HFMA AWARDS 2022



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AWARDS PHOTOGRAPHY: THEODORE WOOD

A TALENTED AND

Highly talented, with impressive leadership skills and influence on the national stage. This is how judges summed up the winner of the HFMA Finance Director of the Year Award for 2022 – **Jenny Ehrhardt**, group chief finance officer for Manchester University NHS Foundation Trust.

Jenny Ehrhardt with Prime's Phil Holland (left)

and HFMA president Lee Bond

Ms Ehrhardt leads the finance team at one of the country's largest and most complex trusts. Manchester University NHS Foundation Trust runs 10 hospitals, a managed clinical service and a local care organisation. It has a turnover of £2.5bn and 28,000 staff.

She was appointed to the role in May 2020, following an eight-month period as deputy chief finance officer. This followed five years at Leeds Teaching Hospitals NHS Trust, where she was also deputy. She stood up to the top finance role in Manchester as the pandemic was moving into its escalation phase and the trust praised her 'calm, structured leadership', which ensured that the organisation had clear financial business continuity plans documented and implemented.

However, despite the need to respond to Covid-19, Ms Ehrhardt was

The judges
highlighted Jenny
Ehrhardt's great
agility and skill
during a challenging
period for the trust
and the NHS
determined to with investr record, brir administration of the trust a unique per

determined that the organisation should continue with investment in a new electronic patient record, bringing together three failing patient administration systems into one enhanced system.

'Jenny was commendable professionally during a unique period of national crisis, and balanced the financial implications of this implementation while leading the financial response to the pandemic,' the trust said. 'As a result, the organisation is emerging in a

strong position post-pandemic with an intense focus on improved performance and financial delivery.'

Ms Ehrhardt also oversaw the implementation of working day 1 reporting, and financially delivered the acquisition of North Manchester General Hospital, which is being integrated into the Manchester University NHS family. She is now leading the regeneration of the facilities, with investment from the new hospital programme, creating a new hospital and population hub for one of the most deprived areas in Greater Manchester. She has also championed the implementation of a new budget and planning tool, which has already enabled automated



improvements and improved the planning process, while reducing an over-reliance on spreadsheets.

The judges described Ms Ehrhardt as highly talented, showing great agility and skill during a challenging period for the trust and the NHS.

They were impressed by the consistent message from her colleagues about the civility and humility she shows in all her interactions with clinicians and colleagues, both within and outside her organisation. Her modest approach means she tends to earn immediate engagement from all disciplines and is held in high regard by her peers and colleagues.

The judges also pointed to her work outside the organisation and her commitment to staff development. A strong believer in the power of clinical and financial teams working together, she has delivered local training sessions to medical trainees on how money works in the NHS.

Ms Ehrhardt also meets the hospital finance directors within the group on a weekly basis, with governance and skills development being standing agenda items.

Nationally, she is chair of the One NHS Finance Finance Innovation Forum. She is committed to the forum becoming a platform for the discovery of existing and emerging innovations in NHS finance, drawing together expert steering groups, patient-level data, technical solutions and NHS innovations to support the delivery of better value health and care to the patient and taxpayer. The judges concluded that she was a worthy winner of this year's award.

Ms Ehrhardt said she was humbled to receive an award that had so many inspirational previous winners. It also reflected the hard work of her team in Manchester and the One NHS Finance team. 'I'm grateful for all the people who have supported me in my career, too many to mention, but some of this honour is theirs too,' she said.

'I am most proud of my team in Manchester, the work they do to support great patient care, and seeing team development is key to that. I've given them encouragement and air cover to develop and innovate and we're rising to the current challenges in a really positive way." •

Also shortlisted



Stephen Sutcliffe, director of finance and accounting at NHS Shared Business Services (SBS), was nominated for his work leading the 'largest finance department in the NHS' - around 500 employees at the shared services provider serve more than 70 providers and all commissioners in England.

In particular, over the past year Mr Sutcliffe has introduced a cloud-based, next generation accounting system for the NHS. He has also developed a new

source-to-settle service for integrated care systems, created an insight diagnostic solution to support finance and procurement benchmarking within systems, and improved performance through the use of robotic process automation.

Mr Sutcliffe steered the SBS finance and accounting team as it helped deliver the move from clinical commissioning groups to integrated care boards. This included closing 106 CCG financial ledgers and creating 42 new ICB ledgers.

Richard Mills, chief financial officer of Sherwood Forest Hospitals NHS Foundation Trust, stepped up from deputy chief financial officer (CFO) at Sherwood Forest Hospitals in October 2021 to become the trust's interim CFO following changes in the senior management structure. He was subsequently confirmed into the substantive role - his first

executive appointment - in June this year.

The trust praised Mr Mills' 'calm and direct approach coupled with a detailed comprehension of the organisation at a specialty level'. And they highlighted 'brave and bold decisions' to support the trust and the local integrated care board to deliver against a challenging financial plan. The trust had delivered financially and operationally during a significant period of change within the organisation.



FOCUS ON IMPROVING

Kay Wiss – a finance leader with a keen focus on staff development and wellbeing - has been named 2022's HFMA Deputy Finance Director of the Year.

Mrs Wiss has worked with four finance directors while at Stockport NHS Foundation Trust, where colleagues highlight the consistency she provides and the focus on continuous improvement that sets her apart. Her staff who nominated her commended Mrs Wiss for her compassion and empathy towards others and the creation of a culture that enables talent to thrive. They hailed her 'transformational leadership', which is based on instilling trust and empowerment.

Under her leadership, the finance team has built excellent relationships with clinical and non-clinical colleagues. Mrs Wiss's 'from spreadsheets to bedsheets' initiative encouraged staff to spend time in a nonfinance role to develop a deeper understanding of different functions in the trust.

She has also introduced individual training passports for every person with financial responsibilities. These training needs assessments result in access to tailored training programmes aimed at ensuring maximum value is obtained for each health pound spent.

The Stockport trust's deputy finance director has also been the driving force behind the finance department gaining the One NHS Finance towards excellence level 3 accreditation and its subsequent retention. This is a significant achievement.

Mrs Wiss's impact goes way beyond the Stockport trust's finance department; she regularly leads complex system discussions with partners and actively looks to support other NHS organisations by sharing the good practice developed at Stockport.

Her colleagues nominated her not just because of her leadership of the finance team in her own trust, but also because of her contribution to the wider Greater Manchester system. She was pivotal in setting up the Greater Manchester deputy director of finance group - a group set up to support finance directors and to provide support and challenge

"Kay Wiss's passion for finance staff development and her commitment to the NHS made her a very worthy winner Winner: Kay Wiss

> across organisations on key financial issues to ensure system-wide equity and transparency.

