Forging ahead

An evaluation of the first two years of Future-Focused Finance has demonstrated both progress made and areas that it should address. Seamus Ward reports

Nearly three years into the programme, NHS Future-Focused Finance (FFF) has become part of the health service lexicon and a highly visible presence, particularly on social media. It's a wide-ranging programme, taking in everything from what it's like to work in NHS finance, to the skills needed as the NHS changes under the Five-year forward view, to clinical engagement and how to achieve best value and lean systems.

FFF recently commissioned an evaluation of progress over its first two years. It concluded that some advances had been made and it also highlighted there was more to be done.

FFF was launched in February 2014 as a five-year programme for all members of finance staff. It is led by the Department of Health, national arm's length bodies such as NHS England, NHS Improvement and Health Education England, together with the HFMA - all under the auspices of the Finance Leadership Council. The HFMA provides hosting arrangements for FFF budgets and contracting. The arm's length bodies provide funding for a small central team to deliver day-to-day support for the programme.

The initial objectives boiled down to putting resources to the best possible use, reflecting changing demography, and increasing clinicalfinance engagement. Individual finance staff members would be equipped to drive and adapt to change, while ensuring finance teams see how their contributions matter. Six action areas were developed to deliver these objectives:

- Best possible value
- · Great place to work
- Close partnering
- Efficient processes and systems
- Skills and strengths
- Foundations for sustained improvement.

Programme director David Ellcock says any assessment of FFF should take into account the fact that it is a mix of tangible traditional outputs, such as reports and tools, and others that are more difficult to measure, though no less important.

'There's an interesting contrast at the heart of FFF,' he says. 'There's an understandable desire from a lot of people for published product they can see - if things come out of FFF then it is seen to be delivering and therefore providing value. Products are important, but so is the social movement that is winning hearts and minds, such as the value makers and working closely with clinicians.'

Best possible value

The Best possible value workstream was an early example of a tangible output. FFF worked with management consultancy Bain to deliver a best value decision-making framework, which was launched early in 2015. Mr Ellcock says it has been used by NHS England to aid the delivery of the Five-year forward view, in assessing whether organisations should be granted vanguard status and funding, for example. However, to date its use has not been as widespread as hoped.

'NHS England made reference to the framework in guidance on commissioner financial planning, but we haven't seen individual organisations take it up in significant numbers. Having said that, we recently launched a campaign to get people to use it and it has generated significant interest.'

Mr Ellcock says the Great place to work action area has delivered a range of outputs. These include coaching and mentoring seminars with the HFMA. The association also worked with FFF on the Career stories project – a large piece of work that profiled a range of NHS finance staff at different stages of their careers. 'This piece of literature always





generates a fantastic response, he says.

The FFF work on the attributes of finance directors has the time to read" is due to be published soon, he adds. 'A large piece of work on developing a national finance leaders' talent pool and regional talent networks, supported by the arm's length bodies and delivered in conjunction with the HFMA, will be launched in December.'

FFF encouraged finance directors to show their support through declarations - by July 2016, 260 of the 500 organisations' directors had signed the declarations and FFF is looking to increase this. Mr Ellcock believes the declarations are important for the whole initiative. 'I think that not only are they saying FFF is a good idea, but also it demonstrates that finance directors are telling their staff they can be involved in FFF. Giving their staff permission to play a role is as important as saying they like the idea of FFF.

He concedes there is more to do in some areas, including diversity. 'It's a massive task. We are doing better, but it's a drop in the ocean compared with what could be achieved.'

The Foundations for sustained improvement workstream includes what some have referred to as the beating heart of FFF - the value-maker programme. This was an early initiative, which built on the London Olympics games maker concept - value-makers are local champions of FFF, sharing best practice and resources. By July this year, 190 valuemakers had been recruited.

Mr Ellcock says: 'The value-maker programme's been a real success in terms of engagement. The report is clear about this: a significant number of value-makers have been closely involved in the work nationally and the evidence suggests a group of value makers are working hard locally without always bringing this to the national team's attention. We need to work more closely with them to showcase their work and to better understand the support they need. We know that inevitably a few will drop away, but where it's worked, it has worked very well.'

The Close partnering workstream and the Finance and clinical educator (FACE) programme (see Healthcare Finance, November 2016) have been built on the value-maker network. Both initiatives seek to improve finance engagement with clinicians.

'This is a network of people sharing best practice and working with colleagues to get messages across finance and clinical boundaries, in both directions. There's no point in people sitting at the centre saying: "This is the way we do things". This is where the social network is really important. But how do you put a value on that?' Mr Ellcock asks.

Mr Ellcock insists progress is being made on clinical engagement. 'This is what FACE is about. I think we had hoped a lot more clinicians would be involved in FFF, but when we realised that wasn't going to happen the emphasis changed - finance staff are going out to work with clinicians. However, there is still a lot of work to be done.'

Moving on, Mr Ellcock admits the Efficient processes and systems workstream has not yet achieved everything it set out to achieve. It began with purpose, with the launch of a benchmarking tool two and a half years ago. This month, the FFF team plan to relaunch it as a fully online tool. Organisations taking part will be able to input their data and compare with other organisations. It plans to update the data every six months. 'The action area also produced two process guides on

procure-to-pay and hire-to-retire systems, which have gone down very well with practitioners and are available via the FFF website,' says Mr Ellcock.

> The potential to create a clearing house for intra-NHS financial transactions - an idea floated soon after the FFF launch - is also being examined. 'We are exploring the possibility of this on a much smaller scale than initially proposed and are looking to develop this with colleagues in a single patch,' he says.

The Skills and strengths workstream has produced the Four strengths framework, which highlights the skills finance staff will need to help the NHS through the next stages of its five-year plan (Healthcare Finance, November

2016). This is being used in several organisations for formal and informal assessment, including annual appraisals. It is also working on an e-learning project with the HFMA and Health Education England.

The need for better communication is a recurring point in the report and is one area of focus for the Foundations for sustained improvement action area. 'One of the things I now know is that we didn't spend enough time thinking about how we would communicate our activities,' says Mr Ellcock candidly.

'This is particularly true because there is always so much going on. We are always looking forward and deliberately set out not to make FFF a project that simply churns out huge printed documents that no-one has the time to read.'

Website updates

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David Ellcock (above)

He accepts the report's assessment of the FFF website - that the site needs to be 'more engaging and active'. He says it relies on the efforts of value-makers and other supporters of the initiative to create much of the content. 'Though the blogs they produce are of a high standard, they are sporadic as they can only be produced when individuals can take time away from their day jobs to write them. FFF is planning a new version of the website that's less reliant on users but will still provide a place for individuals to add content.'

The evaluation report concludes that it is the right time for FFF to review and refresh its initial aims and objectives to ensure they are clear. Mr Ellcock says this is 'entirely appropriate' as FFF goes into the second half of its five years. The landscape has changed, with two sponsoring bodies - the NHS Trust Development Authority and Monitor - now merged into NHS Improvement, for example. 'With these changes, we need to look at the aims and objectives again,' he says.

So if a similar evaluation were to take place in two-and-a-half years, what would it show? 'I am confident we will have delivered the things we are required to do and these will be useful to the finance function,' says Mr Ellcock. 'We will have delivered a wide range of useful products and created a social movement within the finance function to help finance staff make the most of their networks.'

As with any interim evaluation, the assessment of FFF's progress has highlighted areas that must be addressed. Mr Ellcock points out, much has been achieved by volunteers and a handful of central staff. But he knows that FFF must now kick on to fully achieve its objectives. •