HFMA AWARDS 2017



December 2017 | Healthcare Finance supplement

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On top form



Longstanding and highly respected NHS finance director Adrian Roberts has had a busy year. He's overseen a significant turnaround programme and helped steer his trust through a merger creating a £1.6bn turnover body.

Nominated for his role as executive director of finance at Central Manchester University Hospitals NHS Foundation Trust, Mr Roberts is now group chief finance officer at the newly formed Manchester University NHS Foundation Trust. The trust, which runs nine hospitals across six sites, was formed by merging Central Manchester and University Hospital of South Manchester NHS Foundation Trust in October 2017.

The Central Manchester trust turnaround programme turned a deficit approaching £17m in 2015/16 into an operating surplus of more than £56m in 2016/17. He led the programme to engage staff and delivered the message –

using short videos

– that boosting
productivity, efficiency
and cost control could contribute to providing
excellent patient care.

The trust said Mr Roberts was instrumental in the merger, using his finance expertise, negotiating skills and knowledge of the health sector. He was central to the development of the detailed business case required by the

Also shortlisted

Aaron Cummins, University Hospitals of Morecambe Bay NHS Foundation Trust Mr Cummins was nominated by his trust

> for his outstanding leadership qualities and his articulation of a financial framework that is easily understood by clinical leaders. The framework has underpinned an efficiency and sustainability programme that has delivered cost improvements of 4.5%-5.5% each year for five years. He has fostered a spirit of innovation, which has led to the development of a system of financial early warning scores,

developed by trust finance managers. While not compromising on finances, he has established a culture of quality and safety, helping the trust move from special measures under the Care Quality Commission rating to outstanding for care and good overall in three years. He has also worked with local organisations on steps towards establishing an accountable care system.

Anthony Robson, finance director of QE Facilities Mr Robson was instrumental in establishing the wholly owned subsidiary of Gateshead Health NHS Foundation Trust, which provides non-clinical services. including estates. The trust said he created an innovative financial model that brings together the

best commercial benefits, through financial innovation, with the best

of a private outsourced service and quality in-house services. Over the last year he has helped increase the size of a consultancy team, which provides advice on efficiency savings and VAT to more than 10 NHS bodies nationally, providing income for the parent trust. By the end of 2016/17, QEF had helped the Gateshead trust deliver more than £10m in cost reductions, with projected total savings of £42m by 2021. Using its financial model, the trust has determined that the average annual savings are around 3% of the trust's turnover.

Hull Clinical Commissioning Group chief finance officer Emma Sayner

Ms Sayner has played a pivotal role in Humber and Coast Vale Sustainability and Transformation Partnership. She brought finance leads together to agree the scale of the challenge facing the STP area and made the finance group a vital function in the local partnership.



Under her leadership the finance team at Hull CCG has achieved the highest category for financial assurance from NHS England North and her finance department won the 2016 HFMA Accounts Team of the Year Award. Recent achievements include establishing a block contract arrangement with Hull and East Yorkshire Hospitals NHS Trust, which sets out a detailed risk and incentive schedule, and is a collaborative approach to improving health outcomes. Her work on contracting and risk management has brought stability and a platform to transform secondary services.

Competition and Markets Authority and NHS Improvement in proposed mergers, and was highly involved in the complex financial planning to create the new organisation.

While robust during discussion, he is keen to support ideas and innovation and acts as a strong mentor to colleagues. His dedicated approach to pastoral care of colleagues was demonstrated in his one-to-one support for non-clinical staff involved in managing the aftermath of the Manchester Arena bombing.

The trusts said he was respected for his intellect, technical skills, integrity and empathy. He has demonstrated strong leadership of a finance department that is highly regarded and considered best in class in a number of areas. including procurement and contracts and income, as well as for the qualities of its senior leadership team.

Panel members were impressed by the supporting details with his nomination, which 'clearly demonstrated substantial achievement across all of the key award criteria'.

The panel continued: 'Adrian Roberts is an exceptional finance director and has consistently delivered excellent results, both in the area of finance and in the wider managerial context where his insight, commitment and technical ability have been a huge asset to his

trust. The leadership shown in steering his organisation to a successful outcome through a complicated Competition and Markets Authority process, while delivering on internal turnaround, was also noted.

'Adrian is highly respected by his peers, clinicians and team as a visible leader and decisive decision-maker committed to the NHS and its values - the number of testimonials supporting this application was particularly impressive.'

Mr Roberts said he was 'overwhelmed and very honoured' to take the award. He said

the success of the financial turnaround at the Central Manchester trust was due to chipping away at the deficit month by month.

'I have some exceptional colleagues in the finance team and across my operational colleagues,' he said. 'Throughout my career I've always liked the quote about genius being 95% perspiration and 5% inspiration – people who work with me know that I'm not the most innovative and creative person, but we plugged away. Where there were obstacles in our way, if we couldn't get through them, we'd go over them, around them or under them.'



Mr Roberts continued: 'I will be able to show this award to the people back at the trust and tell them this is an achievement for all of us – I just happen to be the figurehead for it.

'When faced with the question, "Are you bothered about the deficit?", people at the trust decided to be bothered.' O



Innovation supremo

Deputy Finance Director of the Year Claire Liddy helped Alder Hey Children's NHS Foundation Trust overcome significant financial challenges, both in her deputy role and as acting director.