> A drive to improve the quality of financial reporting in Stockport meant Mrs Wiss was an early supporter of statistical process control (SPC) charts, promoted as part of the making data count initiative introduced by NHS England. Having got to grips with it internally, Mrs Wiss became a national ambassador for the initiative and has spoken at national forums to advocate the use of SPC. She is now flying the flag for the charts to be used in the wider Greater Manchester health and care system.

The judges were particularly impressed with the breadth of Mrs Wiss's impact - at departmental, organisational, system and national levels. In the judges' opinion, her passion for finance staff development and commitment to the NHS made her a very worthy winner of the award.

Mrs Wiss said she was 'proud and humbled' to have won the award. 'What is particularly poignant for me is that I have won this in the year that we lost my friend Joanne Fitzpatrick, one of the early winners of the award.'

She added that finance staff development was one of the most important parts of her role. 'Having a positive, inclusive culture where everyone can contribute, grow and shine is what I've always strived for,' she said. 'Make time for this and your time will be richly and deeply rewarded in so many ways.' O

Also shortlisted

Bolton NHS Foundation Trust's Andy Chilton was named operational director of finance in April 2022, having served as deputy finance director since 2018. Mr Chilton led the finance team's towards excellence level 3 accreditation in 2021, oversaw an unqualified set of accounts in an extremely challenging year and has been a key player in the local 'one Bolton finance' approach. He has also led a full overhaul of costing at the trust.

The judges were impressed by Helen Taylor's technical ability. As well as leading the operational aspects of the finance department, the deputy finance director at County Durham and Darlington NHS Foundation Trust leads on major projects providing legal and commercial expertise alongside her financial responsibilities. These included providing financial leadership to radiology equipment replacement programmes, as well as private finance initiative benchmarking, market testing and performance management. Her nomination highlighted her role in improving the financial governance of the trust.

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UNITED OUTLOOK

The Staffordshire and Stoke-on-Trent NHS region has a chequered financial history of contract disputes and the use of arbitration. But the creation of a united finance team across the system has changed it to one now characterised by collective working.

This turnaround has been recognised in Staffordshire and Stoke-on-Trent Integrated Care System winning the 2022 HFMA Finance Team of the Year Award.

The 200-plus finance community across the system now comes together regularly to discuss system objectives. The end product is a system finance team where individuals recognise that they work both for their host organisation and the system.

The approach enables the system to focus on patient pathways, rather than viewing patient journeys through an organisational lens, and supports the achievement of optimal system solutions. Leaders are asked to live within the total financial resource and determine the clinical priorities. The system finance team then targets resources to support the priorities.

The system has adopted an intelligent fixed payment (IFP) system, which aims to allocate the integrated care board's revenue resource limit among NHS partners on a fair shares basis and to bring all partners back to financial balance at the same time.

IFP 'base shares' are calculated from the opening net underlying position, with earmarked funds (for example, for the mental health investment standard, Covid-19 and elective recovery) excluded.

There is an agreement to share risks related to planning assumptions, and the risks to be handled by individual organisations are clearly identified. The approach is underpinned by strong governance arrangements, starting with the finance deputies who have developed a single financial model that is fully transparent and equally owned by all organisations.

All cost pressure, development and other financial information is collected centrally within this financial model and used to drive decision-making throughout the system.

The judges were impressed by the inclusive approach to system working. 'The united



Lee Bond and Channel 3's Eleanor Rollason (right)

finance team operates as one across the system and demonstrated its commitment to supporting system transformation,' they said.

supporting system

transformation"

The judges also liked the system-wide approach to developing solutions to tricky issues and rolling out the approach across the patch. And they suggested that the system, while not having as many partners as some ICSs, was leading the way in showing what is possible with collaborative working.

The ICB's chief finance officer, Paul Brown, said it 'meant the world' to have won the award. 'We have come from having the largest number of contract disputes anywhere, along with some pretty fractured relationships, to one where we work collectively as a system finance team,' he said. 'That is something of which we are very proud.

'Our philosophy is that we work together to make the Staffordshire and Stoke-on-Trent pound go as far as it can, and we now have some tangible success, not least that we are on course to break-even this year, something the system never achieved pre-Covid.

'As a group of system chief finance officers, we are working incredibly well together on this shared vision.' •

Also shortlisted

The **Royal Papworth Hospital NHS Foundation Trust** team believes continued clinical excellence is best supported by a finance function that delivers high-quality data and stewardship. It highlighted two initiatives over the year, including the development of an income/activity dashboard enabling data to be broken down to detailed service/point-of-delivery level, and then used to identify patient demographics and referral patterns. It also showcased a new capacity planning model that details the time and capacity requirements for each unit of planned activity.

The **University Hospitals of Derby and Burton NHS Foundation Trust** finance team has been on an improvement journey since the merger of Derby Teaching Hospitals NHS Foundation Trust and Burton Hospitals NHS Foundation Trust in 2018. Problems had included late accounts and audit adjustments, over-detailed board reports and almost non-existent training. The situation has been turned around, with the provision of training for all finance teams, and work groups to review core finance processes. Specific responses have included greater awareness of control accounts and the creation of a journal review process, a control account dashboard and improved reporting of pay expenditure.

HEALTH VILLAGE HIT

Ruth Williamson was named the 2022 Working with Finance - Clinician of the Year at this year's HFMA Awards for her work in setting up outpatient assessment centres across Dorset. Dr Williamson, deputy chief medical officer at University Hospitals Dorset NHS Foundation Trust, led the creation of the 'health village' as a way to address the backlog of non-elective appointments and enable hospitals to focus on the Covid pandemic.

Even before Covid-19, Dorset demand for NHS services outweighed capacity. This was exacerbated by the pandemic, leading to a significant backlog of non-urgent appointments across a number of specialities.

A way of moving outpatient appointments away from hospitals was needed so they could concentrate on coping with Covid and delivering other essential services.

The answer was to create a health village - a series of outpatient assessment centres within densely populated areas with the greatest level of need for outpatient services. This had to be delivered at scale and pace. It also called for clinical buy-in, which is where Dr Williamson stepped in. She was pivotal in gaining buy-in from clinicians across the system while ensuring the end product was affordable and efficient.

For Dr Williamson, the solution would be found in designing financially viable clinical pathways and new ways of operating outpatient and screening services. The challenge was to convince clinical colleagues it could be achieved within the budget and time constraints, without any compromise to care.

She was involved in the adoption of military-style rehearsal-of-concept drills, allowing stakeholders to 'walk through' floor plans to understand the space requirements and flow of a facility. This helped clinicians see the clinical process before implementation.

