

Career Paths of Chief Executives

Personal journeys and reflections

- Backgrounds
- Key factors for success
- Personal accounts of the journey to the top

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Introduction

Background

The NHS recognises that high quality leadership is pivotal to achieving excellence in service delivery and is committed to developing leaders who meet its diverse and evolving needs. As part of its strategic framework for leadership development: Excellence in Leadership – Excellence in Health, NHS Yorkshire and the Humber (NHS Y & H) and all NHS organisations within the region are keen to promote their commitment to the development of inspirational leaders by encouraging talent that reflects both the diversity of the locality and the communities it serves. In support of this, we commissioned the Institute for Employment Studies (IES) to undertake research into how chief executives in the region have made it to the top in the NHS.

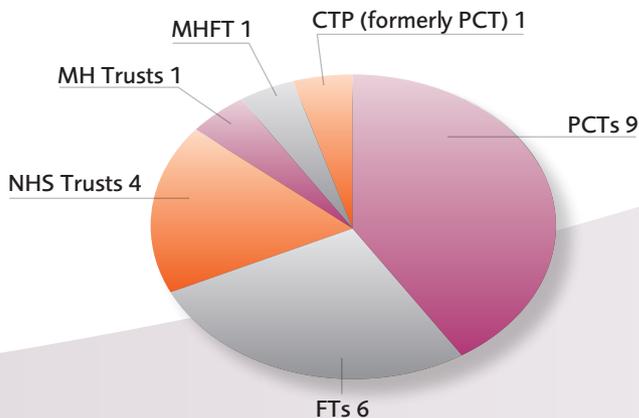
Objectives

This research complements the strategic framework for leadership development and further informs succession planning, leadership development strategies and talent management in NHS organisations in Yorkshire and the Humber. It has the following key aims:

- Make visible the multiple and diverse routes to becoming a chief executive in the NHS – to illustrate that one size does not fit all.
- Identify the key career-enabling factors and other pivotal experiences that current chief executives have experienced along their own personal career journey.
- Gather career insights and practical examples both to inspire and guide the future senior management pipeline and to promote wider understanding within the existing chief executive community about each other, and enhance existing networks and relationships.

The research had two key stages

1. An online survey during February and March 2009 targeted to all 36 current chief executives in NHS Y & H to gather both 'hard' and 'soft' data to reflect their own personal journeys and reflections to be shared with their peers and aspiring chief executives. Almost two-thirds responded to the survey, representing a very good response rate (see chart for respondents by type of organisation).
2. Follow-up telephone interviews during March and April 2009 with 10 volunteers selected from the 22 chief executives who responded to the survey, selected to reflect varying lengths of service as a chief executive, entry into the NHS, gender, and type of organisation. We spoke with four chief executives from PCTs, three from FTs, two from NHS Trusts and one from a MHFT. The interviews explored aspects of their careers to produce tips and advice for aspiring chief executives.



Outcomes

- A publication of the 'personal journeys and reflections' that chief executives have undertaken, with pen portraits and stories to inspire and guide future leaders. This will be shared within the existing chief executive community and more widely.
- A companion pocket book publication containing practical hints and tips on how to make it to the top – to help future chief executives navigate their future careers.
- A short final report framing the key findings and issues that emerged from the research, to inform the development of future leadership and talent management, together with recommendations for all NHS organisations in Yorkshire and Humber.

This publication reveals the personal journeys and reflections for each of the chief executives who participated in the survey, and who agreed to share their own 'page' with NHS colleagues. Each page provides insight into the diversity of each career path and the factors that helped them along their journey, together with their own personal story.



Andy Buck

2.5 years as Chief Executive of
NHS Rotherham

A chief executive for

7 years

Previously

Chief Executive in another PCT

In NHS for

10 years

Working for

26 years

First NHS job

Chief Executive of a Primary Care Group

Main NHS background

Chief Executive of a Primary Care Group, then of its successor Primary Care Trust, then my current post

Main non-NHS background

16 years in local government social services as: a social worker, community worker, service development manager, strategy and commissioning manager, head of strategy

Key factors in career success

Leadership and inspiration from a number of the leaders and managers with whom I have been lucky to work. This has been by far the most important factor – people I have learnt from, who have shown faith in me, given me opportunities, who supported me during more difficult times, and who helped me to have faith in myself.

My participation, in 1993, in the Common Purpose programme which widened my horizons beyond local government and the public sector. All of a sudden, I understood that there is far more that binds us all together, and far more that we can achieve together, than separates and divides us.

Support and encouragement from my family.

I never expected to become a chief executive, and it was never part of a grand plan! My first job, after I had completed my first degree, was as a full-time community service volunteer in inner London. This was my first step towards becoming a social worker, which happened three years later.

