

DECEMBER 2012

HFMA AWARDS 2012



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CLARKE CELEBRATES DIRECTOR WIN



HEALTHCARE FINANCE
SUPPLEMENT

INSIDE

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of the Year

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Honorary Fellow

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Director of the Year ▼



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WELCOME

The HFMA Awards once again celebrate excellence in NHS finance across the UK, showcasing best practice and achievements in financial management and governance.

This year the association honoured one person who has made a sustained and substantial contribution to the life and work of the association – NHS deputy chief executive David Flory. He has led the NHS finance function in England since 2007 and has become chief executive of the NHS Trust Development Authority. Outgoing HFMA president Sue Jacques, who sat on a number of judging panels, said the awards showcased and celebrated the best of NHS finance across the UK. 'The NHS faces a challenging financial agenda so, more than ever, it is important that we share best practice and new ways of working. The HFMA Awards are a fantastic opportunity to do this and to show how our profession is making a difference,' she said.

Read on for the best of NHS finance...



NHS chief financial controller Janet Perry with the service's deputy chief executive David Flory



Winning team member collects Havelock award



HFMA chief executive Mark Knight



All together now: photo call for the award winners



The 750-strong audience take their seats for the awards presentation



Caroline Clarke with NHS deputy chief executive David Flory (left) and Zurich's Richard Wood

PARTNERSHIP KEY TO TOP AWARD

COLLABORATION HAS UNDERPINNED much of Caroline Clarke's work over the past year – as her key role in gaining foundation status for her trust, the Royal Free London, proved. This year's HFMA Finance Director of the Year worked with commissioners to put together joint five-year financial planning assumptions that went beyond Monitor's requirement for commissioner support.

The local health economy is challenged and the five-year plan balances the commissioners' needs to return to financial balance with the trust's financial objectives. The trust's nomination said the achievement was particularly noteworthy at a time of significant upheaval in the NHS, which has made it difficult for any organisation to demonstrate a robust five-year financial plan.

Ms Clarke also showed her leadership across the health economy. The trust is part of UCL Partners, one of five academic health science

Sponsored by Zurich Municipal

- **Winner** Caroline Clarke, Royal Free London NHS Foundation Trust
- **Also shortlisted** Tim Goodson, NHS Dorset; Ismail Hafeji, Greater Manchester West Mental Health NHS Foundation Trust; and Robert Forster, Wrightington, Wigan and Leigh NHS Foundation Trust

systems in the UK, which has been engaged in a project to realign services, putting them with the most appropriate provider. Ms Clarke has helped find solutions to enable major service change.

The trust delivered a £34m QIPP (quality, innovation, productivity and prevention) programme in 2011/12 and expects to deliver a further £24m of savings in 2012/13. Some of the efficiencies will come from innovation, such as a pathology service joint venture with other providers and a commercial partner. This aims to deliver a modern and efficient service while producing significant savings.

She has also been the driving force behind an ongoing clinical engagement project at the Royal Free, which looks to decentralise service strategy and allow clinicians to lead on their vision for their services over the next three to five years.

During the past year she has been appointed

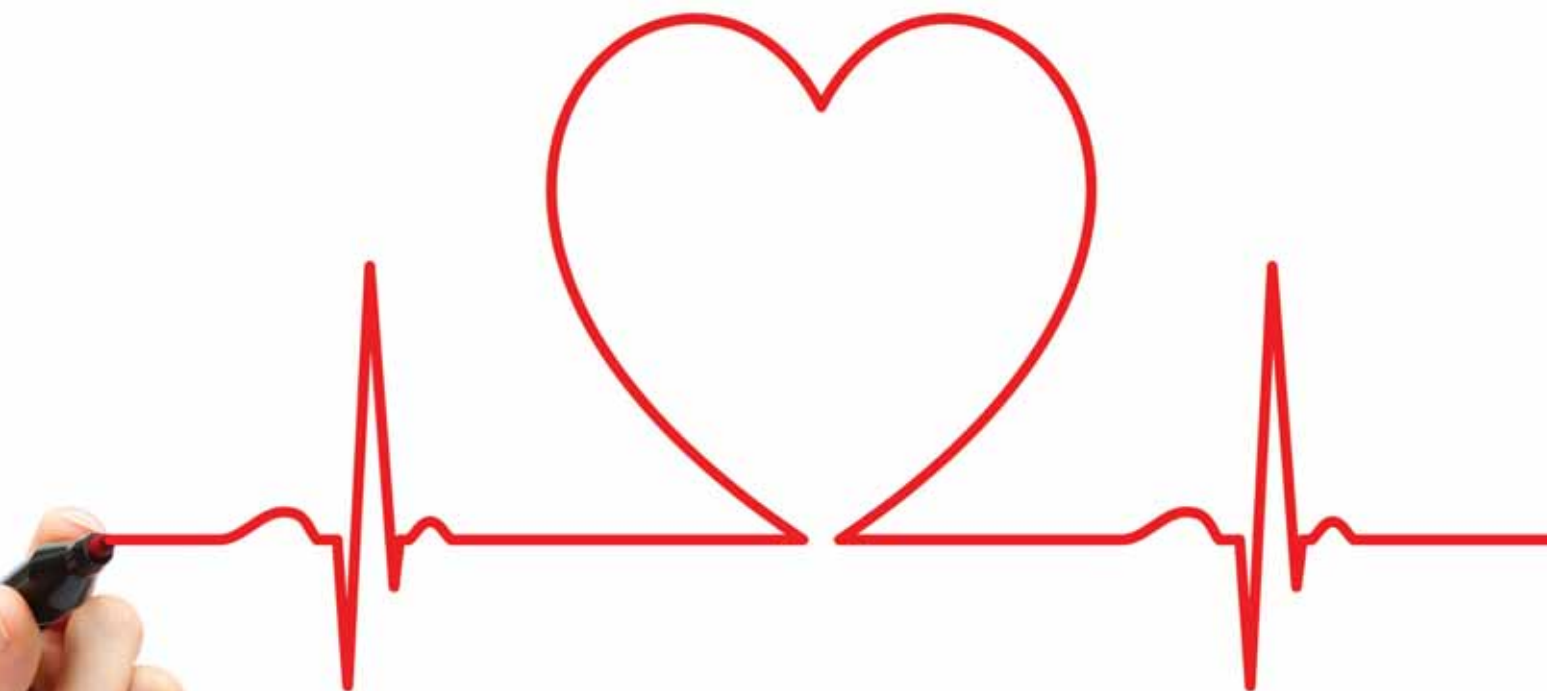
A hearty well done to...