After opening sites in Poole and Dorchester, more than 10,000 patients were seen for abdominal aortic aneurysm screening, breast screening, dermatology, ophthalmology, orthopaedics and rheumatology appointments. The orthopaedics speciality saw a 92% reduction in 78- to 104-week waiters and a 31% uplift in activity, including a 25% increase



The judges were "blown away by the innovation, leadership, collaboration and can-do approach to tackle the elective backlog in Dorset"

in appointment utilisation. The health village concept has moved a vast amount of outpatient care away from acute hospitals, freeing up clinical space, maximising resources and relieving pressure on the system and staff. At the same

time, the strategic placement of the centres has brought a purpose back to high streets, contributed to local economic growth and resulted in high patient satisfaction.

The judges said they were 'blown away by the innovation, leadership, collaboration and can-do approach to tackle the elective backlog in Dorset'. 'By using part of a shopping centre and Nightingale centre equipment, co-creating with patients and staff, winning hearts and minds, Dr Williamson, the finance team and many others changed the paradigm, they said.

'They have put patients at the heart of new clinical pathways, delivered in the community, and applied a one-stop approach, to the benefit of patients, families and the health system.'

The award recognised more than her own contribution, insisted Dr Williamson. 'While it names one clinician, I'm proud that our team of multiple clinicians and managers was able to work so closely and effectively with our finance colleagues to deliver real benefit to patients in a cost-effective way. It is a privilege to accept the award on their behalf.

She added that while the health village concept originated in Covid recovery plans, the changes and benefits were here to stay. •

Also shortlisted

Anne Robinson, Warrington and Halton Teaching Hospitals NHS Foundation Trust deputy medical director, was shortlisted for work she led in a review to understand drivers for medical staffing costs and identify mitigating actions. The aim was to develop a safe medical staffing model that would result in less bank and agency use. The work led to an action plan that has resulted in a programme of substantive recruitment and less reliance on temporary staff, reducing cost pressures by about £3.5m. Dr Robinson, a practising emergency care clinician, has promoted an approach that uses existing resources most efficiently, rather than asking for more funding.

Adam Carney was the clinical lead in Nottingham University Hospitals NHS Trust's programme to support the national Getting It Right First Time six high-volume, low-complexity specialties to deliver improvements. The trust has a wellestablished WAVE programme to achieve value and excellence, in which clinical teams work with costing specialists and service improvement staff to improve care and outcomes. As well as championing the work across the specialties, Dr Carney helped to shape and launch a dashboard for each specialty and led the roll-out of a training programme for clinicians on how to use data to improve services.



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This year's HFMA Governance Award has been won by Lincolnshire Integrated Care Board for its cancer prioritisation process. This proactive programme puts in place best practice governance arrangements to ensure funds are quickly directed to the most challenged areas across a whole system.

The judges unanimously agreed the work to liberate cancer monies in a well governed way enabled earlier treatment for many patients. If applied nationally, the cancer governance improvement could hugely benefit citizens.

The process was set up to solve the issue of financial arrangements leading to a delay in implementation. A plan was needed to decide how to spend cancer funds from the start of April, rather than waiting until the allocations were received, to allow enough lead-in time for the provider to be able to recruit to any posts in the approved schemes.

The programme lead and senior finance business

"The passion and determination of the few individuals who instigated the programme to solve a problem for the benefit of patients shone through"

partner met to agree
what could be
done. The team
developed an
integrated
decision-making
process, signed
off at the cancer
board and agreed
with the director
of finance. With an
estimate of the value of the

next year's funding – and trust agreement it would commit to that – a plan was put in place to prioritise requests from across the system.

A timetable was drawn up highlighting when bids from operational leads needed to be submitted and how they would be scored. The scoring matrix led to bids being scored on: cancer priorities; benefits (qualitative and quantitative); delivery risk; and future system risks. The timetable included when a panel would sit, who would be on the panel and how successful and unsuccessful bids would be communicated. Financial meetings were then scheduled throughout the year to check on the implementation of projects and whether there had been delays or issues encountered.

Changing the process and having a clear timeline allowed the team to be more disciplined in planning and the completion and review of bids. This resulted in the funds being directed to the most vulnerable areas, with a fair and equitable approach to submissions made and how they were rated.

The judges were particularly impressed with



Lincolnshire ICB with Prochainmatrix' Mustafa Sheikh (left) and HFMA president Lee Bond

PROACTIVE PRIORITIES

not just what was achieved, but how it was achieved. The submission clearly demonstrated the importance of: widespread system engagement; leadership support; finance and clinical teams working closely together; clear and transparent arrangements; and the use of ongoing monitoring tools. The passion and determination of the few individuals who had instigated the programme to solve a problem for the benefit of patients shone through.

Cancer programme lead Louise Jeanes (pictured second from right) said it was

valuable to show how good governance could have a direct impact on patient care. 'This is a very important link to establish and has been the foundation to improving outcomes for patients. It allows us to fairly direct finance into the most fragile areas.'

The process is being constantly reviewed, but the ICB is planning to write up a case study so others can understand the principles used and the standard set. 'I am extremely proud and pleased to receive this award on behalf of the ICB,' Ms Jeanes added. •

Highly commended

Recovering overseas visitors' payments is often hard to tackle, but **United LincoInshire Hospitals NHS Trust**'s use of technology to manage the risk of lost income has achieved significant recoveries. The team adopted the message exchange for social care and health (MESH) tool and were able to carry out a retrospective review of treatments to establish if any could have been eligible for claims. Lessons applied could result in a significant positive financial impact across the whole of the UK.

Also shortlisted

The Connect Programme – Mid and South Essex Integrated Care System brings together 15 organisations in five inter-related projects across the entire non-elective pathway. Jointly designed, led and governed to achieve more independent outcomes for older people, it is an excellent example of how the system can together deliver integrated care for improved patient outcomes, staff experience and financial benefit.

MIAA is a provider of internal audit to the NHS in England. With the establishment of integrated care boards, it planned a number of activities to support the clinical commissioning group closedown arrangements in the North West. Among the many activities undertaken were assurance reports, engagement events, audit chair webinars and briefings, and transition group attendance and reporting. Lessons learned have been shared nationally at various groups and events.

HFMA HONOURS

The HFMA presented a number of honorary fellowships at its awards ceremony, held during the 2022 annual conference. The honorary fellowship is awarded to an individual who has made a sustained and substantial contribution to the life, a committee or a branch of the HFMA. Honorary fellowships were awarded to four members.



Nigel Booth has made a career-long commitment to, and impact on, finance staff development. He is passionate about developing talent, encouraging organisations to invest time and resources in their own people, and has been a stalwart for the Yorkshire and Humber Branch and its chair for more than 10 years.

