NHS finance career stories

October 2015
In February 2014, the six heads of the finance profession in the NHS came together to form the Finance Leadership Council (FLC) and to initiate Future-Focused Finance. The FLC sponsors the Future-Focused Finance programme, and forms its steering group who meet on a monthly basis. The FLC members are:

Bob Alexander Chief Executive, NHS Trust Development Authority  
Paul Baumann Chief Financial Officer, NHS England  
Steve Clarke Finance Director, Health Education England  
Stephen Hay Managing Director of Provider Regulation, Monitor  
Sue Lorimer Business Director North, NHS Trust Development Authority and HFMA President  
David Williams Director General, Strategy, Finance and NHS, Department of Health

Future-Focused Finance is about ‘Making People Count’ by ensuring that everyone connected with NHS finance has access to the relevant skills, methods and opportunities to influence decision making in support of the provision of high-quality patient services. It offers a vision for NHS finance to aspire to over the next five years. That includes everyone who works in finance, in every role at every level, those we work with to deliver services and the patients and communities that use and support those services.

To deliver the transformation required to bring about the vision, work is being undertaken around three strategic themes: Securing Excellence, Knowing the Business and Fulfilling Our Potential. Each strategic theme supports two action areas which have their own programme of projects. The six action areas are led by a senior responsible officer (SRO) drawn from the service.

**Securing Excellence**

We invest in the services which give **Best Possible Value** for patients and the public - Caroline Clarke, Director of Finance and Deputy Chief Executive, Royal Free London NHS Foundation Trust.

We run **Efficient Processes & Systems** – Suzanne Tracey, Executive Director of Finance and Business Development, Royal Devon and Exeter NHS FT

**Knowing the Business**

We work with others through **Close Partnering** across every part of the NHS - Dr Sanjay Agrawal, Consultant Respiratory Intensivist, University Hospitals of Leicester NHS Trust.

We all have the **Skills & Strengths** needed for our roles - Richard Alexander, Chief Financial Officer, Imperial College Healthcare NHS Trust.

**Fulfilling Our Potential**

We each play a part in making NHS finance a **Great Place to Work** - Cathy Kennedy, Deputy Chief Executive & Chief Financial Officer, North East Lincolnshire Clinical Commissioning Group.

We create **Foundations for Sustained Improvement** - Mark Orchard, Director of Finance, Poole Hospital NHS FT.

Join the conversation [www.futurefocusedfinance.nhs.uk](http://www.futurefocusedfinance.nhs.uk)

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Introduction

Future-Focused Finance commissioned the HFMA to produce this series of NHS finance career stories to support its Great Place to Work workstream. Our joint aim is to highlight different career pathways and the attractions of working in NHS finance. The stories promote the benefits to people considering their career options at all points in the spectrum – for example, from students and schoolchildren thinking about what they might do in later life, to finance directors working in other industries. They will also be of interest to NHS finance professionals considering what their next step might be.

The series of 25 stories captures a diverse mixture of careers that showcase the range, opportunities and appeal of working in NHS finance. They highlight the ability to have a successful career at any level and the opportunities for wide-ranging personal and career development. They show that time spent in NHS finance can enhance a career that spans other sectors or even non-finance careers.

This summary is intended to be of interest to a wide range of audiences, from NHS staff, to school leavers and graduates, commercial sector employees and those in the wider public sector. It draws on the individual career stories and summarises the key themes common to them all.

When talking to people considering a career in the NHS, one of our interviewees gives the following advice: ‘There are lots of opportunities for you in the NHS – for example, you may want to work as a technical accountant, a management accountant, an internal auditor or a contract accountant. The NHS offers you this and you can expand your skills beyond the finance team if you choose to.’

Why become an accountant?

Our career stories show the many different reasons people have for wanting, or just ‘falling into’, an accountancy career. In this section we look at how the people we interviewed became professional accountants and senior managers in the organisations they work for.

For some it is the extension of their studies at school and university that lead them to pursue a professional qualification combining business, numbers and people. Caroline Clarke, finance director and deputy chief executive of the Royal Free London NHS Foundation Trust, studied economics at the London School of Economics. This was also where she first set her sights on accountancy as a possible career, as she saw it as providing both a technical and portable skill. However, it wasn’t the beauty of a well-balanced spreadsheet that attracted Caroline. Instead, identifying the links between what she was learning in final year psychology and her accountancy modules, she was intrigued by how you could use numbers to influence people’s behaviour.

Andrew Geldard, now chief executive of North Essex Partnership University NHS Foundation Trust, was
working as a statistician in a regional health authority before starting his NHS finance career. He explains: ‘The regional director of finance was unhappy that the data analysis capacity was not within his department. Consequently, he tapped me up to apply for a job in his department.’ Andrew initially turned it down, thinking finance didn’t really appeal, but he says a call from the finance director changed his mind. Andrew went on to sign up for CIPFA’s senior entrants course and says that he ‘owes a huge debt of gratitude’ for being encouraged to do so.

Adam Sewell-Jones, director of provider sustainability at Monitor, also admits he had no plans to be an accountant while he was at university studying maths and statistics. A family friend, working as a finance director in the NHS, pointed him in the direction of the NHS national finance training scheme. ‘All of a sudden I realised that doing accountancy in something like the NHS, where the accountancy wasn’t the end goal, could be exactly what I wanted,’ he says.

For others, the appeal of accounting is the professional qualification. NHS England chief finance officer (CFO) Paul Baumann started his career through a commercial management traineeship at Unilever. He says: ‘It seems to me, you have to have a profession. And I thought finance would give me the best opportunity to exert broad influence across the whole range of things that Unilever did.’ Unilever’s view of the finance role – it had a commercial function rather than a finance department – helped him to see this broader potential from a finance career. But on his move to the NHS more than 20 years later, he says: ‘I think I’ve made the move to the public sector for good. It is difficult to conceive of any parts of the sector that are as interesting, challenging or fulfilling as the NHS.’

Gemma McGeachie also works for NHS England, as senior manager – financial strategy. She studied economics at university and had a place on the government economic service graduate scheme, which she turned down to follow a career as an accountant. She explains: ‘I was on a summer internship at EY at the same time I applied for the government economic service. During the seven weeks I spent at EY, I got involved in a wide variety of projects and enjoyed it more than I was expecting.’

In the next section we explore in more detail the routes that have led people into a career in NHS finance.

Why choose a finance career in the NHS?

Working in the NHS has been a rewarding and diverse career choice for our interviewees, packed with opportunities for career development and providing a strong sense of job satisfaction. Several of the people featured in our career stories have family members working in the NHS – not necessarily in finance – and so working in the NHS was a familiar choice. Others expressed their desire to work in the public sector at an early stage and have combined their NHS careers with spells in local government and other public sector institutions. Others had a different perspective on the NHS however, joining later in their careers, but speak passionately about the work they do.

Kate Hannam, director of operations at North Bristol NHS Trust, joined the NHS finance training scheme in 1994 after completing an accounting and finance degree. She had always wanted to join the NHS, following in the footsteps of a large number of her family. ‘I always had public sector values,’ she says. ‘I considered working for one of the big accountancy firms, but I felt the NHS would give me a greater opportunity to make a difference, I didn’t know exactly what I wanted to do within the NHS. I was quite interested in general management, but I felt the finance training scheme would allow me to transfer between disciplines more easily if I wanted to.’

For Sian Alcock, NHS national graduate management trainee, while working as a student during university holidays in NHS administrative jobs, she realised she quite liked working in a hospital. Her belief in the need for finance to put patients at its heart springs from this early work experience. On passing her degree, she went back to the NHS, first in the outpatient department and then as executive assistant to the directors of finance and nursing at Taunton and Somerset NHS Foundation Trust. During this time she applied to the national graduate management training scheme.
For some, a career in the NHS was not something that was planned. Jamie Foxton, deputy director of finance at Hull and East Yorkshire NHS Trust, says he’d never thought about working in the public sector. He was conscious of a view across parts of the commercial world, where he started his career, that public sector finance managers were little more than budget accountants. ‘My perception had been that the NHS was a bit of a backwater and it was not viable for a career,’ he says. But he was keen to continue his career by staying in the local area and when a job came up in 2010 at the local hospital, he thought he should take a look. His view had also started to change over the past year as his wife’s pregnancy had brought the couple into more contact with NHS services. ‘The more time I spent at the hospital, the more fascinated I became,’ he recalls.

Similarly, Ray Thomas was drawn to the NHS by positive experiences – of finance staff and NHS care. Now assistant director of finance at the Countess of Chester Hospital NHS Foundation Trust, he initially joined the trust as chief financial accountant. ‘It is my local hospital and where my children were born. I knew the care there was excellent and I wanted to build on my good experience on secondment to the NHS.’ He had previously been working at KPMG, specialising in corporate transactions. ‘The role was particularly attractive because of its technical nature’, says Ray. He describes the transition to the NHS as straightforward, ‘the people working at the trust were brilliant and very supportive.’

For Richard Wheeler, East Midlands Ambulance Service NHS Trust director of finance, it was the range of organisations and services that attracted him to the NHS and a desire to improve business practices and put the NHS onto a sure footing financially.

Finally, Andy Hardy, chief executive officer, University Hospitals Coventry and Warwickshire NHS Trust explains what makes an NHS finance career really stand out from other sectors. ‘Being an accountant in the NHS is different to being an accountant anywhere else. We’re not dealing with widgets; it is all about people and making a difference to their lives. Anyone who works in the NHS, whether they’re a clinician or not, is in a job that makes a difference,’ he says. Andy says that while working in NHS finance is rewarding, it is not for the fainthearted. ‘These are tough jobs,’ he says. ‘The pressure can be relentless and how you respond is the true test.’

People come to the NHS for reasons but in the next section we look at what makes them stay and what they love about their jobs.

What drives NHS finance professionals?

Our interviews highlight the huge range of opportunities and experiences the NHS can offer and what it is people find most rewarding about their work. Many spoke about the personal satisfaction achieved from meeting tough challenges. For others it is the opportunity to work with clinicians and see the impact of their work on improving patient care.

Loretta Outhwaite is CFO at Isle of Wight Clinical Commissioning Group. She says, ‘the variety is something I very much enjoy, along with the complex, ever changing and somewhat unpredictable environment of the NHS. The aspects I enjoy are also the ones that provide the most challenge in the role. I love a challenge.’ When starting out her career Loretta deliberately chose to get some experience of life on the front line, in clinical services working as a directorate accountant. ‘I worked a shift in each clinical department, so I could understand what they did – mopping floors in the urology operating theatre, providing support to A&E staff and reassurance to patients and relatives.’

Alison Tonge, regional director, specialised services commissioning for NHS England (North), has always been interested in the bigger picture and making changes through specific pieces of work, such as the private finance initiative, capital development and writing business plans. Alison says, ‘I was interested in the numbers telling the story – and still am. For me, it’s about using financial information and knowledge to make improvements.’

Kate Whiting recently joined Central Manchester NHS Foundation Trust as finance director, specialist medicine. ‘The role is finance, but based within the medical division, so is a perfect balance for me,’ she says. Kate has relished the challenge of working at a large hospital and is making good use of her general management experience. As she explains: ‘I now know I am asking the right questions. I can see where the problems are likely to arise and can suggest ways to overcome them. I’d recommend spending time in an operational role, it really does make you a better accountant.’

Ben Bennett, director of business planning and resources at NICE, also enjoys the breadth of his role. His responsibilities extend beyond the CFO duties to business planning, human resources, IT infrastructure, procurement, estates and facilities, governance and board support. While he may not have formal qualifications in these areas, the accountancy qualification provides transferable skills. He also takes part in managing and reviewing the body’s clinical, public health and social care outputs. He says the work
is ‘fascinating’ and even though his focus is primarily on finance, process and governance, it is a far cry from his narrower accountancy training.

For Mark Brooks, CFO at Southern Health NHS Foundation Trust, the best things about working for the NHS are ‘the dedication from the clear majority of people. Working in an organisation that makes a difference to people’s lives is genuinely attractive’. As well as finance, Mark is responsible for procurement, IT, estates and corporate assurance. He says: ‘When in the office, I work with a fantastic finance team that undertakes much of the day-to-day work. There is no typical day for me and I enjoy a wide range of aspects in my role.’

Gill McKetterick, project manager at Mersey Care NHS Trust, speaks highly of the opportunity to develop. She says: ‘There are good support networks in the NHS and opportunities for those that want to take them. When I worked in manufacturing, it felt like the only incentive to progress was for more money. In the NHS, it feels different. It is about expanding your skills and adding more value.’

