# Chair recruitment: Why did you become a board chair video

Transcript for the support for the “Why did you become a board chair?” video.

**SPEAKER:** Sarah Compton-Bishop, Chair, NHS Highland

**>>SARAH:** Hi, I'm Sarah Compton-Bishop, I'm chair of the board of NHS Highland. I'm just gonna talk to you for a few minutes about why I wanted to become a chair and what the role is like.

**>>SARAH:** So, before I became the chair, I was a non-executive on the board for a number of years, and what motivated me to become the chair was really what motivated me to join the board in the first place.

**>>SARAH:** My background is in the third sector, specifically working with communities in rural and island areas to design, develop, deliver projects in their local area. I've always been interested in policy and strategy and how we link what's happening at a national, regional level to what we experience in our communities. And I'm really interested in health and wellbeing and got a strong kind of civic sense of duties.

**>>SARAH:** So, all of those things that made me want to be part of the board had grown, I suppose as I'd seen the work of NHS Highland. And when the opportunity came up to apply to be the chair, it felt like a natural progression.

**>>SARAH:** I did stop and think before I applied. I gave it a lot of consideration. I knew it would be a big step. There is quite a leap between being a non-executive and being a chair. But fundamentally, my values that had, I suppose really led me to being a non-executive and made me enjoy the role so much was still true. So, I took the chance. I applied and with no expectations, but I was lucky enough to get the role.

**>>SARAH:** I'm very, very pleased that I did because it meant I could continue my work. And I think one of the most challenging bits about the role, but also the most exciting is that ability and the need to connect what happens at a policy and strategy level to what our communities experience and fundamentally to improve outcomes and health and wellbeing of the communities that we serve. So for me, that's the communities in the Highlands and Argyll and Bute.

**>>SARAH:** So, being the chair of territorial board is busy, probably better described as hectic. It's a really responsible job. I feel the weight of responsibility daily, but it's hugely rewarding. It would be an understatement to say that no two weeks, no two days are the same, it's really varied and that's probably one of the things that I enjoy the most about it.

**>>SARAH:** So, I will have days where, you know, it's very business, business, business. I might be chairing a board meeting and we are thinking about strategy and governance and scrutiny and assurance and how does the performance over here linked to our strategic plan over there, and how are things going with that major service change and what challenges are we experiencing and have we got the governance right about it?

**>>SARAH:** So, there's a lot of that. Some days we'll be more about partnerships. So, within our community planning partnerships, within our integration spaces with our local authority partners and other public sector partners and third sector, you know, what are we doing in partnership? How are we thinking about our communities as a whole unit? What are we doing about population health, not just health services.

**>>SARAH:** And other times I will be out and about. Um, We've got a massive area in the Highland NHS area. So, we cover the whole of the Highland Council area and the whole of Argyll and Bute. So, we've got islands, we've got towns, we've got the city of Inverness. So, my visiting patch is big. Sometimes I will be visiting a hospital, maybe an acute ward where I'm really looking like at that kind of end of the services that we provide. Sometimes I'll be out visiting community teams in a rural area.

**>>SARAH:** I get to meet staff, I get to meet partners, I get to meet patients and communities. It’s really interesting. I get to see how dedicated and passionate people are in delivering the, the services that they do and the care that they do.

I get to see the huge variety of careers and professions that work for us in our, in our organisation. I get to, hear about the challenges, which is tricky, but I also get to hear about the innovations and the good work. It's probably one of my favourite bits about the job actually, is being able to meet people.

**>>SARAH:** It's important because that's how we build relationships. That's how we are visible. That's how we understand what the reality is like on the ground. And that's important in any organisation. But because we are such a large board, we do a huge amount of our work online. So, online meetings using things like Microsoft Teams. So, being able to get out and about is such a huge connection point for us as well.

**>>SARAH:** As well as the work that I do, which is solely focused on my board area, so the Highlands and Argyll and Bute, I am also that connection from our board into the wider world. So, I do a lot of work in national meetings, regional meetings where I'm working with other board chairs and executives from a different area. So, we really work in that regional and national space. And that's important not only to make sure that what we are doing aligns with the national work, but also to make sure that our voice is heard in those forums.

**>>SARAH:** I spend a lot of time talking about rural and island challenges when we are talking about the future of health policy and, and things like that. So, that is a really big part of the job as well, which is sometimes less well known. That's the bit that you probably don't see as much of, even if you are on a health board already.

**>>SARAH:** So, it's really, really varied, really interesting, hugely challenging, but really, really rewarding.

**>>SARAH:** I think if you are interested in that kind of work, if you are interested in an ongoing challenge and the ability to contribute, then this would be the kind of role for you. It's important to point out though that I do not have a clinical background. This is a role that draws on leadership, vision, judgment, collaboration, relationship-building. The clinical expertise doesn't come from me, you'll be pleased to know.

**>>SARAH:** The clinical expertise comes from our clinical experts within the organisation and within the government. So, when I think about my background and the background of the other chairs across the country, it's so varied. You know, we've come from all different kinds of sectors, different industries, and that's a good thing. You know, having that variety of voice around the collective table brings a real richness to the work that we do.

**>>SARAH:** We work in a network way. We pull on each other's skills and experience, but what matters most is our values and our commitment to improving health and wellbeing and supporting communities.

**>>SARAH:** So, if you want to use your skills to make a real difference, I would encourage you to apply for a chair role. Yes, it's challenging, but yes, it's rewarding and it's one of the most interesting ways that you can contribute to the future of Scotland's Healthcare.