Claire Yarwood retired earlier this year having worked in finance in the Greater Manchester health community all of her career. She has been an active member and advocate of the HFMA, chairing the association's System Finance Special Interest Group, which has worked closely with NHS England to help shape and influence the national agenda.





lan Moston has also had a longstanding involvement with the association, both on the North West Branch committee and on the national stage. Chair of the Policy and Research Committee for more than five years, he is passionate about research and has been a significant figure in the North West finance community since his days as a regional finance trainee.

Joe Fifer, the HFMA's US president and chief executive, retires next June. Mr Fifer (pictured centre with Mark Knight and Lee Bond) has led the US HFMA for more than 10 years and has been a great friend to, and supporter of, the UK association.



ONE NHS FINANCE



Representatives from the following organisations were presented with certificates to mark the achievement of level 3 accreditation (pictured above from left to right):

- O East Suffolk and North Essex NHS Foundation Trust
- O Sherwood Forest Hospitals NHS Foundation Trust
- O Bolton NHS Foundation Trust
- O Greater Manchester Mental Health NHS Foundation Trust
- O Stockport NHS Foundation Trust
- O Sussex Community NHS Foundation Trust
- O Warrington and Halton Teaching Hospitals NHS Foundation Trust

Outstanding contribution

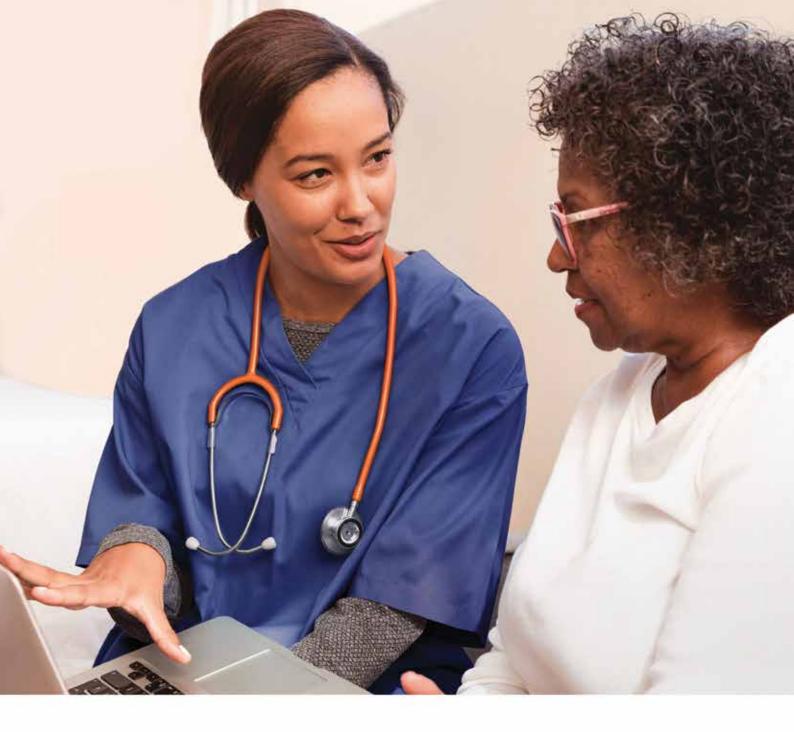
NHS England's Julian Kelly presented Derek Stewart (pictured right) with the One NHS Finance Outstanding Contribution Award. This recognises his instrumental role supporting organisations he has worked in to achieve the towards excellence accreditation. In addition, Mr Stewart is an active assessor for the process,



working with organisations looking to gain level 2 or 3. The central team would not be able to process the number of accreditation applications received without his support reviewing evidence and interviewing colleagues for their applications. He has also been a value maker since 2015 and a dedicated member of multiple working groups, helping ensure the success of many projects.



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JOINT APPROACH

Norfolk and Norwich University Hospitals NHS Foundation

Trust is early on in its digital journey, but that did not stop the winners of this year's HFMA Delivering Value with Digital Technology Award from implementing a successful virtual ward.

As with many innovations,
Covid-19 was the catalyst for the
digital ward at the trust – clinicians
were keen to reduce the need for patients to be
present in the hospital, having seen the clinical
impact of adding beds to wards and bays.

The trust had been piloting and investigating the digital requirements to launch a virtual ward but, once the decision was made, it only took three weeks to get the ward up and running. Patients on the ward are not discharged, but remain under the care of the same clinician as if they were in hospital. Other clinical staff work remotely to monitor patients on the virtual ward.

The ward has established multiple pathways providing round-the-clock care for those awaiting cardiology treatment or diagnostics. There are also pathways for Covid in pregnancy and for palliative care. In addition, ad hoc pathways can be provided for consultants wishing to admit any patient who can be safely cared for on the ward.

There are two key reasons for the project's success. First, it benefited from joint working – the project was initiated by clinicians, but other teams were soon involved, including a named finance team member.

The judges said it was 'a great example of collaboration between clinicians, finance, operational and informatics staff to use digital technology to transform the services for the benefit of patients'.

Communication was the other vital ingredient for success. The judges concluded: 'The success of this project shows that an organisation that is early on in its digital journey can transform.

'Patient feedback from the virtual ward is excellent and staff are enthusiastic about working on it. Length of stay in hospital is reduced and, as the ward is scaled up, the trust expects to make further savings.'

The trust's chief nursing information officer,

"A great example of collaboration between clinicians, finance, operational and infomatics staff to use digital technology to transform services"

Norfolk and Norwich team with Optum's Pete Shergill (left) and HFMA president Lee Bond

Emily Wells (pictured second from right), said that the 24/7 acute step-down virtual ward had been a key piece of innovation for the trust through Covid, into elective recovery and now winter pressures.

'The HFMA award validates our view that care delivered in this way represents value for money for our citizens,' she said.

Dr Ed Prosser-Snelling, chief digital information officer (pictured centre), said the integrated care system was looking to build a community-based ward alongside the acute ward 'to provide a holistic step-up and step-down service that will really begin to reduce our reliance on the 18th century model of care that the acute hospital represents'.

Highly commended

A team of three at **NHS Supply Chain** developed and launched a clinical utilisation platform for integrated datasets (CUPID) within six months. The system gathers and cleanses data from different sources in a single dashboard that tells the story of the costs, usage and suppliers of specialist clinical devices. This allows NHS Supply Chain to provide detailed and real-time information to clinicians, procurement and finance staff when they are making purchasing decisions. Because CUPID was developed inhouse, the only costs are the licence fee, and the team estimates that it has saved the NHS £58m since its launch. The team is now looking at whether other buying functions can use the system and whether access can be given to NHS bodies.