My first job, in Rotherham during the miners strike, offered experiences way beyond anything that had gone before. My next jobs, as a community worker in Sheffield, allowed me to contribute to creating change and improvement with individuals, their families and their communities. My step into service development, strategy and commissioning was a natural extension from this role. (I also spent a few years being a trade union shop steward – from which I learnt an awful lot, very quickly!).

When the PCG chief executive job came along I had been looking for a move – possibly within local government, or the NHS, or elsewhere. The PCG job seemed made for me, and moving to the NHS was just great. This job was full of challenges, so with two year's experience I decided that I wanted to keep the job as we became a PCT, and pulled it off. My move to Rotherham as part of PCT reorganisation in 2006 allowed me to continue along this path – and I am now doing the best job I have ever had.

Looking back, it feels to me like a very natural journey, but one that was never planned. The recurring theme is the opportunity to help make a difference – to try to deliver lasting improvement where it is most needed. I think this remains my core motivation.



Chris Butler

4 years as Chief Executive of
Leeds Partnerships NHS Foundation Trust

A chief executive for

6.5 years

Previously

Chief Executive, Kingston Primary Care Trust

In NHS for

31 years

Working for

31 years

First NHS job

Student Nurse – mental health

Main NHS background

Nursing, through to Director of Nursing Services then Assistant Unit General Manager. Joined the Department of Health as Nursing Officer/ Performance Manager. Professional Advisor on nursing issues; DoH's performance manager for 3 NHS Regional Health Authorities.

Appointed in DoH as Assistant Chief Nursing Officer, England. Member of the Senior Civil Service.

Key factors in career success

An absolute belief in doing the best we can for those who use our services.

Faith in the heroic work that staff do every day.

Keeping close to the experience of service users, carers and my colleagues.

Both my parents had mental health problems, which led me to be interested in mental health issues. As a result of this I gained experience of being a carer from a young age.

I trained as a mental health nurse in a large institution providing second-class care for people. I was angry about this but, more importantly, it got me interested in change management and service improvements. I also became interested in what motivates people and what makes organisations tick from a psychoanalytic perspective.

I became involved in my union; this gave me a wider perspective on the politics of health, as well as giving me some great experience in industrial relations. I became a nurse manager almost by accident, I did not really think about it at the time but it was suggested to me by a colleague. It was a good way to begin to put some of my ideas into practice. Working for the Department of Health taught me a lot about what motivates politicians and how national government works.

Coming back out into the NHS has been great, as was going through the Foundation Trust process. I spend as much time as I can close to what we do every day. I try never to ask anyone to do anything I am not prepared to do myself. If I mess up I always own up and say sorry!



Adam Cairns

3 years as Chief Executive of
Airedale NHS Trust

A chief executive for

3 years

Previously

Director of Communications and Corporate Affairs,
Leeds THNHS Trust

In NHS for

25 years

Working for

25 years

First NHS job

Graduate Trainee

Main NHS background

General management, communications, strategy

Key factors in career success

Having a supportive and encouraging boss at the right time who could help refine my experience and provide a route into successful mentoring relationships elsewhere.

Working in a high profile teaching hospital and being able to carry out four significantly different tasks/roles within ten years.

Working for the first time alongside clinical teams as a service manager, enabling me to understand and come to terms with how the world is perceived from this perspective.

Becoming a Chief Executive is to start a journey – a journey that can take you to places you may find uncomfortable and difficult to deal with.

Balancing the safety of your organisation with the need to become more cost effective; holding people to account while ensuring there is a culture that exposes its own shortcomings; negotiating the quality and the risks to quality that emerge on a daily basis, and through it all remaining positive and good humoured and interested in what happens at every level of your organisation.

In the final analysis it was the chance to lead an organisation to be something it needed to be, doing it my way (for better and sometimes for worse!) working with local people and doing it because I passionately believed in what needed to be done. This, and the realisation that safety and cost work powerfully together, as all waste is non-value adding, and non-value adding from a patient experience is always detrimental.

It is still the best job I've ever had.



Ailsa Claire

7 years as Chief Executive of
NHS Barnsley

A chief executive for

9 years

Previously

Chief Executive, Barnsley Health Authority

In NHS for

26 years

Working for

38 years

First NHS job

Manager of learning Disability Hospital (Director level post)

Main NHS background

General management, planning and strategy

Main non-NHS background

Research, social work, planning and development, and general management

Key factors in career success

Being in the right place at the right time.

Taking an MA in health services management.

Not being very determined just to get to the top.
Wanting to do a good job.

I started out in social care, where I rose to senior management posts very quickly and without a real plan. I just wanted interesting jobs and to do them well. I was then a director for 15 years in the NHS having made the decision that I did not want to be a chief executive until I had had children and was in the right place personally. Even so, I could spend 20 years as a chief executive.