Caroline Clarke

from the Royal Free London NHS Trust, this year's winner of the Finance Director of the Year Award sponsored by Zurich Municipal.

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WHAT THE JUDGES SAID

“She has been fundamental to the continued improvement in the financial health of the organisation, to its successful application to become a foundation trust and to improvement to services for patients across North Central London”

deputy chief executive – in addition to her finance director role – reflecting her wider contribution to the trust.

The judges said Ms Clarke is described as consistently demonstrating excellence in leadership both within the organisation and outside in the wider health economy. ‘She has been fundamental to the continued improvement in the financial health of the organisation, to its successful application to become a foundation trust and to improvement to services for patients across North Central London,’ they added.

The judging panel gave further evidence of the esteem in which Ms Clarke’s is held. ‘Dominic Dodd, chairman at the Royal Free, describes Caroline as the role model of a strategic finance director,’ they said. ‘Richard Alexander, finance director at University College London Hospitals, says of Caroline: “She can be relied upon to negotiate both the



politics and the finances to find acceptable solutions that lead to real change. I value her as a colleague and respect her as a competitor”. The panel feel she is a worthy winner.’

‘I am delighted and very honoured to receive this award,’ said Ms Clarke. ‘I am proud to be an accountant; I am proud of my profession, but it’s not about me, it’s about my team. It’s almost as if individual awards should not exist because you rely so much on the people you work with. They are a great team.’

Her willingness to collaborate has been noted by peers and judges alike, but Ms Clarke is characteristically modest about her achievements. ‘I don’t know any other way,’ she said. ‘I have great colleagues across North Central London who have a desire to work in partnership and we all pull in the same direction. We live in a world that is very much about partnership – you can’t exist on your own.’

JUDGES’ VIEWS ON FD SHORTLIST

TIM GOODSON, NHS DORSET

‘Tim has provided a strong professional lead in NHS Dorset, encouraging joint working in the finance and performance functions across the cluster before their formal introduction. He is described as capable and popular with strong leadership qualities recognised across Dorset and the wider health economy.’



ISMAIL HAFEJI, GREATER MANCHESTER WEST MENTAL HEALTH NHS FT

‘In addition to a number of significant achievements, the panel were impressed with the *Dragons’ Den* approach Ismail had introduced for services to pitch innovative ideas. He is described as blowing the stereotype of finance as a dry subject out of the water and credited with making finance interesting and meaningful to all in his organisation.’



ROBERT FORSTER, WRIGHTINGTON, WIGAN & LEIGH NHS FT

‘In 2011/12 Rob drove through a detailed recovery plan which transformed a £4m deficit in July into a £3m year-end surplus. His chief executive says that Rob firmly believes in putting patients at the heart of everything and can often be seen walking the hospital talking to staff, patients and their relatives inviting suggestions for improvements.’

