## HFMA AWARDS 2015



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## Worthington leads the way

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# Pride of Bolton

Winner: Simon Worthington, Bolton NHS FT

Awarc

If you had to pick out three words you would associate with Simon Worthington, Finance Director of the Year, they would probably be leadership, pride and turnaround. His nomination form uses all three words, demonstrating that he is a finance director who is making a difference.

Mr Worthington joined Bolton NHS Foundation Trust in 2013. It was a difficult point in its history – Monitor had placed the trust in regulatory action for breaching its licence. However, soon after taking his post, Mr Worthington identified a potential run rate deficit that was close to 10% of turnover – his actions limited the final loss to £14m.

He developed a plan to return to surplus and, over 2013/14 and 2014/15, he has overseen cost improvements of £40m. The trust returned a surplus in 2014/15 and is on track to maintain a surplus at a time when most providers are in deficit.

The trust is a pilot site for the Carter review of efficiency and productivity, which has praised his approach to benchmarking and implementation of opportunities for cost improvement.

Mr Worthington is patient focused and, in his deputy chief executive role, he has engaged with clinicians on quality of care and devolved accountability to senior clinicians. As part of his finance strategy, the trust has invested in quality initiatives and the recruitment of doctors and nurses. In the process, it has moved from failing on regulatory quality targets to meeting them all. He has also negotiated £30m funding from the Department

"This is not an award for me. It is for my team, who are fantastic. They have been through an enormous amount of pain, so I am delighted to receive this recognition of their achievements"

of Health to invest in accommodation and IT architecture at the trust. Monitor ended its formal regulatory action at the trust in September 2015.

'This is not an award for me. It is for my team, who are fantastic,' said Mr Worthington. 'They have been through an enormous amount of pain, so I am delighted to receive this recognition of their achievements.

'I often talk about the art of making people bothered. One of the great things about Bolton is that it is a local hospital and a lot of people who live in Bolton work in the hospital. They want their hospital and community services to be strong.

'What happened was a massive shock to them, so we had to work to rebuild the

confidence of the team, having accountability and being supported, but having fun as well?

The judges singled out the trust's move to working day one reporting under his leadership and Mr Worthington agreed it was a crucial step for the trust.

'Moving to working day one reporting was important for two reasons. The first is that as part of the financial management approach, we have a focus on changing behaviours,' he said.

Late or out-of-date financial information should not be used as an excuse not to manage budgets. 'It was a statement that we were doing things differently and made a link to our turnaround.'

Organisational development of the finance team was the second reason why working day one reporting was important. 'The team had agreed we wanted to be the best finance function, providing value and facilitating excellent patient care. We thought, "what can we be best at?" and we weren't aware of any other trusts producing results that quickly.

'The team thought it was impossible but I believed they could. I told them I knew they could do it, but I didn't tell them how to do it. They did it all themselves and in eight weeks moved from day 15 reporting to day one.

'That was a turning point for the finance team – it gave them confidence and heads started to go up.'

Future-Focused Finance has played a big



role in the finance team's development, with the whole team rather than an individual acting as an FFF value maker. Mr Worthington said that this was supported by an 'excellent' FSD team.

'I set Mo Farah as a role model,' he said. 'The idea was that when he was the best, he still wanted to get better. Talking about the need to improve is not a criticism – we felt we needed to improve what we did all the time.'

HFMA 2015 president Sue Lorimer, who sat on the judging panel, said the choice of the winner was a unanimous decision. 'The entry demonstrated the director of finance's role in delivering significant turnaround in an acute foundation trust, taking it out if deficit – a real achievement in these challenging times.<sup>2</sup>

She continued: 'The winner "gave the finance department its pride back" in the words of one member of staff. He encouraged them to be innovative in a number of ways, an example of which was day one reporting, which won the innovation prize in the HFMA North West awards last year.

'The overall entry was impressive both for the achievements of the individual and the true leadership he showed, evidenced by many accolades from his staff.'

## **Also shortlisted**

Paul Dunn, Northumbria Healthcare NHS Foundation Trust In the last 12 months, Mr Dunn has taken the lead on two innovative

capital projects – the £90m Northumbria Specialist Emergency Care Hospital and capital projects to renew some of the trust's other facilities. The first is a purpose-built hospital – the first of its kind in England – offering a new model of care for seriously ill or injured patients. It offers 24-hour emergency care consultant cover together with a range of other specialists, seven days a week. The second project is being delivered through a special purpose vehicle, a wholly owned subsidiary of the trust. He also worked with the trust nursing

director to secure a £1.5m investment in new nursing posts.

#### Tom Jackson, Liverpool Clinical Commissioning Group

As well as being chief finance officer, Mr Jackson is the senior responsible officer for Healthy Liverpool, a programme developed to tackle some of the significant health problems in the city. Under his leadership, the programme has set out measurable ambitions and has developed a clear narrative on how the



CCG commissioning budget will be used to engineer the change required. His financial strategy for the CCG has enabled it to create an £80m transformation fund to support the delivery of Healthy Liverpool. Mr Jackson and his finance team have also supported the CCG in taking full delegated responsibility for commissioning primary care services in Liverpool. And he is leading discussions with NHS England on more effective commissioning of specialised services through co-commissioning.