I think the time spent at director level has made me an experienced and confident chief executive with a background in both general management of provision and commissioning.



Nigel Clifton

12 years as chief executive of
Doncaster and Bassetlaw Hospitals NHS FT

A chief executive for

19 years

Previously

General Manager – Acute Services ie
corresponding post pre CE roles

In NHS for

34 years

Working for

34 years

First NHS job

National Administrative Training Scheme (NATS)
Scotland

Main NHS background

General administration then General Management
(post-Griffiths, 1986)

Key factors in career success

The opportunity aged 24 to lead the
commissioning of a new district general hospital
in Scotland – and then managing capital-led but
people-driven changes in three more new DGHs
before I was 40.

Managers and clinicians with the patience and
the foresight to teach me about clinical process,
and the need to understand everything that I do
from the perspective of the patient affected by my
decision or actions.

Being a cancer patient aged 27.

My school was next to a hospital for older people. The hospital secretary encouraged pupils to visit regularly to get to know the patients. We still called the hospital the workhouse, because 20 years after the founding of the NHS, it still had all the hallmarks of the nineteenth century.

I realised that hospitals could be made much better than the one that I first knew as a teenager. I also learnt that hospitals were the most marvellously complex organisms, staffed by people from all sorts of backgrounds, all of whom wanted the best for their patients. Leading and influencing high quality care remains an intellectual challenge. Managing hospitals seemed to me the most wide ranging job possible, and my job application to NATS was the only one that I submitted after leaving university in the deep recession of 1974.



Allison Cooke

1 year as Chief Executive of
NHS North Lincolnshire

A chief executive for

12 years

Previously

Regional Director WA Country Health Services

In NHS for

32 years

Working for

33 years

First NHS job

Clerk

Main NHS background:

Finance, general administration, capital and service planning, acute, community, mental health management, primary care and commissioning

Main non-NHS background: Management of country health services in Western Australia

Key factors in career success

My first three line managers, who enabled me to grow and develop into new roles by giving me more responsibility and providing a safety net for me, which meant I could grow and try new experiences.

Being opportunist and taking advantage of things as they arose, so not setting myself a rigid career path to the top. Taking a step at a time sometimes sideways. Twice I've been rung and asked to go and talk to someone about an opportunity which has led to promotion.

A development opportunity linked to breaking the glass ceiling, held during 1993.

I entered the NHS as a payroll clerk from school – girls do 'IHSM' not 'CIPFA' qualifications was the message on recruitment. After 5 years in various finance roles, I took a look at administration and planning, and liked it.

I moved south with a promotion in 1984 to help my husband's job prospects. I moved through the ranks and in 1992 was poached from a health authority purchasing role by an NHS trust as a 'deputy' CEO, and in 1995 became CEO when the incumbent left suddenly.

In 1999 I took a year's supported sabbatical to do an MSc, as NHS acute trusts were merging and PCTs emerging. In 2001 I joined my first PCT as CEO, and in 2005 had three stars awarded. I was approached to sort out a zero-star PCT.

There was a life-change moment with a move to Western Australia at the end of 2006 to a health job, but I returned to the NHS for 2008. The Australian lifestyle was great but I was unhappy with the culture and values of the health service. I returned to a PCT CEO role in a small but challenged PCT.



Brian James

3 years as chief executive of
The Rotherham NHS Foundation Trust

A chief executive for

3 years

Previously

Director of Strategy and Innovation, South Yorkshire SHA

In NHS for

34 years

Working for

37 years

First NHS job

Clerical Officer, Supplies Department

Main NHS background

Supplies, Operational Management, Hospital administration, Commissioning, HR, Information Management/IT, Business Development, Strategy, Modernisation

Main non-NHS background

Sales

Key factors in career success

Being the best I could be at everything I did.

Taking the opportunity to shift jobs every 2-3 years, not always for promotion but for experience.

Always working at the leading edge of health care ideas.

After training as a graphic designer, family illness forced me to run my father's business until it was sold. Not knowing then what to do, I fell into the Health Service by accident – I needed a job!

I started as a clerical officer in the Supplies Department and quickly moved up. My promotions brought me into contact with an enormous diversity of people doing all sorts of jobs, which kindled my interest in pursuing a more formal career in NHS management. The Management Training Scheme was brought to my attention but with a few years experience under my belt I felt I could do something similar using my own initiative. I moved job every 18 months or so, to gain experience, often through promotion but sometimes through a sideways transfer if something particularly interested me. I ended up with a very broad range of experience, and have managed every service and function in the NHS except finance.

Throughout, I have studied the service as well as overseas health systems, acquiring a range of formal management qualifications, eventually achieving a post-graduate degree in Health Information Management. I always aspired to be the best I could be and as a consequence every further job I applied for apart from one, was because someone saw my potential and asked me to apply.