While NHS finance and Dinah McLannahan’s current role as senior business consultant at the NHS Trust Development Authority are always going to be a step removed from the front line, Dinah believes she is having a direct effect on patient care. She is in a better position than most to be able to say this, having previously been a nurse. ‘When I was a nurse there were many life and death situations, but also lots of occasions when I was able to make someone’s life a little easier,’ she says.

Kavita Gnanaolivu is a doctor who now works as a manager at EY. She started her NHS finance career as a graduate trainee and was able to develop a range of management skills, in addition to finance, while retaining the connection to patients she wanted. Kavita says: ‘I applied to the NHS graduate financial programme at a time when the general management programme was not being provided. I didn’t have any prior experience in finance or accountancy, but luckily for me the graduate assessment looked for the right transferable skills and ability for applicants to develop the required competencies. I had a great time developing my management and finance skills and all the time I was very conscious not to lose the link to patient care.’

The focus on developing skills, not just becoming better accountants, is key to our interviewees’ experiences of the NHS. In the next section, they share what they have learned.

How can your career develop in the NHS?

In this section we summarise the advice that people have received as their careers progressed and what they have learned. As Yarlini Roberts, Kingston Clinical Commissioning Group CFO, says, she’s found that being a good accountant is taken as read. The skills she now relies on most are negotiation and relationship building. Yarlini explains: ‘When you become a CFO, it suddenly hits you that you are accountable for everything. It’s a huge responsibility, but also a huge honour. I would recommend working in NHS finance to anyone considering a career in accountancy. Also it’s not just about numbers, it’s about doing the best for patients.’

Paul Williams, the HFMA’s research manager, says the best piece of career advice he has received is to keep developing yourself and be patient. ‘When the right job comes along, you have to be ready to take it,’ he says. ‘You could go and find it for yourself, but don’t stress yourself out by swimming against the current.’ For those considering a job in the NHS, he has a clear message: ‘There are many opportunities, so many exciting developments. It’s a great place to develop yourself and do a good job for those who will benefit. This could be someone you know’.

Robert White, health director (value for money audit) at the National Audit Office, joined the NHS as a senior finance manager, after previous experience in private healthcare. He remembers a number of accountants were making the switch from the private sector and that not all of them could adjust. Robert was advised to get as much experience as possible of all parts of the service. He has taken this to heart, working over the years in many different part of the NHS.
Paul Stocks, Department of Health deputy director group finance – financial control, joined the NHS as a deputy finance director of his local NHS trust more than 20 years ago. He has continued to work at that level in several roles, gradually moving to bigger and more diverse organisations. This often required him to learn new skills, which he did by spending time with non-finance colleagues. Paul says: ‘Spending time out of your comfort zones really does help with your development’. He also spent five days working in an accident and emergency department. ‘It was a reminder about what we are here for,’ he says. ‘I’d recommend finance staff do something similar – it really does give you a different perspective’.

Janet Wood, currently non-executive director, South Essex Partnership University NHS Foundation Trust, says there are two main influences on her career. The first was a teacher during her first year in accountancy, who was able to bring the subject to life. She is still in touch with her. The second was a chief executive of the health authority. ‘It struck me that he never took credit for something that someone else did. If it was a paper to the board, for example, he always let them present it themselves,’ says Janet.

The best advice Justine Stalker-Booth, head of financial management specialised commissioning finance in NHS England’s National Team, has been given for her NHS career is to focus on what the next steps are for you, rather than about grade or money.

And Justine has her own advice for those considering a career within the NHS: ‘Sometimes it can be hard to break into the NHS, but I think it is more about skills than the history,’ she says. ‘When I’m interviewing, I look for transferable skills. There are often internal candidates who are very strong, so to break in you need to accentuate how your skills and experiences are relevant. I’d definitely recommend a career in NHS finance. It’s incredibly rewarding and you get to work with so many great people.’

Conclusion

Our finance career stories showcase 25 individuals with experience of working in finance teams in more than 500 NHS organisations. But as well as providing an intriguing insight into personal journeys of career development and hard work, our stories uncover values and attitudes found across the NHS.

The first is the public sector ethos shared by so many. A career in NHS finance is about more than just accounting. Our interviewees were either attracted specifically to the NHS or determined to do something in public service. The timing was earlier for some than others, but was always borne out of their experiences and interactions with the NHS, which continue to drive and motivate them.

Second, accountants really can see how their roles add value to patients’ experiences. The NHS accountant is shedding the label of ‘bureaucrat’ as finance staff increasingly work in partnership with clinicians to develop high-quality services for patients that provide the best possible value for money.

And finally, there is real job satisfaction to be had from a career in NHS finance. Our interviewees, in common with thousands of their colleagues, thoroughly enjoy their work, want to help patients and can see how their work contributes to that.

What is clear is that NHS finance offers huge variety. Not everyone has a defined career plan in their head at the outset but the range of roles available and the portable skill set of the NHS accountant mean that lots of different opportunities for a well-rounded and rewarding career are likely to arise.
Learning to focus on the patient

Siân Alcock was late for work on her second day as a trainee on the NHS national graduate management scheme, but she had a good excuse. She came across an elderly lady who couldn’t find the renal unit. And because Siân didn’t know her way around the hospital either, she found someone who could direct the lady to the appropriate department. It was a simple gesture, but it helps to illustrate her focus on patient care and patient experience.

‘You have to remember the patients. It would be easy to spend your life not seeing anything of the front line. The finance department is often in a separate building and if you bring your own lunch you could avoid the main building and not see any patients at all,’ she says.

Her belief in the need for finance to put patients at its heart springs from her early work experience, when she spent holidays and time out of education working in NHS administrative jobs, including outpatients.

‘I have worked in jobs where I have spoken to patients every day and I have always got that in the back of my mind,’ say Siân. ‘I have worked in a lot of customer service roles and so I know the importance of being nice to people.’

She had been keen to work in healthcare since her school days. Work experience with a doctor told her clinical work was not for her, but she stuck with science, gaining a DipHE (diploma of higher education) in chemistry with medicinal chemistry. However, she was not attracted to the isolation of working in a lab and took a degree in nutrition.

By this time, she had started working in the NHS. ‘I ended up in the NHS by accident,’ says Siân. ‘I was living at home between degrees and my mum worked in a hospital. She handed me an application form for the staff bank and told me I must get a job if I’m living at home. I did loads of [NHS] bank work while at home and during university holidays and I realised I quite liked working in a hospital.’

On passing her degree she went back to the NHS, first in the outpatient department and then as executive assistant to the directors of finance and nursing at Taunton and Somerset NHS Foundation Trust. During this time she applied to the national graduate management training scheme.

The executive assistant post came up after a director advised her to bolster her management credentials by taking a job closer to trust management.

‘It was a sideways move, but it was a good opportunity to get experience of what managers do while applying for the graduate scheme,’ says Siân. ‘It was a good mix of finance and patient focus. I used to go to safeguarding meetings and then to the audit committee.’

Working with the finance director led her to choose finance when she was applying to the graduate training scheme. She believes her varied background, including time spent in customer service and close to the front line of NHS care, has helped her in the graduate scheme.

Key influences
The staff she worked with at the sharp end of the NHS had a huge influence on her thinking.

‘When I left the outpatient department at Taunton, the staff there told me never to forget where I had come from. I have worked on the front line, I have been a band 2, so I should remember that.

‘It’s important to people to understand what they do. There are managers who don’t know everything about what their staff do on a day-to-day basis. They don’t understand the problems they face. If I am ever managing people, I will take the time to find out.’

Her mum has been another influence, both by instilling a hard working ethic and pointing her in the direction of the NHS.

Siân adds that Rebecca Harriott, the chief officer of Northern, Eastern and Western Devon CCG, gave her some good advice when discussing her future career.

‘She asked me to think about what I like doing,’ she says. ‘I like working with people, for example, so she got me to really think about what I wanted to get out of a job rather than what the job title is.

‘I now know I’d rather work in a place with a good team around me, where I feel valued. I hate to be bored, so I like being busy and having responsibility.’

She has been on the graduate
scheme since September 2013 and she rates being accepted onto the scheme as her greatest work-related achievement to date. ‘My placements have been varied and, depending on how long they have been, I have worked in different departments. At the Royal Devon and Exeter, I have been working on business cases and the contract with the CCG.’

On the move
Moving around so much can make life challenging, Siân acknowledges, but it is helpful to experience the different aspects of an NHS accountant’s work. ‘It helps you see areas you want to work in and areas you don’t, though I haven’t yet found anywhere I wouldn’t want to work. The end of the graduate scheme is still a while away, but I feel ready for a proper job with more work and responsibility now.’

The scheme has also enabled her to surprise herself. Working in income costing, she was faced with databases that presented several challenges, including technical programming. ‘But with the help of a colleague, I learned to do SQL programming, which I didn’t think I’d ever be able to do,’ she says.

Would she change anything about her career? ‘I wish I had found what I wanted to do earlier. I started the graduate scheme when I was 29. But, at the same time, if I had not had all these different experiences I don’t think I would have got where I am.

‘I have worked in every band from band 2 upwards and I believe that’s a great thing. Some of my skills come from the fact that I have worked in other jobs and have a better understanding of the NHS.’

While she admits that accountants can feel removed from everyday patient care, she believes this can be counteracted. ‘You can feel like a cog in a bigger system, but what everyone does has an impact on patient care in some way. It is important to see the bigger picture.

She cites as a recent example her experience of a trust board meeting. ‘It was helpful because it put my work into context and brought everything together,’ she says.

She will spend an extended period in a management accounting role at the trust, after spending June and July with the Department of Health in London as part of a national scheme of short placements outside local NHS organisations, including at the Department and accountancy firms.

It is an exciting time to work at the Department, as the new government finds its feet. ‘I will be in the financial policy and strategy team working on the spending review and learning about the wider health system. It’s a great opportunity,’ says Siân.

Becoming a Future-Focused Finance value-maker has also proved to be a big opportunity, giving her a chance to help present a workshop at the national HFMA annual conference, for example. ‘I am also on the HFMA qualifications board, which has led to further opportunities.’

Her work with the HFMA and FFF has widened her vision, she says, adding: ‘It’s easy to get stuck in your own little bubble. Being a value-maker has given me the chance to break out of that bubble and meet people from all over the country.

‘I’ve received countless words of wisdom and career advice from more experienced colleagues, which has really emphasised to me the importance of supporting and developing those around us.’

She summarises her experiences so far: ‘There are some really great people in NHS finance that we are lucky to have.’

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**Qualifications**
- Currently NHS national graduate management trainee, studying for CIMA qualification

**Employment history**

- **2007**
  - Taunton and Somerset NHS FT, administrative assistant (staff bank)

- **2012**
  - Executive assistant

- **2013**
  - NHS graduate management trainee (finance), including placements at North Bristol, NHST, Northern, Eastern and Western Devon CCG; Royal Devon and Exeter NHS FT; and the Department of Health (financial policy and strategy)

**Outside interests**

In the limited time Siân has outside work and study, she enjoys going to gigs and is also renovating a house.

**Favourite film** The Lion King

**Favourite book** The Great Gatsby, F Scott Fitzgerald

**Favourite TV shows** Game of Thrones, Homeland, Sherlock

**Top three songs**
- The Wolves (Act I and II), Bon Iver; We Looked Like Giants, Death Cab for Cutie;
- Mountains, Biffy Clyro

**Favourite food** Pad Thai

**Favourite website** Pinterest – ‘mostly for ideas for renovating our house’
There are few examples of finance managers who have made the switch from the private sector to the NHS at the most senior level. The sector-specific knowledge and experience needed on both sides of the divide are often seen as too big a barrier.

NHS England chief financial officer Paul Baumann is proof that you can make the transition, and he believes the differences – at least between some parts of the commercial sector and the NHS – can be exaggerated.

After 23 years with global food and household goods business Unilever, Mr Baumann joined the NHS in 2007 and is convinced the switch – to the ‘most interesting, exciting and compelling’ part of the public sector – is likely to be permanent.

Paul insists he has never followed a detailed career plan. But planned or otherwise, a degree in modern and medieval languages doesn’t seem the most obvious launch pad for becoming one of the health service’s most senior finance directors.

