



PCRS Chief Executive: Information regarding the Society, how we work, the Chief Executive position and the principal tasks

The Primary Care Respiratory Society: Who are we?

The Primary Care Respiratory Society (PCRS) is a registered charity and membership organisation which is looking for a dynamic CEO to work with its enthusiastic and highly motivated Executive Committee and Trustees. PCRS is the UK-wide professional society which supports any health professional working within a community or general practice setting who aims to deliver high value patient-centred respiratory care. The PCRS has grown and evolved continually over the last 30 years into a highly successful multidisciplinary organisation speaking on behalf of primary and integrated care in respiratory medicine – and as such is now a major force in respiratory healthcare in the UK.

Our ultimate vision is “high value patient-centred (‘optimal’) care available to all people with lung disease now and in the future”.

The Society actively influences policy both independently and in conjunction with others, is active in promoting high quality research, co-produces a well-respected scientific journal, and organises regular educational and scientific meetings including a very popular Annual Conference.

To achieve our vision, we undertake numerous activities including:

- Campaigning to influence policy and the setting of standards in respiratory medicine, relevant to populations nationally and locally.
- Educating health professionals working in primary and community settings to deliver and influence respiratory care through open access to succinct best practice, evidence-based clinical guidance and resources.
- Promoting and disseminating real life respiratory research relevant to population health needs that supports policy and education activities, including through our scientific journal, *npj Primary Care Respiratory Medicine*, published in conjunction with Nature Research.
- Describing how to deliver value-based healthcare that provides a better patient experience which is clinically effective and safe, and disseminating this to support service development and re-design.
- A committed and engaged membership network providing mutual support enabling professional development to support the provision and commissioning of high value, patient-centred care.
- Strong communication mechanisms allowing us to reach out to:
 - Respiratory-aware and interested colleagues – through our annual national primary care conference (attracting 300+ delegates), our membership magazine Primary Care Respiratory Update, our fortnightly In Touch newsletter, and our on line Community forum.
 - The wider generalist primary care health professional audience through the Primary Care Respiratory Academy Clinical Platform and Pharmacy Platforms*, an educational initiative developed in partnership with Cogora the publisher of Pulse and Nursing in Practice.
 - Those responsible for commissioning and providing services through the Primary Care Respiratory Academy Commissioning Platform*, a workshop series and forum for commissioners and provider managers also developed in partnership with Cogora, the publisher of Healthcare Leader.



We are the only professional society dedicated to integrated respiratory care in 'out-of-hospital' settings where most people with respiratory conditions are treated. PCRS is also the only respiratory organisation working with general practice and primary care networks – the major customer groups for most companies interested in respiratory medicine.

We have a multidisciplinary membership of over 1000 respiratory interested generalist and respiratory specialist health professionals (18% GPs; 33% general practice nurses; 26% respiratory specialists – nurses/doctors /physiotherapists; 11% pharmacists; 12% non-clinical researchers/NHS managers/other). The profile and reputation of the PCRS as the organisation representing primary care in respiratory medicine is well established. The expertise and insights we provide through our active and committed multi-disciplinary membership is frequently sought by NHS England, the NHS LTP Board, NICE, NHS Right Care, and other organisations involved in the development and implementation of national policy and guidance for respiratory care. Working in close collaboration with the British Thoracic Society (BTS), British Lung Foundation (BLF) and Asthma UK, as well as the RCP, RCGP and others, PCRS continues to be in a strong position to influence standards, policies and initiatives relevant to respiratory care.

PCRS's main funding sources are pharmaceutical industry sponsorship, income from the Annual Conference, and membership fees . Further information can be found in the [trustees annual report](#)

** The Primary Care Respiratory Academy is an educational initiative developed by Cogora, the publishers of Pulse, Nursing in Practice, Healthcare leader and The Pharmacist working in partner with PCRS.*

PCRS : What is our structure and how are we organised?

PCRS is a registered charity and company limited by guarantee. It is a membership organisation. Formal company (or 'voting') membership is open to any healthcare professional involved in the management of respiratory disease in primary care in the UK, whilst ordinary membership through our paid subscription scheme is open to anyone.