She joined the trust as deputy director in 2014 and has played a key role in modernising the finance function and improving engagement. Unprecedented risks caused by the implementation of a new electronic patient record and a move to a new hospital in 2015 led to a challenging underlying financial position (see page 5). The early forecast was for a year-end deficit of £10.5m in 2016/17 and she was asked to lead the

Ms Liddy ensured staff at all levels were involved and took ownership of the recovery plans.

As a result, a strong governance framework was created, with robust implementation of plans to deliver financial improvements totalling £14m.

recovery.

In the final quarter, with £3m of the planned recovery to be delivered, she became acting finance director. Ms Liddy embraced the role and the trust underspent against its control total – with a year-end surplus of £3.5m and £3m more cash.

Despite the demands of the role, she also chaired a group of procurement leads in the Cheshire and Merseyside Sustainability and Transformation Partnership, as well as an internal group supporting frontline services.

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"We were
impressed by
Claire Liddy's
passion, innovation
and creativity in
supporting Alder
Hey in achieving
turnaround"

The costing team's governance is performance of the trust. The story book of the

The costing team's governance and quarterly value intelligence for patients reports are now being used as best practice by NHS Improvement. The trust received a full assurance rating in the 2016/17 audits.

Ms Liddy organised a *Dragons' Den*-style investment panel and took an innovative, storybook approach to the annual accounts.

The judges hailed her achievements. 'We were impressed by her passion, innovation and creativity in supporting Alder Hey in achieving financial turnaround over an extremely short period, implementing a *Dragons' Den* panel to support innovation across the trust, as well as improving public and staff engagement on the

performance of the trust. The story book of the trust's annual accounts, presented by some of the children associated with the hospital, told the public about the trust's performance, and had over 8,000 views.'

Ms Liddy paid tribute to her team at Alder Hey. 'I am privileged to be given this award, but this is about what the team did in contributing to the success of Alder Hey. It's been a whole-team effort and it's about the impact it has made in terms of improvement and innovation.'

The achievement of the trust's financial control total while she was acting director of finance was due to the dedication of people across the organisation, she said. •

Highly commended

Andrea Bennett, deputy finance director, Bolton NHS FT The work in the Bolton health economy was recognised in the 2015 and 2016 HFMA Awards and Ms Bennett has played her part in this. She led several projects, including working day one reporting of financial performance, aligned incentives contracting and a corporate restructuring programme with the establishment of Integrated Facilities Management Bolton. The judges highlighted the creation of the integrated facilities management body, which led to £5m of recurrent savings, as well as 'implementing the finance improvement plan, adopting a continuous improvement approach and ensuring all finance team employees receive tailored staff development'.

Also shortlisted

Angela Hibbard, Northern, Eastern and Western Devon Clinical Commissioning Group The judges were impressed by Ms Hibbard's support for the Devon STP programme, giving a clear articulation of

the journey to a system approach, delivering savings and a joinedup financial plan. She developed the STP plan with a consolidated operating planning process for 2017/18 across the system.

Paul Southard, Royal Devon and Exeter NHS Foundation Trust

The panel were impressed by his work and the excellent supporting comments by his team. During a period as acting director, he became a valued member of the executive and board teams and contributed to a refresh of the five-year corporate strategy and strategic financial plan.

Vicky Hilpert, South East Staffordshire and Seisdon Peninsula, Cannock Chase and Stafford and Surrounds CCGs, helped deliver a financial recovery plan and brought together the finance functions of three CCGs. The panel were impressed by her work to bring together the finance teams, as well as helping to reduce the overall financial challenge as deputy and in her role as acting finance director.



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Turning it around

The past 24 months have been challenging for the finance team at Alder Hey Children's NHS Foundation Trust. But through innovation and collaboration, significant financial pressures have been overcome. Its efforts have now been recognised with the Finance Team of the Year Award for 2017 - an award that builds on the previous accounts team category.

The financial issues crystallised following the implementation of a new electronic patient record (EPR) system and a move to a new, part-privately-financed hospital in 2015.

The radical differences between the old IT and hospital and their successors led to a larger than anticipated performance lag. Elective and outpatient activity run rates were reduced as clinical teams were unfamiliar with their new surroundings and IT. This contributed to a deficit of £3.6m in 2015/16.

The finance team came up with a solution - harnessing business intelligence software, including real-time 'daily sales' information as part of the activity versus plan and forwardlook dashboard.

This daily sales approach changed activity planning and performance management. As well as giving real-time visual confirmation of the day's activity against plan, it also predicts activity for the week, quarter and year ahead for theatres and clinics. Before its implementation, clinical teams had to wait until working day 10 to review the previous month's activity, but now the trust's ops team can look ahead to ensure capacity is correct.

The trust's high-quality service-line reporting was used in a service review to



Winner: Alder Hey Children's NHS FT with PA Consulting's Simon Collier (right)

finance team's

and an engaging

overcome"

improve run rate and productivity - after seeing it was losing £600,000 on bronchiolitis, a new pathway halved the length of stay.

As a result of its approach, its run rate improved year-on-year, equivalent to a revenue increase of £6.5m, with activity now at planned levels. Patient experience has improved, with fewer cancellations and shorter lengths of stay. And external audit reports have been clean, with no adjustments for the "As a result of the

past three years and no financerelated recommendations.