Anyone can do what I have done if they really want to. Although my career path is unusual, it gave me enormous experience in how to run any service or department in the NHS, and ultimately led to becoming a chief executive. Being a natural entrepreneur definitely helps in the current NHS climate, but the real key to success is hard work, determination, ambition and passion for the service.

I really love my job, and have loved every job I have ever had – I always found something in each to inspire me, and have used that inspiration to drive perpetual improvement of both the service and myself. I now have the best job in the world.



Simon Large

2.5 years as Chief Executive of
Bradford District Care Trust

A chief executive for

2.5 years

Previously

Deputy Chief Executive/ Director of Operations

In NHS for

28 years

Working for

30 years

First NHS job

Student Nurse

Main NHS background

Nursing, workforce strategy, capital planning,
performance and strategy, general management

Main non-NHS background

Manual labour jobs

Key factors in career success

Line management support, mentoring, and belief
and trust that I can do a good job.

Personal belief based on judgements from
networking and access to senior managers, and
formal qualifications.

Interpersonal skills, and people interaction
processes developed from mental health nursing
competencies.

My career in the NHS progressed through the clinical route, having training and practiced for 10 years as a mental health nurse. I have been continually driven by a desire to improve the patient experience and a strong belief in public services offering top quality in service delivery. I have always believed in treating everyone the same regardless of their position and background. However, my desire to improve services and 'make a difference' has always led me to challenge injustice and to never suffer fools gladly. I have an inbuilt desire to know a lot of detail about the issues I'm involved in, never wanting to be 'caught out' by not knowing the detail of a subject, but recognising that those around me are the experts. This reality of understanding and being interested in the detail is coupled with a continual questioning of the status quo in an effort to improve.

Personal drive has always been important to my career, believing that we are judged on outcomes and results, and recognising that making things happen in a big bureaucratic system leads to personal satisfaction and recognition.

Learning the art of patience and dogged determination, and not letting go of issues, will always eventually produce results. The most important aspect of my career has been the art of communication used to clarify, challenge and agree the actions and responsibilities of those around me. Using a logical and project management approach is very important.



John Lawlor

3 years as Chief Executive of
Harrogate and District NHS Foundation Trust

A chief executive for

3 years

Previously

Director of Service Development/Deputy Chief Executive

In NHS for

14 years

Working for

24 years

First NHS job

Assistant Director of Commissioning

Main NHS background

General Management

Main non-NHS background

Secondary School Teacher, Government Statistician, Civil Servant

Key factors in career success

Being a probationary school teacher in a secondary school in a South Yorkshire pit village during the coalminers' strike in 1984/1985. This character building experience brought me out of my shell and it made me even more committed to wanting to make a difference in society.

Working as a civil servant in the Departments of Employment, and of Health, working with ministers and the policy-making process. This helped hone my political awareness, influencing and presentation skills. It has also helped me 'make sense' of things when new policies come out to the NHS.

Working in an acute trust, learning about the NHS, its culture and how to motivate clinical and managerial staff to bring about change and to work with local people to improve services often in the face of political and public opposition.

My career path to becoming a chief executive in the NHS has been somewhat convoluted. I started off life as a school teacher, teaching maths to 12-18 year olds. This was the career I had always wanted as a child and despite the best efforts of several of my own teachers to put me off I made it and stayed at it for five years!

By the late 1980s, however, I became somewhat discouraged by the role, largely by the rock-bottom staffroom morale and, ironically, by the perceived level of top-down control.

So at the age of 26, I took myself off to the Careers Service in Sheffield and asked for their help in choosing a new career. I applied to join either the Government Statistical Service or to become a trainee Tax Inspector and, I am pleased to say, it was the former that I moved into. This was a key point in my career, as I became the statistician with responsibility for collating and publishing the monthly unemployment figures based in London. And as a result, I had significant contact with Ministers and the media.

I then joined the Department of Health in 1992, largely as a result of their decision to move north, with the opening of Quarry House in Leeds. This was my first foray into the health service and, as they say, the rest is history.



Jane Lewington

1.5 years as Chief Executive of
North East Lincolnshire Care Trust Plus

A chief executive for

9 years

Previously

Chief Executive of North East Lincolnshire PCT

In NHS for

27 years

Working for

28 years

First NHS job

Clerical Officer – Outpatients and A&E reception

Main NHS background

Administration and general management across a wide range of sectors within the NHS

Main non-NHS background

Sheltered housing

Key factors in career success

Being able to obtain posts in a wide range of health sectors and therefore having wide experience of the health system.

Being part of the Yorkshire Region GMTS 2 programme in the 1990s, which included an MBA programme.

Working with managers who supported my development in the job.

