



# NHS Gloucestershire Integrated Care Board

## Risk Management Arrangements

v1.0  
1<sup>st</sup> July 2022

## Introduction and context common to all profiles

### Introduction

The Integrated Care Board is one of the two pivotal components of the governance and accountability architecture of the One Gloucestershire Integrated Care System. Together with the Gloucestershire Health and Wellbeing Partnership, the ICB is responsible for delivering on the four fundamental purposes for Integrated Care Systems in England:

- **improve outcomes** in population health and healthcare
- **tackle inequalities** in outcomes, experience, and access
- **enhance productivity** and value for money
- help the NHS support broader **social and economic development**.

### Remit of the Integrated Care Board

The Integrated Care Board is a unitary board and will deliver the strategy for the One Gloucestershire Integrated Care System, set by the Health and Wellbeing Partnership. The functions of the Integrated Care Board are established within the national 'Integrated Care Systems, design framework' guidance. In summary the functions and responsibilities of the ICB includes:

1. Developing a plan to meet the health needs of the population.
2. Allocating resources to deliver the plan across the system.
3. Establishing joint working arrangements with partners that embed collaboration as the basis for delivery of joint priorities.
4. Establishing governance arrangements to support collective accountability between partners.
5. Leading system wide arrangements through which the delivery of health services is ensured in line with allocated resources and conforming to national and constitutional standards.
6. Leading system implementation of the People Plan.
7. Leading system wide action on digital and data.
8. Using joined up digital and data capabilities to understand local priorities, track delivery of plans, monitor and address variation and drive continuous improvement.
9. Working alongside councils to invest in local voluntary sector and community organisations and infrastructure.
10. Driving joint working on estates, procurement, supply chain and commercial strategies.
11. Planning for, responding to and leading recovery from incidents (EPRR);
12. Functions NHS E/I will be delegating – e.g., commissioning of primary care and specialised services.

In addition, system partners in Gloucestershire have prioritised:

13. Promotion of Health and Population Health Management
14. Engagement and participation of local people and communities

## **Requirements for Board Members**

The constitution of the Integrated Care Board sets out the membership of the Board. All members of the Board, executive, non-executive, and partner members are collectively and corporately accountable for ensuring that the ICB exercises its functions effectively, efficiently, economically, with good governance and in accordance with the terms of the ICB Constitution, as agreed by its members. Board members share responsibility for organisational performance and for shaping a healthy culture for the organisation and the system, through its interaction with system partners.

The membership of the ICB has been designed in order to ensure that mutual accountability between system partners and effective decision making is underpinned and informed by perspectives drawn from all parts of the health and care system. Board members will bring different professional and system perspectives, shaped by their expertise and experience. The collective skills and experience of the Board will support its focus on strategy, transformation and assurance and will ensure that:

- the ICB acts in the best interests of the health of the local population, across all communities and at all times and builds confidence amongst patients, public and stakeholders that healthcare is in safe hands
- the ICB plans for the provision of the highest quality services with a view to securing the best possible outcomes for patients within the resources available to Gloucestershire
- the ICB is responsive to the views of local people and adopts the principles and best practice guidance of listening to and learning from people and communities
- the ICB exercises its functions in line with the NHS Constitution, the Nolan principles, and secures the best value from public money
- the ICB adopt best practice in respect of governance and accountability and has systems of control that are reliable and robust
- the ICB meets the requirements of the NHS System Oversight Framework and operates with openness, transparency, and candour

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## **Role Profile for Non-Executive Directors**

### **Role of Non-Executive Directors**

Non-Executive Directors will be expected to demonstrate the following behavioural qualities and either have a track record of or have the aptitude to develop the required board level competencies in respect of:

- leading and championing change and fostering innovation;