Andrew McColl (pictured far left), head of contracts and financial planning, said the team worked closely together and with other colleagues to achieve the trust's financial goals. 'There was a sense that each pound mattered.'

Deputy finance director Claire Liddy added: 'It was challenging and in achieving the turnaround some of the figures were exceptional. It was a whole-team effort, bringing together costing, procurement, clinical and finance teams.'

The judges said: 'The introduction of an EPR system and a move to a new hospital resulted in significant financial

pressures. As a result of the finance team's leadership, innovation and an engaging approach to leadership, innovation working with the rest of the trust, the pressures were approach to working overcome, a forecast deficit with the rest of the of £10.5m reversed and a trust, pressures were surplus of £3.5m achieved with a best in class ISA260 report, no adjustments and no auditor

recommendations.' O

Highly commended

Maidstone and Tunbridge Wells NHS Trust In June 2016 the trust was one of the first put into special measures, and within four weeks the finance team had devised a plan with more than £25m of efficiency and income opportunities. The plan was delivered over six months, turning around the in-year financial position. The judges said: 'The team made a positive impact on the financial position, helping to reduce a forecast deficit of £42m down to a year-end reported deficit of £11m.'

Also shortlisted

Wrightington, Wigan and Leigh NHS Foundation Trust Over the past year, the trust has introduced transformation projects with the local clinical commissioning group. Commissioner and provider have moved to a new contract model that provided stability for the CCG and incentivised demand management, providing the trust with a £2m transformation fund. 'The finance team is commended for a sustained

high level of performance, being involved in a variety of transformation projects and sharing its best practice elsewhere,' the judges said.

The Manchester Health and Care Commissioning finance team led work on a locality financial plan that predicted a £142m deficit in the city's health and social care by 2020/21. The team was instrumental in the response, including the transaction of mental health services, the merger of three CCGs and creation of a single commissioning function.

NHS Shared Business Services is using technology to help the service deliver the recommendations of the Carter review, including a purchase-to-pay e-commerce platform that makes prices transparent, meets the NHS e-procurement strategy and delivers back-office savings. It is also introducing automation in other back-office areas, including payroll and the VAT treatment of purchase invoices.



Some clinicians might question the value of patient-level costing and interrogating data, but in the past year cardiologists at Leeds Teaching Hospitals NHS Trust have seen its value first hand.

The trust has engaged clinicians with its costing information. A good example is its review of HRG EA54Z (percutaneous standard ablation), a treatment for irregular heartbeat. The cardiologists thought the service was profitable, but the costing data told a different story - it was losing £2,000 per case.

The reason was that complex ablations were being coded as standard procedures and, when corrected, income increased by almost £14,000 a month. Lead cardiologist Andy Hogarth believes the benefits have not been limited to finances. Patient-level costing has made figures for clinical audit and benchmarking purposes more accurate, while the coding team is now more closely aligned to the service.

Cost data was used to understand why the trust's renal dialysis service had a high reference cost index (141), making it expensive compared with the national average.

"It was clear that

decision-making,

costing data and

embedded and well

utilised"

As well as gaining a better understanding of the service and its costs, the review discovered it had not been charging for a cohort of acute kidney injury activity. In April 2017, one month of this activity generated £96,000 of billable income for the trust.

There are other examples,

including improving coding in plastics and ensuring relatively simple hand procedures are not performed in more expensive theatres. The latter included exploring the possibility of running three lists and repatriating this activity to suitably equipped and relatively costeffective theatres.

'We are absolutely thrilled to win the award. It is such a reflection of everything the whole trust has done over the last couple of years,' said senior costing accountant Dave Tunstall (pictured right).

The costing work went beyond the costing team, involving the wider finance department and clinical colleagues. 'PLICS is making a big difference to our clinical colleagues, allowing them to make powerful, informed decisions that can have an impact on service delivery.'

The judges were again impressed by the high standard of the entries for the Costing Award. 'What was pleasing was the breadth and variety of the entries,' they said. 'The four shortlisted organisations reflected the significant improvement in costing and value-based

decision-making that the HFMA Costing for Value Institute is supporting and

driving throughout the NHS. 'Clinical engagement and in day-to-day clinical informed decision-making is becoming the norm for the organisations putting value information was themselves forward for the award. The panel would wish to commend all the finalists? However, Leeds was the clear

Also shortlisted

Lancashire Teaching Hospitals NHS Foundation Trust has been transforming its costing to improve pathways for its patients and reduce clinical variation. It has moved its service-line reporting (SLR) from an annual to quarterly basis and worked with clinicians to validate the data. Since mid-2016, due to improvements and validation of the system, SLR has been the basis of business case costings, while reference costs and SLR are used to set productivity and efficiency targets. To ensure the trust is focused on the biggest savings opportunities, its finance and investment committee has reviewed portfolios of services with the costing team.

Pennine Care NHS Foundation Trust

created a single data collection system (integrated service directory, ISD) that includes SLR information and allows wide and quick sharing of information. Led by a senior costing accountant, the PLICS project brings together all the information needed for costing into a single system that is flexible and can be used outside costing. The data is being used to underpin the trust's financial recovery model, facilitating discussion about cross-subsidising services and opportunities for efficiency savings. The trust aims for the ISD and costing model to be a key management tool that, within the next five years, will support transformation.

