NHS efficiency map

Updated January 2018

The HFMA and NHS Improvement have worked in partnership to update and revise the NHS efficiency map. The map is a tool that promotes best practice in identifying, delivering and monitoring cost improvement programmes (CIPs) in the NHS.

NHS organisations continue to work hard delivering savings through improving efficiency and reducing waste. NHS England's *Five-year forward view*[1] makes clear the scale of gap between current spending and resources, setting out how NHS organisations will be expected to close the gap by 2021. *Next steps on the NHS five-year forward view*[2], published in March 2017, sets out the current position and priorities for the next two years.

Alongside this, Lord Carter's productivity review[3] found savings could be made through addressing unwarranted variation in the cost of providing clinical and back-office services, through improved staff engagement, better management of services and performance data and using digital technology more often. Implementing Carter's recommendations is a priority that NHS England and NHS Improvement set out in their July 2016 paper *Strengthening financial performance and accountability in 2016/17*[4].

The national focus on improving efficiency and productivity will mean taking local action to deliver savings remains a priority for all NHS organisations. Aimed at NHS finance directors and their teams and other NHS staff with an interest in the delivery of CIPs, the purpose of the NHS efficiency map is to highlight existing resources on eliminating waste, increasing efficiency and at the same time improving quality and safety.

The map is split into three sections: enablers for efficiency, provider efficiency and system efficiency. The map highlights the successes some NHS providers have had in delivering specific efficiency schemes and provides sign-posts to existing tools and reference materials. It also includes updated definitions for different types of efficiency.

This map will be updated as new tools and case studies are produced.

Guidance

1 www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

2 www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf

3 www.gov.uk/government/publications/productivity-in-nhs-hospitals

4 improvement.nhs.uk/uploads/documents/Strengthening_financial_performance_and_accountability_in_2016-17_-_Final_2.pdf

Explanation of terms

Cost savings can be measured using different methodologies. NHS trusts and NHS foundation trusts have previously measured CIP savings on a different basis but NHS Improvement[5] now defines cost savings using the former Trust Development Authority's method, namely by including revenue generation as a saving and using total expenditure as the denominator, rather than total controllable operating costs. We have produced clear definitions for the following different types of efficiency improvement.

Cost reduction means providing a service at the same or better quality for a lower unit cost, through new ways of working that eliminate excess costs. The costs that are reduced could be ongoing or future pay or non-pay expenditure. A simple example is the use of a different orthopaedic prosthesis offering the same or improved clinical quality for a lower unit cost. Cost reduction savings are typically savings that are cash-releasing. Cash can be released on a recurrent, ongoing basis (if, for instance, staff costs are reduced) or a one-off, non-recurrent basis. They differ from non-cash releasing savings, which result in more activity or services for the same cost or for an additional contribution.

Cost avoidance is a type of cost reduction but refers specifically to eliminating or preventing future costs arising. Cost avoidance measures may involve some expenditure but at a lower level than the expected future costs to be avoided. They may typically not formally be part of the CIP programme but instead avoid future cost pressures. Examples are the avoidance of using locum doctors by making substantive appointments, reducing (non-budgeted) premium pay spend, or increased use in the future of nursing bank staff to avoid higher cost agency premium pay.

Income generation This applies to non-NHS contract funding schemes that provide a contribution to an NHS body that can be used for improving health services. Examples include charging for certain patient services or facilities such as a private room and television or telephone. NHS bodies can also enter into commercial ventures with private companies to generate income from specific services. The Department of Health provides further details[6]. Income generation schemes are typically cash generating schemes as opposed to cash releasing cost reduction schemes.

Service productivity improvements These schemes aim to improve patient care by changing the way services are delivered so that productivity is increased and financial benefits can be delivered. Service productivity improvements often involve joint working between clinical, operational and finance staff, sometimes across different organisations, to develop new ways of working.

Improving service quality and safety are the main priority with the intention of identifying on-going, recurrent efficiency savings and productivity gains through delivering services in the best way. These schemes can make cost savings or can generate an additional contribution.