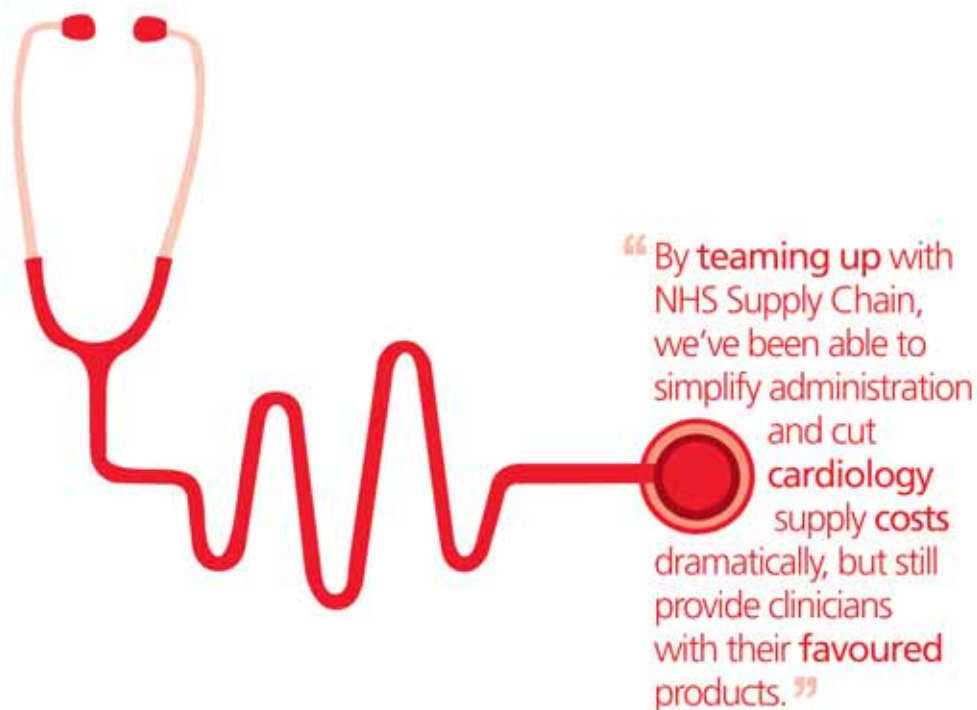


HONORARY FELLOW: DAVID FLORY

As well as presenting the Finance Director of the Year Award, NHS deputy chief executive David Flory was himself honoured by the association. Mr Flory, who has been appointed NHS Trust Development Authority chief executive, received an honorary fellowship of the HFMA. This is awarded to individuals who have made a sustained and substantial contribution to the life of the association.

HFMA chief executive Mark Knight said Mr Flory had led the finance function since 2007, championing the finance cause and skilfully managing the finances of England’s NHS. ‘He has ably assisted HFMA by helping us to provide real help to the function as well as speaking at our national and branch conferences. He has listened to our feedback and provided mentoring and advice to many,’ he said.





Fact

In 2012 this trust will save £240,000 on cardiology, working with NHS Supply Chain.

Jolene Grainger
Contract/Procurement Officer, City Hospitals Sunderland
NHS Foundation Trust
28 August 2012

IN THE ENGINE ROOM

DEPUTY FINANCE DIRECTORS work in the engine room of a trust's finance department. Solving technical accounting issues, overseeing cost improvement programmes (CIPs) and managing staff are tasks often handed to deputies – tasks completed with distinction by this year's Deputy Finance Director of the Year.

Oxford University Hospitals NHS Trust's Richard Wheeler was nominated for his performance both at the trust and in previous positions. He joined the trust in March 2012, following the merger four months earlier of the Nuffield Orthopaedic Centre and Oxford Radcliffe Hospitals trusts.

Immediately, he got to grips with setting up a new finance department structure, merging the ledgers from the predecessor trusts and closing the merger accounts. The latter included complex discussions with the Department of Health on technical issues relating to break-even duty calculations.

He joined the trust from the Midlands and East Strategic Health Authority Cluster, where trust director of finance and procurement Mark Mansfield said he had left behind a significant legacy. This included helping primary care trusts and trusts meet financial performance targets; supporting staff professional and personal development; and co-ordination of the cluster 2012/13 financial plan.

He has led the consolidation of the East Midlands family health services (FHS) support on behalf of nine PCTs locally. Back-office support for FHS was transferred to NHS Shared Business Services, which will save the NHS £9m (a 30% cut in operational expenditure).

A two-day-a-week secondment to United

Sponsored by NHS Supply Chain

- **Winner** Richard Wheeler, Oxford University Hospitals NHS Trust
- **Also shortlisted** Ann McBrien, Belfast Health and Social Care Trust, and Mike Piercy, Camden and Islington NHS Foundation Trust

Lincolnshire Hospitals NHS Trust in 2011/12 provided personal development and assisted the trust's turnaround programme. The Lincolnshire trust had a prior year deficit of £14m and, by supporting its cost improvement programme delivery and a GP-led strategy for Grantham Hospital, Mr Wheeler helped the trust deliver a surplus just ahead of plan and CIPs approaching £16m in 2011/12.

Mr Wheeler paid tribute to the finance directors he had worked with. 'I have been privileged to work with a lot of great finance directors and I have been able to do a variety of work over the last year. It's been a really busy year, but it's been very rewarding,' he said.

There were many highlights, including the transfer of the PCT FHS support and the

production of the merged Oxford trust's accounts. 'We negotiated with the Department of Health on the trust's breakeven duty after our auditors thought there might be a risk that was specific to us in that year. But with the help of Janet Perry and others from the Department we were able to find a solution.'

The judges said this year's shortlist highlighted the diverse roles that deputies are called upon to deliver. One common thread was that the roles were always challenging and fundamental to an organisation's success.

'Whether it was the delivery of a development programme, major cost reduction programme, back-office efficiencies or successfully meeting complex technical accounting challenges, all candidates demonstrated a high level of commitment, enthusiasm and positive attitude to change. Each provided strong leadership in delivering the required results,' they said.