University Hospitals Coventry and Warwickshire NHS Trust has embarked on a project linking prostate cancer outcomes with costing data. Rather than using the traditional survival rates to represent outcomes, the trust wanted to explore what patients considered a good outcome. It chose ICHOM outcome measures and has started to match the collected patient data to PLICS data. Data collection from patients has been improved and the project will enable the trust to look at relative value (cost versus outcome) of treatment options; create a decisionmaking platform for clinicians; and give more detailed information to patients.

winner. 'The panel were impressed with the overall vision and passion - and the clinical engagement across the trust – and how it was clear that in day-to-day clinical decisionmaking costing data and value information was embedded and well utilised.' O

Merry Christmas and best wishes for 2018 from all at **Bellis-Jones Hill**



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Roll of honour

During this year's awards ceremony, the HFMA made a number of personal awards, for individuals who have made a career long contribution to the association. These included two Outstanding Contribution Awards, which are for a specific contribution, and nine honorary fellowships – a record number. These fellowships are awarded to individuals who have made a substantial and sustained contribution to the life and work of the association.

Outstanding Contribution

O Bob Alexander (left) was nominated by the HFMA Board in recognition of his contribution to NHS finance, the HFMA, the Financial Leadership Council and the development of finance staff. Mr Alexander, currently deputy chief executive and director of resources at NHS Improvement, has been appointed executive chair of Sussex and East Surrey Sustainability and Transformation Partnership.

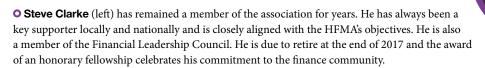
O Caroline Trevena (right) has made a significant contribution to the association and especially to the local branch network. A HFMA member since she joined the NHS, she was an active member of the Kent, Surrey and Sussex Branch until moving to the Northern Branch, where she continued to play a key role, organising conferences, writing the programmes and ensuring events run smoothly.



Honorary Fellows

• Andrew Holden (left) was nominated by the London Branch. A tremendous servant to the HFMA, he was branch chair for eight years. Throughout his tenure, his leadership, professionalism, enthusiasm and commitment to the branch have ensured that local HFMA members have been provided with a wealth of high-quality events to attend. He has also helped sustain the branch membership at a level in excess of 400 members.

O Hugh Groves (right) is highly respected in the wider finance family, nationally and locally. He has a passion for staff development and has made a massive contribution to the HFMA branch and FSD in the South West over a 25-year period – taking a lead role in the local research committee, chairing the FSD network and continuing to be an active member of the branch committee.



O John Guggenheim (right) was nominated by the HFMA Policy and Research Committee. A longstanding HFMA member, he is described as an unsung hero of NHS finance. Between policy meetings, he's an reference point for HFMA staff and a key member of the West Midlands Branch local research committee. He will be missed following his upcoming

• Chris Hurst (left) has been a member of the HFMA Board for the last six years, supporting the association throughout his career. He became deputy chair of his local branch not long after he joined the NHS as a finance director in 1993 and, in the last 20 years, he has been a member of the national council, helped out on a number of committees, and chaired HFMA events and conferences.

Four new honorary fellows were unable to attend the ceremony. They are:

- **O Karl Simkins** nominated by the Policy and Research Committee. A strong supporter of the HFMA, he has written chapters for the *Introductory guide to NHS finance* and reviewed drafts of other publications.
- **O Bob Baker** nominated by the Kent, Surrey and Sussex Branch. A significant supporter of the branch and author of the *Personal effectiveness* module in the HFMA qualification.
- **Stephen McNally** nominated by the Northern Ireland Branch. Branch chair from 2013 to 2016, he helped clarify funding streams for the branch, steering the committee through challenging times.
- Peter Dawson nominated by the Northern Branch. He stepped down as branch chair in June 2017 after 10 years. He was hugely supportive of the branch and of the HFMA nationally.













Fit for the future

This year's Future-Focused Finance Award went to John McLoughlin, NHS England senior finance lead for financial accounting and services, for his hard work and dedication to the FFF programme.

The FFF judges commented: 'While maintaining his role as an active value maker, John almost single-handedly kept the Efficient processes and systems flame burning during 2017 and was responsible for persuading Adrian Snarr, NHS England's director of financial control, that it would be good if he were to take on the senior responsible officer role for the action area, which he duly did in November. Despite the excellence of the other nominations, the FFF team felt that John was the obvious winner.'

Mr McLoughlin said: 'I am honoured to receive this award as there's a lot of great people out there who work within FFF and the wider NHS. I believe there's a lot of efficiency savings to be made in our processes through e-invoicing and rationalisation of transactions.'

Over the year, Mr McLoughlin contributed a number of blogs to the FFF website on topics such as the potential savings that could be made by introducing virtual invoicing and the benefits of introducing this paperless process for providers and commissioners.

The NHS processes as many as 20 million invoices a year and e-invoicing could generate savings of more than 50% in processing costs per transaction. Though the number of e-invoices received by NHS England has

increased in the last few years, Mr McLoughlin believes more can be achieved.

initiative. It brings Even if the service could people together to save £1 for every invoice, he deal with the issues believes commissioners could we face, to identify save as much as £5m in hard costs through e-invoicing. and share best The savings are mainly realised through redeploying staff to other areas of finance departments. Across the NHS as a whole, efficiencies gained could be more than £20m, he said.