5 improvement.nhs.uk/uploads/documents/
BM1653_Q4_sector_performance_report.
pdf

6 webarchive.nationalarchives.gov.
uk/20130107105354/http:/www.
dh.gov.uk/prod_consum_dh/groups/
dh_digitalassets/@dh/@en/documents/

NHS efficiency map

Enablers for efficiency

The first section of the map focuses on good management at all levels of an organisation, from boards to service teams. Organisations need to be well-led at board level so that the right decisions can be made about prioritising and developing savings plans, using the best evidence and by working across the whole organisation or in partnership with others in the local system.

Managers of divisions and teams must also have the right tools to help them plan properly, collect the right data for benchmarking and monitoring performance and make sure savings plans are delivered by team members.

Underpinning any savings programme should be a system of robust internal control that allows managers to report and monitor performance with confidence and take assurance that new systems and processes are operating as planned. Using digital technology is an increasingly important part of delivering services in new ways to improve productivity and is covered in this section.

Improvement area	Case study	Links to tools	Further reading
1. Board capability and governance Appropriate board capability and structures are a key requisite for sustainability. This area links to tools to help boards benchmark their skills and review where there are capacity gaps.		**NHS Institute board development tool** Challenges boards to consider how they operate as a corporate entity **Monitor: Well-led framework for governance reviews** Document to support NHS foundation trusts to gain assurance that they are well led **NHS North West Leadership Academy capability checklist** Reviews overall effectiveness of individual board members	**NHS Leadership Academy: The healthy NHS board** Report outlining principles for good governance **Audit Commission: Taking it on trust** Report looking at how NHS boards gain assurance about the effectiveness of the internal control environment **NHS Improvement: Single oversight framework** Document designed to help NHS providers attain and maintain Care Quality Commission ratings of 'Good' or 'Outstanding' **NHS Improvement: Making the case for quality improvement** 10 lessons for NHS leaders seeking to embed quality improvement in their work

Enablers for efficiency

Improvement area	Case study	Links to tools	Further reading
2. Management capability The right management structures and engagement are key to delivering service improvements and cost savings.	**Click here for a case study on one trust's approach to engaging staff with the efficiency agenda**	**Monitor: Service line management** Service-line management (SLM) is a combination of management and business planning techniques designed to improve the way healthcare is delivered **NHS Institute quality and service improvement tool** Gives an overview of performance management and other tools you can use in conjunction with it **NHS England: Planning, assuring and delivering service change for patients** A good practice guide for commissioners on the NHS England assurance process for major service changes and reconfigurations **NHS IQ project and performance management** One of the eight components of the NHS IQ Change Model **HFMA NHS operating game** A game-changer for NHS finance, this training tool transforms clinicians' and non-clinicians' interactions in their daily decision-making by increasing their financial awareness through game play	**NHS National Institute for Health research: How do they manage?** A qualitative study of the realities of middle and front-line management work in healthcare **NAO: Management of NHS hospital productivity** Report examining how productivity in hospitals in England has changed from 2000 to 2010 **King's Fund: Future of leadership and management** Report summarising the work of the King's Fund 2010 commission set up to investigate and report on management and leadership in the NHS **NHS Improvement: Engineering better care** Report describing a 'systems approach' for improvement designed collaboratively between engineers, clinicians and managers
3. Best practice CIP management Good approaches to managing, recording and tracking are key. This area looks specifically at best practice cost improvement programmes (CIPs).	**Click here for a case study on one trust's approach to CIP management**	**Audit Commission and Monitor: Delivering sustainable CIPs** Report that aims to equip staff at all levels to ask challenging questions about aspects of the CIP process and to review their approach against the good practice identified **Trust Development Authority: guidance for financial best practice** Guidance for trusts on consultancy spending controls	**HFMA e-learning: Introduction to CIPs** HFMA e-learning module on CIPs **Audit Commission and Monitor: Delivering sustainable CIPs** Guidance on the use of programme management offices (to help plan, identify and deliver CIPs and to successfully manage the overall CIP programme)