When I started in the NHS it wasn't my ambition to become a chief executive, but I was actively seeking roles with greater responsibility that could add to my understanding of health care. I have been very fortunate in meeting the right people at the right time in my career, and the leaders I remember are the ones who gave me the opportunity to stretch in the role and the motivation to want to do more.



Chris Long

2.5 years as Chief Executive of
NHS Hull

A chief executive for

7 years

Previously

Chief Executive West Hull PCT

In NHS for

18 years

Working for

30 years

First NHS job

General Manager Acute Services

Main NHS background

General management, Senior Civil Service level in the Northern and Yorkshire Regional Office

Main non-NHS background

The Army for 12 years as an infantry officer
1979–1991

Key factors in career success

The training and experience received during 12 years in the Army.

Working in the Regional Office allowed exposure to the political dimension of NHS life.

Knowing when to keep quiet and listen, and being aware that the 'expert' in any area isn't always the most senior person in that area.

I joined the Army in 1979, and was commissioned in 1980 into an infantry regiment. I saw service in a variety of theatres around the world, including a lot of Northern Ireland, and front-line service in the Gulf War.

I left the Army in 1991, and found my way into the NHS through a series of accidents, coupled with a total ignorance about civilian life. I have thoroughly enjoyed my time and the work. I started my NHS career in hospital management, and always assumed I would rise through the ranks in that environment – typical acute sector arrogance! However the creation of PCTs seemed to offer much broader opportunities, and I was appointed to my first PCT CE job in 2002 with Hambleton & Richmondshire PCT in North Yorkshire.



Steven Michael

2 years as Chief Executive of
South West Yorkshire Mental Health NHS Trust

A chief executive for

2 years

Previously

Deputy Chief Executive

In NHS for

25 years

Working for

25 years

First NHS job

Student Nurse

Main NHS background

Nursing, General Management, Clinical Leadership, Strategy (Regional)

Main non-NHS background

Not for profit sector

Key factors in career success

A good range of experience in a variety of settings including: clinical, managerial and strategic – accepting challenges and learning through experience.

Good mentorship at all points in my career, pertinent to individual learning and support needs.

A well-structured personal development plan including external courses, both formal, academic and 'on the job' learning, backed up by regular appraisal including 360o.

Effective relationship management and an ability to network across complex organisational and political boundaries.

My career began in clinical settings, but moved to a managerial role by a process of natural progression rather than specific design, though well-structured personal development has been crucial in guiding my career choices. A genuine interest in organisations has driven me to take on increasingly demanding roles. Linked to this is a passion to make a real difference to the lives of service users, through improvement in direct service provision, and exerting positive influence on policy and strategy at local, regional and national level.

Lifestyle factors, including personal ambition, have been a driver, but the main one has been a wish to influence and find solutions to challenging problems. The Chief Executive role came at a time when I felt right to handle the level of accountability, having prepared consciously for this for a period of five to six years.

As a chief executive I believe strongly that you not only have to be able to do the job, but find genuine enjoyment and a sense of privilege in accepting the responsibility.



Mike Potts

2.5 years as chief executive of
NHS Kirklees

A chief executive for

8 years

Previously

Chief Executive Doncaster West Primary Care Trust

In NHS for

35 years

Working for

37 years

First NHS job

Clerical Officer Gateshead Health Authority HQ

Main NHS background

General Admin and Clerical posts, Health Authority HQ and Human Resources functions. Acute hospital management at junior, middle and senior levels.

Strategic planning across health and local authority.

Primary care management.

Main non-NHS background

Accounts.

Key factors in career success

Using my own initiative to arrange a job swap with a colleague, which allowed me to gain some experience of working in an acute hospital. Once I had secured this swap, within 6 months I had obtained a post of Unit Administrator managing three small acute hospitals on the Wirral.

Being given the opportunity for further study to obtain my professional IHSM Qualification and to study for a Masters in Business Administration.

Having bosses that gave me the opportunity for new and challenging work experiences and supporting me to do work outside my immediate organisation, which broadened my horizons and raised my profile and reputation.

I joined the NHS in April 1974 as a clerical officer, not as part of any pre-determined career plan but following conversations with people I knew who worked in the service and enjoyed their work. I was soon attracted to working in an acute hospital and became determined to move into this sector of the NHS. I began my studies to obtain the required qualifications and to secure the relevant experience to achieve my aspiration. Despite securing interviews and getting positive feedback on my performance, I was always told I had no acute hospital experience. A key turning point was securing a job swap with a colleague working in an acute hospital in the same authority. Within 6 months I had secured a post of Unit Administrator managing three acute hospitals on the Wirral.

I worked my way up the management ladder gaining experience in a range of hospitals and job roles and acquiring additional academic qualifications and training and development, which culminated in becoming a director and deputy chief executive of an acute hospital in Yorkshire.

