**Job Description**

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| **Job Title:** | Non-Executive Director |
| **Band:** | N/A |
| **Responsible to:** | Trust Chair, Council of Governors |
| **Department:** |  |
| **Directorate:** | Trust Headquarters, Elizabeth House |

**Job Purpose**

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| 1. It is stated within the National Health Service Act 2006 that the duty of the Board and each individual Director is to act with a view of promoting the success of the corporation so as to maximise the benefits for both its members and the public.
2. As set out in the Code of Governance every NHS FT should be headed by an effective Board of Directors. The Board is collectively responsible for the performance of the NHS FT.
3. Non-Executive Directors play a crucial role within the Board as, in addition to any specific knowledge and skills that they may have they provide an independent perspective to the operational Executive Directors.
4. Furthermore, it is the duty of a Non-Executive Director to uphold the highest standards of probity and integrity as per the Trust’s core values as well as encouraging good relations within the Board room.
5. Non-Executive Directors are expected to participate fully as members of their assigned Sub-Committees as well as assuming the role of Committee Chair when appointed. Also, as a representative of the Cambridgeshire and Peterborough Foundation Trust it is their responsibility to ensure their own awareness of the views of the Council of Governors in order to give good consideration to these views when advising the Senior Management on all Trust related issues.
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**Key Responsibilities**

**General Responsibilities & Duties:**

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| 1. To set the strategic direction of the organisation considering the views of the Council of Governors and agreeing appropriate plans to achieve them.
2. To exercise appropriate oversight over the execution of the agreed strategic objectives by the Executive Team.
3. To provide constructive, considered and appropriate challenge to the Board of Directors, monitoring performance reporting.
4. Non-Executive Directors should satisfy themselves in regards to the integrity of operational, financial and clinical information provided.
5. Non-Executive Directors should satisfy themselves that all quality controls, systems of risk management as well as the governance of the Trust are robust and defensible.
6. To ensure that the Trust places patient safety at the heart of its work including the reinforcement of a positive corporate culture by adopting exemplary behaviours within the Board room and across the Trust.
7. To support the Chief Executive and Executive Directors in promoting and upholding CPFT’s mission, vision and values.
8. Where appropriate, and in order to ensure the provision and understanding of decisions, Non-Executive Directors have a duty to elicit and consider external advice.
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**Council of Governors:**

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| 1. All Non-Executive Directors should ensure that they attend The Council of Governors meetings, held quarterly.
2. In doing so they should consider the views and interests of the Council of Governors, bearing in mind that their viewpoint is representative of the Trust’s Membership, Service Users, Carers and Staff.
3. All Non-Executive Directors regarding all Performance, Strategy and Governance related issues should maintain an on-going dialogue with the Council of Governors.
4. Non-Executive Directors should ensure that any feedback provided by the Council of Governors regarding the Trust’s performance is communicated to the Board of Directors and other members of Senior Management effectively.
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**Constitutional Responsibility of all Committee members:**

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| 1. Each Committee is constituted as a standing committee of the Trust Board in accordance with its Constitution.
2. Each Committee is authorised to act within the powers delegated to it as set out in the Trust’s Scheme of Delegation.
3. Each Committee is authorised to act within its agreed Terms of Reference. All members of staff are required to co-operate with any request made by each Committee.
4. Each Committee is authorised by the Board of Directors to obtain such internal and external information as is necessary and expedient to the fulfilment of its functions.
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**Personal Development**