- valuing diversity and promote equity and inclusivity in all aspects of organisational operations and corporate leadership;
- Senior leadership capability that embodies a collective and distributed leadership style and builds an inclusive and compassionate culture within and across organisations;
- a commitment to hearing the diverse voices of local people and communities and embedding their involvement in the improvement, development, and evaluation of health services;
- advocacy for the role of the NHS as an anchor institution and the benefits this can bring to the Gloucestershire economy and wider social and physical environment;
- respect for the different clinical and professional perspectives that may be held by different leaders, teams and partners across the whole system and an appreciation of how to reach consensus within an inter-disciplinary context;
- able to exercise appreciative enquiry as well as critical thinking. Expertise in interpreting and evaluating data, analysis and evidence and reaching balanced judgements and conclusions;
- experience in improving outcomes for patients and tackling health inequalities
- knowledge and understanding of methods and approaches to improve the quality, performance, and value of health services;
- experience in formulating, implementing and evaluating strategy and assessing the benefits and impact delivered;
- experience of working across organisational boundaries to achieve strategic goals;
- understanding of corporate governance, stewardship of public money and assurance systems that achieve compliance with regulatory obligations and standards;
- commitment to preparing for and participating in ICB board meetings and development sessions and to working within the Code of Conduct for ICB members and the associated 'Standards of Business Conduct' policy.

### **Summary of specific role duties and responsibilities**

Non-Executive Directors of the ICB have a number of responsibilities and duties in common and collectively, relating to board governance and oversight:

1. Responsible to ensure corporate accountability for the performance of the organisation, ensuring its functions are effectively and efficiently discharged and its financial obligations are met.
2. Work alongside the Chair, executive directors and partner members and as equal members of a unitary board to bring independent and respectful challenge to the plans, aims and priorities of the ICB.
3. Promoting and provide open and transparent decision-making that facilitates consensus aimed to deliver exceptional outcomes for the population.
4. Bring a range of professional expertise as well as community understanding and experience to the work of the Board, through lived experience and personal motivations that will add valuable personal insights such as:
  - a. being a patient, carer or service user;

- b. experience of gender and women’s issues;
- c. engaging with diverse social, economic and cultural groups and communities;
- d. challenges of younger people;
- e. mental health issues and/or living with physical chronic conditions or disability.

Each Non-Executive Director will be required to be the chair of at least one formal committee of the Board. These committees are bound by Standing Orders, Standing Financial Instructions (SFI’s), the Scheme of Reservation and Delegation (SoRD), and other policies of the ICB.

All Committees have membership from the wider system partners in the ICS, not just the ICB, and Non-Executive Directors will be required to ensure these partners have appropriate voice and agency in the work of the Committee. All Committees will actively consider diversity and equality in its membership, and each Non-Executive Director chair will be required to champion this and hold themselves and the Committee to account.

The scope, responsibilities and functions of each Committee are described in detail in their Terms of Reference documents which are available in the ICB Governance Handbook, and briefly summarised below:

<b>Audit Committee</b>
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| <ul style="list-style-type: none"> <li>• Provide oversight and assurance to the Board on the adequacy of governance, risk management and internal control processes within the ICB.</li> <li>• Critically review the Integrated Care Board’s financial reporting and internal control principles and ensure an appropriate relationship with both internal and external auditors, and counter fraud is maintained.</li> <li>• Deliver an annual programme of business agreed before the start of the financial year, which will be flexible to new and emerging priorities and risks.</li> <li>• Has delegated authority from the Board to: <ul style="list-style-type: none"> <li>○ Seek any information it requires within its remit, from any employee or member of the ICB (who are directed to co-operate with any request made by the Committee);</li> <li>○ Commission any reports it deems necessary to help fulfil its obligations;</li> <li>○ Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions.</li> </ul> </li> <li>• Members of this Committee must possess between them skills and experience in: accounting, risk management, internal, external audit; and technical or specialist issues pertinent to the ICB’s business.</li> </ul> |
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## **People Committee**