A gifted linguist – he studied both German and French at Cambridge – Paul says he saw possible career paths in the diplomatic service or an international business. Both options drew on an enthusiasm to see the world, inspired perhaps by Swiss grandparents and far-flung family connections. The global business option simply came along first, in 1984, as a commercial management traineeship with Unilever.

At the age of 28, Paul became divisional controller of a large agribusiness company, preparing what had become a non-core business for sale in 1991. After a year in head office, he moved to Hamburg as financial controller of Unilever ice-cream company Langnese-Iglo.

The company was in the midst of a major modernisation programme and Paul, who was responsible for performance management, set about adapting the approach to finance and management information flows to support the new process-driven structure.

Knowing the business was key, and Paul says a lot of time was spent on the factory floor and with marketing teams ‘helping them to construct their innovations to deliver the best possible value for consumers and shareholders’.

In the mid-1990s, Paul moved to Dublin for four rewarding years as finance director for Unilever Ireland before moving back to Hamburg in 2000 as finance and IT director for Unilever’s largest European subsidiary, UDL. He sees this as his biggest operational challenge – ‘helping to revive what had become something of a slumbering giant’.

This paved the way for his next role – a ‘dream job’ – as vice-president for financial excellence. It brought him and his growing family back to the UK while allowing him to experience first hand the wide variety of international businesses in Unilever. The role involved leading Unilever’s global ‘Finance of the future’ programme, which reinvented the finance function to deliver benchmark efficiency and bring the best evidence-based decision-making techniques to major choices facing the business.

With six years in post, it was a rare chance to see the project through to conclusion, from devising the strategy to creating a finance academy to implementing the new model across the whole business.

But in 2007, Paul decided it was time for a change. Recognising that another move would most likely take him abroad again – at a time that would have been disruptive to his children’s education – he started thinking beyond Unilever. A call from...
recruitment consultants put the NHS in his sights, with newly appointed NHS London chief executive Ruth Carnall wanting to recruit a finance director for the new strategic health authority from outside the service.

Paul was intrigued, and talking to his potential new boss convinced him it was the right move. ‘The quality of the leadership you work with is probably the biggest determinant of success in whatever you undertake,’ he says. ‘The role sounded exciting and Ruth was assembling a great group of people. It was a recent start-up, which appealed, with big strategic issues to be tackled – Ara Darzi’s

“You wouldn’t do this in a corporate environment – changes at every level, no dry run. But the NHS pulled it off”

Healthcare for London review was just getting under way, for example.’

Paul admits he had a ‘massive learning curve’, but says he was allowed a couple of months to soak up as much knowledge as he could before assuming his full responsibilities. Other national leaders – notably Richard Douglas and David Flory – helped him to integrate into the broader finance function and understand some of the system’s ‘quirkier financial dynamics’.

Perhaps surprisingly, he did not find a major culture gap between Unilever and the NHS. He suggests there are greater cultural differences between Unilever and other consumer goods companies than between Unilever and the NHS - the similarities being based on ‘deep seated roots in communities’.

Politics (with a capital P) and the accompanying media spotlight were perhaps the biggest differences.

In his five years as NHS London’s director of finance, he focused on rolling out a pan-London financial strategy to accelerate transformation and build momentum behind productivity improvement.

In May 2012, he became chief finance officer to the then shadow NHS Commissioning Board, which began life the following April as NHS England. It was a natural extension of his NHS London role, but with a budget jump from £15bn to £95bn.

While NHS England nominally has a commissioning perspective, in reality the view is much wider. ‘The objective is not to make the commissioning system successful, but to use the commissioning system to make the NHS as a whole more successful,’ Paul says. Working with other national finance leaders (from Monitor and the Trust Development Authority, for example) gives useful perspectives and makes the task ‘richer, if at times complex’, he says.

Three years in, and Paul says the finance profession has achieved a huge amount – not least the launch of the new commissioning system in April 2013. ‘You simply wouldn’t do this in a corporate environment – switching literally overnight, with changes at every level and no opportunity for a dry run – but the NHS pulled it off,’ he says.

As the service faces the challenge of delivering sustainable services using new models of care, he singles out faster progress towards fairer allocations as a change that will have a big and lasting impact.

Paul’s commercial experience, with its focus on applying new business models across complex environments, is proving a good foundation for his work on transformation in the NHS. And his background in modernising the finance function at Unilever has made him a driving force for the NHS-wide Future-Focused Finance initiative.

Paul is clearly in a job he enjoys and says he has no plans to move on any time soon.

‘I think I’ve made the move to the public sector for good. It is difficult to conceive of any parts of the sector that are as interesting, challenging or fulfilling as the NHS,’ he says.
Pacing can be the key to success

Careers last a long time, so enjoy what you do at each stage and don’t be in a rush to take the next step. This is the advice from Ben Bennett, director of business planning and resources at the National Institute for Health and Care Excellence. He says he has followed no firm plan in his career and, like many people, has taken opportunities as the right ones arose, rather than forcing the issue.

Ben admits he did not leave school with a burning ambition to be an NHS accountant. Nor was accountancy foremost in his mind while studying for his economics and computer science degree at the University of Keele. ‘The choice of finance went with the economics and computer science territory,’ he says.

But if he simply followed a line of least resistance into accountancy, he was perhaps more destined to pursue his profession in the NHS. Looking back, he admits that student jobs – as a cleaner in a small orthopaedic hospital and a kitchen porter in a large psychiatric hospital – had been ‘formative experiences’. And various members of his family worked in the NHS, so it seemed a natural choice. He had never contemplated applying for chartered accountant positions with major firms and, if nothing else, he says his NHS ‘background’ helped with applications.

Gaining a place on the South East Thames Regional Health Authority graduate training scheme in 1983, he studied for his CIPFA exams while serving placements in the South East – from Guy’s and St Thomas’ in London to the Royal Victoria Hospital in Folkestone. He recalls these as great experiences, with several days attached to a senior registrar in Ashford Hospital fresh in his memory.

He says the scheme was a brilliant introduction to health service finance. Despite this, he ended up leaving before he qualified. Having recently started a family, Ben was keen to move into a substantive role. So he finished his CIPFA qualification at Wandsworth Health Authority, where he was promoted to unit finance manager, with responsibility for advising the continuing care unit.

The role had him rubbing shoulders with more senior finance professionals undertaking the equivalent role for the bigger acute units such as St George’s Hospital.

There were significant development opportunities: responsibility outside finance (for supplies); working with a clinician as his unit general manager; and even personally laying the cable to plug the office’s one computer into the mainframe!

A year with the Blood Transfusion Service at South West Thames Regional Health Authority was followed by a change in Ben’s career path – a job at the Audit Commission. While the role would involve some financial audit, the chief attraction for Ben was supporting the watchdog’s growing value-for-money study work.

‘The commission was expanding into health and wanting people with a health background,’ he says. ‘What attracted me was the wider experience of lots of different things. So while I was recruited for my knowledge in health, I moved to do lots of things in local government, housing and even outside finance.’

He specialised for a time in devising and carrying out bespoke reviews of housing management issues in London boroughs, having a particular impact on the improvement of rent arrears management in one south London borough. In another example, reviews of a London NHS trust’s energy and maintenance arrangements led to major changes to the management arrangements for its estates functions.

But even if it was the broader value-for-money work that most attracted him, the financial audit work was also rewarding – Ben believes there would be benefits for all finance staff to do some audit. For example, it provided an opportunity to observe and work with top managers in audited bodies. ‘I saw a range of different chief executives and finance directors with different styles and approaches, and you pick up different things from all of them,’ he says.

The audit role also helped him develop skills in delivering difficult messages in a constructive way and taught him the importance of keeping issues in perspective and ensuring you look at the big picture.

However, with changes to the scope of the Audit Commission’s work, the opportunities for carrying out non-mainstream audit work narrowed and Ben decided it was time to move back to the NHS.

So, after 13 years at the Audit Commission, where he rose to senior manager, Ben made a move to NICE. He had had some insight to the organisation, having audited its first
set of accounts (1999/2000) while still at the Audit Commission. Since joining, his own role has changed and expanded along with the organisation. Starting as head of finance and information technology in 2004, when NICE was a £20m body employing 130 staff, he became director of business planning and resources in an organisation that now spends £70m and has five times the staff.

Again, he says it is the breadth of the role that appeals. His responsibilities extend beyond the chief finance officer duties (with

### A committed cold water swimmer, Ben swims two to three times a week, competing occasionally

a relatively small 10-strong team) to include business planning, human resources, IT infrastructure, procurement, estates and facilities, governance and board support. While he may not have formal qualifications in these areas, the accountancy qualification provides transferable skills and is recognised as doing so.

He also plays a part in the management and review of NICE’s clinical, public health and social care outputs – its clinical guidelines and technology appraisals. Ben says the work is ‘fascinating’ and even though his focus is primarily finance, process and governance, it is a long way from his narrower accountancy training.

He says this involves working closely with senior clinicians and other experts and having the knowledge and confidence to challenge them. NICE is widely recognised as having been a success both in the UK and internationally – a success that has led to a further widening of its role. Last year, for example, it produced the first safe staffing guidelines – a direct result of recommendations following the Francis report on Mid Staffordshire NHS Foundation Trust. With NICE having set up the process and created guidelines in two areas, NHS England is now taking over this role.

The NICE expansion has come with significant pressures to reduce costs – a 10% cash reduction in the current planning period. Ben has led on this, taking a key role in relocating much of NICE’s work to Manchester and also overseeing mergers and transfers of functions to NICE, such as the National Prescribing Centre and some of the National Patient Safety Agency functions.

As executive lead for human resources, Ben has had responsibility for a range of challenging employment issues relating to management of change, disciplinary and grievance matters. And with responsibility for risk assurance and governance, he has sought to instil high standards of business conduct probity and transparency across the organisation – achieving consistently high ratings from auditors for the design and application of risk management and internal control.

He says he is happy at NICE with a good work-life balance, but doesn’t rule out a move back into frontline healthcare. But it would need to be the right opportunity. People can be in too much of a hurry to make the next step, he says – a career is a marathon not a sprint.

Ben is enthusiastic about finance staff lending their professional skills to voluntary roles, especially health and social care charities. He has held several honorary treasurer roles for clubs and charities and is coming to the end of his last possible term as treasurer at health and care services provider Age UK Lambeth. (It is seeking a replacement – for details email ben.bennett@nice.org.uk).

‘It’s not just a worthwhile thing to do, it’s also great development for finance professionals,’ he says. ‘And for finance directors, it is a way of keeping in touch with the sharp end.’

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### CURRICULUM VITAE

#### Employment history

<table>
<thead>
<tr>
<th>Year</th>
<th>Position</th>
<th>Organisation</th>
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<tbody>
<tr>
<td>1983</td>
<td>South East Thames RHA, management trainee</td>
<td>RHA</td>
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<tr>
<td>1986</td>
<td>Wandsworth HA, unit finance manager</td>
<td>SouthWest Thames HA</td>
</tr>
<tr>
<td>1989</td>
<td>South West Thames RHA, unit accountant</td>
<td>RHA</td>
</tr>
<tr>
<td>1990</td>
<td>Audit Commission, various roles to senior manager</td>
<td>South East Thames RHA</td>
</tr>
<tr>
<td>2004</td>
<td>NICE, head of finance and IT</td>
<td>National Institute for Health and Care Excellence</td>
</tr>
<tr>
<td>2007</td>
<td>Director of business planning and resources</td>
<td>National Institute for Health and Care Excellence</td>
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</table>

#### Outside interests

A committed cold water swimmer (without wet suits), Ben swims two to three times a week and competes occasionally. He is also a qualified swimming teacher and cycles to keep fit. He is a self-taught guitarist and gigs occasionally in a local band with friends. He is currently a trustee and honorary treasurer of charity Age UK Lambeth.

#### Favourite book

As I Walked Out One Midsummer Morning, Laurie Lee

#### Favourite film

Brazil, Terry Gilliam

#### Favourite food

Japanese

#### Alternative career choice

Architect
Before joining the NHS in 2009, Mark Brooks spent almost 20 years working in the medical device industry in a range of UK and international finance roles. His first NHS role was as director of finance and corporate assurance at Humber NHS Foundation Trust, a mental health and learning disability services provider in Hull and East Yorkshire. He has been in his current role at Southern Health NHS Foundation Trust since 2013.

Mark always wanted to work in business and feels it was a natural progression to study accounting and finance. ‘I saw it as a good qualification that would allow me to be involved in business in some way or other. I had a level of interest in finance, which developed while I was studying,’ he says.