The structure and organisation of PCRS is slightly unusual compared to many other charities, professional societies or businesses for a number of reasons exemplified in the detail provided below. Whilst 'quirky' in its nature, in the view of its Trustees and members, PCRS operates not only professionally but also efficiently and effectively and is able to deliver to a high standard at least on a par with many other comparable organisations.

PCRS is governed by its Board of Trustees, supported by an expert committee (the PCRS Executive) and the Chief Executive (CE). The CE is the only employed member of staff. The Chair of the PCRS Executive is a paid position (circa 0.5–1 day per week); the post-holder is paid under PAYE and is regarded as a 'worker' under employment/pension legislation – and like the CE is considered as 'key management personnel' under the SORP accounting framework.

The CE and PCRS Executive Chair are both accountable to the Board of Trustees and work together to support the Trustees in fulfilling their obligations to lead and manage the work of the Society. The Chair of the PCRS Executive is an elected Executive member and brings the healthcare professional, NHS, primary care and respiratory expertise to the Chair/CE partnership. The CE brings the business expertise (i.e. organisational, management, marketing, communications, planning, project management, financial and regulatory expertise) to the partnership. The work is split between the CE and PCRS Executive Chair to reflect their



respective skill /experience bases and time available for the role, with the Executive Chair role being primarily one of leadership whereas the CE role is primarily a management role taking the lion's share of responsibility for implementation.

PCRS has a long-term and close working relationship with an agency, Red Hot Irons Limited (RHI), which is contracted to run the day-to-day operations of the organisation. Red Hot Irons is a small agency specialising in providing operational support for professional societies and other not-for-profit organisations. PCRS is their main client. RHI services to PCRS include secretariat and administrative support, book keeping, event management, data base/website management, production of educational materials/publications and general project management. Two additional freelance consultants are currently contracted by PCRS to coordinate policy work and provide communications support on a very part time basis (less than one day per week each).

The PCRS Executive is comprised of 12 elected members, and has the power to co-opt up to 4 additional members as needed and to appoint leads and sub-committees as appropriate to fulfil its terms of reference. The leads, along with the PCRS Executive Chair and the CE, are regarded as key management personnel and are remunerated for the work they undertake – paid through PAYE (where PCRS contracts directly with the individual) or via reimbursement of the host organisation (where the contract is through another organisation).

All members of the PCRS Executive must be formal company members of the PCRS and all have expertise in respiratory medicine in primary or community care. The Executive, led by the PCRS Executive Chair, and supported by its appointed leads and sub-committees, formulates recommendations on the aims, strategies and activities of the charity for approval by the Trustees. The Chief Executive, alongside the PCRS Executive Chair, supports the Executive in the implementation of the charity's activities and supports the Trustees on governance matters.

PCRS operates as a virtual organisation with the majority of the CE's work conducted via email, telephone or video conferencing. Face-to-face meetings of the PCRS Executive and its sub-committees are held once a year but business is otherwise conducted via email, video conference or other virtual means. Most committee meetings, except any held in conjunction with the annual conference, are held in London due to its UK-wide ease of access and the fact that most of the Society's stakeholder/corporate supporters are based in London or the south-east.

The Society uses the open source civi CRM system and Drupal website systems. Whilst Red Hot Irons has an IT server, PCRS does not. RHI uses the Wrike project management system to which the CE and long-term PCRS consultants have access for the purposes of PCRS activities.

The Society's official Journal *npj Primary Care Respiratory Medicine* is jointly owned by the Society and Springer Nature. Under the agreement with Springer Nature, which came into effect on 1 April 2014, and automatically renews each year for a further 12 months unless either party gives notice, Springer Nature and PCRS are jointly responsible for agreeing the budget for the Journal, appointing the Editors, and for operational decisions through a Joint Management Committee (JMC) comprised of equal numbers of PCRS and Springer Nature representatives. Net profit from the Journal is shared equally between the partners. Springer Nature is responsible for publishing the Journal and in the event of a net financial loss in any one year bears the cost.