### Joanne Newton, North, Central and South Manchester clinical commissioning groups

Ms Newton has been central to shaping the financial aspects of two major projects in Manchester – Healthier Together and the Greater Manchester devolution, for which the Central Manchester CCG hosts the



budgets and programme offices. Among her key actions were: supporting the financial case for change as part of the devolution work in December 2014; becoming acting chief operating officer for Central Manchester CCG following a secondment of a senior team member to the devolution team in early 2015/16; and, as well as being CFO for North, South and Central Manchester CCGs, she is also senior responsible officer for production of the Manchester locality plan. She has maintained strong financial control and governance across the three CCGs.

# Stepping u

In the past year, HFMA 2015 Deputy Finance Director of the Year Chris Lewis has stepped up to acting finance director while maintaining his deputy duties. In doing so, he has guided Cardiff and Vale University Health Board's financial plans through to Welsh Assembly government sign-off at a time when the board had to make savings of £42m.

The award is for any 'second-in-line' finance manager reporting directly to or deputising for the finance director or chief finance officer, a role Mr Lewis has filled with passion and professional leadership. He has given the board confidence in making decisions with clear and concise reporting at a time of restricted financial settlements and a local population rise since 2011 of double the UK average.

The health board said he always put the patient at the centre of decision-making, while aspiring to improve and add value.

And, despite the huge agenda, he has also been able to forge links with Cardiff University. He has embraced the challenge of financial management of research and development activities, winning the approval of hospital and academic clinical staff. This has been achieved at a time of reduced funding levels.

As chair of the all-Wales Financial Modelling group, established to produce sound and professional financial forecasts, Mr Lewis has led the production of this information to support the financial planning process for all of NHS Wales and the Assembly Government. The group has challenged and benchmarked areas of financial growth pressures, such as prescribing, continuing healthcare and pay. This has supported all local heath boards to develop their financial strategy.

Mr Lewis led the contract rebasing for specialist services, helping to reach final agreement – seen as a key achievement.

Despite this national work and his role as acting finance director, Mr Lewis has maintained a presence in the finance department at Cardiff and Vale. He is a keen advocate of developing finance skills and leadership, ensuring finance staff are embedded in clinical and non-clinical teams.

Mr Lewis, who is also HFMA Wales president, is committed to training and development at all levels, within the health board and across Wales. "He has taken the ethos and principles of the deputy role to a new level and addressed relationship issues at executive and Wales levels"

The judges said: 'He has taken the ethos and principles of the deputy role to a new level and addressed relationship issues at executive and Wales levels. He is driven to be solid at what he does, but also to create a very safe pair of hands for the organisation. Financial information is much more accepted and understood now across the organisation.'

Mr Lewis said: 'It has been an extremely

## **Also shortlisted**

Maxime Hewitt-Smith, South Tees Hospitals NHS Foundation Trust Recruited in summer 2014 when the trust anticipated a year-end deficit of £30m, Ms Hewitt-Smith has helped revive its financial fortunes. She developed a long-term financial model for the recovery plan that identified the need for a three-year £91m cost improvement programme. Working closely with the trust's newly established transformation team, she was key to cost savings of £27m in 2014/15. The trust recorded a deficit of £7m that year and expects to approach breakeven in 2015/16.

## Norman McLean, Lewisham and Greenwich NHS Trust

Appointed deputy director of finance in 2004, Mr McLean has ensured smooth transitions after a number of reconfigurations, most recently the formation of the Lewisham and Greenwich trust following the dissolution of South London Healthcare NHS Trust. He ensured a single finance function was created challenging year for the finance team at Cardiff and Vale. The team has performed exceptionally well and has delivered on a number of fronts, including improved financial management. The past 12 months have been a great opportunity for me. Personally, it has been very rewarding and I am looking forward to supporting the new finance director, Bob Chadwick.

following the merger with Queen Elizabeth Hospital and the trust has received positive audit reports in the two years since. He minimised liabilities and maximised income (from outstanding debt) above that assumed in South London's final accounts.

#### Scott Jarvis, Derby Teaching Hospitals NHS Foundation Trust

Following a reorganisation of the finance department and due to colleagues' other commitments. Mr Jarvis led contracting discussions with the trust's commissioners. Though not in his remit, he performed the role with distinction. He has helped liaise with five different Monitor scrutiny teams and maintained his leadership of the annual accounting requirements. This was particularly important with this year's annual and five-year plan process. He has a range of clinical and non-clinical contacts at the trust and in the local health economy, giving him a knowledge that exceeds the traditional boundaries of finance.

Winner: Chris Lewis, Cardiff and Vale UHB

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Despite working closely with clinicians to validate its costing methodologies and achieve a gold materiality and quality score (MAQS), Alder Hey Children's NHS Foundation Trust was aware it struggled to make patient-level information and costing systems (PLICS) mainstream or part of a clinician's day job. So it decided on a three-part approach, one that has won it the HFMA 2015 Costing Award:

- 'Ask, listen and share' to understand what clinicians want
- Create visually appealing reports
- Cost quality and performance issues.

On the first point, consulting clinicians, the trust identified a series of metrics quantifying the cost of quality – now reported monthly using its Value Intelligence for Patients (VIP) system. These user-friendly reports include patient outcome data, such as hospital-acquired infections, readmissions and days in hospital after estimated date of discharge, with associated costs. The trust's core electronic patient record and business intelligence systems were developed to allow this.