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| 1. All Non-Executive Directors are required to participate in the CPFT induction programme that will include reading induction material, attending workshops, partnering Executive Directors and attending meetings.
2. It is a legal requirement for all of the Trust’s senior management team to be approved as a Fit and Proper Person as part of the Terms of Employment, requirements for this are as follows:
3. The completion of an Enhanced Disclosure and Barring Service check (DBS)
4. All Non-Executive Directors must declare any standing interests to the Trust, including pecuniary interests. Completing a ‘Declaration of Interests’ form does this.
5. The completion of a Fit and proper Persons declaration.
6. As part of the on-going development of each Non-Executive Director they are required to visit services across the Trust and provide a report of their findings to the Board of Directors.
7. Complete an annual appraisal with the Trust Chair, conclusions from which will include any future objectives. As part of this, completion of the annual Board Self-Assessment form is also a mandatory requirement.
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**Time Commitment:**

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| 1. It is the responsibility of the Non-Executive Director to ensure that they make sufficient time in order to discharge their responsibilities effectively. This is contracted as 3 days per month.
2. The Non-Executive Director must inform the Trust Secretary of any on-going time commitments prior to their employment.
3. If anything should occur that would impact on the ability to fulfil the time requirement then the Trust Secretary should be notified as soon as is reasonably possible.
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**Quality & Patient Safety**

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| * Protection of Children & Vulnerable Adults – To promote and safeguard the welfare of children, young people and vulnerable adults.
* Implementation of NICE guidance and other statutory / best practice guidelines (if appropriate).
* Infection Control - To be responsible for the prevention and control of infection.
* Incident reporting - To report any incidents of harm or near miss in line with the Trust’s incident reporting policy ensuring appropriate actions are taken to reduce the risk of reoccurrence.
* To contribute to the identification, management and reduction of risk in the area of responsibility.
* To ensure day to day practice reflects the highest standards of governance, clinical effectiveness, safety and patient experience.
* To ensure monitoring of quality and compliance with standards is demonstrable within the service on an ongoing basis.
* To be aware of the responsibility of all employees to maintain a safe and healthy environment for patients/ clients, visitors and staff.
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**General**

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| * To maintain up to date knowledge of legislation, national and local policies and issues in relation to both the specific client group and mental health.
* To comply with the Professional Codes of Conduct and to be aware of changes in these. To maintain up to date knowledge of all relevant legislation and local policies and procedures implementing this.
* To ensure that all duties are carried out to the highest standard and in accordance with currently quality initiatives within the work area.
* To comply with all relevant Trust policies, procedures and guidelines, including those relating to Equal Opportunities, Health and Safety and Confidentiality of Information and to be aware of any changes in these.
* To comply at all times with the Trust’s Information Governance related policies. Staff are required to respect the confidentiality of information about staff, patients and Trust business and in particular the confidentiality and security of personal identifiable information in line with the Data Protection Act. All staff are responsible for ensuring that any data created by them is timely, comprehensive, accurate, and fit for the purposes for which it is intended.
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**Equality & Diversity**

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| The Trust is committed to equality and diversity and works hard to make sure all staff and service users have access to an environment that is open and free from discrimination. As a Trust we value the diversity of our staff and service users, and therefore recognise and appreciate that everyone associated with the Trust is different and so should be treated in ways that are consistent with their needs and preferences. Therefore all staff are required to be aware of the Trust’s Equality and Diversity Policy and the commitments and responsibilities the Trust has to:* Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
* Advance equality of opportunity between people who share a protected characteristic and those who do not.
* Foster good relations between people who share a protected characteristic and those who do not.

We firmly believe that it makes good business sense to have a workforce representative of the communities we serve and so encourage applications from all sections of the community. |

**To be noted:**

* This is not an exhaustive list of duties and responsibilities, and the post holder may be required to undertake other duties, which fall within the grade of the job, in discussion with the manager.
* This job description will be reviewed regularly in the light of changing service requirements and any such changes will be discussed with the post holder.
* This post is subject to the Rehabilitation of Offenders Act 1974 (Exemption Order 1975) and as such it will be necessary for a submission for disclosure to be made to the Criminal Records Bureau to check for previous criminal convictions. The Trust is committed to the fair treatment of its staff, potential staff or users in line with its Equal Opportunities Policy and policy statement on the recruitment of ex-offenders.