Mr McLoughlin was a key contributor to an FFF programme looking at working in networks, carried out with London South Bank University. This five-day programme is for aspiring finance leaders, looking at identifying, understanding,

developing and leading networks.

His commitment to developing a world-class finance function in the NHS led him to apply to become an FFF value maker in 2016, with a particular interest in the Efficient processes and systems workstream.

He continued: 'FFF is a fantastic initiative. It brings people together to deal with the issues we face, to identify improvements and share best practice - and then go beyond ideas to deliver them as well.' O

About FFF

FFF was established in 2014 and has formed working groups in six action areas:

"FFF is a fantastic

improvements

practice"

- · Best possible value creating a decision framework to deliver the best use of
- Efficient processes and systems looking at cutting transaction times and costs
- Close partnering assisting financial, clinical and operational staff, patients and the public to better understand NHS finance, improve services and reduce
- Skills and strengths ensuring finance staff have the skills and knowledge needed to perform their roles
- Great place to work developing understanding of the career framework for people working in NHS finance and how to support their career development
- Foundations for sustained improvement securing long-term sustainability for FFF, ensuring it is embedded within organisations' cultures

Alternative model

In recent years, Lancashire Care NHS Foundation Trust faced an issue with high demand for mental healthcare. It could have opened more beds, but instead chose an alternative that solved the problem and has led to the trust being named winner of the 2017 HFMA Innovation Award.

A longstanding bed management programme had reduced the number of mental health beds and sites across the county, but as demand rose, the use of out-of-area placements (OAPs) increased. These were expensive and gave patients and carers a poor experience of care.

The tipping point came in January 2016, when the trust had 94 patients in private sector beds, which led to silver command measures being initiated and work starting on finding a sustainable solution.

The trust carried out a review of patients occupying beds, asking clinical teams three questions. First, would the patient have been admitted had there been alternatives, such as assessment wards, crisis house or clinical decision unit? Almost 32% of patients would not have required admission to the acute mental health ward, with most benefiting from a short assessment ward admission.

A second question showed that 30% of patients did not need to be in an acute mental health bed that day, while the third question found that most of this group needed longterm placements.

Using this information, several initiatives were trialled, including a male assessment ward for three- to five-day admissions; a crisis support unit; an acute therapy service offering an intensive five-day psychological programme; and a crisis house run in partnership with the third sector.

Detailed data analysis allowed the project team to gain the confidence of commissioners and the board - securing rapid investment of £3.8m - by showing that existing financial pressure due to OAPs would not be compounded if the scheme failed. The new models saved £8.9m on OAPs costs.

Patients have also benefited. Of the 116 patients accessing the trust's crisis support unit in the first quarter of 2017, 81% did not require admission to any hospital bed. In the same period, 220 people accessed the acute therapy service and only one was admitted. And 72%



grow understanding of the 354 patients admitted of a complex to an assessment ward were discharged without requiring a treatment bed. The trust said patients have expressed a high degree of preference for community-based support.

problem"

The judges said: 'Lancashire Care won unanimously due to its engagement with system partners to grow understanding of a complex problem, and then seeking support for the innovative solutions that changed the service offer to patients. The panel noted the significant financial benefits achieved in collaboration with stakeholders, and excellent support throughout from the finance team.'

'It's about delivering the right care at the right place at the right time, so people don't need to be admitted as an inpatient,' said chief operating officer Sue Moore (second from right). 'It's such an honour to have received the award for work our services have been doing to ensure the people of Lancashire receive the best care possible. We have been working so hard to develop community mental health services in Lancashire and we feel extremely proud to be recognised for providing innovative, high quality services that are also financially efficient.' •

Also shortlisted

Chelsea and Westminster Hospital NHS Foundation Trust will provide a sexual health e-service for 27 London boroughs to offer financial sustainability and improve value. From April 2018, eligible residents who want a check-up for sexually transmitted infections (STIs) but have no symptoms will be able to access information online and register to be sent testing kits, avoiding clinic visits. The rate of STIs in the capital is 65% higher than other English regions. But open access would consume the entire public health budget by 2021/22 unless changes are made.

Leeds Teaching Hospitals NHS Trust is the largest and most complex of the six Scan4Safety demonstrator sites. Yet it has overcome obstacles in implementing the barcode and electronic communication standards as part of the procurement programme. It added 100,000 GTINs (numbers that identify products) to its catalogue, ensuring all spaces in the hospital

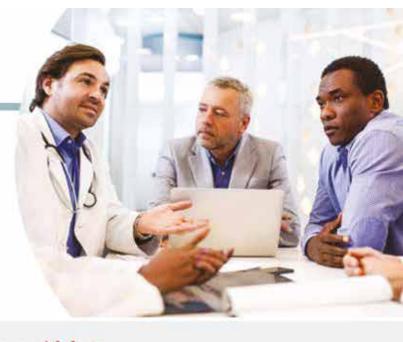
are uniquely identified and all patients receive a trackable wristband. These softer wristbands store more information and generate annual savings of £8,000 recurrently. With almost two-thirds of relevant areas using Scan4Safety inventory management, there has been an inventory reduction of about £1m. Less wastage and obsolete stock and reduced sterilisation costs have added a further £460,000 in savings.