- Accountable to the ICB for all matters relating to the development of the System People Strategy (aligned to the NHS People Promise) and associated plans and for delivery of the Equality, Diversity and Inclusion (EDI) agenda and objectives.
- Hold the People Board to account for achieving the intended results and benefits of the People Strategy and Plans, and reaching agreed milestones in making the ICS an increasingly equitable, diverse and inclusive health and care system.
- Provide oversight and scrutiny of the effectiveness of the ICS People Function and receive assurance that it is fit for purpose in delivering the capability necessary for the delivery of the ICS people strategy and objectives.
- Receive reports against the leadership and people dimensions of System Oversight Framework and will examine the management of People and EDI related risks.
- Oversee the ICS's strategic approach to talent management and succession planning, ensuring a pipeline of talent for clinical, professional, executive and non-executive leadership roles is developed and maintained.
- Examine opportunities for extending partnership and integrated working across the system workforce agenda so that the conditions for enabling transformation in respect of people and EDI priorities are optimised
- Has delegated authority from the Board to:
  - Investigate any activity or aspects within its terms of reference;
  - Seek any information it requires within its remit, from any employee or member of the ICB;
  - Commission any reports it deems necessary to help fulfil its obligations;
  - Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions;
  - Create task and finish sub-groups in order to undertake 'deep-dive' examinations of aspects of governance and assurance;
- Members of this Committee must possess between them skills and experience in: Equity and EDI; strategic workforce planning, development and transformation; leadership, culture, talent and organisational development; system dynamics and development.

## **Primary Care & Direct Commissioning (PCDC) Committee**

- Manage the delivery of those elements of the primary care healthcare services delegated by NHSEI to the ICB (see para 1.2 of the full Terms of Reference).
- Deliver, on behalf of the ICB, services that are high quality, clinically effective and safe, within available resources, through a culture of openness supported by sound governance arrangements.
- Has delegated authority from the Board to:
  - Investigate any activity or aspects within its terms of reference;
  - Seek any information it requires within its remit, from any employee or member of the ICB;

- Commission any reports it deems necessary to help fulfil its obligations;
- Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions;
- Members of this Committee must possess between them skills and experience in: Equity and EDI; primary care development and contracting, patient safety and quality and technical, or specialist issues pertinent (e.g. dentistry, optometry and pharmacy).

### **Quality Committee**

- Provide the ICB with assurance that it is delivering its functions in a way that secures continuous improvement in the quality of services, against each of the dimensions of quality set out in the Shared Commitment to Quality and enshrined in the Health and Care Bill 2021. This includes reducing inequalities in the quality of care.
- Scrutinise the robustness of, and gain and provide assurance to the ICB, that there is an effective system of quality governance and internal control that supports it to effectively deliver its strategic objectives and provide sustainable, high quality care.
- Has delegated authority from the Board to:
  - Investigate any activity or aspects within its terms of reference;
  - Seek any information it requires within its remit, from any employee or member of the ICB;
  - Commission any reports it deems necessary to help fulfil its obligations;
  - Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions;
- Members of this Committee must possess between them skills and experience in: clinical quality and governance, and technical or specialist issues.

### **Remuneration Committee**

- Exercise the functions of the ICB relating to paragraphs 17 to 19 of Schedule 1B to the NHS Act 2006. In summary:
  - Confirm the ICB Pay Policy including adoption of any pay frameworks for all employees including senior managers/directors (including board members) and Non-Executive Members (excluding the Chair)
  - Oversight of executive board member performance in relation to any performance related pay;
- Take a strategic role in laying the foundations for aligning Pay and Reward Policies across the ICS such that Gloucestershire can optimise the conditions for attracting, recruiting and retaining the highest calibre senior directors and leaders (including board members) to roles across the ICB and its partner members.
- Members of this Committee must possess between them skills and experience in: organisational development, people management and remuneration, and technical or specialist issues.