The Society also has an agreement with the International Primary Care Respiratory Group (IPCRG) that sets out the terms under which the Journal is published and the journal is then marketed as the official Journal of the IPCRG. One of the three PCRS places on the JMC is allocated to the IPCRG.

PCRS: What is our strategy and what are our plans for the next few years?

Our strategy is to continue to develop as a multidisciplinary integrated care society, focused on developing a holistic high value patient-centred approach to caring for people with respiratory conditions, and bringing together professionals from across boundaries, offering them a welcoming, supportive and non-hierarchical community.

Our plans are underpinned by;

- A committed and engaged multidisciplinary membership of respiratory-interested generalist and respiratory specialist health professionals working within general practice or other community settings, who provide the bedrock of the organisation and our unique respiratory expertise
- Building strategic partnerships, which allows us to reach out to wider audiences and increase our impact:
 - The wider generalist primary/community care professional audience
 - Those responsible for commissioning and providing respiratory services
 - A global scientific community and audience of academic researchers.

Our clinical focus will continue to be on the respiratory diseases seen most commonly in primary/community care combined with a holistic/patient-focused approach.

Our business priorities remain as:

- Influencing national policy, setting standards and providing pragmatic guidance
- Supporting the professional development and “lifelong learning” of our members, thereby fuelling their passion for, and expertise in, respiratory care
- Reaching out to and educating the wider generalist primary/community care audiences
- Supporting effective commissioning/respiratory service provision
- Promoting and encouraging 'real world' research to generate the evidence of what works and how to implement it
- Campaigns on focussed topics to galvanise thinking, engage members and drive change.

Digital marketing will continue to play a key role across all our work in 2020, enabling us to identify and nurture our most engaged users to further build the PCRS community.

To achieve these plans the Society needs to be financially strong. Like other membership organisations, achieving optimal financial stability is a challenge, and relationships with the pharmaceutical industry are changing but maturing. The Society’s reserves are currently good but the Trustees are aware that income will have to be maintained if the current level of exciting and vital activities is to be continued.



PCRS Chief Executive: What are we looking for?

Chief Executive Job description

1. **Job title** Chief Executive
Reports to: The Board of Trustees

2. **Purpose of the job:**

Working in close collaboration with the PCRS Executive Chair (and PCRS Executive)

- I. Support the Board of Trustees to ensure that the Society has a relevant and clearly articulated mission and strategic plan, and that the Board can fulfil its governance responsibilities
- II. Be responsible for the management and administration of the organisation in the execution of the Board of Trustees' policies and strategic plan

3. **Principal tasks**

I. **Working with the Board (supported as appropriate by the Chair of the PCRS Executive and the PCRS Executive):**

- a) Support the Board in formulating and regularly reviewing the Society's mission and strategic plans
- b) Ensure appropriate presentation and reporting to the Board on the progress of the organisation on all matters relevant to the discharge of its responsibilities
- c) Support the Board of Trustees to ensure that appropriate risk management (financial, reputational, regulatory and other) framework, policies and systems are in place to ensure effective governance of the Society
- d) Monitor and advise on any constitutional or organisational change that would enhance the effectiveness of PCRS
- e) Take responsibility to ensure the organisation discharges its constitutional and legal obligations, seeking input from the Trustees and professional advisors as appropriate
- f) Ensure that an annual calendar of meetings of the Board of Trustees is in place, and in conjunction with the Chair of Trustees, to develop appropriate and relevant agendas for each meeting. Ensure accurate minutes of all Board meetings are recorded.
- g) Work with the Society's appointed auditors and accountants to ensure that statutory accounts and report of the Trustees are developed, audited and signed off in a timely manner for presentation at the AGM
- h) In conjunction with the Trustees and the Chair of the PCRS Executive, ensure that the organisation has the structures, systems and processes in place to operate as effectively and efficiently as possible
- i) In conjunction with the PCRS Executive, and working appropriately with its Chair, be responsible to the Trustees for the overall financial health of the organisation, ensuring that expenditure is controlled in line with budgets as approved by the Board
- j) Supported by the PCRS Executive, keep under review and where appropriate appraise the work of staff, contractors, Executive members and other volunteers to ensure the business plan is delivered to time, budget and to agreed standards