The Christie NHS Foundation Trust engaged clinicians to ensure that transformation of cancer services is sustainable, effective and based on expert advice. Between 2014 and 2017, a pilot project rebranded early palliative care services as Enhanced Supportive Care (ESC) - a multidisciplinary team integrated with oncology teams to reduce avoidable hospital admissions. Analysis showed savings of £460,000 a year at 2016/17 prices. Subsequently NHS England adopted ESC as a national specialised services CQUIN for cancer centres for 2016-2018.

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^{1.} Care Quality Commission. The state of health care and adult social care in England 2015/16 (October 2016). Available from: https://www.gov.uk/government/uploads/system/uploads/attachment_ data/file/561730/State_of_Care_15-16_web.pdf. Accessed November 2017.

Next Steps on the NHS Five Year Forward View (March 2017). Available from: https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW. pdf. Accessed October 2017.



Also shortlisted

Jean MacLeod, North Tees and Hartlepool NHS Foundation Trust, has 'led from the front', linking high-quality care to costing and value. A strong advocate of PLICS, she chairs the local costing for value steering group, scrutinising data and developments, engaging colleagues to help improve the costing model and pushing for a greater emphasis on outcomes. Dr MacLeod has also argued for the greater use of community data to understand the relationship between clinical settings.

As well as being medical director at University College London Hospitals NHS Foundation Trust, in 2016 Gill Gaskin became clinical senior responsible officer for the Carter productivity agenda at the trust. Her Carter team developed user-friendly, actionable information on productivity opportunities, including dashboards on length of stay, and she led productivity projects that delivered more for less.

Yasir Abbasi, clinical director of addictions services at Mersey Care NHS Foundation Trust, took on the financial agenda following the transfer of commissioning to the council and local clinical commissioning group. As funding was reduced, he led negotiations with the council and CCG, outlining the impact of this on the services. He also launched a fundamental service review with the finance department that examined cost benefit and social return on investment, capacity and demand modelling and estates.

Costing excellence

"We recognise

Paul's contribution

while still rolling up his sleeves at a local level"

Paul Buss, medical director at Aneurin Bevan University Health Board, is well known in the UK for championing the use of clinical evidence and cost data to develop policies that eradicate waste and improve patient care. His long-term commitment won him the Working with finance - Clinician of the Year Award.

Winner: Paul Buss, Aneurin Bevan UHB

The award acknowledges the importance of clinical engagement in financial management and recognises a clinician who has taken financial responsibility for their services, led efficiency or improvement programmes or provided an example for other clinicians by engaging with the financial agenda.

Dr Buss ticks all those boxes, but his dedication shines in his leadership of clinical groups seeking to ensure the NHS in Wales gets best value for money. In 2016, he was the chair and clinical lead of the All-Wales Medical Devices and Consumables Group, recommending the best products to ensure procurement is cost-effective and value-based. He also chaired the All-Wales Medicines Strategy Group in 2016/17, advising the health and social services minister on the

introduction of new medicines and the appropriate use of existing medicines.

At a local level, he has been a prime advocate for patient-level information and costing, and the need for clinicians to access costing data as part of normal working practice to improve patient services. He leads a costing and clinical variation group that identifies unwarranted clinical variation, reviews the evidence and recommends changes where appropriate.

Dr Buss said he was 'shocked but delighted' to win the award. 'Being a doctor is fundamentally about treating patients, but we are also responsible for how resources are used. Every clinical decision a doctor makes has a resource implication and the profession must recognise it needs to spend resources wisely.

'We all have our specialties, but if every decision made has implications somewhere else, we should be cognisant of every penny spent. There should be congruence between medical knowledge in Wales in almost all and the benefit you can get sectors of healthcare, from the use of that penny.'

The judging panel was impressed by the quality of all submissions for the award. 'The evidence we were presented with revealed genuine and far-reaching clinical leadership working in combination with finance teams and staff. The shortlist was incredibly strong - we could quite easily have given the award to all four as each brought a strength and passion for clinical leadership, engagement in financial management and taking financial responsibility for services.'

They continued: 'We decided to give this award to Paul Buss to recognise his long-term, strategic contribution in Wales in almost all sectors of healthcare, while still rolling up his sleeves to contribute at a local level. His enthusiasm and support of others to "have a go" appears unwavering, as is his key principle

for keeping things simple. All those shortlisted need to be strongly

commended for their insight into and contribution to the pursuit of engagement in their sector or sphere of influence?



Chorley and South Ribble CCG and Greater Preston CCG won the 2017 Governance Award for their scheme to ensure their joint operational plan was well understood and gained as much staff engagement as possible.

The CCGs, which have a joint senior management structure, recognised that knowledge of its operational plan was inconsistent and clinicians believed they should be more engaged in developing the plan. A new approach to developing, monitoring and delivering the plan was needed, and an improved governance framework to underpin clinical engagement and allow the organisation to understand risks and lines of accountability.

The CCGs set about designing a governance process for the operational plan, with two components looking at governance for turning ideas into approved schemes, and an operational plan delivery room to ensure tighter risk management.

First, it designed easier to complete documents for the approval of new ideas and introduced a prioritisation score with key metrics for local and national priorities, such as RightCare. A simpler approval process was introduced and the scheme is managed using redeployed staff.