## System Resources Committee

- Provide the ICB with oversight and assurance for matters relating to system resources allocation, performance against strategic plans, and financial performance:
  - Efficiency, outcomes and value for money in the use of resources across the ICB footprint;
  - Financial performance of the ICB;
  - Financial performance of NHS organisations within the ICB footprint.
- Ensuring that resources are prioritised to support:
  - Improving population health and healthcare;
  - Tackling unequal outcomes and access;
  - Enhancing productivity and value for money;
  - Helping the NHS to support broader social and economic development through the strategic objectives as set out through the integrated care partnership
- Oversee the collective management of system resources and performance system/place-based and organisational levels, contributing to the wider System Oversight Framework held by the ICS Board, in particular with responsibility for providing the evidence for the domain “Finance and Use of Resources”.
- Request devolution of programme funding (assuming Segment 1 earned autonomy) and take proportionate control over the deployment of improvement resources made available through regional improvement hubs.
- Request access to funding to provide peer support to other organisations, and benefit from a streamlined business case approval process.
- Has delegated authority from the Board to:
  - Investigate any activity or aspects within its terms of reference;
  - Seek any information it requires within its remit, from any employee or member of the ICB;
  - Commission any reports it deems necessary to help fulfil its obligations;
  - Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions;
  - Create task and finish sub-groups in order to take forward specific programmes of work as considered necessary by the Committee’s members/
- Members of this Committee must possess between them skills and experience in: accounting; risk management; strategic and financial planning quality and governance, and technical or specialist issues.



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## Role Profile for Chief Executive Officer

### Role and responsibilities of the Chief Executive Officer (CEO)

The CEO will be expected to demonstrate the following behavioural qualities and either have a track record of the required board level competencies in respect of:

- exemplary track record of leading and living in accordance with the 7 Nolan Principles of Public Life<sup>1</sup>.
- leading and developing high performing teams of directors, setting pace whilst ensuring the highest quality.
- senior leadership capability that embodies a collective and distributed leadership style and builds an inclusive and compassionate culture within and across organisations;
- leading and championing change and fostering innovation, including prioritising system-wide working across organisational boundaries to achieve strategic goals, including with regional and national agencies;
- valuing diversity and promote equity and inclusivity in all aspects of organisational operations and corporate leadership;
- a commitment to hearing the diverse voices of local people and communities and embedding their involvement in the improvement, development, and evaluation of health services;
- advocacy for the role of the NHS as an anchor institution and the benefits this can bring to the Gloucestershire economy and wider social and physical environment;
- respect for the different clinical and professional perspectives that may be held by different leaders, teams and partners across the whole system and an appreciation of how to reach consensus within an inter-disciplinary context;
- able to exercise appreciative enquiry as well as critical thinking. Expertise in interpreting and evaluating data, analysis and evidence and reaching balanced judgements and conclusions;
- experience in improving outcomes for patients and tackling health inequalities;
- knowledge and understanding of methods and approaches to improve the quality, performance, and value of health services;
- experience in formulating, implementing and evaluating strategy and assessing the benefits and impact delivered;
- understanding of corporate governance, stewardship of public money and assurance systems that achieve compliance with regulatory obligations and standards;
- commitment to preparing for and participating in ICB board meetings and development sessions and to working within the Code of Conduct for ICB members and the associated 'Standards of Business Conduct' policy.

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<sup>1</sup> <https://www.england.nhs.uk/non-executive-opportunities/wp-content/uploads/sites/54/2021/02/The-Nolan-Principles-of-Public-Life.pdf>

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## Role Profile for Executives

### Role of Executive Directors

Executive Directors will be expected to demonstrate the following behavioural qualities and either have a track record of or have the aptitude to develop the required board level competencies in respect of:

- leading and championing change and fostering innovation;
- valuing diversity and promote equity and inclusivity in all aspects of organisational operations and corporate leadership;
- senior leadership capability that embodies a collective and distributed leadership style and builds an inclusive and compassionate culture within and across organisations;
- a commitment to hearing the diverse voices of local people and communities and embedding their involvement in the improvement, development, and evaluation of health services;
- advocacy for the role of the NHS as an anchor institution and the benefits this can bring to the Gloucestershire economy and wider social and physical environment;
- respect for the different clinical and professional perspectives that may be held by different leaders, teams and partners across the whole system and an appreciation of how to reach consensus within an inter-disciplinary context;
- able to exercise appreciative enquiry as well as critical thinking. Expertise in interpreting and evaluating data, analysis and evidence and reaching balanced judgements and conclusions;
- experience in improving outcomes for patients and tackling health inequalities;
- knowledge and understanding of methods and approaches to improve the quality, performance, and value of health services;
- experience in formulating, implementing and evaluating strategy and assessing the benefits and impact delivered;
- experience of working across organisational boundaries to achieve strategic goals;
- understanding of corporate governance, stewardship of public money and assurance systems that achieve compliance with regulatory obligations and standards;
- commitment to preparing for and participating in ICB board meetings and development sessions and to working within the Code of Conduct for ICB members and the associated 'Standards of Business Conduct' policy.