I was then asked if I would work with the new Chief Executive of the Health Authority who had been brought in to move the local mental health service out of special measures. This role gave me valuable experience in working across health and local authority services. I was then asked if at the same time I was undertaking my substantive role I would also set up one of the local Primary Care Groups. This was a fantastic opportunity and although personally demanding, I was up for the challenge, and gained some fantastic experience in sectors with which I had previously been unfamiliar. I saw great opportunities in primary care and the potential developments in commissioning, and decided to move into this area of work. I was appointed to my first Chief Executive post in 2001 and am now in my second Chief Executive role.



Miles Scott

4 years as Chief Executive of
Bradford Teaching Hospitals NHS Foundation Trust

A chief executive for

8 years

Previously

Chief Executive

In NHS for

20 years

Working for

20 years

First NHS job

General Management Training Scheme

Main NHS background

General Management, Strategy & Planning

Key factors in career success

Working for Chief Executives who were interested in developing people.

Variety of experience (acute, community, mental health, regional office, King's Fund).

General Management Training Scheme.

I joined the NHS at the end of my degree to get a good management training. I found that I really enjoyed it, and as a result have stayed with the NHS ever since.

I have managed to work in most sectors including acute, community and mental health services, and have learned a great deal from each.

I have been lucky to have had some great bosses and outstanding colleagues who have given me the support necessary to build a rewarding career. Being encouraged to gain experience, try new things, develop networks and take a few risks, have been hugely important. It's then down to you to make the most of the opportunities on offer.



Jan Sobeiraj

2.5 years as Chief Executive of
NHS Sheffield

A chief executive for

12 years

Previously

Chief Executive of a Foundation Trust

In NHS for

18 years

Working for

32 years

First NHS job

Deputy Director of HR in a hospital

Main NHS background

HR, Contracts, strategy, service improvement,
development

Main non-NHS background

general management

Key factors in career success

Support and opportunities from my line manager.

Taking an MBA opened my eyes and gave me skills.

A supportive family, through long hours and home moves.

I did not have a master plan to become a CEO but just got to a level and thought I could offer more. Various bosses have been really supportive, found opportunities and gave me space to develop. I also took risks such as joining the NHS from housing without any knowledge.

Being close to senior people has really helped: shadowing, networking etc. so I could see what the job really looks like. I could assess whether I could add value.

Finally it's been quite fun – helping shape policy, national influence, controlling yourself –there is a real sense of freedom, which has been a great incentive.



Julia Squire

2 years as Chief Executive of
Mid Yorkshire Hospitals NHS Trust

A chief executive for

10 years

Previously

Chief Executive, Northamptonshire PCT

In NHS for

22 years

Working for

22 years

First NHS job

Management Trainee

Main NHS background

General management

Key factors in career success

The management training scheme.

Working in good SHAs!

Shadow one.

I joined the NHS as a graduate management trainee in 1987, for two reasons. On the 'Milk Round' I met an inspirational Chief Executive (UGM in those days) who was passionate about general management and the difference it can make to doctors and nurses' ability to provide good care. Also, my first career choice was the Prison Governor's Training Scheme, but I wasn't old enough to apply – you had to be 23 then! As a management trainee I worked for three different, excellent, ambitious for the service and challenging, chief executives, in Doncaster and Sheffield. I became hooked on the NHS.

I worked as a general manager in various posts across acute, community and mental health services, in a first wave NHS Trust, then as a commissioner when health, not just illness, became important. As a commissioner in Leicestershire I worked for a superb DPH and we did some really interesting work on health inequalities and disease-specific contracting long before they became nationally important.

I moved to my first Director's post at a combined community/learning disability and mental health Trust, with responsibility for a mental health and learning disability re-provision programme which was a mixture of public and private funding. I then moved to become a PCC, then first wave PCT Chief Executive Officer at a groundbreaking PCT, where I stayed for five years in a post which became a heart and soul job for me. Many Chief Executives do not get an opportunity to set up services and organisations from scratch and to make real innovative changes. I was lucky.

I then moved back, from my last maternity leave, into the acute sector in Kettering and from there to a large acute Trust with a troubled history in Yorkshire, which is enormously challenging, great fun and hugely fulfilling working with Yorkshire's best.



Kevan Taylor

7 years as Chief Executive of
Sheffield Health and Social Care NHS Foundation Trust

A chief executive for

7 years

Previously

Executive Director, Planning

In NHS for

16 years

Working for

27 years

First NHS job

Nursing Assistant

Main NHS background

FHSA Primary Care development, Planning, and as
Chief Executive

Main non-NHS background

Social Worker, Social Services Planning

Key factors in career success

A sense of belief in me from others. Initially from my parents – pushing me to do well. Then from senior managers when I was very junior, and they gave me encouragement and support.

