strategy, policy and service developments.
- Ensure appropriate and effective governance structures are in place to support strategy and planning activities.
- Provide executive leadership to the development of an integrated approach to strategy and policy management.
- Lead the development of a Commissioning strategy for Derby & Derbyshire, to ensure the commissioning of services which further our strategic JFP objectives and local priorities.
- Working with the Chief Financial Officer establish a significantly different contractual relationship, culture and set of behaviours between the ICB and its providers, that moves away from previous transactional and adversarial arrangements to a more aligned and transformational dynamic based on a collaborative, 'system first' approach which reflects the Derby & Derbyshire NHS & ICS development plan.
- Provide strategic system leadership along with key local authority partners to establish vision and timely planning for joint strategic commissioning including overall direction

and reconfiguration of services and, where appropriate, accountable provider arrangements.

- Lead the development and implementation of strategic service reviews, ensuring the involvement of all stakeholders, and implementing a systematic and comprehensive review of baseline spend across the strategic planning period (this would involve working in an integrated way with providers on fragile service reviews).
- Lead the identification, development and agreement of the ICBs commissioning vision, principles, goals and deliverables.

Planning

- Ensure plans deliver high quality, efficient health services that reduce health inequalities and optimise outcomes for patients, making the most efficient use of resources.
- Lead the development of the ICB's commissioning plans, systems and processes. Take accountability for developing and refining systems and processes to deliver and monitor commissioning plan implementation and delivery.
- Working with stakeholders and ICB Board members, ensure that the ICB's "Strategic Intentions" and activities are informed by and respond to local sensitivities and reflect and address population health issues, as well as addressing statutory targets and strategic priorities.
- Provide leadership to the development of a robust business planning process that takes account of suitable evidence bases, quality and equality impact assessments and produces plans that are locally sensitive.
- Lead the formulation of long-term strategic business plans to deliver the agreed system priorities.
- Establish and implement an annual planning cycle that ensures full clinical and stakeholder engagement.
- Lead the development of robust and comprehensive, ambitious yet achievable, operational plans and ensure in-year delivery against plans.
- Ensure robust mechanisms for monitoring and delivering continuous operational and business improvement are in place.
- Work with other Senior Leaders to support system transformation and the development of the ICS.
- Develop and manage a robust integrated performance framework across the organisation in support of statutory requirements.

BUILDING TRUSTED RELATIONSHIPS WITH PARTNERS AND COMMUNITIES

The CSDO will demonstrate commitment to working and engaging constructively with internal and external stakeholders on a range of business sensitive issues. In addition, the post holder will develop and nurture key relationships, maintain networks internally and externally, including national networks, including but not limited to:

Internal:

- Members of the ICB:
 - Chair
 - Chief Executive

- ICB Executive Team
- Clinical & Professional Staff
- Senior Managers

External:

- The Public & patient voice
- Provider and Local Authority organisations' executive teams
- NHS England Directors and other senior functional leaders
- Commissioning Support Services
- Regulatory Bodies
- Health and Wellbeing board members
- Citizens, patients, councillors and the voluntary sector
- Representatives of the care sector
- Chief Executives, COOs, MDs, Executive Directors and Non-Executive
- Members of Parliament, Councillors and other Governors
- NHSE and Department of Health and NHS Midlands and East.
- Local Authority, Directors of Social Services & Senior Staff, District Council senior staff & LSP
- Local NHS Providers, Foundation Trusts
- Care Quality Commission,
- Voluntary & Private Sector leaders
- Other Interest Groups
- Non NHS Bodies, i.e. HEIs
- The Media
- Relevant professional associations

Offer statements to the media on portfolio related issues as appropriate and develop positive relations with local media, enhancing public education where appropriate.

Represent both Strategic Commissioning opinion and the local service at external groups and events as appropriate.

The CSDO will engage clinicians and members of the public in decisions relating to the commissioning and design of health services.

The CSDO will engage key partners across health and social care to ensure effective use and management of interagency commissioning opportunities such as those in the BCF.

Ultimately, the CSDO will bring strong leadership and commissioning expertise to the strategic debates across the wider health & care economy; they will be seen as a highly credible, knowledgeable and influential leader in the health economy and be able to influence policy development.