II. **Managing the organisation (jointly with the Chair of the PCRS Executive) :**

- a) Ensure that a long-term strategy and annual plans/ budgets are developed and approved by the Trustees



- b) Be responsible to the Trustees for delivery of the annual business plan – to time, on budget and to the agreed standards – in line with the PCRS’s mission, strategic framework and policies
- c) Enable the organisation to articulate its corporate philosophy and value base, ensuring that these are consistently applied across the organisation
- d) Secure the funding required to achieve the long-term strategy and annual business plan of the organisation. I.e.;
 - a. Develop and maintain effective relationships with current and future Corporate Supporters
 - b. Ensure that appropriate contracts and a clear audit trail is in place for all funding agreements
 - c. Regularly review new sources of potential funding and keep the Trustees apprised accordingly
- e) Ensure the appropriate agreements are in place with all staff, contractors and volunteers:
 - a. to support delivery of the business plan, to time, on budget and to the agreed standards
 - b. for fulfilment of the Society’s mission, strategic plans and legal /constitutional responsibilities
- f) Maintain effective networks and relationships with supporters and stakeholders
- g) Regularly review and seek opportunities to expand and promote the role of the organisation
- h) Involve and consult with the PCRS membership on relevant matters as appropriate to fulfil the Society’s mission, strategic direction and business plans

III. Promotion of the organisation

- a) In conjunction with the Chair of the PCRS Executive, ensure the organisation is presented in an appropriate and professional manner to its members and other stakeholders
- b) Support the Chair of the PCRS Executive in ensuring the continued engagement/involvement of the Executive and other prominent members of PCRS.

IV. Securing income from the pharmaceutical/ healthcare industry

PCRS has enjoyed excellent relations with the pharmaceutical industry over the years whilst maintaining absolute independence. Times are changing, but maturing, and corporate relationships remain important (see final desired attribute below)

What Experience Skills and attributes are we expecting?

Person Specification

Key Skills, Experience and Attributes

- Knowledge and understanding of the healthcare system – in particular primary care and an understanding of respiratory medicine
- Proven track record of leadership in a similar organisation
- Ideally experience of working with health professionals
- Proven track record of developing and implementing strategic plans – ideally in a charity, professional society, healthcare organisation or pharmaceutical company
- Strong understanding of financial management within a similar organisation
- Strong customer (membership) orientation coupled with strong commercial acumen



- Ideally, experienced at working in a small, growing organisation and fully committed to operating with very limited budgets / resources – enjoys taking a pragmatic approach
- Strategically aware with good analytical and planning skills: grasps the critical issues, understands the wider implications and can distil out clear manageable priorities
- Experienced leader and people manager, with flexible style: prepared to support and where necessary lead / manage the clinical lead / working party members
- Excellent project manager, with strong planning skills and able to inspire / motivate people with a wide range of skills / experience and hold them to account for their promises – delivers on time and to plan
- Self-starter and self-reliant, able to work flexibly and to fit in with the time constraints on others – be comfortable working virtually with the necessary level of IT competency
- Politically astute, with high achievement standards, a ‘can do’ attitude, and strong interpersonal / influencing skills
- Dynamic, enthusiastic, creative, articulate with flexible, collegiate style and sound literacy and numeracy skills
- The financial situation faced by societies like the PCRS can be challenging and the appointee will enjoy such challenges, have experience of the Health Service and Pharmaceutical Industry, and expertise and experience in the organisation and financial controls necessary to maintain a range of activities similar to those currently being undertaken by the PCRS.

PCRS Chief Executive: The contract

This is a home-based role with flexible working conditions. The post is offered as a Full time Post on a 12 month contract with a salary in the range of £80k to £90k. Applications would also be welcome from those wishing to work part time (minimum 3.5 days per week, or from those wishing to undertake a job share. The appointee may be based anywhere within the United Kingdom but some travel to meetings and Conferences is necessary. Benefits include pension contribution and funding of ACEVO membership.

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