The trust said it wanted costing to have an impact on patient care. The dashboard shows the cost of quality and performance issues and these are benchmarked against other hospitals using healthcare

"The judges were impressed with the strong emphasis on engagement and communication throughout the trust"

e episodes data. VIP clinical champions were identified and have joined the trust's Value Hub, which is piloting a number of projects.

The trust identified appendectomies as one of its largest deficit-making healthcare resource groups. Length of stay was higher than the

## **Highly commended**

#### Lincolnshire Community Health Services NHS Trust

The trust has introduced individual costs for each clinician, moving away from costs per clinical team allocated over the team's clinical activity. Each clinician now has their own cost pool (based on pay and travel costs) and the cost of each contact is driven by the time spent on the patient's care. The clinical team can use this information to review the time and financial resource for each intervention. The trust's PLICS data uses notional income (national reference costs averages as proxy tariff), giving a live benchmarking tool. The judges said: 'Lincolnshire evidenced real developments in costing information and how it was being used to support and change clinical practice.'

#### **Also shortlisted**

### **Devon Partnership NHS Trust**

The trust's efforts to improve its costing had three aspects: improved engagement, information development and continuous improvement. The planning process for reference costs, education and training costs and benchmarking returns now includes three points for review ahead of submission, including stakeholders outside finance. A workbook has been developed for easier review of reference cost data, and proactive planning has been key to continuous improvement in costing.

#### South Tees Hospitals NHS Foundation Trust

South Tees has made moves to provide cost-based information to inform decisions on reducing costs while maintaining high-quality services. It has taken a number of steps to improve its costing. These have included increasing the frequency and quality of data flows, educating its finance business partners, introducing a general ledger to support costing, and strengthening the costing team. The trust is also producing PLICS data in a more timely fashion.

Winner: Alder Hey Children's NHS Foundation Trust

**VIP** service

national average, while readmission rates post surgery were greater than in peers. There was wide variation in clinical outcomes and costs,

It launched a continuous improvement project to redesign the pathway. The key initial change was to give patients with more complex appendicitis five days of intravenous antibiotics instead of two – this reduced the readmission rate from 14% in 2009/10 to zero in 2014/15.

The trust plans to develop its approach to costing, remaining best in class by continually improving its processes. It also plans to expand and formalise the Value Hub, establishing a Value Committee delivering value-based multi-disciplinary projects and overseeing a trust-wide value champion reward scheme reducing costs and improving patient care.

Deputy finance director Claire Liddy (pictured second left) said: 'We are delighted and proud that Alder Hey has received recognition for all the hard work that has gone into pushing the boundaries of costing, focusing on patients and working with clients. We unlocked costing to make an impact on patient care and had less emphasis on the numbers and a greater focus on quality.'

The judges said: 'The trust decided on a "right first time for the patient" approach, focusing on issues where a relatively small investment in resources could improve safety, quality and show a demonstrable improvement in patient outcome.

'The judges were impressed by the strong emphasis on engagement and communication throughout the trust.' **O** 

## Pioneering spirit

The first Future-Focused Finance Award winner Gayle Wells embodies the spirit of the programme, showing commitment, innovation and inspirational leadership, the judges said.

The Wigan Borough Clinical Commissioning Group assistant chief finance officer for financial management has been a prominent figure in FFF locally and nationally since joining the first cohort of value makers in June 2014. At the CCG, she has ensured the principles of FFF are built into its dedicated staff development time, organising sessions such as personal development for the CCG finance and commissioned services team.

At regional level, she has presented to a number of North West events, including those for Finance Skills Development leads and directors of finance - encouraging the latter to sign the FFF finance director declaration.

It is perhaps on the national stage where she has been most innovative, being one of the leading value makers on social media. She has led the way, building the #valuemaker community on Twitter. Now, 15 months on, it has a reach of more than 16 million, engaging with more than 1,400 different Twitter users. Reach is the total number of estimated unique Twitter users that tweets using the search term have been delivered to.

Social media has helped her seek out connections with other healthcare professional groups, such as #wenurses. Ms Wells has also supporting the 24 organisations using the FFF 'Close partnering' toolkit to develop their clinical and financial engagement, and has spoken at a director of nursing conference about FFF and the experience of the pilots.

'Gayle is a true leader and innovator who has taken the opportunities presented by being an FFF value maker and used them to improve services for finance colleagues, others working in the NHS and patients,' the judges said.

'She is generous with her own time and thinks nothing of working on FFF issues in the evening and at weekends when she feels it necessary. She inspires others around her to build on FFF's themes and ideals. She has truly embodied the spirit of FFF by connecting with people both virtually and in person.

'Despite all her successes, she has remained humble and self-aware. She is a worthy winner of the first FFF Award?

Ms Wells said: 'This means so much to me - it's only when you are nominated you realise just how much difference you are making. I



Winner: Gayle Wells (left), Wigan Borough CCG

wish everyone could have that recognition as there is just so much good work going on and it all deserves the same credit.'