LEADING FOR SOCIAL JUSTICE AND HEALTH EQUALITY

Leading for social justice and health equality is a driving aim for the ICB and the CSDO for the ICB will have a significant role in underpinning the work of the whole ICB in delivering against this aim. Principally, they will support:

- As the Executive Lead for the "Strategic Intent" function of both the ICB & ICP, the CSDO will be the lead officer coordinating the four key components of the Strategic Intent function which ultimately has a key role in supporting the promotion of social justice and reaching health equity (working in partnership with the lead Medical Director and Director of Public Health); the four functions are:
 - Strategic Commissioning
 - Health Protection
 - Population Health & Clinical Strategy
 - Clinical Standards, Improvement & Innovation and Learning & Development
- The fostering of a culture in which equality, diversity, inclusion and allyship are actively promoted across the ICB and ICS.
- The drive of innovative, clinically evidenced change on behalf of the ICB, focusing on ensuring that inequalities across the system are addressed; they will promote and enhance strategic approaches to further developing personalised care locally so that the ICB achieves the best possible health and care for its communities.
- The drive of innovative data evidenced change on behalf of the ICB and on behalf of NHS England and NHS Improvement focusing on ensuring that inequalities across the system are addressed.
- The promoting and enhancing of strategic approaches to further developing personalised care locally in so that the ICB achieves the best possible health and care for its communities.
- By working with other lead executives and the Public & Partnerships committee, ensure the population needs are understood and that the developing Integrated Care Strategies recognise and take on board these views.
- The CSDO will provide Lead discussions with patients and citizens on the effective use of the ICB's budget.

DRIVING HIGH QUALITY, SUSTAINABLE OUTCOMES

The CSDO will act as a member of the ICB executive contributing to the ICB's objectives, including promoting the success and culture of the ICB, setting the strategic direction of the ICB, supporting the ICB in holding itself to account for delivery of its strategic objectives and performance; ensuring delivery of statutory financial and performance targets.

- The CSDO will work with other ICB executive colleagues and ICS partners to collectively oversee the quality of all health services including implementing a safer just culture, safer systems, and safer care.
- As a member of the ICB executive, the CSDO will collectively work to address underperformance in a timely manner and promote continuous quality improvement through learning, improvement methodologies, research, and innovation.
 - This will include embedding and delivery of system wide transformation and efficiency programmes, and any related recovery programmes.
- The CSDO will positively engage with key system leaders to collectively provide ICS leadership for the NHS & strategic commissioning within health and care.
- The CSDO will support wider executive colleagues in influencing strategic change and collaborative initiatives which have a direct impact on population health outcomes including key matters such as collective financial and contracting opportunities, future

workforce supply, quality and safety initiatives and system wide joint working at a strategic board level with system partners.

- Working with the Chief Financial Officer, the CSDO (Lead Officer) will take action to ensure underperformance in any service commissioned by the ICB is addressed in a timely manner, working with the relevant providers and the NHS England and NHS Improvement regional team as required.
- The CSDO will establish strong relationships with healthcare providers to support delivery of service transformation to deliver services within an affordable healthcare system for the greatest benefit of the population.
- Lead the development and implementation of joint/delegated commissioning arrangements for NHSE Specialised and Direct Commissioned services ensuring safe transition to ICB delegation; full involvement of the ICB in the planning, transformation and delivery of these services.
- Develop relationships with other ICSs and their local Care Alliances, so that Derby & Derbyshire local sensitivities are acknowledged and reflected in their strategic decisions
- Support Place Partnerships in identifying examples of national and international best practice and to ensure that the ICS, ICB and ICP benefits from relevant innovations in healthcare.

PROVIDING ROBUST GOVERNANCE AND ASSURANCE

Each individual in the ICB is there to bring their unique perspective, informed by their expertise and experience to support its work as a unitary board. This will support decisions made by the ICB as a whole and will help ensure that:

- The interests of patients and the community remain at the heart of discussions and decisions;
- The ICB, the broader NHS & the ICP collaboratively act in the best interests of their local population at all times;
- The ICB commissions the highest quality services and best possible outcomes for their patients within their resource allocation and ensuring
- Good governance remains central at all times.

Specific aspects include:

- Support the interpretation and translation of national, regional and local policy for implementation at both system, Place Partnership and Provider Collaborative levels, ensuring the information is appropriate in style and content for various audiences.
- Ensure the ICB is up to date with national and regional developments in strategic and local commissioning and that they respond as required.
- The CSDO will Identify and manage organisational risks in accordance with their portfolio.
- Acting as a key member of the ICB's executive management team, the Executive Director of Strategy & Planning will actively take part in and advising on key business decisions.
- The CSDO will be a full participant of the ICB and attend relevant ICB subcommittees and other key forums.

• Working across the executive, ensure that services are commissioned and procured in line with current procurement law, standing financial instructions and local partnership frameworks.