'After much consideration the panel awarded Deputy Director of Finance of the Year to the candidate who overcame a variety of challenges within a short space of time, bringing to bear his broad knowledge of the NHS.'

WHAT THE JUDGES SAID

"After much consideration the panel awarded Deputy Director of Finance of the Year to the candidate who overcame a variety of challenges within a short space of time, bringing to bear his broad knowledge of the NHS"



Award winner Richard Wheeler with Graham Moore from NHS Supply Chain (left) and NHS chief financial controller Janet Perry



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The winning team from the Christie, including Suzanne Robinson (far right), with Gavin Mowling from Healthcost and Sue Jacques (both left)

THIS WAY TO SAVINGS

THE CHRISTIE NHS Foundation Trust has improved the accuracy of its costing processes, engaged clinicians and identified cost improvement savings.

The winner of the 2012 HFMA Costing Award introduced a patient-level information and costing system (PLICS) in 2009 with the engagement and support of clinicians. But the trust did not leave it at that. It has committed to improving the accuracy of its cost information, recently developing its own checklist to improve the quality of reference costs (similar to one developed by the Audit Commission) and now routinely calculating a materiality and quality score (MAQS), as defined in the HFMA *Clinical costing standards*. The MAQS is reported to the trust board each quarter with a stretch target to promote improvement.

The specialist cancer care provider has targeted improvements in costing to support service improvement; build up understanding of its business; have a voice in national debates over costing; and to promote costing skills among NHS finance professionals.

The judges were impressed by the commitment, structure and depth to which patient-level costing has been implemented across the organisation.

'Concrete examples were provided to demonstrate how costing has become embedded within the culture of the organisation and how it is being used to inform decisions and change the way treatment is

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- **Winner** The Christie NHS Foundation Trust
- **Also shortlisted** Chelsea and Westminster Hospital NHS Foundation Trust; Wrightington, Wigan and Leigh NHS Foundation Trust; Liverpool Heart and Chest Hospital NHS Foundation Trust

planned and delivered, thus demonstrating high levels of clinical engagement,' they said.

'The Christie is involved in many different national exercises and programmes to improve the quality of costing in the NHS. And many initiatives have been undertaken to improve the quality of costing within the organisation, such as the calculation of the MAQS, inclusion in personal objectives and commissioning an independent review to provide assurance over the costing process and quality of the cost data being produced.'

The examples provided by the trust included

the introduction of sessional theatre costs in 2012/13, which was agreed as a consequence of completing the MAQS exercise.

The trust is developing its costing around specialist palliative care – in the past it has been classed as direct patient care and apportioned based on length of stay. However, a new system will recognise nursing time specific to this activity.

Accurate and transparent costing provided evidence on the financial viability of a joint venture on the care of private patients. Using PLICS data and reference costs the Christie and partner HCA were able to confirm this as an avenue worth exploring.

This led to the formation of the Christie Clinic in 2010, which has generated a profit of £5m for the NHS and has been used to support development of NHS services at the Christie.

Expressing her delight at receiving the award, Christie head of income, costing and contracting Suzanne Robinson said she did not believe it to be a finance award.

'It's an award for the whole organisation. I am so proud of the work the organisation has done,' she said. 'We have had PLICS since 2009, but the difference in the past few years is that the organisation has started to get it. It's not finance driven; it's about clinician management. Our biggest project has been to combine cost and outcome information to enhance decision-making.'

WHAT THE JUDGES SAID

"Concrete examples were provided to demonstrate how costing has become embedded within the culture of the organisation and how it is being used to inform decisions and change the way treatment is planned and delivered"

EFFICIENCY DRIVER

MALIK RAMADHAN'S APPOINTMENT as clinical director of the emergency department at Barts Health NHS Trust marked a step forward in clinical engagement with finance at the trust. Not only has he raised the profile of finance among clinical colleagues, but he has also ensured that the whole department understands the financial position and the impact their actions can have on that. His dedication to making his department more efficient has secured him the 2012 Working with finance – Clinician of the Year.

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

On his appointment in 2012, Dr Ramadhan instantly took steps to understand the department's financial position, meeting with members of the finance team and external commissioners to get to the bottom of all cost drivers and income.

This exercise allowed him to identify costs that could be reduced and income not being received for activity that was being carried out. He then led workshops to remove the costs he had identified and worked with the income team and commissioners to ensure the department was receiving the correct amount.

The trust said that before Dr Ramadhan's appointment, finance was not regularly raised in the clinical team. Now there are senior team finance meetings and finance is on the agenda at all the regular meetings for the various staff groups. He is also engaged in the wider trust, regularly attending divisional performance reviews to take accountability for his department's financial position.

Dr Ramadhan has worked with clinical and finance colleagues to ensure the department has resident consultant cover in place 24 hours a day, seven days a week and generated savings by supporting a clinically led review of the diagnostic tests being ordered in the department.



Malik Ramadhan accepts his award from Allocate Software's Martin Jeffries (left) and the HFMA's Sue Jacques

WHAT THE JUDGES SAID

"He is clearly passionate about what he is doing and has built a strong and trusted relationship with his finance colleagues. He is a strong user of fact over anecdote to drive decision-making"

The judges said that as well as bringing better value to his department, Dr Ramadhan had raised the profile of finance.