Also shortlisted

Nottingham University Hospitals NHS Trust's bed elective scheduling tool (BEST) predicts the number of hospital inpatients 28 days in advance with 95% accuracy. A product of multi-disciplinary cross-departmental working, BEST combines patient-level cost data with real-time clinical data and hospital-wide productivity metrics to forecast future bed occupancy levels. The result is improved theatre utilisation across five specialties and a 4% reduction in unit costs per theatre.

The introduction of an electronic prescription system by **Midlands Partnership NHS Foundation Trust** has reduced travel time and postage costs as clinicians and patients no longer have to travel to deliver or collect prescriptions. Instead prescriptions are sent electronically to the patient's community pharmacy of choice. The system has also reduced pharmacist queries as they no longer have to decipher clinicians' handwriting. As the first system of its type in England, the trust worked closely with NHS Digital during development and piloting. The information gathered during the pilots has been used to roll out the system across the trust and will be useful to other NHS bodies implementing similar arrangements.

WAVE OF SUCCESS

Nottingham University Hospitals NHS Trust

has won the 2022 HFMA Costing Award – becoming the first trust to win the award twice. The latest win recognises its approach to reducing waste in clinical pathways through targeted quality improvements.

The trust's WAVE (working to achieve value and excellence) improvement programme brings together a delivery support team of costing, quality improvement and project management specialists.

Clinically led and supported by executive sponsorship, the WAVE team has worked with specialties across the trust. Underpinned by quality, service improvement and redesign (QSIR) tools, WAVE has shown that focusing on patient outcomes and improving staff and patient experience also contributes to meeting operational and financial targets, delivering savings totalling £55m in the past seven years.

Specialties taking part are expected to commit to a 17-week structured programme with weekly check-in meetings. The costing team develops and refines bespoke dashboards, working with clinicians to validate and cleanse data and ensuring that presentation of valuable information about patient pathways is tailored to audience and clinical practices.

The meetings, including three confirm-andchallenge sessions with the executive sponsor, are key to maintaining momentum and ensuring the WAVE team can provide support as services analyse the data, noting any issues raised and acting on them promptly.

From a longlist of potential improvements, a shortlist of three projects is selected. Plans are developed for these in the final phase of the WAVE cycle, with delivery measured during post-project evaluation. By the end of the cycle, the specialty teams will also have developed continual improvement skills they can apply to other projects on the longlist.

WAVE continued throughout Covid-19, with £4m of cash-releasing savings and £2m in productivity gains achieved in this time.

Scott Hodgson (pictured second from left), the trust's head of clinical accounting and costing transformation, said virtual meetings had improved engagement. 'It is easier now to meet clinicians at a time convenient for them, often early evening, and not impact their clinical commitments.'

A 17-week commitment from clinical services sounds challenging given operational



pressures, but the team has specialties waiting to take part. It would take nearly three years to deliver WAVE in its current format to all specialities, so the team aims to develop a single dashboard with multiple views to enable increased self-service within speciality teams.

The judges liked the structured and embedded approach with a strong focus on end users. 'A core deliverable is the provision of training and support to ensure that specialty teams develop the skills required for continual improvement,' they said.

They also commended the trust for links with other acute trusts in the region to share

best practice.

Mr Hodgson hailed the team's win as a 'fantastic achievement'.

'It's great that the hard work we have put in has been rewarded at a national event,' he said, adding that clinical support was crucial.

training and support to

ensure that specialty

teams develop

skills for continual

improvement"

'WAVE is successful because we really do get results. The clinical teams involved are bought into the process and drive it themselves rather than it being a process that is done to them.'

Also shortlisted

North Staffordshire Combined Healthcare NHS Trust is a small organisation with a limited costing team but big ambitions and a clear commitment to clinical engagement. By focusing on all available data and taking a value and outcomes approach, it is seeing tangible benefits. One example is the memory clinic, where the team worked with the clinical lead to identify bottlenecks in clinical pathways. It implemented changes that improved outcomes and reduced non-attendance, also reducing the cost of the service by redesigning clinical sessions and eliminating unnecessary CT scans.

When faced with implementing a new costing system, **Barts Health NHS Trust** used the opportunity to understand what clinicians wanted and how they would use the data. Having hospitals across a large footprint in East London, with diverse population groups, there is a big focus on health inequalities and access to care. Dashboards and performance reports bring together costing information with activity metrics, patient demographics, deprivation indices, population data and outcomes where available.

Warrington and Halton Teaching Hospitals NHS Foundation Trust has

demonstrated continual improvement in the production and use of costing information across the trust and with local partners in the wider Cheshire and Merseyside healthcare system. The medical director champions the costing team and has worked closely with it on a range of improvement projects, including a medical staffing review undertaken by Anne Robinson, shortlisted for HFMA Clinician of the Year (page 6).

Training finance teams to have Microsoft SQL skills has helped save more than 200 hours a month of time previously spent manually processing data at Blackpool

Teaching Hospitals NHS

Foundation Trust - a programme that has earned the trust the Havelock Award for finance skills development.

organisations across Finance teams handle an increasing the country volume of data to support decisions by departments and frontline teams. But the real value added by finance professionals is often in the narrative accompanying data, rather than in the time spent processing it.

The solution at Blackpool was to introduce SQL as part of the finance team's toolkit, developing an in-house training programme and training materials.

The alternative - using Excel processes - can be time-consuming, with a new department member needing time to learn several steps with the risk of making manual errors.

But with SQL - which finance teams can often install at no additional cost as many NHS IT departments have access to the program new team members can quickly be trained to import data and execute an SQL script. This keeps processes running in a timely manner, removes the potential for manual errors and allows the learner to develop their knowledge of SQL code over time.

The use of SQL has also helped to centralise and standardise processes, instead of finance staff processing the same data in slightly different ways. For example, the Blackpool trust recognised that SQL saved 20 hours a month for one accruals process carried out across divisional teams in management accounts. Some 18 different SQL processes have been developed across the department.

Blackpool's SQL programme began with 15 learners across the finance department undertaking an SQL basics training programme and getting to the point where they could write SQL code. Learners are then required to train members of their team in running any SQL processes they develop and to create supporting documentation.

The clear aim at the trust is for SQL to become part of the standard skillset of NHS accountants. The work has also been scaled up as part of the One NHS Finance software skills for finance staff programme. Blackpool



SQL SAVIOUR

now supports a national SQL Teams channel that hosts members NHS-wide. And, as SQL educators, the trust provides learning content, including its in-house developed training videos, to support other finance teams starting to use SQL across the NHS.

