

**Pan-London Quality and Regulation Unit**

# Recruitment of Quality and Regulation Lay Representatives



**Information pack for applicants**

**August 2014**

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## Health Education England

Health Education England (HEE) was established as a Special Health Authority in June 2012, taking on some functions from October 2012 before assuming full operational responsibilities from April 2013.

HEE provides leadership for the new education and training system ensuring that the shape and skills of the future health and public health workforce evolve to sustain high quality outcomes for patients in the face of demographic and technological change. HEE ensures that the workforce has the right skills, behaviours and training, and is available in the right numbers, to support the delivery of excellent healthcare and drive improvements. HEE supports healthcare providers and clinicians to take greater responsibility for planning and commissioning education and training through thirteen Local Education and Training Boards (LETBs), which are statutory committees of HEE.

The establishment and development of HEE was set out in 'Liberating the NHS: Developing the Healthcare Workforce, From Design to Delivery', the Government's policy for a new system for planning commissioning education and training. The driving principle for reform of the education and training system was, and is, to improve care and outcomes for patients and HEE exists for one reason alone – to help ensure delivery of the highest quality healthcare to England's population, through the people we recruit, educate, train and develop.

The key national functions of the organisation include:

- Providing national leadership for planning and developing the whole healthcare and public health workforce
- Authorising and supporting development of LETBs and holding them to account
- Promoting high quality education and training which is responsive to the changing needs of patients and communities and delivered to standards set by regulators
- Allocating and accounting for NHS education and training resources – ensuring transparency, fairness and efficiency in investments made across England
- Ensuring security of supply of the professionally qualified clinical workforce
- Assisting the spread of innovation across the NHS in order to improve quality of care
- Delivering against the national Education Outcomes Framework to ensure the allocation of education and training resources is linked to quantifiable improvements

For more information please visit:

Health Education England - [www.hee.nhs.uk](http://www.hee.nhs.uk)

Health Education England LETBs - [www.hee.nhs.uk/tag/letb](http://www.hee.nhs.uk/tag/letb)

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## London's Local Education and Training Boards

In Greater London the mandate of HEE is delivered by three LETBs:

- Health Education North Central and East London
- Health Education North West London
- Health Education South London

The three LETBs are all constituted as sub-committees of HEE, with independent chairs, and boards to ensure that the LETB delivers on the mandate of HEE with appropriate local focus.

The LETBs are responsible for the commissioning and quality management of healthcare education and training for the whole health workforce in their respective geographical areas. They are supported in the processes of commissioning by local commissioning teams, and are all supported by the Pan-London Quality and Regulation Unit (PLQRU) in meeting their obligations in terms of quality and regulation.

The quality of healthcare education is regulated by various professional bodies such as the General Medical Council, General Dental Council, Nursing and Midwifery Council and Health & Care Professionals Council. The LETBs support, either through regulation or collaboration, these regulatory bodies in ensuring that the quality of education and training for all healthcare professionals is of a high quality.

You can find out more about the London LETBs, their individual visions, workforce development plans, and much more by visiting their respective websites:

Health Education North Central and East London - [www.ncel.hee.nhs.uk](http://www.ncel.hee.nhs.uk)

Health Education North West London – [www.nwl.hee.nhs.uk](http://www.nwl.hee.nhs.uk)

Health Education South London – [www.southlondon.hee.nhs.uk](http://www.southlondon.hee.nhs.uk)

## The Pan-London Quality and Regulation Unit

The Pan-London Quality and Regulation Unit (PLQRU) sit within and is managed by Health Education North Central and East London on behalf of the three London LETBs (Health Education North Central and East London, Health Education South London and Health Education North West London). Whilst employed within Health Education North Central and East London all members of the team work across all three London LETBs. The team is responsible for ensuring that the regulatory requirements of all of the professional regulators are met and exceeded, further the team is responsible for ensuring that patient safety and the quality of training are priorities in all education and training matters; coordinating initiatives to continually drive up the delivery of high quality education and training across London – this includes the management of performance systems, quality visits and regulatory reporting processes. The team work closely with all colleagues across the three London LETBs to ensure that best practice in all aspects of commissioning drive excellence, using relevant data and information, from a number of sources, to inform high level judgements with regard to health education and training.

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## Laity – the purpose

Lay representatives are engaged by the London LETBs in order to ensure suitable external assurance of processes – to meet our regulatory obligations, and to assure trainees, students and the public that our processes are undertaken objectively and performed to best practice standards.