His first role after university was at Computype, an organisation that manufactured high-precision barcodes. Mark describes the organisation as small but forward-thinking. He says the employees were well regarded and supported by the organisation to achieve as much as they could. Mark liked its organisational model. ‘It reflected a text book company,’ he says. ‘It was an American firm, so there was an overseas parent with multiple subsidiaries and it operated in different markets.’

Managing directors were sent from the US to the UK, one of whom positively encouraged Mark and helped him to understand the options available to him if he became an accountant. He qualified with CIMA at the age of 23.

In planning his career, Mark has always been aware of the art of the possible and what an accountant can achieve. After two years at Computype, he wanted to progress into a bigger and more challenging role, so in 1990 he moved to Smith & Nephew, a firm manufacturing medical devices with a global market. The division he worked for was 20 times larger than his previous one at Computype, and included spending six months working in Milan and then Hamburg. ‘The culture of the organisation was key to me,’ says Mark. ‘There was also a great focus on developing people. Accountants typically rotated between roles every couple of years, which provided opportunities to develop and meet your aspirations.’

It was at Smith & Nephew that Mark gained his first experience of a wide range of strategic initiatives across worldwide manufacturing projects.

One key project was creating a new organisation as the company divested in manufacturing devices that it did not consider to be part of its future. He describes it as ‘a great project where all my financial skills were put to good use, with finance playing a crucial role supporting the focus on customers’.

‘We started with very little and quickly created a strategy,’ he says. ‘Over two years we developed the business and it was great to see the strategy was correct and the benefits delivered.’

Mark returned to mainstream finance at Smith & Nephew and worked in two more financial control roles at a time of great change for the company. He describes his experience as a key influence for later moving to the NHS.

It was here that Mark saw the role of medical devices in helping people to regain their lives. ‘The company was incredibly customer focused,’ he says. ‘I could see how my work was having an impact despite not working at the front line.’ His move to the NHS wouldn’t happen until later in his career but the values and culture of the NHS was a key motivator.

Stock Exchange ambition

Mark worked at Smith & Nephew for 17 years. He left to fulfil his aspiration to become a finance director for a company traded on the New York Stock Exchange, joining Symmetry Medical Inc in 2007. The company made medical devices, primarily artificial hips and knees.

It was at Symmetry Medical that Mark faced his greatest challenge to date - leading the restructure of a subsidiary that was a heavy loss maker and faced accounting challenges. ‘At Symmetry Medical there was a clear drive for an improvement in financial performance and a focus on value for shareholders,’ he says.

Mark successfully restructured the finance department and along with the chief operating officer significantly improved the company’s financial performance.

While at the company, he made it a clear focus for accountants to generate strong financial management information and develop an environment of proper financial control. ‘It is important to
develop and maintain relationships and really understand where customers are coming from,’ he says. ‘Finance can support by using strong analytical skills to understand what is happening. Organisationally, we then know where to focus and how to address the challenges to add value.’

Joining Humber NHS Foundation Trust in 2009, Mark put this into practice and found it essential to listen to people, learn about the organisation and remain confident in his own skills and prior experience. He says it is important not be afraid to challenge in a positive way what is happening. By looking objectively with business managers and clinicians, Mark was able to improve the way teams worked and the management information that was available.

He joined Humber after the trust had made an unsuccessful initial foundation trust application. As well as a desire to make a difference, it was the challenge of applying his skills in a different environment that attracted Mark. Within a few months, the trust was successful in its application.

‘Humber sought in me strong financial leadership and I was fortunate to learn a lot from very good people in the NHS,’ he says.

Mark says working in a finance team can mean that sometimes it is difficult to see directly the link to patient care. ‘There is a role for us all to continuously ask how finance, estates, information technology and any corporate service can support the best possible care for the monies available,’ he says. ‘Management accounting teams working with clinical staff can find ways to develop and deliver sustainable services. The effective working relationships of the finance team can add value to any good organisation.’

He sees the HFMA as a key resource for NHS finance professionals, of a type and quality that is not readily available to the private sector.

‘The NHS is lucky to have such rich resources and expertise available to finance teams,’ he says. ‘The opportunities for meeting people and networking are beneficial whatever stage of career you are at.’

Now chief finance officer at Southern Health NHS Foundation Trust, Mark is transferring his recent skills and experience from working in East Yorkshire.

‘There are a number of challenges nationally for the NHS that are being met in different ways and with different levels of success. I am really enjoying working in the NHS and I am enthusiastic about coming to work when I get out of bed in the morning.’

Work balance
This is important to Mark because he works 200 miles away from his home. ‘There are challenges striking a good balance between home and work. It is as important at home that you are engaged in quality activities as it is when you are at work,’ he says.

‘When in the office I work with a fantastic finance team who undertake much of the day-to-day work. There is no typical day for me and I enjoy a wide range of different activities. As well as the financial aspects of the trust’s activities, I am responsible for procurement IT, estates and corporate assurance’ he says.

And the best things about working for the NHS? ‘The dedication to the NHS and patients from the vast majority of people. Working in an organisation that makes a difference to people’s lives is genuinely attractive. Many people across many organisations support excellent front line services.’

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### Employment history

<table>
<thead>
<tr>
<th>Year</th>
<th>Position</th>
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<tbody>
<tr>
<td>1987</td>
<td>Computype, company accountant</td>
</tr>
<tr>
<td>1990</td>
<td>Smith &amp; Nephew, various senior finance roles including operations financial controller</td>
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<tr>
<td>2007</td>
<td>Symmetry Medical Inc, chief finance officer Europe</td>
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<tr>
<td>2009</td>
<td>Humber NHS FT, director of finance and corporate assurance</td>
</tr>
<tr>
<td>2013</td>
<td>Southern Health NHS FT, chief finance officer</td>
</tr>
</tbody>
</table>

### Outside interests

Mark is a Hull City football fan and a keen sportsman. He enjoys cricket and when he can find the time he is the opening batsman for his local club side.

**Favourite film** The Hunger Games

**Favourite book** Birdsong, Sebastian Faulks

**Top three records** Mr Brightside, The Killers; Will You, Hazel O’Connor; London Calling, The Clash

### Alternative career

Archaeologist
Public service, local focus

The biggest lesson Caroline Clarke believes she has learnt in her NHS finance career is that you don’t know everything. It is much better to acknowledge this to yourself and to others, says the finance director and deputy chief executive of the Royal Free London NHS Foundation Trust.

But if there is one thing Caroline did know, even as a teenager, it was that she wanted to work in the public services.

Having studied for her O levels at a comprehensive school in Cardiff, a scholarship gave her the chance to go to a well-renowned public school for her A levels. And it was here that she believes she developed a ‘real sense of the privileged elite and the under privileged’. From then on, she knew her future lay within the public services.

Four A levels later and she was at the London School of Economics studying economics, where she built on earlier bouts of political activism by taking a year out to be treasurer of the student union.

This was also where she first set her sights on accountancy as a possible career.

However, it wasn’t the beauty of a well-balanced spreadsheet that attracted Caroline. Instead, identifying the links between what she was learning in final year psychology and her accountancy modules, she was intrigued by how you could use numbers to influence people’s behaviour.

Accountancy also appealed – compared with, for example, general management – as she saw it as providing both a technical and portable skill. This would serve as an insurance policy if things didn’t work out with plan A.

This plan turned out to involve the NHS, and a place on the NHS national finance training scheme, having been impressed by the recruitment process and one of her assessors, Colin Gentile.

In fact, she was soon working with Colin at Hampstead Health Authority, where he was director of finance, as her first placement on the scheme.

Describing herself as a ‘shaper, early adopter and innovator’, Caroline says Colin had a big influence both on her decision to join the NHS and how she worked.

‘Like Colin, he was very direct. He was happy to take risks – albeit educated and informed risks,’ she says. ‘And he taught me it was okay to do that, to be different and to speak the truth – to say it as you see it. That is so important, especially in the highly politicised environment of the NHS.’

She was impressed with Keith’s ability to influence policy makers, recognising that this was based not just on what he said, but the fact that he delivered in his day job.

Dealing with failure

Shortly after starting at Kensington, Caroline found out that she had failed her CIPFA project on charitable funds and it hit her hard.

‘It was the first thing I’d ever failed, and I failed because I didn’t ask enough people for help. So it taught me the power of consulting and asking at an early stage. You can have a good idea, but it is really only good if lots of people share it.’

A new project was lined up, based on the large-scale transfer of nurses’ homes to a housing association. A year and 10,000 words later, she had her CIPFA qualification.

‘It was a good project, based on something I did in reality and it taught me the importance of talking to people,’ says Caroline. ‘You can’t always think you know the answer – in fact usually you don’t. That is a good gift to have, and it is perhaps easier to say now that I am more senior, but it is difficult when you are starting out. It is more credible to expose your ignorance and be honest with people, and that is a good thing to learn.’

A first deputy finance director role at Camden and Islington Health Authority was followed by a first real taste of provider-land at the Royal

‘He had a very direct approach – he was very practical and a doer,’ she says. While at Hampstead, in the first leg of what was to be a return journey, she was involved with the creation of the Royal Free as a freestanding NHS trust.

Her first ‘proper job’ was at Kensington, Chelsea and Westminster Health Authority as a project accountant working under finance director Keith Ford – another major influence.
Brompton. Caroline then gained her first director job at the new City and Hackney Primary Care Trust.

With a completely new organisation needing to be set up, Caroline says she was able to play to her strengths and to ‘get on with the job’.

‘I learnt [from chief executive Laura Sharp] that good management and leadership aren’t about control and power – they are about getting the best from other people,’ she says.

She also chalked up some more career firsts – signing the technically challenging first LIFT scheme in East London and – reaching outside her finance role – linking service and estates strategies.

Caroline says that location has always been important for her career. She not only wanted to be in the public services, but connected to her own local services – and so pursuing her career in and around her home territory of north and east London has been a deliberate strategy.

In 2003, she continued this connection when she moved to the Homerton hospital – a trust with ambitions of becoming a first-wave foundation trust – where she stepped into her first provider director role.

She remembers a trust ‘punching massively above its weight’ in gaining its FT status, implementing the fledgling payment by results system and introducing a new electronic patient record well ahead of the trend. The trust’s success was built on it having a good team and good relationships and partnerships with other local health organisations.

‘I started to become more aware of my external profile and my ability to represent an organisation and carry a message and ensure it gets landed back internally,’ says Caroline – all of which are key aspects of the finance director role.

**Learning from KPMG**

After five successful years at the Homerton, Caroline joined KPMG, initially as a director and subsequently associate partner, to help build a health practice within the consultancy.

She says she learnt a lot and had two good years working with some very bright people. But she recognises now that the move ‘didn’t fit entirely with who I am’.

She adds that it had always been her intention to return to the NHS, which she duly did – armed with the knowledge of how to be a better client – in 2009.

Then, in 2011, she made her return journey to the Royal Free, this time as finance director and later adding the deputy chief executive role to her responsibilities.

Now in her fifth year, Caroline says she is proud of the work she has done at the organisation that originally trained her. ‘We’ve put a real focus on safety, quality improvement and value for the patient,’ she says.

This is an interest she has also pursued by heading the value workstream for the national Future-Focused Finance initiative. She also picked up the HFMA Finance Director of the Year Award in 2012.

However, Caroline insists that her achievements are all the results of great teams, not individual performance.

She returns again to the advice of one of her mentors, Keith Ford: you don’t and can’t know everything, so get some help.

**Outside interests**

Since becoming a mum two years ago, Caroline says her diary is managed better to avoid so many long evenings at work. She cites music and theatre as her big outside interests, though she doesn’t like musicals (with exceptions, see songs below) and she attends gigs where possible.

**Favourite book** *Perfume*, Patrick Süskind; *The Checklist Manifesto* (non-fiction), Atul Gawande

**Favourite song** *Gimme Shelter*, Rolling Stones; *Give a Little Love*, Bugsy Malone

**Alternative career choice** Bass guitarist

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**“Good management and leadership aren’t about control and power – they are about getting the best from other people”**

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**CURRICULUM VITAE**

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<thead>
<tr>
<th>Employment history</th>
<th>Qualifications</th>
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<tr>
<td>1993 Kensington Chelsea and Westminster HA, project accountant</td>
<td>CIPFA</td>
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<tr>
<td>1996 Camden and Islington HA, finance manager – deputy finance director</td>
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<tr>
<td>2000-2001 Royal Brompton Hospital NHST, assistant finance director</td>
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<td>2003 Homerton University Hospital NHS FT, finance director</td>
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<td>2007 KPMG, associate partner</td>
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<td>2009 NHS North Central London Commissioning Agency</td>
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<tr>
<td>2011 Royal Free London NHS FT, finance director and deputy chief executive</td>
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**Outside interests**

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**Favourite song** *Gimme Shelter*, Rolling Stones; *Give a Little Love*, Bugsy Malone

**Alternative career choice** Bass guitarist
From farmyard to finance

Having left school at 16 to work on his family’s farm in Yorkshire, a career in accountancy was not really on Jamie Foxton’s radar. But 15 years on and now deputy director of finance at Hull and East Yorkshire NHS Trust, Jamie is sure he made the right move.