Enablers for efficiency

Improvement area	Case study	Links to tools	Further reading
4. Controls and reporting Robust baseline provision of information and the control environment are important. This area highlights the resources available to help organisations review their key controls.		**NHS England: conforming local commissioning data** Guidance on developing conformed data sets **Future-Focused Finance: difference 1 day makes** Case study on improving monthly financial reporting	**Audit Commission: Figures you can trust** Briefing on data quality in the NHS **King's Fund: Service line management** Report on how SLM can improve productivity
5. System leadership Delivery of system efficiency requires good external leadership and governance. Toolkits are available to help organisations plan and develop strategies more effectively.		**NHS Improvement: Developing local system strategy** Guide to help system leaders tackle the challenges of developing strategy across their local health systems **NHS England: Effective service change toolkit** Aims to give an overview of the support and guidance available to local organisations as they seek to progress service change	**King's Fund: System leadership resources** Website describing leadership programmes and other assistance **King's Fund: The practice of system leadership** Case studies of 10 senior leaders **HFMA: System leadership in the NHS** Considers practical steps finance directors can take to improve system leadership
6. Digital maturity Organisation and system-wide digital agenda will assist efficiency, integration and self-care. Many organisations do not make best use of digital technology to support service change. This area highlights resources to help organisations improve the way they use technology to increase productivity.	**Click here for a case study on one trust's approach to developing an online service**	**NHS England: Digital maturity assessment** Measures the extent to which healthcare services in England are supported by the effective use of digital technology	**NHS England: Digital technology resources** Webpage of resources **Department of Health: Review of IT in the NHS** Review will look at ways to improve NHS IT, including electronic health records, to achieve a paper-free health and care system by 2020 **Digitising healthcare** Practical insights for the NHS to increase uptake of digital technology

Provider efficiency

This section focuses on the efficiency and productivity improvements NHS provider organisations can make across their organisations. It provides links to tools, where available, and to background reading, with detail around the types of savings that can be expected.

The section covers all aspects of workforce cost savings, as pay costs are the largest area of a provider organisation's expenditure. Topics include managing staff absence, using mobile technology to improve staff productivity and approaches to clinical staffing to maintain service quality and patient safety.

Provider organisations also make use of a range of support services – both clinical and back-office – and this section includes tools to help organisations make decisions about the best way to deliver those services.

Finally, in addition to cost savings and cost avoidance, this section covers income generation opportunities.

Improvement area	Case study	Links to tools	Further reading
7. Optimal use of workforce Getting skill mix right, managing staff absences, using technology to support mobile working and creating new roles are all methods to help improve productivity. There are several tools available to help managers optimise workforce planning.		**NHS Employers: Guidelines on managing sickness absence** Steps to create healthy workplaces and minimise absence **NHS Wales: Sickness absence management toolkit** Resources to help minimise absence **NHS Digital: Mobile technology investment toolkit** Resources to support QIPP, from the former Health and Social Care Information Centre	**NHS Employers: Sickness absence** Online resource library **Digital Health Stoke-on-Trent resources** Online resource library **NHS England: Technology enabled care services** Resource for commissioners to help maximise the value of technology-enabled care services for patients, carers, commissioners and the whole health economy
8. Clinical workforce Good job planning, rostering and approaches to specialling can enable workforce productivity improvements. There are several tools available to help managers optimise clinical workforce planning.	**Click here for a case study on two trusts' approach to enhanced nursing**	**NHS HEE West Midlands: Safe staffing tools mental health and learning disability** Evidence-based tool to inform staffing **Shelford Group: Safer nursing care tool** One method used to assist chief nurses to determine optimal nurse staffing levels **NHS Improvement: Staff workload tracker tool (elective care)** Tool allowing staff groups to track key areas of their activity and time spent on each in a week	**NHS HEE: Workforce planning resources** Workforce minimum data set return **NHS Employers: Medical workforce resources** Information on medical workforce planning **NHS Improvement: Allied health professionals job planning, best practice** Advice for trusts to ensure their job planning for allied health professionals is consistent with best practice