She paid tribute to her fellow shortlisted candidates - Jonny Gamble, Pam Kaur and Matt Greene. 'When I saw the shortlist I really thought it wouldn't be me because they all do so much for FFF. Pam does fantastic work on clinical and financial engagement; Matt with the work he has done on the "Best possible value" decision-making tool and Jonny has

## Also shortlisted

Jonny Gamble and Pam Kaur, both from University Hospitals of Coventry and Warwickshire NHS Trust Matthew Greene, Liverpool Clinical **Commissioning Group** 

All three are value makers who have shown great commitment to FFF, supporting it across their organisations and the NHS. Mr Gamble has led finance staff development locally and is a member of the FFF 'Efficient processes and systems' delivery group. Mr Greene has led the Liverpool CCG pilot of the FFF value-based decision-making tool, promoting the tool locally and nationally. And Ms Kaur is a prominent ambassador for FFF, with a passion for finance training - an integral part of the 'Close partnering' delivery group. The judges said: 'Jonny, Matthew and

done so much in his trust to take FFF forward.'

the NHS"

Social media has been a powerful tool for communicating the aims of FFF and the Twitter #wefinance community will be launched in December, she added.

'I want to use social media to support finance colleagues across the country. We are all working so hard, under increasing pressure and the virtual community will be there to answer questions or offer support when someone is having a hard day.

Pam were all very strong contenders for the prize. Like Gayle, all three are value makers and, also like Gayle, most of what they have achieved has been as a result of their own passion and commitment. not because of their position in their organisation's hierarchy.' The judges added that they were 'humbled' by the nominees' demonstrable commitment to the aims and values of FFF at local, regional and national levels.

'Jonny helped bring FFF to life in his organisation, as well as contributing to the national "Efficient processes and systems" work. Matthew drove the "Best possible value" work forward as part of a pilot and then in the national roll-out. Pam has worked tirelessly to establish key aspects of the "Close partnering" action area, including the finance educator programme.'

## Contributions honoured

The HFMA made a number of personal awards during the annual awards ceremony. There are two types of personal awards - the Outstanding Contribution Award and honorary fellowships. They recognise individuals who have served the HFMA over a career or have provided continued support to its work for a substantial period. This year the HFMA gave one Outstanding Contribution Award and six honorary fellowships.

## **Outstanding Contribution Award**

HFMA chief executive Mark Knight said the Outstanding Contribution Award went to 'a special individual who has over the course of the last couple of years made a truly outstanding contribution to our work'.

Joe Teape has inspired many finance professionals in the South West to get involved in the HFMA and to take part in staff development. He is also a Future-Focused Finance value maker. Under his leadership when he was HFMA South West Branch chair, the local NHS Finance

Skills Development network and the HFMA came together for the first time to produce a first class service, Mr Knight said. 'The branch has gone from strength to strength with his ongoing input, so it is very fitting that he receives this award in recognition of all of his hard work.'

## **Honorary fellowships**

Joanna Watson was nominated by the East Midlands Branch for her branch and national work. She has been an active member of the branch for 10 years, including a number of years as chair. Under her leadership, the branch significantly increased its influence and support to the national HFMA agenda. Her enthusiasm and motivation has helped attract new members and ensured both local and national events are well attended.





The HFMA Charitable Funds Group nominated Nigel Davies. He was a founder member of the Charitable Funds Special Interest Group, providing expert guidance and opinion for more than 10 years. He has been the main representative on the group for the Charity Commission. He has presented at, and been involved with, the programme for every charitable funds conference ever run by the association.

Now retired, Vanessa Harris has long been a passionate advocate of staff development. Nominating her for the honorary fellowship, the Kent, Surrey and Sussex Branch said she had encouraged and influenced the development of the local branch and its activities. She had left it in the enviable position where a culture of staff development and participation in branch activities is considered to be the norm.



David Carson, who unfortunately was unable to attend the event, has also recently retired. In 2015 he stepped down as chair of the Scotland Branch, which nominated him for the award. He has served on the HFMA Scottish Branch for many years and during his tenure as chair resurrected the annual conference. The last two annual conferences have been attended by more than 100 finance professionals.

The senior team at the HFMA nominated Bob Alexander for fellowship. Mr Knight said he had been a stalwart of many HFMA conferences up and down the country in his role as finance director and subsequently chief executive of the NHS Trust Development Authority. He praised Mr Alexander's 'straight forward, straight talking approach' and his willingness to mentor and guide his colleagues.





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Mark Knight

Keith Wood is a long-standing HFMA supporter and member of its former Financial Management and Research Committee, which he chaired for more than 15 years. He stepped down from the committee in 2015 and was nominated by its successor, the Policy and Research Committee. He has chaired the judging panel of the Efficiency and Innovation Award since its inception and been an Eastern Branch committee member since the 1990s. O





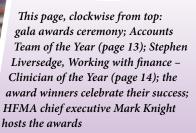
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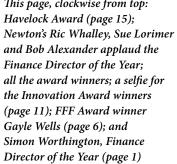


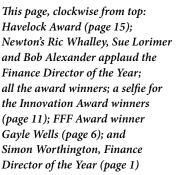




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Dorset Clinical Commissioning Group won the 2015 Innovation Award for its part in a health promotion fund it believes could save the local NHS millions of pounds.

Following the success of the 2012 Olympic events in the county, local organisations decided its legacy would be a lasting impact on the health of the county's population.

Budget pressures have meant the focus is on delivering core health services to the detriment of investment in prevention of ill health. The Dorset project bucks this trend, while its community-led approach meant work was targeted at those most in need.