He admits to stumbling into accountancy. Ill health as a teenager brought his school days to a premature end after finishing his GCSEs. But a year of farm work at his parents’ farm was enough to convince him he wanted a more academic challenge.

‘A job came up in accountancy in a small local practice. I didn’t get it, but I had managed to get my name onto recruitment agencies’ lists as a potential candidate for AAT-level jobs in accountancy. And that led to a call for an interview with PwC in its Hull office,’ he says.

He says he ‘hounded’ the firm after the interview, desperate for a new career path. His persistence paid off: he was offered a job and within 18 months he had his AAT qualifications and had started on a fast-track path to being a chartered accountant. His AAT training cut down his required training period to two years.

Thrown in with slightly older graduates, Jamie acknowledges he felt he had something to prove given his different academic path. But with an enthusiasm for learning, he found himself a fully qualified accountant by the age of 22, picking up a regional prize in the ICAEW professional level exams on the way.

Having become an assistant manager at PwC, he soon moved into audit, where he found himself travelling and overseeing audits in major companies. ‘It was quite daunting and high pressured at a young age, but being in a big blue-chip company, people weren’t too fazed by the age thing,’ he says.

‘I really enjoyed it, but I knew I didn’t want to pursue a career in audit. I was more interested in industry – I wanted to be influencing what was going to happen, not looking back at what had happened.’

His first step towards this came with a move to Portakabin in York. Although he started in internal audit, he soon moved into his preferred management accounting role in the modular building company’s European division.

Despite being a big organisation, with a group turnover now exceeding £220m, Jamie says it is still quite definitely a family company with a great ethos and one that values its employees. ‘It was a great place to work. I spent two years there and really enjoyed it,’ he says.

However, he admits to ‘being dazzled again by a big blue-chip plc’ and made a move in 2007 to join multi-national consumer goods company Reckitt Benckiser. The company, which produces health and hygiene products such as Dettol and Nurofen, was a stark contrast to the family-run environment of Portakabin. ‘I was in my mid-20s and enticed by the career opportunities and potential for going round the world. And for six months or so I really enjoyed it. But after a couple of years, the culture of a really big profit focus didn’t fit with my personality and I started looking for something different.’

Jamie says he’d never thought about working in the public sector. He was conscious of a view across parts of the commercial world that public sector finance managers were little more than budget accountants. ‘My perception had been that the NHS was a bit of a backwater and it was not viable for a career.’

Local focus

However, he was keen to continue his career in the local area. When a job came up in 2010 at the local hospital – Hull and East Yorkshire Hospitals NHS Trust – he thought he should take a look. His view had also started to change over the previous year as his wife’s pregnancy had brought the couple into more contact with NHS services. ‘The more time I spent at the hospital, the more fascinated I became,’ he recalls.

An interview with then finance director John Barber further convinced him it was the right move. ‘He was quite inspiring and he sold the job well,’ says Jamie. ‘We talked about the trust’s foundation trust aspirations and the greater autonomy and commercial approach that would bring. But there also seemed to be such a great team-working environment, which was really something I was looking for.’

The role was senior business unit accountant for one of three surgical units and the interview, which also involved the unit’s clinical director,
made it clear this would involve close work with clinicians.

‘This was really appealing to me – the opportunity to support business cases that could have a direct impact on patient care. That gave me a real buzz.’ When he was offered the job, he didn’t hesitate.

‘It was a steep learning curve, but you have to throw yourself into it and learn on the job,’ he remembers. ‘But right from the off, I was going to business meetings and presenting the financial position and opportunities for savings and talking through finance and non-finance metrics.’

It helped that the clinicians were learning too. While many clinicians might do ‘maths as a hobby’, as his clinical director put it, they weren’t experts in how NHS finance works and how the funding flowed or costs accumulated. But they were interested. ‘Most clinicians appreciated honesty and a fresh perspective. I really liked the ethos that we were doing this together.’

A subsequent merger of the surgical units a year later saw Jamie promoted to head of finance of the new, bigger group. ‘This was a great role. It was a £120m unit – responsible for about a quarter of the trust’s cost base – and we had our own ‘board’, including medical, nursing and operations directors plus myself. We all had different strengths – but we worked really well together.’

In one notable initiative, the team built up a £10.5m investment plan to reconfigure surgical services to provide more patient-focused care. This would have involved bringing all elective activity onto a single site, but the tough financial environment made it impossible to take the plan forward. The trust is now looking for other ways to deliver the same outcomes.

Jamie believes the experience was hugely developmental and gave him great exposure across the trust, as well as the opportunity to build lasting relationships with clinicians.

**Director shift**

A further role change has seen Jamie become the trust’s deputy director of finance. ‘Moving to the NHS was the right thing for me,’ says Jamie. ‘I’ve loved the learning over the past five years.’ He says the opportunity to pursue his career in his own local hospital has added to the experience.

‘I’m a local person and I feel proud of my hospital and the fact that my family use it.’

Jamie is pragmatic about his future. He remains career-minded and realises he may need to leave to make the next step up. ‘I’m keen to broaden my experience and recognise my next career move may need to be to a clinical commissioning group, a commissioning support unit or more on the strategic side,’ he says. ‘Wanting to stay local clearly makes this more challenging.’

He has changed his own initial ideas about the NHS and says ‘accountancy in the NHS offers as many if not more challenges than dealing with finance in the commercial sector. Importantly, there’s an additional payback in contributing to the development of good and better patient services.’

Jamie says he would consider a move back into the private sector if the right role came up. In his view, ‘the experiences gained in the NHS have made me a much more rounded finance professional’.

‘I now take a much more holistic view of business proposals rather than just the bottom line,’ he says. ‘The development of my influencing skills and ability to take people with me has been essential in my progression.’

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**Employment history**

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<tr>
<th>Year</th>
<th>Position &amp; Company</th>
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<tbody>
<tr>
<td>2000</td>
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<tr>
<td>2005</td>
<td>Portakabin, finance manager</td>
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<tr>
<td>2007</td>
<td>Reckitt Benckiser, supply controller</td>
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<tr>
<td>2010</td>
<td>Hull and East Yorkshire NHST, senior business unit accountant, head of finance, deputy director of finance</td>
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</table>

**Outside interests**

With two children aged two and four, Mr Foxton says there isn’t a lot of time for much else. He describes his hobbies as ‘holidaying’ and the seemingly polar opposites of ‘fishing and fast cars’. However, he also enjoys keeping fit and playing football for a trust five-a-side team.

**Favourite book** Animal Farm, George Orwell

**Favourite place** Maldives

**Favourite song** Can’t Stand Me Now, Libertines

**Best career advice** A fulfilling career is a marathon, not a sprint

**Alternative career choice** Probably a journalist – I always enjoyed creative writing
Gathering data and recognition

Life could have turned out very different for Andrew Geldard. He admits he tried to avoid working for as long as possible – and succeeded until he was 25.

He graduated from the University of Wales with a degree in geography and American studies and was keen to continue his studies. A lack of public funding in the UK sent Andrew overseas and he spent a year in Canada at the University of Manitoba completing a masters degree in geography. He was keen to stay in Canada but he didn’t meet the criteria for obtaining a permanent visa.

Andrew returned to the UK to succumb to the inevitable and look for a job, but it was the mid-1980s and not any easy time to enter the labour market. He explains: ‘There was not much employment in the north of England at that time, so I had to be open-minded about my options. After a year of job hunting, I spotted an advert for a statistician at South East Thames Regional Health Authority and applied for it.’

While at that time Andrew did not have a particular interest in working in the NHS, his masters thesis was on accessibility to primary care in the Canadian city of Winnipeg. This stood him in good stead – he got the job.

Andrew recalls that the regional statistics team provided support for three district health authorities (DHAs). There were information systems at district level but most of the analysis was carried out at regional level.

Andrew recognises that there were two factors that had a significant impact on the direction his career took – his personality and luck. At that time, data programmes were run over night and printed off on continuous paper, which was then sent to the DHAs. Frustrated by the lack of accessible information, Andrew made a name for himself by producing a booklet that set out activity information for each of the DHAs.

Luck played a part when he was asked to learn a spreadsheet package known as Multiplan. Spreadsheets were in their infancy and Andrew was one of the few people at the regional health authority who could use them.

‘Being able to use a spreadsheet enabled me to carve out a niche for myself,’ he says. ‘In 1986, there was a big push on reducing waiting lists and I was able to do some spreadsheet modelling, which helped to support what we were doing.’

Jobs in the capital planning and public health departments of the regional health authority quickly followed and in both he continued to develop his data analysis skills, including how to use databases.

The 1988 white paper Working for patients brought about a big change for Andrew as well as for the NHS. The paper set out proposals for the creation of the purchaser/provider split in the service. In demand because of his database and spreadsheet skills, he was approached to help start the thinking in the regional health authority about commissioning services and to lead on the modelling of commissioning plans.

Andrew explains how he made his move into the finance department. ‘The regional director of finance, Stuart Welling, was unhappy that capital was not part of finance and that the data analysis capacity was not within his department. Consequently, he tapped me up to apply for a job in his department.

Mixed feelings

‘When I was offered it, I turned it down and explained that the questions in the interview had made me realise that a job in finance did not appeal. Stuart then rang me to explain the error of my ways. I’m so glad he did.’

The job involved preparing for the introduction of the NHS internal market and included developing allocation formulas for commissioners in the region.

It was in this role that Andrew studied CIPFA. At the time, there was a push for finance to be a core part of NHS management and unqualified finance directors were being encouraged to qualify.

Even though he was working in the finance department, Andrew had no intention of becoming an accountant.

Things changed when he received another call from Stuart.

‘He asked me why I hadn’t signed up for CIPFA’s senior entrants course and explained that I would struggle to go much further in NHS finance without being qualified,’ he says. ‘I owe him a huge debt of gratitude.’
In 1992, Andrew started what he calls his ‘first proper finance job’. It was at Brighton Healthcare NHS Trust as deputy finance manager, where he was responsible for providing management accounts support to the surgical department.

As Andrew recalls: ‘I’d not worked in a hospital before and there was a lot to learn. Luckily, the finance team was very supportive.’

His data skills came to the fore again and he found ways to improve reporting at the trust by extracting data from the ledger, which led to better manipulation and analysis.

“**I like to be very visible in my organisation. I walk the wards, meet teams and service users, always ask for feedback**”

Gaining in confidence and getting more serious about his career, he took up the post of deputy director of finance at Crawley Horsham NHS Trust in 1996. ‘It was a much deeper step into NHS finance’ he says.

In 1998, the trust merged with East Surrey Hospitals NHS Trust to form Surrey and Sussex Healthcare NHS Trust. Andrew was responsible for the management accounting and planning side of finance.

While CIPFA had an impact on Andrew’s work life, it also had an unexpected impact on his love life. It was while Andrew was volunteering as a P3 CIPFA project examiner that he met the woman who would become his wife, Veronica Watson, also an NHS accountant.

It was his keenness to be closer to Veronica that prompted Andrew’s next move. He decided to take a risk and experience what it was like to be a commissioner, and became director of finance and performance at Southend-on-Sea Primary Care Trust in 2000. While he enjoyed certain aspects of the role, particularly working with GPs, he missed working in a provider organisation.

Attracted by work in mental health, Andrew then became director of resources at North Essex Partnership NHS Trust in 2002. His first priority was returning the trust to a stable financial footing and putting a robust financial plan in place. The improved performance at the trust led to it getting foundation trust status in 2007 and Andrew led on the financial aspects of the application.

He recalls how his move to become a chief executive came about. ‘I had no ambitions to be a chief executive. But when the then chief executive went on long-term sick leave, I was asked to fill the role on an interim basis. I felt I couldn’t say no. I was committed to the organisation and had to step up.’