Provider efficiency

Improvement area	Case study	Links to tools	Further reading
8. Clinical workforce (continued)		**Skills for health: Integrated workforce planning** Six Steps Methodology to Integrated Workforce Planning is a practical approach to planning that ensures you have a workforce of the right size with the right skills and competences **AUKUH acuity dependency tool** Developed to help NHS hospitals measure patient acuity and/or dependency to inform evidence-based decision-making on staffing and workforce **NHS Improvement: Making effective use of staff banks** Toolkit to help trusts maximise the use of staff banks and reduce agency spend **NHS Improvement: Safe, sustainable and productive staffing in urgent and emergency care** Resource to help providers implement safe staffing levels in urgent and emergency care settings	**King's Fund: Workforce planning in the NHS** What is happening in the NHS workforce in mental health, GPs and community nursing **NAO: Managing the supply of NHS clinical staff in England** The NAO found that a more coordinated and proactive approach to managing the supply of staff could result in efficiencies for the NHS as a whole **NHS Improvement: Clinical staff shortages** Analysis of the causes and extent of current clinical staff shortages in acute hospitals, focusing on adult nurses and consultants **NHS Employers/BMA: A guide to consultant job planning** Framework for the consultant job planning process **NHS Improvement: Rostering good practice guide** Developed following a review of the rostering practices of the 32 trusts that took part in the Carter review programme
9. Clinical support services The Carter review suggests savings can be found by redesigning clinical support services. Collaborative working will enable pathology, radiology and pharmacy improvements.		**NHS England: Commissioning for effective service transformation** This guide will help commissioners of health and care services to commission for service transformation **NHS England: Effective service change toolkit** Toolkit aims to provide an overview of the support and guidance available to local organisations as they seek to progress service change	**NHS England: Commissioning support services** Advice on whether to make, share or buy

Provider efficiency

Improvement area	Case study	Links to tools	Further reading
10. Service redesign and getting it right first time This area looks at savings and service improvements through redesigning of services.	**Click here for a case study on one trust's approach to redesigning mental health services**	**British Orthopaedic Association: Getting it right first time** Professional guidance to implement the policy **NHS networks: Getting it right first time** Members' network for orthopaedics	**Getting it right first time report** Considers the current state of England's orthopaedic surgery provision and suggests that changes can be made to improve pathways of care, patient experience, and outcomes with significant cost savings
11. Procurement and non-pay The Carter report makes recommendations about reducing variation in non-pay costs through improved procurement. Area looks at improved category management, collaboration, using technology and the GS1 standard.	**Click here for a case study on one trust's procurement strategy** **Click here for a case study on saving printing costs** **Click here for a case study on one trust's approach to managing blood** **Click here for a case study on eprocurement** **Click here for a case study on an ambulance trust's approach to fuel procurement**	**Department of Health: NHS procurement standards** Standards for assessing NHS procurement performance **GS1 UK website** GS1 works with healthcare providers and suppliers to provide improved patient safety, greater regulatory compliance and to drive operational efficiencies **GS1 UK academy** Offers training, webinars and e-learning	**Department of Health: NHS eProcurement Strategy** This document follows on from *Better procurement, better value, better care* (Department of Health and NHS England, August 2013), which included a commitment to publish an NHS eProcurement strategy and mandate the use of GS1 product coding standards
12. Estates The Carter report makes recommendations about relative and target performance in estates costs. The Department of Health has produced resources to help organisations manage their estates more efficiently.		**Department of Health: Achieving excellence design evaluation toolkit (AEDET)** Part of a benchmarking tool to assist trusts in measuring and managing the design quality of their healthcare facilities **Department of Health: A staff and patient environment calibration toolkit (ASPECT)** Part of a benchmarking tool to assist trusts in measuring and managing the design quality of their healthcare facilities	**Lord Carter report on productivity in hospitals** Lord Carter's review of efficiency in hospitals shows how large savings can be made by the NHS **NHS Providers: Carter review briefing note** Lord Carter's review of acute trusts' operational productivity: on the day briefing **NHS Estates: Risk-based methodology for managing backlog** Best practice advice on undertaking a detailed survey to establish backlog. It introduces a model for measuring risk in relation to sub-standard assets

Provider efficiency

Improvement area	Case study	Links to tools	Further reading
12. Estates (continued)			**King's Fund: Time to think differently** How the NHS estate could help to improve efficiency, move more care out of hospitals and exploit new technologies **Sustainable development unit: NHS carbon reduction strategy** The strategy shows the scale of reduction in carbon required for the NHS to meet its legal targets set out in the **Climate Change Act**
13. Corporate support The Carter report makes recommendations about relative and target performance in corporate services.		**NHS benchmarking services** Benchmarking Network provides three core services to its subscribing members plus bespoke projects **London Procurement Partnership benchmarking service** Benchmarking and analytics service **NHS National Performance Advisory Group benchmarking clubs** List of best value clubs **NHS Digital iview** Tool to compare workforce WTEs against peers, driven from ESR **CIPFA Corporate Benchmarking Clubs** CIPFA provides a subscription-based benchmarking service across areas	**NHS Benchmarking Network** Report supports the NHS benchmarking service tool
14. Productive series The Productive Series, from the NHS Institute for Innovation and Improvement, is a good source of material applying lean methods to operational areas.	**Click here for a case study on a trust's approach to theatre management**	**NHS Institute for Innovation and Improvement Productive Series** Series supports NHS teams to redesign and streamline the way they manage and work, covering a range of topics	**NHS England: Sustainable Improvement Team** The SI Team (formerly NHS Improving Quality) is the driving force for improvement across the NHS **Monitor: Improving productivity in elective care** Gives support for NHS providers to improve productivity in elective care