'He is clearly passionate about what he is doing and has built a strong and trusted relationship with his finance colleagues. He is a strong user of fact over anecdote to drive decision-making, with a strong emphasis on analytics,' they said. He championed the use of technology to support clinicians in their work and believed finance, governance and safety are together essential for running a department that delivers high-quality care efficiently.

Dr Ramadhan said he was delighted the finance department at Barts chose to nominate him. 'I was pleased to be nominated and that the finance department chose me and feel I work with them,' he said.

'When you do medicine your sole interest is to help people. As a doctor, by understanding finance I can potentially help half a million people, rather than the one person in front of me at any one time – though of course that one person is the most important when I am seeing them.'

It was important for clinicians to engage with finance, he added. 'Doctors are strange beasts who think the world revolves around them and exists to serve their needs,' he said. 'That's not the case and if you can't engage with finance you will exist in a bubble and you won't achieve anything.'

Sponsored by Allocate Software in association with Academy of Medical Royal Colleges

- **Winner** Malik Ramadhan, Barts Health NHS Trust
- **Also shortlisted** George Findlay, Cardiff and Vale University Health Board; Johan Waktare, Liverpool Heart and Chest Hospital NHS Foundation Trust

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SMOOTH OPERATORS

AFTER ONE OF the closest competitions for many years, Alder Hey Children's NHS Foundation Trust was confirmed as Accounts Team of the Year 2012.

'We were impressed with the final accounts production process and the teamworking that was demonstrated,' the judges said. 'And we liked the way that the trust has worked to benchmark itself against recognised good practice to understand their external audience and to learn from the experiences of others across the NHS.'

Alder Hey said its 2011/12 accounts production process was based on a learning environment – learning lessons from past years' successes, adapting best practice from other NHS organisations and taking advice from its external auditor. All finance staff provided support for the process, taking part in feedback sessions on the 2010/11 accounts; senior staff reviewed key transactions; and there were regular updates on progress. Training needs were identified and included in staff development plans.

The team prepared well, drafting accounting policies in December 2011 for approval by the trust audit committee in January 2012. External audit was part of this. A draft production timetable was circulated round the finance department in January and finalised in February. The final timetable included work needed to prepare working papers by client list, in response to a request from external auditors.

The trust achieved a smoother process by raising Greenbury requirements well before the end of March; all departments were made aware of the year-end requirements; and early agreement of the approach on key accounting

Sponsored by KPMG in association with the Department of Health

- **Winner** Alder Hey Children's NHS Foundation Trust
- **Also shortlisted** NHS Dorset; Dorset County Hospital NHS FT; Dudley and Walsall Mental Health Partnership NHS Trust

issues (such as private finance initiative and segmental reporting). The trust used a new financial ledger system for the first time in 2011/12, so key reports were written and tested in advance of the year-end to ensure all information was available when needed.

The finance department introduced a standard invoice request form, requiring all fields to be completed prior to the invoice being raised. This has reduced the amount of time spent by accounts receivable staff coding

income and finding customer contact details. It has also improved the collection of debts as the team now has all the information to hand.

A template was also introduced for accruals, enabling faster analysis, especially for NHS organisations.

By strictly adhering to the timetable, the general ledger was closed on 12 April and the accounts completed by the middle of the week before the submission deadline. This gave time for the director and deputy directors of finance and the audit committee to review the accounts. Draft accounts were submitted to Monitor and the external auditor on 20 April, three days ahead of the deadline. The accounts were not qualified and there were no unadjusted audit differences and few presentational changes made between the draft and audited accounts.

Asked if she had any advice for other trusts hoping to improve the quality and timeliness of their account closure process, Alder Hey deputy director of finance Melanie Simmonds said: 'You need a lot of teamwork, a lot of preparation and planning. You must also make sure you involve the whole department and other services across the trust.'

'We are really pleased and amazed to win the award. It's rounded off our year as we have received Monitor approval to build a new hospital. It's a great achievement for the trust.'

The team already had plans in place for the current financial year's accounts. 'With the reorganisation of the NHS it is even more important to plan ahead this year. We have started working early as closing the contract on the new hospital will bring with it extra complications.'

WHAT THE JUDGES SAID

"We were impressed with the final accounts production process and the teamworking. And we liked the way that the trust has worked to benchmark itself against recognised good practice"



Alder Hey winners, including finance director Sue Lorimer (far left) and Melanie Simmonds (second from right), with the Department of Health's Janet Perry (centre)

INSIDE OUT



Julia Rudrum from ACCA (far left) and the HFMA's Sue Jacques with the winning team

THERE IS A danger that trust governance can be insular, with assurance taking place at internal audit and board level. But the winners of the 2012 Governance Award have shown the benefits of working across organisational boundaries to provide assurance on Care Quality Commission (CQC) benchmarks.