Andrew focused on addressing the issues that needed sorting and a year later was permanently appointed into the role.

As chief executive, Andrew says he spends most of his time on customers. ‘There are two groups,’ he says. ‘Our commissioners and patients. I like to be very visible in my organisation. I walk the wards, meet the teams and service users. I’m always asking for feedback so we improve what we are doing. I’m keen on patient surveys to give us something concrete to improve on.’

Andrew is in no doubt that a background in finance is a good grounding for an NHS chief executive. ‘Being able to quickly understand complex data and get behind the numbers of the organisation really helps. It can give you a sense of what is and is not important, but is only one piece of the jigsaw,’ he says.

The best piece of advice Andrew has been given is to make the best use of other people’s resources. ‘Being a good finance manager in the NHS is not just about working with what you have,’ he says. ‘It is about generating new resources, by working with others, doing things better and winning new business.’

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**Employment history**

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<thead>
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<th>Year</th>
<th>Position/Institution</th>
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<td>1987</td>
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<tr>
<td>1988</td>
<td>Policy analyst</td>
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<td>1989</td>
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<td>1992</td>
<td>Brighton Healthcare NHST, deputy finance manager</td>
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<tr>
<td>1996</td>
<td>Surrey and Sussex Healthcare NHST, deputy director of finance and planning</td>
</tr>
<tr>
<td>1998</td>
<td>Southend-on-Sea PCT, director of finance and performance</td>
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<tr>
<td>2000</td>
<td>North Essex Partnership University NHS FT, director of resources</td>
</tr>
<tr>
<td>2002</td>
<td>Chief executive</td>
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</tbody>
</table>

**Outside interests**

Andrew makes time for his family by being at work by 7am and leaving at 5pm. His hobbies include watching football (supporting Blackburn Rovers) and managing his son’s cricket team now his playing days are over.

**Favourite book** Trainspotting, Irvine Welsh

**Favourite film** Italian Job

**Favourite TV show** Top Gear

**Top three songs** London Calling, The Clash; Anarchy in the UK, Sex Pistols; Boredom, Buzzcocks – ‘I’m still stuck in 1976 I’m afraid!’

**Favourite website** BBC Sport
Doctor with a ‘go for it’ spirit

Kavita Gnanaolivu qualified as a doctor before training to become an accountant. At school, she had a keen interest in space and research and set her sights on working for NASA, but in the end she decided to take a more traditional route, studying medicine.

‘Healthcare was exciting and the alternative was probably an engineering degree,’ says Kavita. ‘I chose medicine because I realised it would give me the opportunity to have a positive impact on people’s lives and healthcare is relevant all around the world. Also, I tend to choose what I perceive to be the greatest challenge and medicine was a much longer course.’

Studying at Stanley Medical College in India, following her schooling in Kuwait, Kavita qualified as a doctor and worked as a house officer with a wide range of specialties. ‘The public health service in India is very stretched and cannot cope with demand,’ she says. ‘We would see 100 outpatients in a morning and there was no regular follow-up. There were lots of good doctors, but we had limited resources resulting in shortages of basic equipment. We are lucky to have such a great NHS.’

She quickly realised that she wanted to play a bigger part in improving healthcare. Kavita saw healthcare management as the way to do this, taking her beyond the one-on-one interactions she had with patients and their families, and enabling her to have an impact on a wider scale.

It was a big decision to change disciplines, but if it didn’t work Kavita knew she could return to clinical practice. The management skills she was developing would not be wasted. ‘I had an opportunity to move to the UK with my husband and I applied to the NHS graduate financial programme at a time when the general management programme was not being provided,’ she says.

‘I didn’t have any prior experience in finance or accountancy, but luckily for me the graduate assessment looked for the right transferable skills and ability for applicants to develop the required competencies.

‘I had a great time developing my management and finance skills, but all the time I was very conscious not to lose the link to patient care.’

Having graduated from the scheme, Kavita joined Cardiff and Vale Health Board in 2004 boasting a relatively unique combination of financial and medical qualifications – a combination that would stand her in good stead for her career ahead.

Kavita arranged with the medical clinical director to attend some of the clinics taking place within the board’s hospitals. It was similar to the normal observerships that take place in medical training, but it was not hands-on nor did it maintain her medical CPD. ‘I wanted to make sure I knew what was happening on the shop floor, what we were doing well and what didn’t work or was causing staff and patients frustration,’ she says.

Kavita has sought mentors when she felt she needed to and, years later, still seeks the opinions of mentors from her NHS training scheme. One deputy director of finance advised her to ‘go for it’ and this has become her mantra. ‘I have always been encouraged to say yes to people and to help them,’ she says.

Go the extra mile

She encourages her colleagues to work in this way, to spread ideas and challenge them not to become too comfortable. She was encouraged to take on more when she was already busy, not to take the easy route and to go the extra mile.

‘I have witnessed occasions where finance colleagues have said no because of cost pressures and it can be perceived in a negative way and affect longer-term relationships,’ says Kavita. ‘I’ve usually found there is a way of moving things forward, particularly if it improves the care given to patients.’

While the support of mentors has been important, Kavita has supplemented it with other development activities such as leading the research work for HFMA Wales. She is keen to understand how different healthcare systems have evolved and the benefits and challenges faced by different countries and cultures.

She has taken part in HFMA study tours in America and Canada and facilitated the setting up of the HFMA UK-Australian exchange programme. ‘There are a range of development opportunities and support available in the NHS,’ she says.
Kavita has found that her background and approach has been useful for service planning, design and making decisions. ‘Understanding the clinical service and working closely with general managers pays huge benefits, and ensures realistic services are developed that don’t just work on paper’ she says.

‘My clinical background gives me an advantage and greater ability to challenge. I know how doctors are trained to think and work. I offer viable solutions in translating clinical proposals into reality while getting as much value for money as we can and enabling clinicians to work to their full potential, which is very satisfying.’

While working within the NHS, Kavita enjoyed the variety, the opportunity to change roles and the number of interesting projects running at the same time. Keen to progress her career and continue to be involved in challenging projects, Kavita explored opportunities within and outside healthcare. In 2013, she took up a manager post with EY.

As she explains ‘Moving to EY I wanted to try something different. My role in the NHS had lots of things happening and I took advantage of lots of opportunities, but broadly the core work was cyclical and followed the financial calendar. At EY I have seen a shift in my working pattern, so the focus is on what the client needs.

‘After 12 months I started to get into the rhythm and pace of work and balance my work, development and personal life. I support clinical work streams and have worked on redesigning clinical services so there are sustainable services across a whole health economy.’

Kavita’s recent roles have included supporting one trust looking to acquire another and redesign their future portfolio of services. She was also part of the team co-ordinating the disaggregation of services at Mid Staffordshire NHS Foundation Trust (MSFT), where EY was the special administrator.

Kavita describes this as the most challenging achievement in her career. ‘The safe transfer of services, appropriate governance and maintaining patient safety could not have been achieved unless all clinicians were on board. Disaggregating MSFT across two receiving trusts and co-ordinating the change across multiple stakeholders was very complex.’

Kavita led the medicine work stream, with the aim of ensuring sustainable services. ‘We had to adhere to tight deadlines. Working in circumstances with significant operational and staffing challenges required a lot of sensitivity.’

The project was completed but Kavita says challenges remain. ‘Although the work was successful and the two organisations have the best chance of success, the underlying problems will take time to work through,’ she says.

She believes the NHS can learn from private sector approaches. ‘And a lot of good work in the NHS can be shared more widely so that other organisations learn. ‘At EY, when a new project is delivered or a new concept is successful it is quickly assessed and turned into a methodology or framework that can be rolled out in other teams and other types of work,’ she says.

Working in finance keeps options open, says Kavita. ‘There are so many roles in the NHS that could fulfil your career. Your skills are valued,’ she says. Her advice is to be open to anything that comes your way.

‘Providing the best possible value for the patient often involves getting the best possible value for yourself,’ she says.

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**Favourite film** The Secret Life of Walter Mitty

**Favourite book** Outliers, Malcolm Gladwell

**Favourite TV shows** Sci-fi and fantasy, currently watching Defiance

**Top three records** ‘I listen to most kinds of music – maybe Third Day by Katie Melua’

**Favourite food** Hot cookie dough

**Favourite website** Interesting posts via Facebook or LinkedIn, such as Wired, Harvard Business Review
Finance route key to management

Kate Hannam always wanted to make a difference and, as director of operations at North Bristol NHS Trust, she sees her accountancy experience as having a positive support.

She joined the NHS finance training scheme in 1994 after completing an accounting and finance degree. Kate had always wanted to join the NHS and to follow in the footsteps of family members who worked in the NHS. ‘I always had public sector values. I considered working for one of the big accountancy firms, but I felt the NHS would give me a greater opportunity to make a difference,’ she says.

While being attracted to the NHS, Kate was keen to keep her options open and was attracted to both finance and general management. ‘I didn’t know exactly what I wanted to do within the NHS,’ she says. ‘I was quite interested in general management, but I felt the finance training scheme would allow me to transfer between disciplines more easily if I wanted to.’

Having completed the training scheme, Kate qualified as a CIPFA member. Her first substantive post was as a senior management accountant and she was involved in the merger of Frenchay and Southmead hospitals to create North Bristol NHS Trust. ‘It was a great experience to be involved in the finances of the merger and how to realise cash-releasing savings at that stage of my career,’ she says. ‘Much of what I did then is relevant today.’

Kate worked as a finance business partner in the newly merged North Bristol NHS Trust. The trust pioneered an approach where the management accounting team was embedded in the clinical directorates with an equal voice at directorate management boards. ‘My role was about working in partnership with managers and clinicians. We developed integrated reporting to link workforce and activity information with the traditional financial management information,’ says Kate. ‘All this is common now, but it wasn’t back then.’

Her next opportunity came from a close working relationship with the director of the directorate she supported. ‘The director asked me whether I would like work on a secondment basis, and cover the associate director role,’ says Kate. ‘I think she saw the understanding I had for the business and the good relationship I had with the management team.’

However, on taking up her first role in operational management, she found her skills needed to be developed. ‘My finance background naturally suited more analytical approaches to management. There was a lot for me to learn and I was lucky that I had great support from my colleagues.’

After a successful secondment, Kate moved to back into finance and a new role as assistant director of finance at United Bristol Healthcare Trust. But she didn’t stay long in this post. She explains: ‘I enjoyed the role back in finance, where I covered seven directorates and had good variety in my work. I didn’t stay too long because I was keen to get back to general management.’

In 2002, Kate moved to Swindon and Marlborough NHS Trust as general manager. In her new role, Kate played a greater part in project management and completed her PRINCE2 project management qualification. ‘I was involved in a number of large tender exercises and I really benefited from the experience,’ she says. ‘Finance provides a great platform to develop and learn a number of other disciplines if you want to. I aimed to manage the business guided by my experience as a finance professional.

‘While I had a clear focus on patients, I was still able to use financial measures to gauge what was happening. Nothing tends to happen without a financial consequence, and that can be positive as well as negative.’

Working in the women and children’s services directorate, Kate stayed nearly six years. A highlight was establishing an integrated children’s service as part of the children’s national service framework. ‘The work was incredibly interesting and I enjoyed myself. It involved lots of partnership working – for example, with social care as well as other acute providers – and it really made a difference to what we were doing.’

Long-term view
Kate says a few people questioned whether staying at one place and in one role for so long was a good idea. She feels one really good outcome of her time at Swindon and Marlborough...
was having the opportunity to learn a single organisation very well.

‘I really enjoyed my time at the trust and always felt like I was learning,’ she says. ‘You have to be in a role for a couple of years to be able to influence things. When you change roles, you have the opportunity to reinvigorate yourself; when you stay, you sometimes have to live with the consequences of the decisions you make when you are new into the role.’

It is clear Kate has focused on her personal development throughout her career and has engaged help from mentors and coaches at different stages. ‘Working in any role, you can find yourself getting entrenched. I looked for individuals I trusted and respected to mentor me,’ she says. ‘I looked for people who had experience coaching and mentoring other people working in the public sector, as well as the private sector. It’s helpful if they have an understanding of the NHS, but it is not always necessary.’ Kate says her most successful mentoring experience was with a GP who helped give her a different perspective.