The new approval process led to more engagement, but not as much as the CCGs would have liked, so it went further. A room was selected to host the operational plan, with schemes listed on the walls together with risk ratings for each scheme. At weekly one-hour meetings staff from finance, quality and contracting teams, together with GP directors and senior managers, highlight issues in schemes with the highest risk ratings.

The operational plan delivery room has changed the monitoring of risks. The previous focus on a few underachieving schemes at month-end meant circumstances could change in between reports, but with little understanding of why they had changed. The delivery room meetings ensure regular feedback and assurance, informing the risk profile and corporate risk register.

A more sophisticated risk rating that splits between operational and financial risk has been introduced so the operational delivery room can focus on the key mitigations.

The judges applauded the scheme for producing 'a dramatic improvement in the governance around the operational plan with full and ongoing engagement across

Delivery focus



the approach is evident from it being recognised as best practice, with many other CCGs visiting with a view to replicating it"

the organisations.

'The approach was a visual and engaging methodology of a plan discussed and delivered by showing all elements of the plan on walls of a room with staff predominantly standing

throughout the discussions. The success of the approach is evident from it being recognised as best practice, with many other CCGs visiting with a view to replicating it in

their organisations, they added.

Matt Gaunt, the CCGs' chief finance and contracting officer (pictured second from right), said: 'I'm delighted - what was fundamentally a simple way of starting to get engagement in a cost improvement programme has been recognised as being innovative and best practice. It's about engaging all our colleagues in trying to run our processes in a way that gives us a sustainable solution to some of the great pressures we're facing and holding each other to account.' O

Also shortlisted

At Belfast Health and Social Care Trust information from a new e-rostering system was reviewed with expenditure trends to identify the cost drivers of nursing. It found that nurses were not always effectively deployed, which led to training for ward sisters and charge nurses and significant cost savings. 'The trust has driven stronger governance through the determined and effective use of an e-rostering system,' the judges said. 'The effectiveness of the improvements in governance is evident from the closer working of finance and nursing and

In Hampshire and Isle of Wight **Sustainability and Transformation** Partnership a virtual finance department brings the partner organisations together and seeks to strike a balance between collaboration and organisational

costs savings in excess of £1m.'

accountability. The judges said the finance team showed exceptional determination and skill in working with all the organisations in its sustainability and transformation footprint to bring forward ways to develop governance arrangements. 'Most notably, it produced monthly financial results within 10 working days of the month end for the whole of the footprint,' they added.

The judges praised The Christie NHS Foundation Trust for its implementation of a general ledger project to strengthen governance arrangements. It had embedded the standing financial instructions into the organisation while streamlining systems. The use of paper was eradicated, ensuring staff time was used more efficiently. The judges highlighted changes to online staff travel arrangements, leading to savings in staff numbers in the finance department.

Highly commended

Stockport NHS Foundation Trust The Stockport trust's

Spreadsheets to bedsheets programme caught the eye of the judges. 'Stockport's commitment to developing every member of its finance team was impressive and easily transferred,' they said. Spreadsheets to bedsheets - part of its plan to achieve level 3 FSD accreditation asks each member of the finance team to visit a part of the hospital or community that they have not been to before but that has a link to their role or wider development. Following the visit, staff examine what happened and what they have learned.

Also shortlisted

Countess of Chester Hospital NHS Foundation Trust has a finance training scheme for staff that includes a high-level interactive session for all staff and a more detailed one for budget holders, managers and business partners. At least one session is held every month and,

although it's been going more than 18 months, each session is full. The finance team has reviewed finance staff training and development, including wider training needs as well as professional qualifications. It also holds joint away days with other local NHS organisations and has created a CPD database.

The North West Skills Development Network offers development opportunities to staff from entry level to directors. Hosted by Warrington and Halton NHS Trust, it was established to support finance function development, but now covers procurement and informatics. As the workforce ages, there is a danger of future staff shortages, so the network has apprenticeship programmes in place. It has developed a three-week work preparation programme for young people – an unpaid introduction to non-clinical NHS careers in finance, procurement and informatics. Retention since the scheme began in 2015 has been high.

On a training mission

'We loved their energy, enthusiasm, and commitment to developing both the finance team and the whole trust.' So said the judging panel of the winners of the 2017 Havelock Training Award - North Staffordshire Combined Healthcare NHS Trust.

The judges added: 'The team's engagement outside the finance team with clinical colleagues, service users and other stakeholders was impressive. Its approach was holistic and dynamic and used multiple examples of best practice from around the system, including Future-Focused Finance and Finance Skills Development networks.'

The Havelock Award recognises a contribution to finance skills development,

best practice in the training of finance staff or the raising of financial

"Its approach was holistic and dynamic and used multiple examples of best practice from around the system"

awareness among non-finance staff. Established in 1999, the award was named after former Department of Health deputy finance director Jon Havelock. Committed to FFF

and FSD, the small finance team has created a developmental infrastructure that looks to add value to the organisation as a whole, concentrating on finance skills and financial awareness.

In its FSD work, the team has focused on



ensuring the finance department is more responsive to the organisation's needs. This included staff and service user value makers (not the national FFF value maker programme) - they could submit ideas on an online portal to improve efficiency and costs or to add value. Those who generate ideas that result in a cost saving are awarded a value maker badge. 'It's a great tool for engaging the trust and supports us in delivering our cost improvement programme,' the team said.