EMIAS, an internal audit service hosted by Leicestershire Partnership NHS Foundation Trust, provides internal audit to eight trusts in the East Midlands. In the summer of 2011 it embarked on an initiative to help NHS bodies across the region enhance their governance arrangements. This was prompted by the need for all CQC-registered providers to produce a declaration of compliance with 28 quality and safety standards – as providers must inform the CQC of any changes in compliance, an internal mechanism is needed to monitor ongoing compliance and risks.

First, it sent a survey to all NHS providers in the region to benchmark their CQC internal audit processes, achieving a 100% response from 18 organisations. An overall report, together with reports for each of its client organisations, were produced and found that while all trusts had internal monitoring processes, they had strengths and weaknesses that should be addressed. EMIAS has also undertaken detailed reviews of its clients' internal assurance processes, making recommendations for improvements.

The survey results led to the second stage – the establishment of the East Midlands-wide CQC Benchmarking Forum for all bodies (not just EMIAS clients). CQC compliance leads get together to peer review their work and share

Sponsored by ACCA

- **Winner** Leicestershire Partnership NHS Trust/EMIAS (internal audit entry)
- **Also shortlisted** Basildon and Thurrock University Hospitals NHS Foundation Trust; Leicestershire Partnership NHS Trust / EMIAS (counter fraud entry); Mersey Internal Audit Agency (MIAA)

WHAT THE JUDGES SAID

“We were impressed with the proactive and innovative nature of the work and the fact that it was planned to further expand the forum onto a national platform”

their experiences and best practice.

In the EMIAS submission, Nottingham University Hospitals NHS Trust associate director of assurance Kathy Kirkwood said the peer review and knowledge gained at the forum helped the trust enhance the systems it uses to assure compliance, simplify yet strengthen its monitoring systems and make them more meaningful to staff.

Regular papers tabled before the forum include a benchmarking study, which examines the standards being examined most

often by the CQC and the rates of compliance. There is also a paper examining a particular standard. A recent example is one looking at standard 7 (safeguarding), which is now being used by the strategic health authority safeguarding leads as the basis for a project on ‘what good looks like’.

The forum has been such a success that members have suggested a national event that would allow the group to showcase what it is doing. Meanwhile, the East Midlands SHA forum representative is supporting its expansion into the other parts of the cluster.

The judges said the survey demonstrated EMIAS's awareness of its clients' needs. ‘This developed into a benchmarking/best practice comparison and discussion forum whereby member organisations learned lessons from each other facilitated by EMIAS,’ they said.

‘Tools and methodologies had been developed and there were detailed practical examples from customers whereby the governance and quality of care for patients had improved. We were impressed with the proactive and innovative nature of the work and the fact that it was planned to further expand the forum onto a national platform.’

EMIAS director Tim Thomas said the team was thrilled to win the award, particularly as the nomination for the CQC work was submitted after three clients came forward to suggest they enter. ‘We had two entries shortlisted for this award and we are proud of both. The CQC work had such a positive impact and is a good example of how we can all work together and how internal audit engagement can bring clinicians together.’

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David Rowsby from CIMA (far left) with trust finance manager Richard Sollars and the rest of the winning team

DEVOLUTION DRIVE

BIRMINGHAM AND SOLIHULL Mental Health NHS Foundation Trust has created a training package that has given frontline managers and senior doctors a greater understanding of finance – winning it the Havelock Training Award.

The award recognises a significant contribution to finance skills development, best practice in the training of finance staff or the raising of financial awareness among the non-finance workforce. The award was established in 1999 and named after former Department of Health deputy finance director Jon Havelock, who died suddenly in 1998.

Much has been said about the need to devolve responsibility down to frontline teams. At the Birmingham trust, this resulted in band 7 team and ward managers taking control of their budgets, including the ability to authorise bank staff and initiate local service improvement.

Local managers, consultants and lead clinicians would be held jointly accountable for balancing their budget – achieving the best possible outcomes within their financial limits. The change in responsibilities was launched in late 2011 for all service lines.

The finance team recognised that this was a big change for these managers and clinicians, so it devised a training and support package to add to its routine finance training.

Discussions with team managers, which were held before budgetary responsibility was devolved, uncovered two main concerns: they wished to understand the financial context in which they would be operating; and they wanted to learn more about the financial

Sponsored by CIMA

- **Winner** Birmingham and Solihull Mental Health NHS Foundation Trust
- **Also shortlisted** Imperial College London Healthcare NHS Trust; Wrightington, Wigan and Leigh NHS Foundation Trust; University College London Hospitals NHS Foundation Trust

processes needed to manage their budgets.

The programme can be delivered as a one-day training package or on an ad hoc basis. It is aimed at managers with little to no financial knowledge. There are two sections – one gives an overview of ordering goods, payroll forms and standing financial instructions (SFIs); the other gives more context and discusses savings, what to do if a team has overspent and the consequences of overspending.

The training was supplemented by one-to-one and group sessions where appropriate and reinforced via ongoing financial management support to the clinical teams.

WHAT THE JUDGES SAID

“The resulting increase in financial awareness throughout the trust has led to much better teamwork and control of budgets”

Lead consultants have also received the training. The consultants have expressed interest in drugs spending and other medical-related costs, so the finance team responded by developing a suite of drugs expenditure information.