CREATING A COMPASSIONATE AND INCLUSIVE CULTURE

The CSDO will contribute to and support continual improvement and learning approaches, building a collaborative working environment and an innovative and inclusive culture; they will provide direct and professional management to heads of the functions within the role's portfolio and will motivate, inspire and develop staff within the team to ensure that they can deliver the responsibilities of the ICB.

The CSDO will be responsible for the recruitment and development of the team staff, including undertaking appraisal, staff development and where appropriate progressing employee relation matters

- The CSDO will promote continuous quality improvement through learning, improvement methodologies, research, innovation, and data driven improvement initiatives both at a strategic and operational level.
- They will lead multiple departments in different functions to ensure the plan/deliverables are met in a timely manner, to the required standards and within budget.
- Given the importance of supporting the development of integrated care, the CSDO will have an important role in supporting PCNs, Place Partnerships and Provider Collaboratives both with the development of their operational plans that will emerge from the system's strategic intentions but also in supporting those parts of the system to adopt their own commissioning functionality.

FINANCIAL MANAGEMENT

The CSDO will work with the Chief Financial Officer to achieve and maintain financial sustainability.

The CSDO will be accountable for ensuring adherence to the departmental budget, with ongoing management of expenditure against budget and ensuring the appropriate documentation is available for scrutiny.

They will strive for value for money and greater efficiency in the use of these budgets and to ensure that they operate in recurrent financial balance year on year.

- Develop commissioning service models that ensures value for money and promote excellence.
- Support compliance with the organisations Standing Orders and Standing Financial Instructions.
- Set and manage the budgetary implications of activity.
- Supporting the Chief Financial Officer, the CSDO will promote awareness and understanding of financial, value for money and commercial issues, including robust and considered challenge and ICB decision-making at all levels.
- Supporting the Chief Financial Officer, the CSDO will ensure effective systems are in place for the ICB to manage all delegated budgets to the agreed levels and anticipate

and address any adverse movement from plan; this includes supporting the management of the running costs for the ICB and associated structures.

SUPPLEMENTARY DUTIES AND RESPONSIBILITIES

OTHER DUTIES

The above is only an outline of the tasks, responsibilities and outcomes required of the role.

The job holder will carry out any other duties as may reasonably be required by the Chief Executive.

The nature of this role is one of continual development and the duties and responsibilities outline above will change from time to time to reflect the emerging legislation.

Take part in the Director "On Call" arrangements supporting the work of the ICB as a category 1 responder.

CODE OF CONDUCT FOR NHS MANAGERS

Managers are required to carry out their duties in a manner which complies with the NHS Code of Conduct for Managers Directions, 2002.

ADDITIONAL INFORMATION

Infection Control

Infection Prevention and Control is everyone's responsibility. All staff, clinical and non clinical, are required to adhere to the ICBs' Infection Prevention and Control Policies and Procedures and must make every effort to maintain high standards of Infection Prevention and Control at all times, thus minimising the risks associated with healthcare associated infections.

Staff involved with patient care, whether directly or indirectly, have a duty to:

- Clean their hands before and after direct contact with patients and when entering and leaving a clinical area;
- Ensure that patient equipment is cleaned and/or decontaminated appropriately between each patient use;
- Ensure that all environments, where patient care is provided, is clean at all times, maintained to a high standard and appropriate for patient care;
- Provide patients, relatives and the public with clear and consistent HCAI messages and advice on standard Infection Prevention and Control precautions and key infections (MRSA and Clostridium Difficile).

All staff have a duty to:

- Attend/undertake Infection Prevention and Control training programmes provided by the ICBs;
- Report to Occupational Health any infections that they develop which may be transmissible to patients or colleagues;
- Adhere to the ICBs' Uniform and Non Uniform Dress Code Policies;
- Challenge and address inappropriate Infection Prevention and Control practice;
- Report and take action on areas where Infection Prevention and Control standards are not being met.

Health and Safety at Work

You must not wilfully endanger yourself or others whilst at work. Safe working practices and safety precautions will be adhered to. Protective clothing and equipment must be used where provided. ALL accidents / incidents must be reported to your immediate senior officer, and you are asked to participate in accident prevention by reporting potential hazards and to ensure that appropriate forms are completed. A copy of the ICB's Health and Safety Policy document will be given to the successful applicant on appointment.

Rehabilitation of Offenders Act

Due to the nature of the work for which you are applying, this post is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are therefore not entitled to withhold information about convictions which for other purposes are "spent" under the provision of the Act, and, in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the ICB. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the order applies.

Protection of Children or vulnerable adults

Disclosure of Criminal Background of Those With Access to Children or vulnerable adults whether it be in-direct or direct contact.