Experience of being a mental health practitioner. Understanding what motivates people and groups, understanding and not being phased by the dynamics.

An innate sense of drive – whether that be work or managing my son's football team!

I didn't set out in life to become a CEO – I sometimes think planning is what people do as life happens to them. I come from a traditional working class background – very loved, but my mum could not read or write, so education was very much respected as the way to 'get on'.

Because of my background there was a sense of needing to 'prove myself'. Gradual realisation over the years that the best way to leave the world a better place than when you joined it (which is what my parents expected!) was to get sufficient authority to make a difference on a bigger scale.



Sandra Taylor

1.5 years as Chief Executive of
Barnsley Hospital NHS Foundation Trust

A chief executive for

15 months

Previously

Executive Director Joint Commissioning

In NHS for

7 years

Working for

35 years

First NHS job

Executive Director Policy and System Reform

Main NHS background

Executive Director level; Strategic Health Authority; PCT; and now acute Trust CEO

Main non-NHS background

University Lecturer (Hull and UCL) then Local government, initially unqualified SW, then after multiple roles ended as Director of SSD for Nottinghamshire, Leicester and Birmingham

Key factors in career success

A mother who had limited life opportunities and a very disadvantaged childhood encouraged me to 'get a good education, qualifications and job and not be reliant on a man'.

A number of teachers and school friends parents who opened my mind to different lifestyles and opportunities (I went to a girls' grammar school and met lots of friends with professional parents) who encouraged me to go to university as I was very bright.

Life events led to my accepting a lot of 'risks' in taking difficult and challenging jobs.

I was an only girl in a family of six boys in a mining family. The expectation was that I would get married and have children and that it was a waste of time my being educated. My mother sought to encourage me to aspire for more than this.

She was unhappy and had mental health difficulties, which resulted in her early death and my looking after my younger brothers throughout my teenage years. I wanted to have a life, and fought to go to University, which I finally did. I did well and went through to a doctorate and to become a university lecturer.

I became aware that I wanted to give something back to the communities and families I had come from.

I changed direction and became an unqualified social worker on very disadvantaged estates in North Nottinghamshire. Over a number of years I did numerous jobs (child protection; mental health etc.) and finally ended up as a senior manager and then Director of Social Services in some of the largest and most challenging authorities in the country.

A combination of my father being diagnosed as terminally ill, some serious health problems for myself requiring extensive surgery, and the decision of government to separate children and adult social services (which I disagreed with, and still do) led to me deciding to leave social work, take some time out, work as an interim manager/consultant to allow me time for surgery and time with my dad.

It so transpired that all the work that came up was in the NHS and this led to my finding myself on a path to my current role. I didn't plan my career, and have taken jobs that I really wanted to do and that have interested and inspired me and fulfilled my need to feel I am making a difference.



Rob Webster

2 years as Chief Executive of
NHS Calderdale

A chief executive for

2 years

Previously

Department of Health

In NHS for

2 years

Working for

19 years

First NHS job

Chief Executive

Main NHS background

Chief Executive

Main non-NHS background

One year secondment as Director in the Prime Minister's Delivery Unit. 16 Years in the Department of Health in a variety of senior roles. These encompassed Strategy, the NHS Plan, Primary Care, Workforce, Finance and Efficiency, Service Improvement, Performance, Regulation, Estates, Dentistry International and Statistics. Also experience as an Executive Director of a national Public Private Partnership.

Key factors in career success

People I have worked with who have inspired or challenged me.

I came into the Department as a Fast Stream Statistician in 1990. I then benefitted from being on the first cohort of the High Potential Development Scheme – a programme for people who have the potential to be permanent secretaries of national Departments of State.

Taking risks around career moves and doing difficult, unpopular or demanding jobs.

Being a PCT Chief Executive in the NHS is a fantastic job. My career in the Department of Health involved a broad range of leadership, policy and delivery roles. These brought me into close partnership with the NHS on a daily basis, including sometimes being responsible for NHS staff within Directly Managed Units. When the Labour Government came into power in 1997, there was a step change in the way in which the Department engaged with the NHS – with much greater intervention and clarity on performance, delivery and clinical governance required.

This was a shock across the system. I was fortunate to work very closely with Ministers, Special Advisors, senior officials and NHS managers on the NHS reform programme that became the NHS Plan. In 2000, I took up a leadership role in primary care. As well as ensuring delivery of a transformational agenda, I was a big advocate of the changes that drove shifting the balance of power and the role of primary care and PCTs. These appeared to me to have the potential to drive the reforms that would deliver a new NHS.

In 2004, I became Director of Workforce at DH, ensconced in leadership, workforce development and people management. At the same time, I was fortunate to be selected for the Whitehall scheme for people with the potential to become a permanent secretary. These experiences consolidated my desire to become a chief executive in the NHS.