The FSD group also came up with a plan to present annual accounts in a way that non-finance staff and service users could understand easily. An animated video was developed and shown at the trust annual general meeting - many viewers said it was the first year they understood the numbers.

The idea has now been rolled out across the trust to describe both patient-level costing and what cost improvement means.

The finance team also engaged with consultants to gauge their financial awareness. With the consultants' input, roles were designed so that they could undertake financial projects.

Finance director Suzanne Robinson (pictured) said the trust adopted a lot of the learning from NHS FFF to spread financial knowledge and focus on value. 'We are a small organisation with huge ambition and this work sought to make a massive impact on the training of staff and raise financial awareness across the whole organisation,' she said.

The online portal was a great success. 'These ideas are generated at the front line and we could get them into practice and generate savings on the back of that. It's been about value and doing things in the right way and that's helped achieve a cost reduction.' •

Past winners

Accounts Team of the Year

2016 Hul	I CCG
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2015 Nottingham University Hospitals NHS Trust

2014 Wrightington, Wigan and Leigh NHS FT

2013 Hertfordshire Partnership University NHS FT

2012 Alder Hey Children's NHS FT

2011 5 Boroughs Partnership NHS FT photo 1

2010 NHS Bournemouth and Poole

2009 Mersey Care NHS Trust

2008 Hull and East Yorkshire Hospitals NHS Trust

2007 North West Ambulance Service NHS Trust

Clinician of the Year/Clinical Engagement*

2016 Tara Kearney, Salford Royal NHS FT

2015 Stephen Liversedge, Bolton CCG photo 2

2014 Rob Duncombe, The Christie NHS FT2013 David Fearnley, Mersey Care NHS Trust

2012 Malik Ramadhan, Barts Health NHS Trust

2011 Jason Leitch, Scottish Government

2010 Philip Thomas, Brighton & Sussex University Hospitals Trust

2009 Ellen Wilkinson, Cornwall Partnership NHS Trust

2008* South Manchester PBC and NHS Manchester

2007* The Christie Hospital NHS FT

Costing

2016 North Staffordshire Combined Healthcare NHST

2015 Alder Hey Children's NHS FT

2014 Derby Hospitals NHS FT photo 3

2013 Nottingham University Hospitals NHS Trust

2012 The Christie NHS FT

2011 Cardiff and Vale UHB

Deputy Finance Director of the Year

2016 Sheila Stenson, Maidstone and Tunbridge Wells NHST

2015 Chris Lewis, Cardiff and Vale UHB

2014 Tim Jaggard, UCLH NHS FT

2013 Paul Ronald, Hertfordshire Partnership University NHS FT

2012 Richard Wheeler, Oxford University Hospitals NHST

2011 Joanne Fitzpatrick, The Christie NHS FT

2010 Elaine Konieczny, Sherwood Forest Hospitals NHS Trust

Finance Director of the Year

2016 Annette Walker, Bolton CCG photo 4

2015 Simon Worthington, Bolton NHS FT

2014 Alan Brace, Aneurin Bevan University Health Board

2013 Colin Martin, Tees, Esk and Wear Valleys NHS FT and Bill Shields, Imperial College Healthcare NHS Trust

2012 Caroline Clarke, Royal Free London NHS FT

2011 David Melbourne, Birmingham Children's Hospital NHS FT

2010 Steve Webster, North Bristol NHS Trust

2009 Paul Hinnigan, NHS Blackburn with Darwen PCT

2008 Sue Jacques, County Durham and Darlington NHS FT

2007 Jane Tomkinson, Countess of Chester NHS FT

Innovation*/Efficiency

2016* Bolton CCG and Bolton NHS FT

2015* Dorset CCG

2014 Alder Hey Children's NHS FT

2013 Portsmouth CCG

2012 Countess of Chester Hospital NHS FT/Wirral University

Teaching Hospital NHS FT

2011 NHS Oldham

2010 Basildon & Thurrock University Hospitals NHS FT

2009 Newham University Hospital NHS Trust

2008 2gether NHS FT

FFF Award

2016 Ben Roberts, Bolton NHS FT2015 Gayle Wells, Wigan Borough CCG

Governance

2016 Lancashire Teaching Hospitals NHS FT

2015 North East Lincolnshire CCG, North Lincolnshire CCG, Northern Lincolnshire and Goole NHS FT, Navigo Health and

Social Care CIC and Care Plus Group

2014 South Warwickshire NHS FT

2013 Imperial College Healthcare NHS Trust photo 5

2012 Leicestershire Partnership NHS Trust/EMIAS (internal audit)

2011 University Hospital of South Manchester NHS FT

2010 Plymouth Hospitals NHS Trust and Audit South West

2009 The Ipswich Hospital NHS Trust

2008 Plymouth Hospitals NHS Trust

2007 Redbridge PCT

2006 Oldham PCT

Havelock Training

2016 London Ambulance Service NHST

2015 Liverpool CCG photo 6

2014 The Walton Centre NHS FT

2013 Nottingham University Hospitals NHS Trust

2012 Birmingham and Solihull Mental Health NHS FT

2011 East Kent Hospitals University NHS FT

2010 NHS Central Lancashire

2009 Heart of England NHS FT

2008 NHS London

2007 Sherwood Forest Hospitals NHS FT

A full list of previous winners can be found at www.hfma.org.uk/awards



















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