Provider efficiency

Improvement area	Case study	Links to tools	Further reading
15. The Model Hospital The Model Hospital gives trusts information on key performance and productivity metrics from board to ward. It contains defined performance metrics and enables organisations to compare performance against peers and recognised best practice. It also contains good practice guides and case study examples of best practice.		**Carter review: The model hospital** The Model Hospital can be accessed through this login page	**Carter report: Final report on operational productivity in English acute hospitals** The Model Hospital forms part of the final Carter review report **Carter Interim report: Review of operational productivity in NHS Providers** It is also covered in the interim Carter review report
16. Commercial income In addition to reducing and avoiding costs, NHS organisations can develop revenue generation schemes. This area covers overseas visitors and migrants cost recovery and other commercial income.		**NHS England: Overseas visitor cost recovery guidance** Interim guidance for implementing risk share arrangements between providers and commissioners for chargeable overseas visitors	**Department of Health: Changes to charging overseas visitors** Summary of changes made to the way the NHS charges overseas visitors for NHS hospital care **Department of Health: Income generation** Guidance gives information and advice about income generation in the NHS **NHS Identity: Commercial income guidance** Further guidance on the NHS brand

System efficiency

The final section of the map looks at how organisations can work together within their local or regional health system to deliver care in the most appropriate way to improve service quality, patient safety and patient satisfaction while achieving cost savings.

These savings require organisations to work in partnership with other providers, commissioners or local government bodies to redesign services using data to identify where improvements can be made and to benchmark existing services against best practice.

Improvement area	Case study	Links to tools	Further reading
17. Urgent and emergency care The Keogh Review made recommendations about urgent and emergency care. Redesigning urgent and emergency care services could improve patient care and reduce costs.	**Click here for one trust's approach to palliative care, which has improved the quality of services and reduced emergency admissions**	**RCGP: Urgent and emergency care toolkit** Clinical audit toolkit, applicable across a wide range of urgent and emergency care situations, and one which supports the implementation of a system of routine clinical audit along all urgent care pathways **NHS Improvement: Emergency department (ED) patient safety checklist** Resource to support providers to maintain patient safety and reduce overcrowding in emergency departments **NHS England: Clinical streaming principles** Principles for clinical streaming in A&E departments to support local planning and decision-making to achieve comprehensive front-door clinical streaming service	**Keogh urgent and emergency care review** Comprehensive review of the NHS urgent and emergency care system in England **King's Fund: Managing urgent and emergency activity** Developing an integrated approach to urgent and emergency care, involving hospitals, community, primary and ambulance services through joint service planning and sharing of clinical information across different agencies **NHS England: Transforming urgent and emergency care services in England** Safer, faster, better: good practice in delivering urgent and emergency care. A guide for local health and social care communities
18. Chronic disease and frailty Patients with chronic diseases and frailty account for much NHS spending. More outreach and monitoring models for high-risk patients are needed to avoid preventable crises and hospital attendances. Highlights the available resources.		**Johns Hopkins: Diagnosing frail patients** Online tool eliminates guesswork from diagnosing frail patients **NHS England: Toolkit for general practice in supporting older people with frailty** Achieving the requirements of the unplanned admissions enhanced service (2014)	**NHS England: Safe, compassionate care for frail older people** Practical guidance for commissioners, providers and nursing, medical and allied health professional leaders **NHS future fit: Further reading about long-term conditions and frailty** Detailed references and further reading about long-term conditions and frailty