As well as a lasting legacy, the muti-agency approach aimed to target the most vulnerable, tackle health inequalities and inspire people towards a healthier lifestyle. Applications were assessed against several criteria – strategic and financial need; quality plans; and impact on beneficiaries.

The initiative, the Health Legacy Fund, aimed to invest in schemes addressing health inequalities in vulnerable, marginalised and deprived communities, including disabled and homeless people. Collaboration was key. The CCG worked with the county council, as well as borough and district councils and Dorset Public Health to deliver the health priorities of two health and wellbeing boards.

The partners invested £744,000 in 56 projects that addressed a range of health inequalities leading to cancer, obesity and



## Olympic spirit

mental health issues. More than 20,000 people took part in projects and, as the local investment is in matched funds, the overall funding attracted was almost  $\pounds 2.5m$ .

Based on government figures, the CCG said a visit to a GP costs the NHS £45 on average, so 20,500 participants making five fewer visits per year would offer an opportunity cost of £4.6m. The £744,000 – unused public health contingency funding – was used to fund grants

## **Highly commended**

### Salford Royal NHS Foundation Trust

The trust introduced nursing ward dashboards to give managers clear and concise data. The tool presents an analysis of hours worked per ward per week, focusing on hours funded versus hours worked, rather than budgeted and actual cost. This was chosen as it was felt concentration on variation in rotas would increase nursing staff engagement and understanding and lead to greater success in managing resources within budget. It reduced bank and agency expenditure, sickness rates and lengths of stay. Additionally, the dashboard highlights spend on specialling (one-to-one nursing care) and, along with the introduction of a 'prescription' for this type of care, led to a sustained reduction in one-to-one nursing costs.

#### **Also nominated**

## NHS England (consolidation and reporting team)

The team created an agreement of balances toolkit in 2014/15 to ensure all organisations in NHS England coded income and expenditure and debtors and creditors transactions to correct or allowable combinations. The aim was to eliminate 'grey code' errors. In 2013/14 NHS England group accounts had a large top-level adjustment (£3.3bn) due to these errors. After the toolkit was introduced,

NHS England had to make £12m of central adjustment on its £98bn budget.

#### **Bolton NHS Foundation Trust**

The trust revamped its reporting processes so that instead of reporting the financial position at working day 15, with divisional performance meetings a month later, the trust reports its financial position at working day one of each month. Now it no longer takes two months before issues are identified and acted upon. of up to £20,000. The CCG finance team played a key role, with two senior members heavily involved and two others contributing to the conception, adoption, delivery and overview of the project. The team is also working with Dorset County Council's sports and physical activity team to consider research into value for money and options for extending the fund.

It oversees a grant process that has a timescale of two to three months from application to receipt of funding. The team has also engaged with projects that have successfully applied for funds.

The judges said: 'The panel was inspired by the sheer scale of Dorset CCG's Health Legacy Fund and just how far reaching it is – with a great impact on improving the lives of a marginalised and vulnerable part of the population. The fact that the initiative used matched funding to significantly increase its scope and impact and bring health and social care together was very impressive.'

The winners were thrilled with the recognition of a project that tackled health inequalities by bringing together health, social care and the voluntary sector. 'We worked with the health and wellbeing boards in Bournemouth and Poole and Dorset to target health inequalities through innovation,' said Chris Hickson, head of management accounts at Dorset CCG.

Dave Franks, Dorset County Council sports and physical activity manager, added: 'We gave grants of up to £20,000 for third sector community groups to deliver health inequalities work and it made a difference to local people.'

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## Collaborative effort

In recent years, judges have bestowed this award on organisations that have produced timely, accurate accounts or have innovated in the presentation of their accounts. But this year they chose an organisation that did both, praising the collaboration at Nottingham University Hospitals NHS Trust that went into producing its accounts.

'The panel were impressed with the clear evidence of the accounts team being integrated within the organisation and evidence of the information within the annual accounts being used across the organisation,' they said.

The team embedded stakeholders in the accounts process, both within and outside the trust. A wide range of stakeholders, including commissioners, the media and patients, contributed to the annual report. In the financial review of the year section of the report, emphasis was placed on collaborative working arrangements with health and social care partners to support the wider QIPP efficiency and quality agenda.

In line with segmental reporting requirements, the trust felt it was important for stakeholders to have a more granular understanding of its financial position. So, for the first time, it presented to an external audience a summary of the margins achieved by each of the trust's service lines in 2014/15. The trust said this helped to provide stakeholders with a clear indication of the underlying drivers of its financial performance and a transparent link to the service line reporting developed in the previous years.

The judges added: 'The development of segmental reporting in a transparent and open way is a bold step that has supported a collaborative approach across the health community as a whole to understand and share the respective financial position of all organisations and the development of integrated financial strategies.'

Following feedback from stakeholders, the annual report and accounts document was redesigned in 2014/15. It is now a more concise document using more graphs, pictures and tables to show financial and performance data.

As well as these innovations, the team ensured the accounts process ran smoothly. And in preparing group accounts for the first time, the team had to cope with the complication of the consolidation of a private subsidiary. This was reflected in the external

"The judging panel were impressed with the clear evidence of the accounts team being integrated within the organisation"

auditor's comments on the draft accounts. The auditors identified only a small number of

minor adjustments, while the trust had prepared working papers to their 'prepared by client' requirements.