The judges praised the training programme for being 'thoughtfully designed'. And they highlighted the use of these training materials as part of a series of SQL kickstart sessions with NHS organisations across the country.

Associate director of finance at the trust Tracey Squires-Evans (pictured far right) said the award was recognition of the finance team's hard work and its willingness to embrace new ways of working.

She paid tribute to colleagues Loie McNeill and Shakira Joynson, who led the SQL programme. 'It has been especially great to see more junior members of the team leading automation projects and the development of cross-team working, she said. O

Highly commended

A skills gap analysis tool was developed by the Royal Papworth Hospital NHS Foundation Trust to enable individuals to self-assess against competencies in several areas: technical; people, leadership and business skills; and personal attributes. It can be used to develop a bespoke personal development plan between the individual and line manager. Around 40 organisations, including One NHS Finance, have now used the skills matrix. Building on this, the trust has developed a learning log and dashboard to improve the monitoring of learning activities against development plans.

Also shortlisted

St George's University Hospitals NHS Foundation Trust expanded its training and development programme over the past 12 months in response to staff feedback for finance and non-finance staff. For finance staff, inter-departmental sessions and development workshops have allowed teams to learn more about each other, leading in some cases to secondments. And shadowing in clinical areas has also given the opportunity to get a better understanding of frontline activities.

In the same month that Greater Manchester Integrated Care Board was created, it was awarded level one accreditation under the One NHS Finance towards excellence scheme. This followed a programme to ensure all 12 organisations transitioning to the new board, including the 10 clinical commissioning groups, had all gained accreditation in advance. This involved six organisations achieving the required standards, with accreditation in January 2022.

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DYSLEXIA SUPERPOWER

The winner of the 2022 HFMA Diversity and Inclusion Award, the MerseyCare NHS Foundation Trust dyslexia and dyspraxia network, is an inspiring example of a financeled initiative with positive impacts on staff, patients and the wider community.

Despite dyslexia affecting about 20% of the population, and so 20% of the NHS workforce and service users, it is rarely discussed. People with dyslexia can often feel vulnerable and isolated at work or in formal surroundings such as healthcare settings. They may be frightened to disclose their dyslexia due to perceptions, misconceptions or a fear of being misunderstood and negatively judged.

The trust's dyslexia and dyspraxia network raises awareness and empowers individuals, enabling them to value and embrace their uniqueness and individuality. It has identified clear actions needed to tackle issues in areas such as IT, training and recruitment.

The network identified a lack of targeted equipment offered to employees with dyslexia to support problems with IT systems and technology. It is reviewing new IT solutions for supply on a regular basis in partnership with its informatics department.

It found current training did not meet the needs of employees with dyslexia and dyspraxia. And it secured investment to deliver specific hidden difficulties training. Following feedback from the network, no numerical or verbal reasoning tests are being used in the trust for recruitment as these discriminate against individuals with dyslexia.

The judges singled out the passion and hard work of Wes Baker, director of strategic analytics, economics and population health management at the trust, who came up with the initiative. Endorsing the nomination, NHS





England's North West regional director Nikhil Khashu also praised Mr Baker. 'Wes has been courageous in not only coming forward and highlighting his disability to inspire others to seek help and support, but, more importantly, highlighting the power that dyslexia and other neurodiverse conditions can have in developing high-performing teams

within the NHS,' he said.

Adding to the trust's success, a presentation was created to increase awareness. Mr Baker has regularly presented on 'dyslexia as a superpower' to other NHS organisations, schools and the private sector, promoting the need to stop seeing dyslexia as a disability, but more as a gift. Feedback shows this has led to organisational change and invaluable personal support for individuals and their families.

The judges acknowledged that hidden

disabilities are not usually talked about in the NHS and this work has brought it clearly onto the agenda. They

"The innovative

from being

a disability to a

positive point of

difference"

also recognised how the innovative approach

shifts the perception of dyslexia from being a disability to a positive point of difference, creating a sense of belonging and empowering individuals to embrace their uniqueness and individuality.

Mr Baker said winning was a real surprise. 'My son is also dyslexic, which fuels my passion to create a better working world where neurodiversity is seen for its strengths rather than its weaknesses and to explore how we can reduce stigma around learning and thinking differences, he said.

The award would be a platform to promote the work across finance teams, he added. 'Statistics suggest that 20% of the population has dyslexia, but I think it's a lot higher within the finance communities, and a lot of people are undiagnosed but are struggling in silence, he said. 'I hope we can address these issues by building awareness and confidence and creating a culture of psychological safety. O

Highly commended

The Chelsea and Westminster Hospital NHS Foundation Trust finance department was highly commended by the judges for its supported internships to help local young people with special needs into full-time paid employment. Autism and special needs are areas of diversity and inclusion that are not commonly talked about. Joanna Thomas, working in the trust's accounts payable team, saw an opportunity to change that locally and the judges were inspired by her and what's been achieved for interns.

Also shortlisted

Barts Health NHS Trust's Thrive programme brings together women across finance and procurement on a self-development programme of seven half-day workshops. It has increased confidence and skills, resulting in more women being successfully appointed to senior posts and a reduction in their gender pay gap.

Warrington and Halton Teaching Hospitals NHS Foundation Trust has undertaken a range of activities to support the careers of less represented groups and change organisational culture. With the aim to understand and embrace equality, diversity and inclusion, activities range from quizzes to changing recruitment approaches.



EQUAL ACCESS

Specialised services are not often considered when it comes to looking at the impact of health inequalities. But for the Welsh

Health Specialised Services Committee (WHSSC), a request from associate medical director Kerryn Lutchman-Singh (pictured far left) to look at specialist service access rates led to an ongoing project to consider how investment earlier in a patient pathway could reduce upstream costs and improve equity.

The committee is the inaugural winner of the HFMA Addressing Health Inequalities through NHS Finance Action Award.

It works on behalf of all seven Welsh health boards and was able to use linked patient data in a secure environment to take a value-based approach to analysing activity and costs across a whole pathway.

It was recognised by all involved that accessing specialised services is a culmination of all that has come before. So, to truly understand the drivers, the whole pathway has to be analysed. The finance team's familiarity with the datasets and ability to add cost information to the activity, enabled identification of the part of the pathway that would most benefit from investment or change. The judges were impressed by the robust analytical work undertaken and the potential power of the data.

The first part of the project has focused on cardiac services, analysing the effect of eight separate interventions. Health resource usage was compared pre- and post-intervention to understand what impact each treatment had on local health service use. According to Professor Lutchman-Singh, a key part of the work was to approach the data with an open mind and follow what it showed, rather than looking for the data that supported the expected outcome. This meant that although the process took a long time, the resulting analysis was robust and free of bias.