Following a report by the Home Office, the Government accepted its recommendations regarding the disclosure of criminal convictions of those with access either direct or non-direct access to children or vulnerable adults. If therefore this post involves substantial access to children or vulnerable adults, a check will be made with the police as to whether you have a criminal record before the appointment can be confirmed.

Data Protection and Information Governance

If you have contact with computerised data systems you are required to obtain, process and/or use information held on a computer or word processor in a fair and lawful way. To hold data only for the specific registered purpose and not to use or disclose it in any way that is incompatible with such purpose and to disclose data only to authorised persons or organisations as instructed.

You must abide by all the conditions laid down within the most recent NHS Information Governance Toolkit.

Access to Health Records

All staff who contribute to patients' health records are expected to be familiar with and adhere to, the Trust's Record Keeping Policy and other related documents. All staff who have access to patients records have a responsibility to ensure that these are maintained efficiently and that confidentiality is protected in line with the ICB's policies and related documents.

Staff are also subject to this obligation both on an implied basis and also on the basis that, on accepting their job description, they agree to maintain both patient/client and staff confidentiality.

In addition, all health professionals are advised to compile records on the assumption that they are accessible to patients in line with the Access to Health Records Act 1998.

Person Specification

Personal Values

- Personal commitment to the values of the NHS Long Term Plan, the NHS People Plan, Nolan Principle and the Fit and Proper Persons regime.
- Demonstrates a compassionate leadership style with a track record of improvements to equality, diversity, and inclusion.
- Lives by the values of openness and integrity and has created cultures where this thrives.
- Committed to continuing professional development.

Experience

- Substantial board level leadership experience and/or system leadership experience within a regulatory, provider, commissioner or similar environment is essential.
- Substantial experience of providing board level and/or system leadership within a regulatory environment and across complex systems with demonstrable impact.
- Experience of or significant proven and effective influencing of senior provider operational leadership in health and/or social care services.
- Extensive experience or exposure (as commissioner and/or provider) to commissioning and contracting within key portfolio areas which include acute and community commissioning, activity planning, strategy and plan development and implementation, stakeholder and market management.
- Experience of managing highly sensitive situations with stakeholders.
- Experience of managing relationships with the media and political stakeholders.
- Demonstrable experience of robustly managing multi-million pound contracts in a complex environment.
- Experience of senior level decision making and delivery in an ambiguous and changing environment;
- Experience of working in different sectors of the NHS and/or Local Government.
- Track record of leading successful negotiations with or within health and/or care Providers which result in delivery of value for money and significant savings.
- Impressive record of successful management of service change in person-centred care and innovation in a complex environment.
- Proven track record of strategic development and planning within NHS and/or partner organisations both locally and nationally.

Knowledge

- Extensive knowledge of the health, care and local government landscape and an understanding of the resourcing implications related to the social determinants of public health.
- Current evidence and thinking on practices which reduce health inequality, improve patient access, safety and ensure organisations are Well Led.
- Extensive knowledge of health and care financial planning and budgeting at a board and/or system level.

Skills

- Exceptional communication skills which engender community confidence, strong collaborations, and partnership.
- Strong critical thinking and strategic problem solving; the ability to contribute to a joint strategic plan and undertake problem resolution and action. Analytical rigour and numerical excellence.
- Highly effective influencing skills.
- Confident communicator with ability to be persuasive especially when dealing with highly complex matters or in difficult situations.
- Confident presenter to groups of all sizes and the general public.
- Confident in dealing with the media.
- Ability to lead strategic thinking and option appraisal in a highly complex environment.
- Strong analytical skills: ability to gather, analyse, interpret and present extensive and/or complex data and information.
- Financially literate with the ability to critically review, challenge and effectively utilise financial information for decision-making.
- Highly developed numerical competences and data analysis skills.
- Proven ability to build effective and mutually supportive team.
- Excellent skills in developing and coaching staff.
- Experience in managing performance issues.
- Financial acumen and budget management skills.
- Ability to work under pressure and manage priorities and deadlines in an everchanging environment.

Personal Characteristics

- Ability to foster and maintain positive working relationships at every level.
- Positive attitude; self-motivated and able to motivate others.
- Commitment with stamina/ personal resilience.
- Demonstrable self-awareness and proven ability to manage the impact of and consequences of own actions and behaviour.

- Credibility with clinicians and managers.
- Ability to build trust, respect and co-operation quickly.
- Professional courage, integrity and diplomacy.
- Delivers challenging objectives in high-pressure and unpredictable situations.
- Self-aware and committed to continuous improvement.
- Creative thinker; problem solver; resourceful.

Qualifications

- Educated to Masters level or equivalent level of work experience;
- Evidence of recent continuing professional development;
- MBA or relevant professional qualification.