Deputy finance director Duncan Orme (pictured third from right) said that speaking to the trust communications team early in

## **Highly commended**

#### **Rotherham Clinical Commissioning Group**

The judges hailed the team's work after a senior team member fell seriously ill five days before the accounts submission deadline. 'In what has clearly been a difficult period for the finance team and the CCG, the panel were impressed with the way three-dimensional tools such as the abacus and Lego blocks had been integrated into the presentation of financial information and to help make that information understandable. The segmentation of stakeholders and the tailoring of approach to fit each stakeholder's background and interest area was particularly impressive.'

#### Also shortlisted

Leeds Teaching Hospitals NHS Trust The judges recognised the team's proactive and positive approach to engagement with the Department of Health finance team. 'We were able to see clear evidence of ongoing learning through analysis of Freedom of Information requests and the use of regular interfaces with stakeholders to focus the areas of development of information in terms of content and style of presentation of financial information,' they said.

Winner: Nottingham University Hospitals NHS Trust

the process was a vital step in ensuring the information was delivered in an accessible way.

He was pleased for the accounts team. 'They have put a lot of hard work and planning into getting the accounts to a place where they were telling a story to the people who use them,' he said. 'And, in that story, they are helping people understand not only how difficult finances are in the trust but also where the difficulties are.'

## Wrightington, Wigan and Leigh NHS Foundation Trust

Following the success of the 2013/14 video as a way of sharing financial information, the judges said the message has been developed further with the use of non-financial staff in the 2014/15 video. 'The trust is also commended for the way it managed the transition process to NHS Shared Business Services for the transactional elements of the finance function at the same time the 2014/15 accounts were being prepared,' they added.



Winner: Stephen Liversedge, Bolton CCG

The 2015 Working with finance – Clinician of the Year, Stephen Liversedge, has a track record of working with finance and other colleagues to deliver better value services to patients. As well as working part-time as a GP, he is clinical director of primary care and health improvement at Bolton Clinical Commissioning Group. His engagement with finance started in the days of primary care trusts. In 2008/09, he negotiated £1m from the local PCT to implement the Big Bolton Health Check, to ensure everyone in the town aged 45 and over had a health check.

Since 2014/15, he has been advocating radical change in the way primary care is funded as the only way forward for the CCG if it is to cope with unprecedented financial pressures. He was instrumental in the Bolton Quality Contract, which has invested an extra £3.4m in primary care and produced a 100% return on investment in the first year.

All local GP practices, whether on general medical services (GMS), primary medical services (PMS) or alternative provider medical services (APMS) contracts, moved over to the new quality contract. 'One of the big things was moving away from GMS and PMS funding, which has significant variations, particularly in Bolton, and giving everyone the same amount, weighted for deprivation,' Dr Liversedge said.

The contract aims to increase GP surgery opening hours, reduce prescribing waste and clinical variations between GPs, cut secondary

## **Also shortlisted**

#### Fraser Cummings, University Hospital of Southampton NHS Foundation Trust

Dr Cummings' project to manage high-cost biological treatments demonstrated the successful implementation of a change of clinician practice and the implementation of a revised patient pathway, said the judges. These changes not only improved the quality of care, but significantly reduced the pharmaceutical costs of treating patients with irritable bowel syndrome. The early identification of the benefits of a drug. biosimilar infliximab, and Dr Cummings' engagement with finance and commissioners were key to success.

### Mike Jones South Staffordshire and Shropshire Healthcare NHS Foundation Trust

Mr Jones has made a long-term commitment to implementing and improving the use of clustering in mental health services. This involved taking what was perceived as a finance system and showing clinicians the benefits of the approach to improving the delivery of timely relevant pathways for patients. The judges said the key to success was his development of the four-factor model to assess patient progress, supporting clinicians in monitoring their care.

### Stuart Murdoch Leeds Teaching Hospitals NHS Trust

The judges said Dr Murdoch had shown the highest level of clinical leadership – commitment to delivering savings plans and ensuring budget holders are held to account. He has implemented a performance management framework so budgets are understood and processes and authorisation levels are clear. The judges said: 'As chair of the patient-level information and costing board and clinical lead of the trust management group, he has demonstrated his commitment. Improvements implemented have included using patient cost data to improve the spinal surgery pathway.'

## Primary engagement

project where the

nominee took end-

to-end responsibility

from the generation

of the original

idea to successful

implementation"

care demand and encourage more costeffective use of clinical resources.

Dr Liversedge worked with the CCG finance and business intelligence directorates to set the overarching financial principles and payment mechanisms, standards and metrics.

The expected savings in 2015/16 as a result of the contract are £3.8m from prescribing and reduced primary and secondary activity. The CCG said early indications are that 85% of the savings are being delivered and it is forecasting that 94% of the prescribing savings will be achieved by the end of the year.

'I realised I had to get GPs to

understand there are two chequebooks on their desks – a referral pad and a prescription pad. If you do not engage them in that, the NHS could run into problems,' Dr Liversedge said. and the range of issues addressed impressed the judges, Dr Liversedge was the unanimous winner. They highlighted his personal commitment to improving the quality of services to patients and to balancing the

While the quality of this year's nominees

books, particularly in his work on "This was truly a the health check.