## Summary of specific role duties and responsibilities

### ICB Chief Medical Officer

- Registered professional directly accountable to the CEO of the ICB, and professionally accountable to the regional Medical Director.
- Ensure that there is a framework in place which ensures strong clinical and care professional leadership and voice in decision-making at all levels across the system, and that these leaders are supported in their decision-making role.
- In collaboration with the ICB Chief Nurse Officer:
  - Line manage clinicians employed by the ICB;
  - Lead oversight and improvement of health service quality across the ICS, identifying performance risks and issues;
  - Support development and delivery of key clinical strategies for the ICB, engaging with a range of professionals across the ICS and other organisations, reflecting the integrated strategies of all relevant partner organisations.
- Lead programmes and projects, working with relevant providers and partners, to develop and implement solutions to ensure safe and effective standards of care for patients and tackle health inequalities.
- Lead on Medicines Optimisation and Management across the system.
- Ensure population health management, innovation and research support continuous improvements in health and wellbeing, including digitally enabled clinical transformation and the clinical and care elements of the ICS workforce plan.
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation in clinical outcomes, reducing health inequalities and achieving better life outcomes.
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own practice and professional conduct.
- Be part of a wider network of clinical and care professional leaders across the South West region and nationally.

## ICB Chief Nurse Officer

- Registered professional directly accountable to the CEO of the ICB, and professionally accountable to the regional Chief Nurse.
- Ensure that there is a framework in place which ensures strong clinical and care professional leadership and voice in decision-making at all levels across the system, and that these leaders are supported in their decision-making role.
- In collaboration with the ICB Chief Medical Officer:
  - Line manage clinicians employed by the ICB;
  - Lead oversight and improvement of health service quality across the ICS, identifying performance risks and issues;
  - Support development and delivery of key clinical strategies for the ICB, engaging with a range of professionals across the ICS and other organisations, reflecting the integrated strategies of all relevant partner organisations.
- Lead programmes and projects, working with relevant providers and partners, to develop and implement solutions to ensure safe and effective standards of care for patients and tackle health inequalities.
- Provide professional leadership to ICB Nurses, midwives & AHPs working in commissioning, professional advisory and quality roles and functions, including Practice Nurses and non-NHS Nurses working in the system.
- Lead the development of Nurse leadership at PCN and ILP levels, ensuring that Nurses are fully engaged in the population health agenda.
- Ensure population health management, innovation and research support continuous improvements in health and wellbeing, including digitally enabled clinical transformation and the clinical and care elements of the ICS workforce plan.
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation in clinical outcomes, reducing health inequalities and achieving better life outcomes.
- Be the ICB Caldicott Guardian and discharge the legal duties necessary for this role.
- Lead the ICB EPRR function.
- Lead cross-border working arrangements with the Welsh Health Service, managing disputes and supporting patients. Chair the cross-border network group on behalf of NHSEI and Welsh Government.
- Executive oversight of effective Infection Control and Prevention arrangements across the ICB/ICS supporting the implementation of best practice across partners.
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own practice and professional conduct.
- Be part of a wider network of clinical and care professional leaders across the South West region and nationally.