System efficiency

Improvement area	Case study	Links to tools	Further reading
19. Integration with social care Working with social care providers can improve patient care and result in significant cost savings. Key areas to focus on in this area include delayed transfers of care and the need to better integrate health and social care provision.		**NHS Clinical Commissioners: Health and care integration** Toolkit to help local health and care leaders move further and faster on achieving their vision of integration **LGA/ADASS/NHS England: Integrated care value case toolkit** Toolkit should enable health and wellbeing boards and local partners to understand the evidence and impact of different integrated care models on service users, as well as the associated impact on activity and cost to different parts of the health and care system	**Department of Health: health and social care integration policies** What the government is doing about health and social care integration **Monitor: Delivering better integrated care** Summary of what delivering better integrated care means **Nuffield Trust: What is integrated care?** Research report investigates what is meant by integrated care and explores the concepts that underpin it **Skills for care: Workforce integration** Supporting you to make the change to integrated care delivery
20. Commissioning for value and RightCare Commissioners need to use all available data to identify the healthcare needs of their populations and prioritise their resources to commission care in the most cost-effective way. NHS RightCare is a national programme analysing population healthcare to identify value improvement. This area links to tools to help commissioners understand the data.		**NHS England: Commissioning for value data packs** Comprehensive data packs to support CCGs and NHS England in the regions **NHS England: Commissioning for value interactive tool** Online interactive charts and data **NHS Library benchmarking resources** Online links to benchmarking tools	**NHS RightCare: Commissioning for value resources** A range of Right Care commissioning for value tools **NHS Institute: Measurement for quality and cost** Library of case study examples

System efficiency

Improvement area	Case study	Links to tools	Further reading
21. Prevention and self-care Prevention and self-care approaches are examples of cost avoidance, where patients can avoid hospital admissions, for instance. The sustainability and transformation plan process will identify gaps in prevention services and where patients can be more involved in their own care.		**Monitor: Strategy development: a toolkit for NHS providers** A toolkit to support all NHS providers in developing clear and well thought out strategies **NHS Improvement: In it together: developing your local system strategy** Summary of workshops on strategy development **Department of Health: Self-care toolkit** A simple information booklet that could provide you with handy tips and skills to support you along the way to managing your health and condition **Future-Focused Finance: Best possible value** As part of the Future-Focused Finance programme, this work-stream provides practical tools and resources to support NHS finance business partners and NHS organisations in delivering the best possible value for patients and the public **NHS England: End of life care commissioning toolkit** A toolkit for health and social care professionals **Nesta: Realising the value** Tools and resources which enable people to take an active role in their own health and care	**NHS England: Sustainability and transformation plans** Background to STP policy **HFMA: Emerging approaches, developing STP governance arrangements** This briefing explores the emerging governance arrangements being developed to support STPs

About NHS Improvement

NHS Improvement is responsible for overseeing NHS foundation trusts, NHS trusts and independent providers. We offer the support NHS trusts and NHS foundation trusts need to give patients consistently safe, high-quality, compassionate care within local health systems that are financially sustainable. By holding providers to account and, where necessary, intervening, we help the NHS to meet its short-term challenges and secure its future.

NHS Improvement is the operational name for the organisation that brings together Monitor, NHS Trust Development Authority, Patient Safety, the National Reporting and Learning System, the Advancing Change team and the Intensive Support teams.

About the HFMA

The Healthcare Financial Management Association (HFMA) is the professional body for finance staff in healthcare. For more than 60 years, it has provided independent and objective advice to its members and the wider healthcare community. It is a charitable organisation that promotes best practice and innovation in financial management and governance across the UK health economy through its local and national networks.

The association also analyses and responds to national policy and aims to exert influence in shaping the wider healthcare agenda. It has a particular interest in promoting the highest professional standards in financial management and governance and is keen to work with other organisations to promote approaches that really are 'fit for purpose' and effective.

The vision that inspires us is a world where we see better quality healthcare through effective use of resources. In order to help deliver our vision, we are committed to our mission of:

· Representing and supporting healthcare finance professionals

· Influencing healthcare policy

· Promoting best practice, education and CPD

If you have any suggested additions to the *NHS efficiency map*, please contact **policy@hfma.org.uk**

HFMA

1 Temple Way, Bristol BS2 0BU

T 0117 929 4789   F 0117 929 4844   E info@hfma.org.uk

www.hfma.org.uk