The data showed variation in costs between patient groups for the same intervention. Further investigations highlighted that a key driver for the cost variation was deprivation. Potentially this could highlight a failure to access services in deprived areas, which



Welsh Health Specialised Services Committee with PA Consulting's Jenny Lewis

eventually leads to higher pathway costs.

This work is just the beginning. The next step for cardiac services is to look at equity of access, a key part of the WHSSC ethos. Analysis will be undertaken to look at any correlation between the proactive management of conditions, the geographical distribution of high-cost patients and deprivation.

WHSSC finance partner for financial planning Kendal Smith (pictured centre)

said the team was thrilled to win against tough competition. 'As a small team, it was an amazing opportunity for us to be able to put the NHS in Wales on the UK map, he said.

The work showed it was 'impossible to understand variation in costs without understanding inequality'. He added: 'WHSSC has certainly seen the value of using a value approach to understanding patient pathway analysis available from linked data. O

Highly commended

The judges commended Leeds Teaching Hospitals NHS Trust for the development of population health management tools that enable each clinical service to understand its patient population. The trust built a dashboard that helped reveal health inequalities by using patient-level information, with postcode and other demographic details. The tool has helped to develop targeted services to support more effective service utilisation. The judges were particularly impressed by insight derived from the data showing how patients on the elective waiting list can tip over into the urgent care pathway.

Also shortlisted

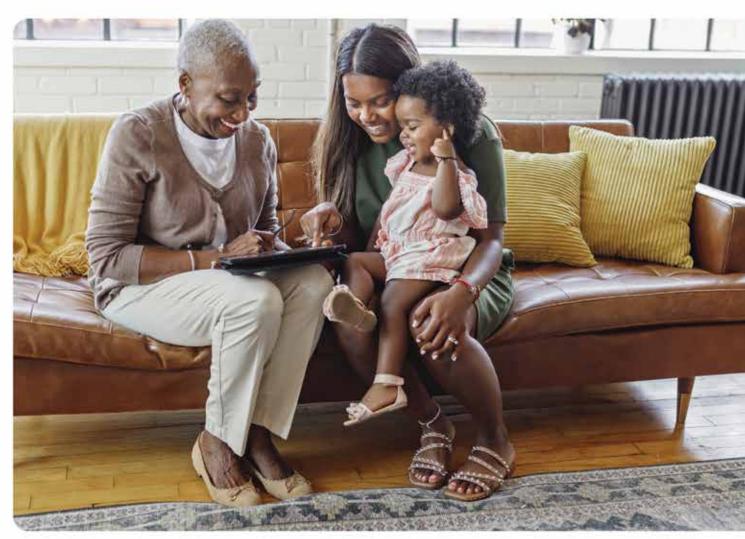
Cardiff and Vale University Health Board identified unequal access to palliative care between conditions, with most specialist care prioritised for cancer patients. The finance team supported senior cardiology clinicians to develop the heart failure supportive care service to improve end-of-life care for heart failure patients. Evaluation showed it was hugely cost-effective, reducing unscheduled admissions and in-hospital deaths. The approach has been expanded to three other clinical areas.

The 'was not brought' tool developed at Alder Hey Children's NHS Foundation **Trust** was developed to address the significant number of outpatient appointments not attended. There was often a correlation with families from deprived areas, allowing the trust to identify who was likely not to attend and intervene prior to the appointment, significantly improving attendance. The tool has been rolled out across the members of the Children's Hospital Alliance, addressing inequalities and waste across the country.



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INHALER CAMPAIGN

East of England Productivity and Efficiency **Group and PrescQIPP Community Interest Company** (CIC) are the winners of this year's inaugural HFMA Environmental Sustainability Award. Their inhaler carbon awareness campaign represents a single initiative over a large system-wide footprint, with the opportunity to be replicated nationwide.

The productivity and efficiency group, led by NHS England's East of England finance team, was responsible for agreeing and overseeing the development and monitoring of the campaign. PrescQIPP, an NHS-funded notfor-profit organisation that supports optimised prescribing for patients, was asked to produce resources to support the campaign.

The productivity and efficiency group identified that the East of England region had the "An excellent highest inhaler carbon example of a footprint of all regions system approach in England. The group, to embedding an consisting of finance, innovative practice into system-wide medicines optimisation and communication teams, decision-making" therefore devised an inhaler awareness campaign to help address unwarranted variations in inhaler carbon emissions and support delivering a net zero NHS. The aim was to produce campaign materials across the region and 'do once and share', thereby reducing duplication of effort and providing consistent messages across systems for clinicians and patients.

Educational materials to upskill clinicians and patients include: asthma e-learning; respiratory virtual workshops; patient information leaflets; an interactive patientfriendly inhaler carbon footprint comparison table; and inhaler technique videos. Patient input was critical in ensuring materials were relevant and effective.

The campaign has resulted in reductions in both carbon and costs across systems in the East of England region and the approach is being used as a template for other clinical areas. The results impact favourably on patient outcomes and experience, clinical excellence, environmental benefits and finance.

All resources developed are open-access on the **PrescQIPP** website to ensure this not only makes a significant contribution towards improving environmental sustainability in

the region, but can be easily adopted by other systems to make a difference.

There were challenges along the way, with teams encountering a lot of misinformation about the best use of inhalers and what the NHS was actively encouraging. Using easyto-understand data, the campaign was able to inform clinicians (both in primary and secondary care) about the impact of inhalers.

> The judges felt this was an excellent example of

using a system approach to work with all

partners across primary and secondary care, embedding an innovative practice into system-wide decision-making arrangements.

The judges were particularly impressed with the effective clinical and patient engagement, as well as the high-quality outputs available online for anyone to use.

PrescQIPP chief executive Carol Roberts

Winner: East of England and PrescQIPP CIC

(pictured right) said she was 'delighted' to win for the joint project. 'This is such a hot topic at the moment and there does seem a lot of work ahead of us,' she said. 'We would recommend anyone wanting to tackle the inhaler carbon footprint work to do the task one step at a time. Make sure that you work jointly across the whole system, including finance, medicines optimisation, comms and other interested parties to get the work done.' O

Highly commended

The Newcastle upon Tyne Hospitals NHS Foundation Trust has established a ground-breaking programme to measure and reduce the carbon footprint of its supply chain. The five-step approach provides a blueprint for all within the sustainability field and can be rolled out across the country. The judges were impressed by the commitment made by the trust to tackle such a difficult area, along with its effective engagement with commercial partners, recognising that this will pay dividends not only for themselves but the whole sector.