Following a stint in the Prime Minister's Delivery Unit, I was fortunate enough to be successful in securing my current role. This allows me to fulfil my underlying ambitions: delivering significant improvements in the health and lives of local people; developing a world class workforce in an organisation where people truly matter; and being challenged every single day.



Alan Wittrick

2.5 years as Chief Executive of
NHS Wakefield District

A chief executive for

3.5 years

Previously

Acting Chief Executive, South Yorkshire SHA

In NHS for

17 years

Working for

35 years

First NHS job

Director of Finance, Doncaster HA and FSHA

Main NHS background

Finance, and general management

Main non-NHS background

Finance, Information/statistics, management consultancy

Key factors in career success

A variety of positions and organisations. I worked in two blue chip companies prior to the NHS. This included an eight year spell as a management consultant where I must have worked for over 30 companies and public sector organisations, seeing a variety of organisational styles and reacting quickly to a variety of situations. I had to deal with a huge range of organisational styles, issues and situations.

Personal support and coaching. Throughout my career, I have been fortunate in seeking out and working with a variety of coaches/mentors and colleagues who have 'helped me on my way'. This was essential to my personal development.

Volunteering to take on responsibilities and working hard. I always took up opportunities even when inconvenient or affecting family life through relocation, long hours, trips overseas, speaking opportunities and leading extra pieces of work.

Following an abortive start with a job as a statistician, my career effectively started when I was accepted onto the blue chip general management training programme with Unilever plc. This was excellent and supported me in getting a professional qualification as an accountant and provided wide ranging exposure to manufacturing, marketing, and financial aspects of running a large commercial enterprise.

In order to get lots more experience in different organisations, I decided to become a management consultant and worked for Price Waterhouse for eight years in general, financial and NHS consulting. This was an excellent job move and provided a strong basis to move into an executive director role. I left eventually for social and personal reasons (too disruptive to family life) to move into the NHS at director level. I spent about 14 years as a director of finance at three levels, becoming more knowledgeable, confident and competent in three different organisations.

I had not really considered becoming a chief executive until I was approached by an experienced chief executive and asked to do an acting chief executive role. This was challenging but enjoyable and I decided to apply for a substantive role in my own right when the opportunity arose. I was successful at this and have consolidated my position and grown even more into the role over the past three years.

One critical issue is that I did not fully understand what being a chief executive involved until I became one. It is important that we try and let aspiring chief executives know what it is really like and what the role entails – both good and bad points. This should include the impact on personal life, and the pressures of the role, as well as the opportunities, excitement and job satisfaction that can be realised.



Diane Whittingham

8 years as Chief Executive of
Calderdale and Huddersfield NHS Foundation Trust

A chief executive for

12 years

Previously

Chief Executive Huddersfield NHS Trust

In NHS for

32 years

Working for

32 years

First NHS job

Clerical Officer

Main NHS background

General Management, HR, Strategy, mental health, primary care, acute

Key factors in career success

I had a really good mentor at a key stage in my career. He championed opportunities for me, opened doors and generally supported my development. I attended a development course for aspiring Chief Executives and was introduced to Action Learning. I began to understand the difference between transactional and transformational management and leadership.

Doing several really difficult, busy jobs early in my career, I made many mistakes, learnt a great deal, and discovered how to thrive in the NHS.

Keep energised, fresh and retain a sense of perspective, have external interests take regular breaks and network, network, network.

During the first half of my career I moved around the country working in acute, mental health, and primary care organisations. I wanted to obtain the broadest based experience I could and develop a wide knowledge of the NHS and how it worked. It was not a career plan I was just curious about the NHS and I particularly enjoyed working with doctors. In the mid 1980s I was appointed to my first deputy CEO post. I held 3 Deputy posts moving into increasingly bigger Trusts. I had no desire or ambition to be a CEO but when I had been in my 3rd Deputy CEO post for 6 years I realised that I had to take a major decision and either move into a CEO post or build an alternative career.

To be honest I didn't make a positive decision to become a CEO, but one day I saw an advert for a CEO post – it was to manage acute, mental health and primary care services – I thought it had been written for me. It was the first CEO advert that had interested me, I applied, and was offered the post.

It was opportunistic, and unplanned. Although the job was challenging and I never regretted my decision, I cannot say that I enjoyed my first six months. I sometimes felt isolated and I missed being part of a Director team. But I quickly discovered the scope I had to effect change, to establish a successful culture, and to build an excellent organisation. A challenge I did not underestimate but one I relished. Twelve years on and I am still here. Why? Because I have never seen another job I would rather do ... I suppose that says it all really.

If you are passionate about the NHS and believe that it is a privilege to work in it you are off to a good start.

For further information, please contact:

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