Whilst there are many areas that the PLQRU may wish to engage laity in, the main area is to provide appropriate externality to our quality visiting process. This said, wherever a lay representative is engaged by the PLQRU the core function remains the same – namely to ensure that the functions of the unit are carried out in line with the expectations of HEE, regulatory partners, trainees/students and members of the public. Ensuring at all times our processes are undertaken objectively and performed to best practice standards.

The provision of this level and type of externality is key to ensuring that our processes remain robust and independent, and that our regulatory partners, trainees, students and the public maintain confidence in the actions that we take in order to ensure the provision of high quality education and training, and safe patient care are at the heart of all our activity.

Lay representatives are not employees, and they must, at all times, act with suitable levels of externality whilst maintaining their contractual and operational obligations.

## Role Definition

Lay representatives use their skills and experience as a member of the community to deliver the lay representative role as follows:

- Commit to working to, and encouraging within the organisation, the highest standards of probity, integrity and governance and contribute to ensuring that the PLQRU's internal governance arrangements conform to best practice and statutory requirements.
- Provide independent judgement and advice - constructively challenging and influencing to enable the organisation to fulfil its leadership responsibilities to trainees, students and patients.
- Bring independent judgement and experience from outside the organisation and apply this to the benefit of the organisation, and its stakeholders.
- In relation to quality visits - to attend quality visits and review the process followed by the PLQRU, and specifically the visit panel, conducting any visit to a Local Education Provider.
- In relation to quality visits - to ensure processes are in line with good practice standards, and are conducted in line with published governance frameworks.
- To read, comprehend, challenge and agree written quality visit reports.
- To contribute to discussion and debate from a lay perspective.
- To provide externality for quality management processes in line with Standard 4 of The Trainee Doctor – Standards for Postgraduate Medical Education and Training<sup>1</sup>.
- To ensure that the needs of trainees from a pastoral perspective are met and to assure this via the quality visiting process.

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<sup>1</sup> [www.gmc-uk.org/Trainee\\_Doctor.pdf\\_39274940.pdf](http://www.gmc-uk.org/Trainee_Doctor.pdf_39274940.pdf)

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- To ensure that patient safety is at the centre of every quality management process, and to actively challenge standards of patient safety during quality visiting.
  - To attend any pre-briefing sessions required in order to ensure that the above elements of the role can be delivered when attending a quality visit.
  - To provide independent and impartial advice at all times.
  - To engage in review processes at the request of the Head of Pan-London Quality and Regulation, or other senior manager – such reviews may relate to serious occurrences requiring internal or external learning.
  - To lead independent investigations internally or externally.
  - To provide laity to internal or external investigations.
  - To provide laity to reviews of process, policy, procedure or any other departmental developments.
  - To deliver all functions whilst embracing the principles of the NHS Constitution and NHS Values.

## Role Specification

The role specification of a Quality and Regulation Lay Representative is as below, all Quality and Regulation Lay Representatives are required to evidence their ability, experience and commitment to deliver against the criteria in the specification at appointment, and throughout their tenure. Annual reviews will be held against this specification:

**Genuine commitment** - lay representatives need to have, and be able to demonstrate, a genuine commitment to the education and training of all healthcare professionals, and a commitment to patients, and patient care. They should be committed to the development of a health workforce which is able to deliver excellent health care services for today's and tomorrow's patients.

**Patient and trainee/student focus** - a strong commitment to the provision of high quality and safe care for patients through the provision of high quality education and training to all of the health workforce.

**Holding to account** - having the ability to positively challenge senior clinical and non-clinical staff in a professional manner in order to ensure that processes and governance structures are always followed as required.

**Effective influencing and communication** - a high level of ability to gain support and influence, political acumen to understand the current landscape within a Local Education Provider, and how this will impact on service, education and training.

**Team working** - be committed to working as a team member, and the ability to take on a personal leadership role where needed, and a supportive leadership role where our findings or our processes are challenged incorrectly.

**Self-belief, confidence, integrity and drive** - the motivation and confidence to take on challenges and perform the role, whilst having the confidence to not be swayed in to a decision, ensuring that you have integrity in all that you do.

**Intellectual flexibility** - the ability to think clearly and creatively, making sense of complexity and clarifying it for other people.