Also shortlisted

Manchester University NHS Foundation Trust consists of a group of 10 hospitals with a mission to provide a 'greener single hospital service' to the residents of Greater Manchester. Projects and initiatives include energy-efficient building transformation, sustainable procurement, low-carbon medicines and sustainable models of care to deliver positive environmental and social impacts alongside finance savings - the 'triple bottom line'. The judges recognised the passion of all involved, the huge scale of work, effective use of data and 'fantastic combined top-down and bottom-up approach'.

Past winners

Finance Team*/Accounts Team

2021* Liverpool University Hospitals NHSFT

2020* Warrington and Halton Teaching Hospitals NHSFT

2019* Hampshire and Isle of Wight Partnership of CCGs

2018* Leeds Teaching Hospitals NHST

2017* Alder Hey Children's NHSFT photo 1

2016 Hull CCG

2015 Nottingham University Hospitals NHST

2014 Wrightington, Wigan and Leigh NHSFT

2013 Hertfordshire Partnership University NHS FT

2012 Alder Hey Children's NHSFT

2011 5 Boroughs Partnership NHSFT

2010 NHS Bournemouth and Poole

2009 Mersey Care NHST

2008 Hull and East Yorkshire Hospitals NHST

Clinician

2021 Matthew Wood, Portsmouth Hospitals University NHST

2020 Kulandaivel Sakthivel, United Lincolnshire Hospitals NHST photo 2

2019 Maggie Davies, Western Sussex Hospitals NHS FT

2018 David Berridge, Leeds Teaching Hospitals NHST

2017 Paul Buss, Aneurin Bevan UHB

2016 Tara Kearney, Salford Royal NHSFT

2015 Stephen Liversedge, Bolton CCG

2014 Rob Duncombe, The Christie NHSFT

2013 David Fearnley, Mersey Care NHST

2012 Malik Ramadhan, Barts Health NHST

2011 Jason Leitch, Scottish Government

2010 Philip Thomas, Brighton & Sussex University Hospitals Trust

Costing

2021 Kent and Medway NHS and Social Care Partnership Trust

2020 Royal Cornwall Hospitals NHST

2019 Gloucestershire Health and Care

2018 Wrightington, Wigan and Leigh NHSFT

2017 Leeds Teaching Hospitals NHST

2016 North Staffordshire Combined Healthcare NHST

2015 Alder Hey Children's NHSFT

2014 Derby Hospitals NHSFT

2013 Nottingham University Hospitals NHST

2012 The Christie NHSFT

2011 Cardiff and Vale UHB

Deputy Finance Director

2021 Guy Dentith, East Kent Hospitals University NHSFT

2020 Jonathan Gamble, Leeds Teaching Hospital NHST

2019 Eva Horgan, Liverpool Women's NHSFT

2018 Duncan Orme, Nottingham University Hospitals NHST

2017 Claire Liddy, Alder Hey Children's NHSFT

2016 Sheila Stenson, Maidstone and Tunbridge Wells NHST









2015 Chris Lewis, Cardiff and Vale UHB

2014 Tim Jaggard, UCLH NHSFT

2013 Paul Ronald, Hertfordshire Partnership University NHSFT

2012 Richard Wheeler, Oxford University Hospitals NHST

2011 Joanne Fitzpatrick, The Christie NHSFT

2010 Elaine Konieczny, Sherwood Forest Hospitals NHST

Finance Director

2021 Nicci Briggs, Leicester, Leicestershire and Rutland CCGs photo 3

2020 Catherine Phillips, North Bristol NHST

2019 Karen Geoghegan, Brighton and Sussex Hospitals NHST/Western Sussex Hospitals NHSFT

2018 Kathy Roe, Tameside and Glossop CCG/Tameside MBC

2017 Adrian Roberts, Manchester University NHSFT

2016 Annette Walker, Bolton CCG

2015 Simon Worthington, Bolton NHSFT

2014 Alan Brace, Aneurin Bevan UHB

2013 Colin Martin, Tees, Esk and Wear Valleys NHSFT and Bill Shields, Imperial College Healthcare NHST

2012 Caroline Clarke, Royal Free London NHSFT

2011 David Melbourne, Birmingham Children's Hospital NHSFT

2010 Steve Webster, North Bristol NHST

Innovation*/Efficiency

2020* Alder Hey Children's NHSFT

2019* Cheshire and Merseyside HCP, with MIAA

2018* Devon Partnership NHST

2017* Lancashire Care NHSFT photo 4

2016* Bolton CCG and Bolton NHSFT

2015* Dorset CCG

2014 Alder Hey Children's NHSFT

2013 Portsmouth CCG

2012 Countess of Chester Hospital NHSFT/ Wirral University Teaching Hospital NHSFT

2011 NHS Oldham

2010 Basildon & Thurrock University Hospitals NHSFT

FFF/ONF* Award

2021* Beth Pidduck, Lancashire Teaching Hospitals NHSFT

2020 Natasha Monroe, NHS England and NHS Improvement

2019 Ken Godber, East Midlands lead

2018 Mark Songhurst, Leeds Teaching Hospitals NHST

2017 John McLoughlin, NHS England

2016 Ben Roberts, Bolton NHSFT

Governance

2021 Liverpool University Hospitals NHSFT

2020 East Suffolk and North Essex NHSFT

2019 Epsom and St Helier University Hospitals NHST, Sutton CCG and Surrey Downs CCG

2018 Northern Care Alliance NHS Group and Mersey Internal Audit Agency

2017 Chorley and South Ribble CCG and Greater Preston CCG

2016 Lancashire Teaching Hospitals NHSFT

2015 North East Lincolnshire CCG, North Lincolnshire CCG, Northern Lincolnshire and Goole NHSFT, Navigo Health and Social Care CIC and Care Plus Group

2014 South Warwickshire NHSFT

2013 Imperial College Healthcare NHST

2012 Leicestershire Partnership NHST/EMIAS

2011 University Hospital of South Manchester NHSFT

2010 Plymouth Hospitals NHST and Audit South West

Havelock Training

2021 Liverpool University Hospitals NHSFT

2020 Alder Hey Children's NHSFT

2019 Countess of Chester Hospital NHSFT

2018 Wrightington, Wigan and Leigh NHSFT

2017 North Staffordshire Combined Healthcare NHST

2016 London Ambulance Service NHST

2015 Liverpool CCG

2014 The Walton Centre NHSFT

2013 Nottingham University Hospitals NHST

2012 Birmingham and Solihull Mental Health

2011 East Kent Hospitals University NHSFT

2010 NHS Central Lancashire

Delivering Value with Digital Technology/Embracing Technology*

2021 Dorset Integrated Care System 2020* East Lancashire Hospitals NHST

Diversity and Inclusion 2021 Airedale NHSFT

Overcoming Adversity

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