'This was truly a project where the nominee took endto-end responsibility from the generation of the original idea to successful implementation.

'A year after implementation the level of heart attacks in Bolton had reduced by 50%, delivering the prefect cost

improvement scheme of improving the quality of services and reducing not only economic costs but the very real impact on patients lives? •

## Finance explained

Liverpool Clinical Commissioning Group's innovative, fun approach to demystifying finance has won it the Havelock Training Award this year.

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

The CCG finance team developed a onehour event in response to the need for whole organisations to ensure resources are used effectively to deliver the best outcomes and value. It wanted decisionmakers to understand the financial implications of what they do and to develop the relationships between the finance team and other parts of the CCG.

However, realising NHS finance could be a daunting subject for non-finance managers, the team decided to make the events more fun.

Entitled 'Show me the money', the event featured a series of information stands on all aspects of finance, including financial accounts, statutory duties, contracts and management accounts. Participants spent five minutes at each until all had been visited.

All of the CCG finance team helped prepare the event, enabling them to think outside their spreadsheets. There were games, such as 'Play your cards right' for contract values, 'Who pays?' to identify the responsible commissioner, and 'Pin the price on the body' to illustrate tariffs. A 'Balance the books' game tasked participants with hitting a zero cash balance on 31 March. Finance acronyms and terms were explained and the components and significance of financial codes revealed. The finance team said there was 'a real buzz' in the room as participants enjoyed taking part.

A questionnaire sent to participants a few days after the first session produced an overwhelmingly positive response. The finance team also reported that the preparation and delivery of the events were good for team building and the sessions had helped identify further training requirements. The event has been developed further, with 'Show me more money' incorporating new stands, and 'Show me the money on tour' delivering smaller tailored versions to school careers fairs and parent engagement events, marketplaces and GP practices. Further events are planned, including for practice managers, patients and an audit consortium conference. The judges praised the scope of the

winning entry. 'Show me the money is innovative and engaging, as well as being practical and

"The 'Show me the money' event is innovative and engaging, as well as being practical and transferable" transferable. It includes both finance and non-finance development and is a worthy winner?

Kim McNaught (pictured below right), who until recently was deputy chief finance officer at the CCG, said: "This was about getting people interested in finance in different ways. It was informal and fun – the chief officer punched the air with delight when getting an answer right. And it was a team-building exercise for the finance team – everyone was involved and wanted to have a great stand. It made us more human to the organisation."

Winner: Liverpool CCG



## **Also shortlisted**

#### **Bolton NHS Foundation Trust**

The trust advised other NHS bodies on how to deliver their financial results on working day one, which it achieved in October 2013. Interest in how the trust had moved to day one reporting was renewed recently when the finance team wrote a blog for the Future-Focused Finance website. Following several requests for visits, training and presentations, the finance team developed interactive training, including template plans, a teamwork jigsaw and debate.

### Leeds Teaching Hospitals NHS Trust

Leeds took steps to improve financial knowledge and awareness after discussions with 25 budget managers with different backgrounds. This looked at skill levels, assessed what the levels should be and how managers would prefer to get to the required level. Responsibility for improving finance skills was incorporated into a new assistant director of finance post. With a disparate range of knowledge and skills, the project group decided that a one-size-fits-all approach would not work and has developed bespoke programmes.

#### The Christie NHS Foundation Trust

The Christie finance team has developed an infrastructure with succession planning that allows it to focus on developing staff with an emphasis on adding value to the organisation. It has taken its finance skills development to a new level, concentrating on how the team can be more responsive to the needs of the organisation – for example, by introducing a scheme for finance staff to buddy with clinical colleagues. It has introduced a training programme covering strategic learning, technical learning and skills for work.

# Forward together

A collaborative model between two commissioners and three providers has scooped the 2015 Governance Award. The winners are North East Lincolnshire Clinical Commissioning Group, North Lincolnshire Clinical Commissioning Group, Northern Lincolnshire and Goole NHS Foundation Trust, Navigo Health and Social Care Community Interest Company (a mental healthcare provider) and Care Plus Group (community health and social care).

Tight finances made contract negotiation tough – for example, the 2014/15 contract with the acute trust was not signed by all parties until early 2015. The organisations agreed changes were needed in 2015/16 to incentivise and support delivery of the North Lincolnshire change programme, Healthy Lives, Healthy Futures (HLHF), and close a projected financial gap of £104m by 2018/19.

The finance leaders in each organisation led the implementation of a joint financial planning initiative, with a different model for managing financial risks and incentives.

They developed a memorandum of understanding, which sits alongside all local NHS provider contracts in 2015/16. It is designed to increase certainty, minimise risk and incentivise transformation and provides a minimum and maximum income guarantee. This guarantee is based on 2014/15 activity, adjusted for growth and the impact of QIPP schemes and priced at 2015/16 tariff prices. The memorandum recognises the need for:

- Financial transparency
- Collaboration
- Delivery of quality outcomes
- · Getting maximum value from resources
- Ensuring a resilient, sustainable system
- Moving towards weighted capitation budgets or currencies.

There is ongoing monthly monitoring of the financial health of the whole community, with each of the five organisations operating an open-book approach, sharing financial forecasts and identified risks. As a result, inyear pressures can be managed across them.