**Application of standards of public life** - uphold the highest standards of conduct set out in "The Seven Principles of Public Life".

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**Key behaviours and values of a lay representative** – ensuring at all times you embrace and deliver the role in line with the “Key behaviours and values of a lay representative”.

**NHS Constitution** – ensuring at all times you embrace and uphold the principles of the NHS Constitution and NHS Values.

## Eligibility

Given the local focus of HEE’s LETBs applicants must live in, or have strong connections, with the Greater London area, and specifically one or more London Boroughs – either through residence, or employment. We will not accept applications from individuals who do not have a strong connection with Greater London.

## Disqualification from appointment

Not everybody is eligible to be appointed to this position. The following people are disqualified from appointment as a lay representative:

- Employees of HEE;
- Postgraduate medical trainees, student doctors, student nurses and or student allied health professionals on a HEE commissioned course;
- People who have received a prison sentence or suspended sentence of 3 months or more in the last 5 years;
- People who are the subject of a bankruptcy restriction order or interim order;
- Anyone who has been dismissed (except by redundancy) by any NHS body;
- Anyone who has been removed from trusteeship of a charity;
- Anyone who has had erasure, suspension or restrictions including interim suspension or restrictions imposed by a professional body (GMC, GDC, HCPC, NMC etc.).

## Remuneration

Remuneration will be paid at a daily rate of £150.00; half day rates will apply at £75.00 per half day.

A day is recorded as one full operational day with the PLQRU where the day exceeds four hours’ work – regardless of start and end time.

A half day will be paid where the day’s work is less than four hours.

Lay representatives are also eligible to claim allowance for travel and subsistence costs incurred necessarily on business in line with rates set centrally by HEE.

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## **Contractual arrangements**

The provision of laity will be managed via a Contract for Services – this contract does not form an employment relationship between HEE and the lay representative. It does not warrant an agreement for a minimum offer of work, but manages the occasions where services are provided by the lay representative to HEE.

## **Impact of appointment on people in receipt of benefits**

Your appointment may affect your entitlement to benefits. This will depend on individual circumstances and the type of benefit received. Advice should be sought from the department that pays the benefit.

## **Time commitment**

This appointment provides no guarantee of work, however it is anticipated that lay representatives will be able to take part in between 2-3 days' work per month at a maximum.

In order to ensure that lay representatives remain impartial, a maximum of 33 days' work per annum will be offered to the lay representative.

## **Period of appointment**

The initial appointment is for 3 years, with a view to extending for a further 5 years subject to the needs of the organisation and a good performance - no lay representative will continue in any given role for more than eight years.

## **Standards in public life**

You will be expected to demonstrate high standards of corporate and personal conduct. All successful candidates will be asked to subscribe to the "Operational Framework for Quality and Regulation Lay Representatives" which will be issued at appointment.

Candidates must also demonstrate that they understand the standards of probity outlined in the "Seven Principles of Public Life" - details can be found in Appendix 1.

Candidates must also demonstrate their commitment to the "Key Values and Behaviours of a Lay Representative" – details can be found in Appendix 2.

You should note particularly the requirement to declare any conflict of interest that arises in the course of HEE business and the need to declare any relevant business interests, positions of authority or other connections with commercial, public or voluntary bodies.

## **Equality of opportunity**

We ensure that all appointments of lay representatives are made in a way that is open, transparent and fair to all candidates.

We value and promote diversity and are committed to equality of opportunity for all and appointments made on merit. We believe that for any organisation to be successful, it needs to work with the most talented and diverse people available. We positively encourage applications from people from all sections of the community, from all backgrounds and with a

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broad range of experience. We undertake that your application will be dealt with fairly and that all decisions we make about it will be based on merit and your ability to meet the person specification.

## How to apply

All candidates are required to complete an application form, accompanied by an up to date Curriculum Vitae (CV). The application form is available online by visiting [www.lpmde.ac.uk/lpmde/work-for-us/layrepresentatives](http://www.lpmde.ac.uk/lpmde/work-for-us/layrepresentatives).

Alternative formats such as, braille, large print and audio versions of this information pack and the application forms are available.