## **ICB Director of Strategy and Transformation**

- Experienced professional directly accountable to the CEO of the ICB.
- Develop the strategic vision and direction for the ICS, ensuring that aspirations are translated into clinically led strategies and transformation programmes.
- Support ongoing development of the governance arrangements for the ICB, Strategic Executive and key Programme Boards.
- Build and sustain effective professional relationships with senior System Leaders, Clinicians and Stakeholders.
- Maintain a good knowledge of emerging policies from government departments to assist in the thinking and definition of strategy discussions and help support stakeholders.
- Senior system executive lead for Transformation, often operating in a highly political and sensitive environment, navigating proposals for large scale service change through the necessary legislative and governance assurance requirements at both organisational and system levels and beyond.
- System Executive lead, working with relevant providers and partners, for:
  - Clinical Programmes;
  - Urgent Care and System Flow Programme;
  - Enabling Active Communities and Individuals Programme.
- Provide Executive leadership for the ICB transformation directorate and functions, with oversight of standards for best practise change management and engagement, including digitally enabled transformation and pertinent elements of the ICS workforce plan and maintaining a consistent focus on quality, integration and innovation. This will include:
  - Promoting co-production by ensuring the voices of our partners and local communities are heard and the interests of patients and the community are at the heart of all discussions and decisions;
  - Ensuring the ICB/ICS secures health and care services that are provided in line with the NHS Constitution;
  - Providing appropriate challenge; contributing to the development and embedding of the vision, aims and business objectives of the ICB/ICS.
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation, reducing health inequalities and achieving better life outcomes.
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own performance and professional conduct.
- Be part of a wider network of strategy and transformation leaders across the South West region and nationally.

## ICB Chief Financial Officer

- Experienced professional directly accountable to the CEO of the ICB, and professionally accountable to the regional Finance Director.
- Strategic leadership as a credible financial leader and key point of contact for finance across the system, to support the ICS ambitions to deliver vital programmes of improvement in line with national policy.
- Work collaboratively with system of other partners to commission and implement system change and delivery programmes, maximising finance and business intelligence contributions and adding value to individual health and wellbeing, population health and to those professions in scope of the role
- Build and sustain effective professional relationships with senior System Leaders, Clinicians and Stakeholders.
- Maintain a good knowledge of emerging policies from government departments to assist in the thinking and definition of strategy discussions and help support stakeholders.
- Draw from experience and expertise in other academic fields and industries, ensuring that the organisation benefits from innovation, research and relevant initiatives.
- Responsible, with the ICB Executive team, for ensuring that the ICB:
  - Meets financial targets set by NHSEI;
  - Operates within overall revenue and capital allocations and the administration cost limit;
  - Supports system partners to meet ICS financial targets.
- Develop the ICB funding strategy to support the Board in achieving its aims, making use of benchmarking to make sure that funds are deployed as effectively as possible.
- Lead on appropriate programmes, projects, system and processes to enable the implementation of agreed strategies.
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation, reducing health inequalities and achieving better life outcomes.
- Be the ICB Senior Information Risk Officer and discharge the legal duties necessary for this role.
- Be the ICB lead for Estates and for Sustainability.
- Be the lead executive for the Business Intelligence function within the ICB, and to lead, with the Director of Public Health and Director of Primary Care, on the Population Health Management agenda for the ICB.
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own performance and professional conduct.
- Be part of a wider network of strategy and transformation leaders across the South West region and nationally.

## **ICB Director of People, Culture and Engagement**

- Experienced professional directly accountable to the CEO of the ICB.
- Strategic leadership as a credible professional and key point of contact for system People and EDI professionals to deliver vital workforce and system development programmes in line with national policy and local strategy.
- Work collaboratively with system partners to commission and implement system change and delivery programmes, maximising People, HR, OD, Engagement, EI and EDI contributions, adding value to individual health and wellbeing, population health and to those professions in scope of the role.
- Build and sustain effective professional relationships with senior System Leaders, Clinicians and Stakeholders.
- Maintain a good knowledge of emerging policies from government departments to assist in the thinking and definition of strategy discussions and help support stakeholders.
- Responsible for:
  - Leading the strategic development of people in the ICB;
  - Supporting the CEO to ensure that as an NHS statutory body the ICB is well-led;
  - Leading the application of organisational design and development to shaping the culture and ways of working across the ICB to support the strategic ambition of the ICB/ICS;
  - Leading and facilitating the production of a five-year people strategy for the ICS and associated strategic and operational plans to underpin its delivery.
  - Strategic leadership to workforce design, planning and education and training of workforce planners.
  - Leading the strategic approach to Equality, Diversity and Inclusion across the ICS and ensuring it is central to all ICS activities and decision-making
- Develop the development plan to ensure that the ICB is on track to meet the requirements of the System Oversight Framework and perform in line with segment 2 or above, as defined in the System Progression Tool.
- Ensure QI is a major enabler to delivering the strategic priorities of the ICB/ICS, developing and deploying an effective community of practice and optimising its role and contribution.
- Ensure the system-wide strategy for working with people and communities is developed collaboratively and built on best available evidence and data, covering health and social care and addressing wider determinants of health and wellbeing.
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation, reducing health inequalities and achieving better life outcomes.
- To co-ordinate arrangements to support the learning and development of all ICB/ICS staff and teams, and take a leading role in the design and delivery of leadership development and board development programmes across the ICS
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own performance and professional conduct.