In 2009, Kate moved to Taunton and Somerset NHS Foundation Trust, where she was a divisional director of operations within emergency and urgent care. Later, she changed roles to become director of acute service development, where she focused on developing robust and effective partnerships with key stakeholders to develop and implement integrated pathways of care. ‘My personal objective was to take the opportunities to build operational and leadership skills, both personally and within the clinical and operational teams for which I was accountable.’

Kate moved on in 2013 to become chief operating officer at Salisbury NHS Foundation Trust. ‘I applied for the role because I wanted to gain board-level experience. Salisbury is a high-performing smaller trust with a number of specialist services. It was a unique opportunity for me and a great experience.’

‘She has since moved back to North Bristol NHS Trust. ‘I never moved away from Bristol,’ Kate says. ‘I have always lived within the area and commuted for work – it is nice to only have a 20-minute journey into work.’

Now in a different role working with new services in a state-of-the-art hospital, Kate faces different challenges every day. ‘When I returned to North Bristol NHS Trust, the two main hospitals had relocated the majority of their services into a brand new hospital,’ she says. ‘We focused on aligning work cultures and redesigning internal service models to ensure we got the maximum benefit from the new hospital.

‘North Bristol NHS Trust is a complex health and social care system, where we work with two clinical commissioning groups and two councils. Balancing the need for high-quality services for our local population, as well as delivering national specialist services is a challenge.

‘Increasing demand for all services requires us to develop new models of care. Working in collaboration with our system partners is essential to secure our long-term sustainability, and to work towards our goal of being a foundation trust. The challenge is immense but very rewarding!’

Kate has some clear advice for people considering a career in the NHS. ‘There are lots of opportunities in the NHS, there are lots of different types of finance roles and you can expand your skills beyond the finance team if you choose to,’ she says. ‘I’d recommend finance is a good basis for a role in general management.’

“There are lots of opportunities in the NHS, lots of finance roles. You can expand your skills beyond finance if you choose”

Outside interests
Kate enjoys relaxing with friends and family over a lovely meal with a fine glass of wine, or a cocktail, or two. She’s a huge fan of cocktail-making classes. Kate is also a season ticket holder at Bath rugby club.

Favourite book Anything by John Grisham

Favourite film Casino Royale

Favourite TV shows Comedies such as The Big Bang Theory

Top three records Dancing Queen, ABBA; YMCA; Village People; I Am What I Am, Gloria Gaynor

Favourite food Mexican

Favourite website Google

Alternative career Martial arts instructor
‘It’s an honour to work in the NHS’

Andy Hardy is a busy man. As well as leading University Coventry and Warwickshire NHS Trust (UHC&W), one of the largest trusts in the country, he is also an HFMA trustee and a CIPFA council member. He’s on the board of directors of not-for-profit careers advisory service Right Step and the Albany Theatre in Coventry, a registered charity.

While Andy is now a committed public servant, it is not what he had planned. With his degree in economics, he expected his future would be in the City, but when he graduated in 1990 jobs were scarce and he found himself applying for a trainee accountant post with North East Warwickshire Health Authority.

Unusually, it was a part of a local training scheme and Andy benefited from undertaking a wide range of roles within the finance department. He became CIPFA qualified in 1994 and the same year took up the substantive post of purchasing/locality accountant within the health authority.

He recalls it being a challenging time with the introduction of GP fundholding. Keen to continue his studies, he undertook an MBA at Birmingham University. ‘The MBA really helped give me a broader perspective and I think it helped to mark me out from other qualified accountants,’ he says.

Provider move
Recognising the need to get some provider experience on his CV, Andy took up his first post at UHC&W in 1998. It was the beginning of Andy’s long association with the trust. He started off as a directorate finance manager/deputy general manager with responsibility for surgery and oncology and it gave him his first taste of general management. Andy was quickly promoted to the role of assistant director of finance, with responsibility for planning. He stayed in this role for two years before a secondment to the West Midlands Regional Office of the NHS Executive led to him to working in the regional tier of the NHS for three years in a variety of roles.

He explains how his role as head of finance at West Midlands Strategic Health Authority came about. ‘I applied for a job as a PCT director of finance but didn’t get it.

Kevin Orford was on the interview panel, as he was the finance director at the strategic health authority, and he offered me a role working for him. ‘I learnt a lot from Kevin. He has a natural coaching style and went out of his way to develop people. Looking back it was a good thing that I didn’t get the PCT post – these things tend to work out for the best.’

Andy says the best advice he has been given is ‘don’t do a job you don’t enjoy’. ‘Some people do that to build a CV,’ he says. It is more important to have a good boss – choose to work for people who you can learn from and who can motivate you.’

In 2004, Andy returned to UHC&W as chief finance officer. Andy recalls: ‘It was a huge jump from my previous role. It really should have been a role for someone who already had experience of being a finance director, but I applied for it and got it. I’m really grateful to Dave Roberts, the then chief executive who took a chance on me.’

Recruiting skills
Andy puts some of his success down to his skill in recruiting good people and putting fantastic teams together. ‘Two of my initial associate directors of finance are now finance directors themselves. Having a strong team enables you to do your job better,’ he says.

The role of deputy chief executive was added to Andy’s portfolio in 2008. He says: ‘I was thrilled to be expanding my role. It gave me an opportunity to have more involvement in the clinical side of the organisation and to move outside my finance comfort zone.’

When the post of chief executive became available in 2010, Andy jumped at the chance to lead the organisation, now one of the country’s largest tertiary acute trusts. His application was successful and since then he has been working with colleagues to continue the success of the organisation and move towards the achievement of foundation trust status. He has particularly focused on developing relationships and joint working with others in the local health economy, which he sees as crucial for delivering high-quality, financially sustainable services for local people.

Although he is a chief executive,
Andy says he still considers himself a finance professional. He says one of the highlights of his career was becoming HFMA president in 2014. ‘From the start of my career in NHS finance some 25 years ago, the HFMA always represented a focus for training and professional networking opportunities.

‘It is a fantastic organisation and it was an honour to be the president last year. I know that I personally gained from the experience and so did my trust.’

Among other highlights, he toured the branches, attended the US HFMA annual conference and was called to represent the HFMA at the Public Accounts Committee, an experience he says he will not forget.

Andy recommends a career in NHS finance. ‘Being an accountant in the NHS is different to being an accountant anywhere else. We’re not dealing with widgets, it is all about people’

Core values
‘As well as technical accounting skills,’ he continues, ‘you also need to share the core values of the NHS. It is so much more than just numbers.

‘I’ve had the privilege of working with many great accountants who are as committed to the delivery of excellent healthcare as our clinical colleagues. I firmly believe that we are lucky to work in the NHS – it is an honour’.

However, Andy says that while working in NHS finance is rewarding, it is not for the faint-hearted.

‘These are tough jobs,’ he says. ‘Nine years ago I went through a particularly tough time with the building of a new PFI hospital and needing to make big efficiency savings. I got through it and was better for the experience.

‘The pressure can be relentless and how you respond is the true test. NHS finance staff need to be resilient as the financial position is not going to get any easier.’

Coping with pressure
To help him cope with the pressure, Andy tries his hardest not to work during his time off.

As he explains: ‘I sometimes look at emails and try to reduce my reading pile in the evenings, but I try really hard not to work at weekends or when I’m on holiday. It’s important to recharge the batteries and to give yourself time to reflect.’

Andy has a wide range of hobbies that help him to switch off – particularly when he is performing in an amateur dramatic production. ‘You cannot think about anything else when you are on the stage’ he says.

Perhaps surprisingly, given what he has achieved so far, Andy doesn’t consider himself naturally ambitious.

‘I like a challenge and hate being bored,’ he says. ‘This is what drives me more than ambition.’

Looking ahead, Andy doesn’t anticipate leaving UHC&W any time soon. ‘We’ve made lots of progress but there is still more to do,’ he says. ‘We’ve got great staff and ambitious plans to integrate services and to work with others so the patients get the best possible care.

‘I think we’ve got the building blocks in place to become one of the best trusts in the country. It is a genuine privilege to lead such a fantastic organisation, especially as it is in the community I live in. I wouldn’t want to do anything else’.

“Being an accountant in the NHS is different to being an accountant anywhere else. We’re not dealing with widgets, it is all about people”

Outside interests
Andy likes to make the most of his free time. He is passionate about amateur dramatics and recently starred as Bill Sykes in Oliver! He keeps fit and in 2011 completed the London Marathon. He supports the Leicester Tigers and England rugby teams.

Favourite TV show EastEnders and Mad Men
Favourite film Love Actually
Favourite book The Great Gatsby
Favourite songs Too many to list
Favourite food: Everything from fillet steak to Heinz beans
Alternative career choice ‘A spy like James Bond’
As a senior manager in NHS England’s financial strategy team, Gemma McGeachie provides financial input to NHS England’s strategic projects, including the new models of care work.

Gemma studied economics at university and had a place on the government economic service graduate scheme, which she turned down to follow a career as an accountant. ‘I was on a summer internship at EY at the same time I applied for the government economic service,’ she says. ‘During the seven weeks I spent at EY, I got involved in a wide variety of projects and enjoyed it more than I was expecting.’

Faced with two opportunities, Gemma sought advice. ‘My lecturers advised me that the public sector would always be there and that it would be good to get experience working elsewhere first and then move to the public sector and apply what I had learnt,’ she says. So Gemma returned to EY full-time in 2002 and studied the Institute of Chartered Accountants of Scotland (ICAS) exams. When she completed her accountancy training, she didn’t have a traditional celebration, instead signing up to participate in a yacht race around Ireland.

‘I wanted to challenge myself and do something fun’ she says. ‘I couldn’t swim and I’d not been sailing before. We set sail from Plymouth and I had until we reached Ireland to learn the ropes. I was hooked immediately.

Gemma enjoyed her time at EY, but did not see herself staying at the firm long term. ‘The accountancy firms are a great way to get skills and experience in a range of services,’ she says. ‘While my role was challenging and rewarding, it wasn’t perfect for me. Fortunately, I had a mentor at EY who was supportive and helped me to think about my career and what I wanted to do next.’

Gemma was looking for new roles in EY when her mentor pointed to a vacancy at Monitor. ‘He knew I wanted a change,’ she says, ‘and I thought the interview would give me an opportunity to compare roles.’

At the interview she was impressed. ‘I worked in financial services and insurance at EY and Monitor was willing to take a risk despite me not having health experience. I left the interview wishing I had done more preparation.’

Gemma was successful and started working at Monitor in 2006. In her role as an assessment manager, Gemma was involved in assessing more than 30 foundation trust applications and reviewing transactions in existing foundation trusts. She got satisfaction from the support she was giving.

‘After the assessment process, finance directors would tell me that they really understood the activities and performance of their trust a lot better’ she says. ‘They asked how they could continue to get the benefits of the reviews without going through intensive assessments every few months.’

Bitten by the sailing bug, Gemma took a sabbatical from Monitor in 2008 and took part in the Clipper round-the-world yacht race. She spent five months sailing from China to Liverpool via Hawaii, Santa Cruz, the Panama Canal, Jamaica, New York, Canada and Ireland. During her adventure Gemma had time to think about her career.

Nautical time out
‘Life on the boat was basic and I spent a lot of time thinking,’ she says. ‘With little electronic communication, you got into a routine of eat, sail and sleep. I learnt so much about team dynamics and personal motivations from living in such close quarters with my team mates.’

While on her sabbatical, Gemma realised she wanted to focus her career more on health operations, policy and strategy and less directly on traditional finance. As a result, she completed a postgraduate certificate in health economics at the University of Aberdeen and a short course on organisational management in health systems at the University of London.

After three years at Monitor, Gemma looked for her next challenge and she embarked on a year’s secondment to HM Treasury as a policy adviser in the health team. The culture and dealing with ministers directly was different to her previous experience. She gained an understanding of strategic policy and decision-making during the Budget and in the run-up to an election and forged strong relationships with key contacts across the Department of Health, Treasury, NICE, the NHS Institute and Cabinet Office.
In 2011 Gemma left Monitor after five and half years to undertake voluntary work at Partners in Health, a not-for-profit organisation that aims to facilitate the provision of modern healthcare to those in most need. She worked at its headquarters in Boston for a month, before spending four months at its sister organisation Zanmi Lasante, which runs clinics and hospitals at 12 sites in Haiti. Gemma carried out an organisational review for Haitian and US-based staff, focusing on reducing fraud and corruption risks.

Before Gemma returned from her voluntary work, she started thinking about her next role. ‘When I returned from Haiti a friend of a friend asked me to join an organisation she was starting up,’ she said. ‘At the time, I had been looking into roles in NHS provider organisations. I knew that the start-up was high risk, but also that the opportunity wouldn’t come along again.’