HEE must receive your completed application form **by the closing date for applications – Sunday 14<sup>th</sup> September 2014 (Midnight) - Late applications will not be accepted.**

Completed applications and CVs should be submitted via email to the following address:

[layrecruitment@ncel.hee.nhs.uk](mailto:layrecruitment@ncel.hee.nhs.uk)

## Appointment timetable

Application submission deadline	Sunday 14 <sup>th</sup> September 2014 – Midnight
Shortlisting	Week commencing: Monday 15 <sup>th</sup> September 2014
Interviews	Weeks commencing: Monday 22 <sup>nd</sup> September 2014 Monday 29 <sup>th</sup> September 2014

## How we will handle your application

We aim to process all applications as quickly as possible and to treat all candidates with courtesy. After the closing date for applications:

- You will receive an acknowledgment of receipt of your application by email.
- Your application form and CV will be assessed to see whether you have demonstrated the expertise required at the appropriate level for the post.
- We will rely on the information you provide on your application form and CV.
- The panel will decide which candidates will be invited for interview following shortlisting.
- We will let you know whether or not you will be offered an interview.
- Due to the volume of applications we receive, we are not able to provide feedback to individuals not shortlisted for interview.
- If invited to interview, the panel will ask you questions about your skills and experience and how you would apply them to this role.
- The questions will also enable you to demonstrate the competencies required.

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- Where a candidate is unable to attend an interview on the set date, an alternative date will only be offered at the discretion of the panel.
  - After the interview, the panel will identify and rank the appointable candidates; appointments will be offered to the top scoring candidates.
  - You will be notified of the outcome of your application.

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## Questions and further information

Further information regarding Health Education England, and London's Local Education and Training Boards can be found using the following links:

Health Education England  
[www.hee.nhs.uk/tag/letb](http://www.hee.nhs.uk/tag/letb)

Health Education England  
[www.hee.nhs.uk](http://www.hee.nhs.uk)

Health Education North Central and East London  
[www.ncel.hee.nhs.uk](http://www.ncel.hee.nhs.uk)

Health Education North West London  
[www.nwl.hee.nhs.uk](http://www.nwl.hee.nhs.uk)

Health Education South London  
[www.southlondon.hee.nhs.uk](http://www.southlondon.hee.nhs.uk)

Candidates are also directed to the following websites for further information:

General Medical Council – Education & Training  
[www.gmc-uk.org/education/index.asp](http://www.gmc-uk.org/education/index.asp)

Nursing and Midwifery Council – Education & Training  
[www.nmc-uk.org/Educators](http://www.nmc-uk.org/Educators)

Health and Care Professionals Council – Education & Training  
[www.hcpc-uk.org.uk/education/](http://www.hcpc-uk.org.uk/education/)

London Postgraduate Medical Education & Training  
[www.lpmde.ac.uk](http://www.lpmde.ac.uk)

Should prospective candidates have any question or should they wish to discuss the role they are encouraged to contact Ian Bateman – Head of Pan-London Quality and Regulation for a confidential and informal conversation about the role prior to application:

Telephone – 0207 862 8847 (via Business Support Manager)

Email – [layreprecruitment@ncl.hee.nhs.uk](mailto:layreprecruitment@ncl.hee.nhs.uk)

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## **Appendix 1 - The seven principles of public life**

The principles of public life apply to anyone who works as a public office-holder. This includes all those who are elected or appointed to public office, nationally and locally, and all people appointed to work in the civil service, local government, the police, courts and probation services, NDPBs, and in the health, education, social and care services. All public office-holders are both servants of the public and stewards of public resources. The principles also have application to all those in other sectors delivering public services.

### **Selflessness**

Holders of public office should act solely in terms of the public interest.

### **Integrity**

Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.

### **Objectivity**

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

### **Accountability**

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

### **Openness**

Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.

### **Honesty**

Holders of public office should be truthful.

### **Leadership**

Holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behavior wherever it occurs.

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## **Appendix 2 - Key behaviours and values of a lay representative**

- A good lay person will be independent and free from conflicts of interest;
- A good lay person will remain calm under pressure;
- A good lay person will act honestly and with integrity at all times;
- A good lay person will be available and visible throughout a process but will not command centre stage;
- A good lay person will provide guidance but not substitute their decisions for that of the panel or the clinical expert;
- A good lay person will be courteous and polite at all times;
- A good lay person will represent the public interest and the values of the NHS;
- A good lay person will be committed to upholding and embodying the principles of equality and fairness at all times;
- A good lay person will understand the importance of written records and will strive to capture events and opinions in an honest and non-judgemental fashion;
- A good lay person will conduct themselves in a professional manner at all times.