## **ICB Director of Operational Planning and Performance**

- Experienced professional directly accountable to the CEO of the ICB, and the ICS lead liaison Director for recovery and performance with NHSEI.
- Provide Executive leadership for system performance, responsible for ensuring the system has plans in place to deliver against all national and local performance standards including leading the delivery of key elements of the financial recovery programme through efficient and integrated system services.
- Lead system operational planning and delivery with responsibility for integrated system operational delivery plans.
- Build and sustain effective professional relationships with senior System Leaders, Clinicians and Stakeholders, and effective commissioning partnerships with other ICSs, the Local Authority and NHSEI.
- Provide system leadership for operational commissioning, including ICB contracting and procurement functions and all statutory responsibilities relating to NHS, independent sector and third sector providers.
- Responsible for:
  - Elective recovery and sustainability including key aspects of service re-design and delivery with system partners;
  - Securing and fostering strong working relationships and when appropriate joint agreements with neighbouring systems in order to ensure system delivery;
  - Financial delivery and budget management in relation to contract and elective care portfolios and the delivery of relevant key programmes of work resourced through in year regional/national funding;
  - Leading the annual contracting round and procurement processes, ensuring safe, high quality services are delivered within the resources available
- Delivery against system priorities as set out in annual system operating plans and wider ICS plans, partnership with the Clinical Programme Groups, ILPs and PCNs.
- Working with the quality teams to develop and agree supporting policies and processes for the safe delivery of services.
- Play a lead role in ensuring that clinicians and managers have access to timely and accurate performance information.
- Agreeing activity and capacity plans for services in response to changing population health needs and to address identified health inequalities.
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation, reducing health inequalities and achieving better life outcomes.
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own performance and professional conduct.



## **ICB Chief Clinical information Officer**

- Registered professional directly accountable to the CEO of the ICB, and professionally accountable to the regional Director of Digital Transformation.
- Provide strategic, credible clinical leadership and be a key point of contact for clinicians across the system to deliver vital programmes of improvement in line with national policy.
- Work with national and regional teams in the commissioning and delivery of work programmes to support system change and delivery, where clinical and multi-professional contributions could be maximised.
- Build and sustain effective professional relationships with senior System Leaders, Clinicians and Stakeholders.
- Facilitate the delivery of excellent, safe patient care through the digitalisation of services and service delivery and the utilisation of information.
- Responsible for:
  - Leading strategic development, design and implementation of informatics and information technology to support better health and care, improved patient outcomes and experience, and better value and affordability;
  - Strategic oversight of the procurement, development, deployment, re-engineering, optimisation and integration of clinical information systems;
  - Leading a wide range of deployment and improvement projects across the full range of clinical information systems
- Ensuring that delivery of technology and information changes:
  - Balance the needs of improving operational performance, quality of care, and reducing delays in the patient pathway
  - Meet security and confidentiality needs
  - Enabling continuous improvement through monitoring and research to develop improved treatment methods
  - Extending patient choice and patient involvement
- Influence and contribute to ICB plans and wider system strategies, including the delivery of the five-year ICS plan with the aim of driving innovation, reducing health inequalities and achieving better life outcomes.
- Ensure that the organisation values diversity and promotes equality and inclusivity in all aspects of its business.
- Accountable for own performance and professional conduct.

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## Role Profile for Partner members

### Role of Partner Members

Nominees can be clinical or non-clinical and must comply with the eligibility and disqualification criteria outlined in the ICB Constitution; see Appendix 1 herein.