The 2015/16 contracts were signed earlier than in the previous year, while planning for 2016/17 and 2017/18 has started earlier and on a collective basis.

"The providers and CCGs have worked up an open-book and collaborative approach that seeks to really incentivise transformation"

North Lincolnshire and Goole NHS Foundation Trust director of finance Marcus Hassall said the initiative had addressed fragmentation in the health system. 'We are trying to put accountants in the position where they are working together rather than fighting each other.' He added that accountants were leading by example and the project could be replicated across the NHS. 'We are not going to find innovative solutions to the problems we face if we do not work together.'

The judges said: 'This is an innovative joint planning approach for the region of North Lincolnshire, where providers and CCGs have worked up an open-book and collaborative approach that seeks to really incentivise transformation. It is a model of working that could be replicated across other health economies given the finance challenges.'



Winners: North East Lincolnshire CCG, North Lincolnshire CCG, Northern Lincolnshire and Goole NHS FT, Navigo Health and Social Care CIC and Care Plus Group

## **Also shortlisted**

Leeds Teaching Hospitals NHS Trust As part of the Leeds Way - the values with which employees are expected to conduct themselves - the finance team has led a change programme challenging all 15,000 staff to 'know their business' and work with finance to drive cultural change and seek efficiencies. This has led to greater engagement between the clinical business units and the finance team and resulted in improvements in the financial position. For example, between July and August 2015 there was a 22% fall in agency nurse spending. The judges said: 'The enthusiasm and passion of the team and tangible successes achieved in the early stages of the project really impressed us.'

## West Midlands Ambulance Service NHS Foundation Trust

The trust's internal audit service has developed a centre of governance excellence in cyber security and become the only accredited security testing provider in the NHS. The service helps ensure the confidentiality, integrity and availability of information, including in picture archiving and communications and website content management. 'The services of the team have been used by moe than 30 NHS organisations to test their security from cyber-attack,' the judges said.

#### **Public Health England**

The organisation was shortlisted for its approach to governance, assurance and risk in its finance and commercial directorate, including the development of a performance scorecard. 'As a new organisation formed in 2013 bringing 130 disparate units together Public Health England had real challenges pulling together a governance structure and managing a wide range of risks,' the judges said. 'The team, through its passion, hard work and skills in IT and risk management, has pulled together an effective and user friendly risk management structure.'

## **PAST WINNERS**

#### Accounts Team of the Year

- Wrightington, Wigan and Leigh NHS FT 2014
- Hertfordshire Partnership University NHS FT 2013
- 2012 Alder Hey Children's NHS FT
- 2011 5 Boroughs Partnership NHS FT 2010 NHS Bournemouth and Poole photo 1
- 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

- Rob Duncombe, The Christie NHS FT 2014
- 2013 David Fearnley, Mersey Care NHS Trust
- 2012 Malik Ramadhan, Barts Health NHS Trust photo 2
- Jason Leitch, Scottish Government 2011
- 2010 Philip Thomas, Brighton & Sussex University Hospitals Trust
- 2009 Ellen Wilkinson, Cornwall Partnership NHS Trust
- South Manchester PBC and NHS Manchester 2008\*
- 2007\* The Christie Hospital NHS FT

#### Costing

- 2014 Derby Hospitals NHS FT
- 2013 Nottingham University Hospitals NHS Trust photo 3
- The Christie NHS FT 2012
- 2011 Cardiff and Vale UHB

### **Deputy Finance Director of the Year**

#### 2014 Tim Jaggard, UCLH NHS FT photo 4

- 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**

- 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 photo 5
- 2010 Steve Webster, North Bristol NHS Trust

- 2009 Paul Hinnigan, NHS Blackburn with Darwen PCT
- Sue Jacques, County Durham and Darlington NHS FT 2008
- 2007 Jane Tomkinson, Countess of Chester NHS FT

#### Efficiency

- 2014 Alder Hey Children's NHS FT
- 2013 Portsmouth CCG photo 6
- Countess of Chester Hospital NHS FT/Wirral University 2012 Teaching Hospital NHS FT
- 2011 NHS Oldham
- 2010 Basildon & Thurrock University Hospitals NHS FT
- 2009 Newham University Hospital NHS Trust
- 2008 2gether NHS FT

#### Governance

- 2014 South Warwickshire NHS FT photo 7
- 2013 Imperial College Healthcare NHS Trust
- 2012 Leicestershire Partnership NHS Trust/EMIAS (internal audit)
- 2011 University Hospital of South Manchester NHS FT
- Plymouth Hospitals NHS Trust and Audit South West 2010
- 2009 The Ipswich Hospital NHS Trust
- 2008 Plymouth Hospitals NHS Trust
- 2007 Redbridge PCT
- 2006 Oldham PCT

#### **Havelock Training**

- 2014 The Walton Centre NHS FT
- Nottingham University Hospitals NHS Trust 2013
- 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 photo 8
- 2007 Sherwood Forest Hospitals NHS FT

### **Best New Organisation**

2013 Bolton CCG

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



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To find out more call **0117 938 8358** or email **alex.wood@hfma.org.uk**  "For someone with a lack of knowledge of NHS finance, I found the day very insightful and a springboard for learning which I hope to put into practice."

Patricia McAuley Programme Co-ordinator Health Education West Midlands