So far the training has been provided to more than 150 managers and 100 consultants. According to the trust, a March 2012 evaluation of the devolution of responsibility showed that there had been no loss of financial control, a reduction in SFI breaches and better engagement on procurement.

The judges said the trust had developed an innovative training package designed to devolve more decision-making to the frontline.

“The resulting increase in financial awareness throughout the trust has led to much better teamwork and control of budgets,” they said. “There were quantifiable reductions in the number of SFI breaches and a significant improvement in the use of e-procurement. Overall, the feedback from managers was that they are now much more in control of their teams and they feel more confident in their decision-making.”

‘I am surprised we have won, but it’s good to get a recognition of all the hard work we did,’ said Richard Sollars, a finance manager at the trust. ‘Most of the band 7s were clinical managers and it was about improving their skill levels and confidence to look at finance. While it increased knowledge of issues such as SFI breaches, there were benefits in softer areas such as engagement. The scheme has been rolled out across the trust and we are thinking of extending it to band 6s.’

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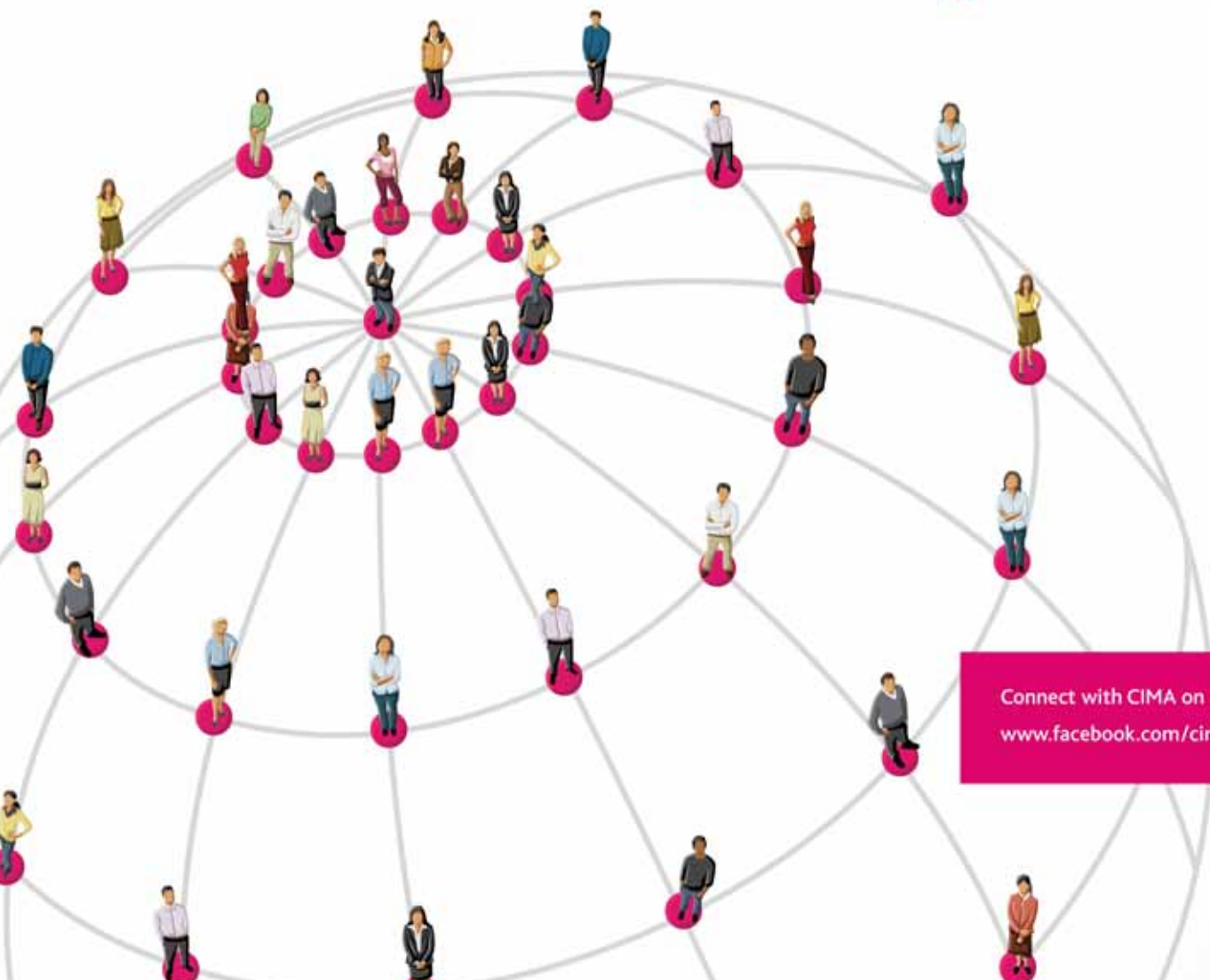
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ON THE SAVINGS PATH

PARTNERSHIP HAS BECOME a much-used word now that trusts are moving on from seeking savings beyond traditional cost-cutting measures. Some trusts are working together to decide which is best placed to provide a service, while others are collaborating to provide a support service across a patch. The winners of this year's Efficiency Award are a good example of foundation trusts working together to provide a key clinical service.