The role of partner members is to contribute to the Integrated Care Board contemporary knowledge, insight, and subject matter expertise of differing parts of the health and care system, drawn from their perspective of leading provider and public health services in Gloucestershire.

Partner Members will be expected to demonstrate the following behavioural qualities and either have a track record of or have the aptitude to develop the required board level competencies in respect of:

- leading and championing change and fostering innovation;
- valuing diversity and promote equity and inclusivity in all aspects of organisational operations and corporate leadership;
- senior leadership capability that embodies a collective and distributed leadership style and builds an inclusive and compassionate culture within and across organisations;
- a commitment to hearing the diverse voices of local people and communities and embedding their involvement in the improvement, development, and evaluation of health services;
- advocacy for the role of the NHS as an anchor institution and the benefits this can bring to the Gloucestershire economy and wider social and physical environment;
- respect for the different clinical and professional perspectives that may be held by different leaders, teams and partners across the whole system and an appreciation of how to reach consensus within an inter-disciplinary context;
- able to exercise appreciative enquiry as well as critical thinking. Expertise in interpreting and evaluating data, analysis and evidence and reaching balanced judgements and conclusions;
- experience in improving outcomes for patients and tackling health inequalities;
- knowledge and understanding of methods and approaches to improve the quality, performance, and value of health services;
- experience in formulating, implementing and evaluating strategy and assessing the benefits and impact delivered;
- experience of working across organisational boundaries to achieve strategic goals;
- understanding of corporate governance, stewardship of public money and assurance systems that achieve compliance with regulatory obligations and standards;
- commitment to preparing for and participating in ICB board meetings and development sessions and to working within the Code of Conduct for ICB members and the associated 'Standards of Business Conduct' policy.

The following table summarises the particular requirements relating to the partner member roles.

ICB Role	Requirements
<p>Nominated Voting Member: <b>NHS Foundation Trust Providers</b></p>	<p><b>Provider Perspective</b> <i>Eligibility in addition to general criteria in Appendix 1: Be an Executive Director of one of the NHS Trusts or FTs within the ICB's area.</i></p> <p>Able to provide perspective and current experience of leading delivery of broad range of core secondary care and specialist health services to the whole population.</p>
<p>Nominated Voting Member: <b>NHS Foundation Trust Providers</b></p>	<p><b>Mental Health, Learning Disability, Autism Perspective</b> <i>Eligibility in addition to general criteria in Appendix 1: Be an Executive Director of one of the NHS Trusts or FTs within the ICB's area.</i></p> <p>Able to provide perspective and current experience of delivering secondary care services for people with mental health needs, learning disability and autism and with expertise of delivering integrated models of provision spanning physical and mental health.</p>
<p>Nominated Voting Member: <b>Local Authority</b></p>	<p><b>Local Authority Perspective</b> <i>Eligibility in addition to general criteria in Appendix 1: Be the Chief Executive or hold a relevant Executive level role at Gloucestershire County Council</i></p> <p>Able to provide perspective and current experience of leading Local Authority services to the population and managing the interface between health and care and other aspects of public service delivery.</p>
<p>Nominated Voting Member: <b>Local Authority</b></p>	<p><b>Population Health and Prevention Perspective</b> <i>Eligibility in addition to general criteria in Appendix 1: Be the Chief Executive or hold a relevant Executive level role at Gloucestershire County Council</i></p> <p>Able to provide perspective and current experience of leading public health across the county and designing and delivering interventions that promote better health outcomes, tackle health inequalities, and address the wider determinants of health and wellbeing.</p>

ICB Role	Requirements
<p>Nominated Voting Member: <b>Primary Medical Services</b></p>	<p><b>Primary Care Perspective</b> <i>Eligibility in addition to general criteria in Appendix 1:</i> Primary medical services contract holders responsible for the provision of essential services, within core hours to a list of registered persons for whom the ICB has core responsibility</p> <p>Able to provide perspective and current experience of leading Primary Medical Services, with in-depth understanding and insight into both daytime and Out of Hours provision. Also brings wider primary care perspective including dental, community pharmacy and optometry and development of Primary Care Networks.</p>