The partnership between the Countess of Chester Hospital NHS Foundation Trust and Wirral University Teaching Hospital NHS Foundation Trust provides a modern, off-site microbiology lab, which they say will deliver significant financial benefits and improve quality and workflow efficiency.

MicroPath, as it is known, became operational in April 2012. The trusts say annual savings of £800,000 have been released – more than 20% of the original base budget. The business case outlined a £5.4m return over 10 years and a 45-month payback period for the initial capital investment – the project is on track to deliver these milestones.

The move was prompted in part by the need for both trusts to make significant savings and a national NHS pathology review, which identified potential improvements in microbiology laboratory infrastructure, turnaround times and the range of tests, as well as financial efficiencies.

Implementation of MicroPath began in earnest in September 2010 and took a total of 19 months to complete. The trusts say this is a result of strong leadership and robust project and operational management. It had a capital

Sponsored by HCS Care Coordination

- **Winner** Countess of Chester Hospital NHS Foundation Trust/Wirral University Teaching Hospital NHS Foundation Trust
- **Also shortlisted** Great Western Hospitals NHS Foundation Trust; Health and Social Care Board Northern Ireland; Chelsea and Westminster Hospital NHS Foundation Trust

budget of £2.2m, split equally between the trusts, which was used to purchase and adapt a building on an industrial estate and buy the necessary equipment. The cost of purchase and redevelopment of the industrial unit was 45% lower than a traditional NHS build (£2.2m compared with almost £3.98m).

A new staffing model was agreed, including the reduction of 18 whole-time equivalent staff, achieved through natural wastage and

voluntary severance schemes. The lab has also been designed with flexibility for the future – it can expand to meet demand and can accommodate automation when required.

Richard Baird, divisional director at the Countess of Chester who worked across the trusts during the project, paid tribute to the staff at both trusts. 'The key to the project's success was the drive and enthusiasm of the team to make it happen,' he said.

The pathology initiative could be replicated in trusts across the country, he added. 'The two trusts had labs that weren't fit for purpose and had to do something about it. Going off-site created efficiencies and gives us greater flexibility for the future.'

The judges said the NHS needed collaboration and this was a good example of how this could be achieved. 'The development of MicroPath is a rare – possibly unique – example of two foundation trusts collaborating on the issue of core clinical services,' they said.

'The trusts have taken the forward-thinking step of developing an industrial unit into a modern and flexible laboratory, which has delivered more than the 20% of savings that is expected under the current financial pressures, and provides the capacity for significantly more if other customers can be found.'

They continued: 'The development is a triumph of vision, setting aside old animosities and mistrust, while still being sensitive to the politics of developing joint services. This project will continue to deliver savings with no discernible adverse impact on care, and substantial improvements in governance and audit capability.'

WHAT THE JUDGES SAID

"The development is a triumph of vision, setting aside old animosities and mistrust, while still being sensitive to the politics of developing joint services"



Members of the winning team (right), including the Countess of Chester's Richard Baird. Also pictured, the HFMA's Sue Jacques and Vasu Rangadass, chief executive of HCS technical partner Net.Orange



Accounts Team of the Year

2011	5 Boroughs Partnership NHS FT
2010	NHS Bournemouth and Poole
2009	Mersey Care NHS Trust
2008	Hull and East Yorkshire Hospitals NHS Trust (photo 1)
2007	North West Ambulance Service NHS Trust
2006	Wrightington, Wigan & Leigh NHS Trust
2005	Foyle Health & Social Services Trust
2004	Isle of Wight Healthcare NHS Trust

Clinician of the Year/Clinical Engagement *

2011	Jason Leitch, Scottish Government (photo 2)
2010	Philip Thomas, Brighton & Sussex University Hospitals Trust
2009	Ellen Wilkinson, Cornwall Partnership NHS Trust
2008	South Manchester PBC and NHS Manchester *
2007	Christie Hospital NHS FT (photo 3) *

Costing

2011	Cardiff and Vale UHB (photo 4)
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Deputy Finance Director of the Year

2011	Joanne Fitzpatrick, The Christie NHS FT
2010	Elaine Konieczny, Sherwood Forest Hospitals NHS Trust (photo 5, right)

Finance Director of the Year

2011	David Melbourne, Birmingham Children's Hospital NHS FT
2010	Steve Webster from North Bristol NHS Trust (photo 6)
2009	Paul Hinnigan, NHS Blackburn with Darwen Primary Care Trust
2008	Sue Jacques, County Durham and Darlington NHS FT (photo 7)
2007	Jane Tomkinson, Countess of Chester NHS FT

Efficiency

2011	NHS Oldham
2010	Basildon & Thurrock University Hospitals NHS FT
2009	Newham University Hospital NHS Trust
2008	2gether NHS Foundation Trust (photo 8)

Governance

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 (photo 9)

Havelock Training

2011	East Kent Hospitals University NHS FT (photo 10)
2010	NHS Central Lancashire
2009	Heart of England NHS Foundation Trust
2008	NHS London (photo 11)
2007	Sherwood Forest Hospitals NHS FT



Please note: for reasons of space this is not a complete list of past winners. For further details see www.hfma.org.uk/awards

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