Consequently, Gemma became business manager at Beacon Health Strategies UK in 2011. She played a key role in establishing and growing its privately managed mental health care advisory services. Beacon aims to improve outcomes for people with mental health problems by working as a consultancy service for NHS partners to translate principles and theory into models of care.

Working directly with the chief executive, Gemma gained experience of creating a new organisation. She supported all aspects of strategy, market assessments, funding pitches and grant applications as well as client relationship management.

Then, confident the organisation would continue to thrive, Gemma left in 2012 to join University College London Hospitals NHS Foundation Trust (UCLH). It was at here that she started to take a more strategic role, by leading on the development of key business cases in A&E and working on the reconfiguration of services across north London and beyond.

Joint venture experience
Her experience working at a start-up was put to good use as she led on the commercial aspects of establishing a pathology service joint venture.

‘I had a lot to reflect on from my experience with the joint venture,’ she says. ‘While some elements of our approach worked well, it demonstrated to me that organisational form is a byproduct of defining the outcomes we want and getting the model of care right.’

While at UCLH Gemma found the time to complete a masters degree in health policy at Imperial College.

In 2013 she moved to NHS England. ‘The director I worked for at UCLH was moving to NHS England and he asked me to join his team,’ she says. ‘I wasn’t looking for another role at the time but I knew we worked well together and the team would be focusing on the type of strategic issues I am really interested in.

‘At the moment, we are investigating the potential impacts of the spending review for the NHS by speculating on a range of possible scenarios that may be announced by the government.’

Gemma is also a member of the national new models of care team, looking at different ways of delivering clinical outcomes and sustainable finances. ‘We are working with the first wave of vanguard sites to understand what level of support they need and address the barriers they face for implementing new care models,’ she says. ‘Finance input is essential in any service redesign, so that services are designed in a way that will meet clinical outcomes and be affordable.’

Outside interests
Gemma enjoys hill-walking, running (for charity) and sailing. She also provides financial governance mentoring to charities and career mentoring to fellow ICAS members.

Favourite film Cinema Paradiso
Favourite book Pride and Prejudice, Jane Austen
Favourite TV show Borgen
Top three records Black Sands, Bonobo; All is Full of Love, Bjork; 500 Miles, The Proclaimers (Glasgow Clipper boat song)
Favourite food Avocado
Favourite website Google maps
Manufacturing meets the Mersey

At Mersey Care NHS Trust, Gill McKetterick supports the redesign of the trust’s finance and procurement services. But a project management role is not something she thinks she would have looked for earlier in her career. ‘It has been a massive change from my previous roles,’ she says. ‘But I am relishing the opportunity to make a difference and have embraced the prospect of personal development.’

Undertaking several roles in the finance department has given Gill a broad range of skills and experiences, as well as familiarising her with constant change. This is useful in her current role, as she can relate to colleagues affected by the changes at Mersey Care. Having performed many of the roles herself, she knows what it’s like to change. She tries to get the best possible solution for everyone.

Encouraged by her grandfather only to ‘get a good job’, Gill initially looked at the legal profession. ‘I didn’t have any particular desire to become an accountant,’ she says. ‘I always wanted to be a lawyer – I enjoyed watching LA Law when I was younger.

‘The foundation course I studied involved law, but I was surprised to find that I enjoyed the accountancy aspects of the course and had the option to continue to complete a 12-month access to finance course.’

After completing her foundation course in 1994, Gill took a temporary role through an agency as a finance assistant at Emerald Airways. It was quite an investment for Gill as she needed to buy a car to get to the offices.

Her first permanent role came the following year, working at T&D Industries, a manufacturing company that makes steel drums, where she worked as an accounts assistant. Gill was supported to study for the CIMA qualification.

She explains: ‘I didn’t complete the qualification at the time, and it wasn’t until later, when I was working in the NHS, that I realised the importance of professional expertise for patients and my colleagues, so I decided it would be a good thing to complete.’

She believes becoming a qualified accountant is one of her greatest career achievements. Gill says she always knew she would complete the CIMA qualification at some stage and wishes she had done so initially. ‘I have always had a good moral compass and wanted to do a role that would be of benefit to people. My parents and friends said joining the NHS would be a good thing to do.’

Gill’s career very nearly took a different path when, within the first six months of working in the NHS, Gill remembers being approached to go back to work in manufacturing and was tempted by the variety of work offered within a smaller organisation.

‘The deputy director of finance at the time would not accept my resignation,’ she says. ‘I suppose they saw more in me and the opportunity to develop. Looking back, I’m really glad I stayed. It took me a while to realise that my background in manufacturing brought something different and added value.

NHS support network

‘Also the good things about working in the NHS are the support you receive and the opportunities to develop. Over time, my work became more rewarding, I could see I was doing a good job and having a positive impact.

‘Working with clinicians and understanding clinical services helped put into perspective what is important and what working in the NHS is all about.’

Settling into the NHS, Gill worked across a range of finance roles at the Walton Centre before moving to Mersey Care NHS Trust in 2009 as financial accountant. Her focus changed again in 2014, when she became a project manager to lead the development and transformation of the finance and procurement department as part of a wider corporate services review.

Gill recognised the different skillset required to be successful in her new role and was keen to develop herself
further. ‘A project management qualification was within the desirable criteria when I applied for the role,’ she says. ‘In my interview, I identified the need to learn a formal project management framework and was keen to pass as the role is very different to what I am used to.’

She completed the PRINCE2 foundation project management course shortly after changing roles. The course gave her the confidence and skills to undertake the role, but it was not the first time Gill had looked for external support to aid her development.

‘While I was studying for CIMA, I had a coach to support me,’ she says. ‘I placed so much pressure on myself to pass and it was helpful to have the support of another person to ensure I focused my efforts on the right things. The coach helped me to press pause on my day job to allow me to think about what I really wanted and what things were preventing me from achieving success.’

Gill is putting her formal training and experience to good use in her current role, where she engages with stakeholders on a daily basis. Leading a change programme was a challenge that interested her.

‘A lot of my time is spent planning and monitoring against programmes, which involves nagging people for progress updates,’ she says. ‘I have lots of meetings with a variety of people about a whole range of topics, so there is something different every day, which is the complete opposite to my substantive financial accountant post.

‘There is a lot more writing, with briefing papers and monthly blogs to help keep staff up to date. Sometimes I do miss my numbers though!’

Now Gill is not managing a team in the finance department, she values the strength of relationships and the unofficial support network at the trust.

Broader engagement
‘In my previous role, my conversations would have mainly been with the financial services staff I managed, but this project means I am engaging with the entire finance and procurement functions.

‘I have similar conversations to before, about where things are up to, but I now spend a lot of time seeking people’s feedback. I try to capture their ideas and opinions as well as their concerns, to make sure we respond to them.’

While enjoying her role, Gill is looking forward to working with clinicians more. ‘At the moment, I spend very little time with clinicians,’ she says, ‘but I anticipate this will change as the project begins to engage with stakeholders external to finance and procurement. Customer engagement will be critical to the success of the project, as it is the intention to further improve the quality of service provided.’

Gill is grateful for her career in the health service. ‘There are lots of opportunities available within the NHS. When I worked in manufacturing, it felt like the only incentive to progress was for more money; in the NHS, it feels different. It is about expanding your skills and adding more value,’ she says.

‘Throughout my career, the NHS has always been going through a period of change of some kind or other. My advice is that there is no need to panic as this offers new opportunities. ‘You have to want to take the opportunities when they present themselves and be open to trying something different.’

“I have lots of meetings with a variety of people about a whole range of topics, so there is something different every day”

Outside interests
In her spare time, Gill likes to take to the road in her touring caravan. It’s only small and because all the tidying up is done in a few minutes, that leaves her more time to spend with her two children.

Favourite film Mamma Mia
Favourite TV show Strictly Come Dancing
Top three records Copa Cabana, Barry Manilow; Always a Woman to Me, Billy Joel; Uptown Funk, Bruno Mars
Favourite food Chinese
Pulling out all the stops for health

Dinah McLannahan is no stranger to working into the small hours to make finances work. Recently she worked through the night on a major infrastructure project at a trust, and she recalls staying up til 3am to balance the till for a student job at a hotel. ‘I had to balance the books on a paper ledger using a computer and a till. I would be up until 3am sometimes to find every last penny. I always felt really comfortable with numbers – although I am no mathematician!’

It was that memory, together with an encounter with an NHS accountant, that brought her to NHS finance. She already had a career in the NHS as a nurse, a profession she admits to ‘falling into’. ‘I went to a really good school, one of the top 10 in the country in terms of results. It seemed everyone knew what they wanted to do – doctor, lawyer – but I didn’t. My mum was a nurse at the time, so I sort of fell into it.’

While she was a nurse, the unit accountant would attend the ward as a patient from time to time. They talked about his role and, having enjoyed her previous job at the hotel, she decided to train as an accountant.

A careers teacher was a big influence, but not in a positive sense. She told her to choose a practical career rather than anything academic. That hit hard, as it would any 16-year-old, she admits, but she was determined to prove the teacher wrong. ‘I knew I wasn’t going for four As at A-level and a degree from Oxford or Cambridge, but I was capable and bright,’ she says.

But even during her three years’ training, she admits she still did not know what she wanted to do.

While proud of the standards of care she helped deliver during her time as a nurse, it became evident it wasn’t the career for her. The structure of nurse management was too hierarchical and if she wanted to progress, the jobs would take her away from patients. ‘I felt like every shift was an eight-hour adrenaline rush. You’d take a breath walking onto the ward and then let it out eight hours later. My senior nursing colleagues didn’t seem very happy and that didn’t attract me to stay in nursing,’ she adds.

While NHS finance and her current role as senior business consultant at the NHS Trust Development Authority (TDA) are always going to be a step removed from the front line, Dinah believes she is having a direct effect on patient care. ‘When I was a nurse there were lots of life and death situations, but also lots of occasions when I was able to make someone’s life a little easier. That stays with you forever. It drives what I do as a finance professional, having had this experience,’ she says.

‘I like to think I help trusts to be financially and clinically sustainable. When I work with a financially challenged trust, the conversations are mainly about money, but also about improving quality and safety of services and getting better outcomes for patients.’

Successfully putting forward a business case on a trust’s behalf will benefit patients, she says. ‘I am the one who puts these cases to the Independent Trust Financing Facility. It’s almost as if I’m working for that trust to make the case, so it goes forward and makes a difference to patients.

‘Finance is a support function, whether within the TDA or a trust, and it can be a blocker as well as an enabler. That’s an important balance to strike. It’s difficult in a risk-averse culture, but we must not lose sight of innovation as well as safeguarding public money.’

Wide-ranging work
Dinah looks after 11 trusts in the West Midlands – a mix of acute, community and mental health trusts. ‘I have a tremendously privileged role,’ she says. ‘There’s variety in the work and I am also able to interact with a diverse group of organisations with different styles of doing things. I could be doing a financial recovery plan in one trust or on the business case for a new hospital. I also get the whole system view and I feel I’ve learnt a lot.’

She says her biggest challenge is developing and maintaining good relationships with the organisations. ‘You must ensure this is translated into something tangible so you can make a measurable difference. Ultimately, boards are accountable, but you can put a lot of development support into an organisation and see the effects that has,’ she says.

Looking after a variety of organisations has a flip side – it can mean life is hectic as she goes from
trust to trust, meeting to meeting. ‘You have to be creative with your time management, but logistically it can be a challenge to manage the diary.’

With such a busy life, she is grateful for her husband’s support. On leaving nursing for accountancy, she got a training job at a three-partner practice in Worcester, before joining Baker Tilley for a year, working chiefly on auditing small businesses.

‘Working outside the NHS taught me the value of not wasting time. I had to account for every six minutes of chargeable time and was only allowed 30 minutes of non-chargeable time a day. It is a good discipline. Time has to be used well.’

It was always Dinah’s intention to move back to the NHS, so she jumped at the chance to join South Birmingham Primary Care Trust in 2003, looking after 11 Sure Start programmes as well as a financial reporting role.

She qualified in 2005 and moved into a financial management post in the PCT children’s and community services team. Two years later she moved to Birmingham and Solihull Mental Health NHS FT as a finance and business manager and was then promoted in that trust.

Immediately, another opportunity came up. On her first day following promotion, she received a call from a former boss who was at Dudley and Walsall Mental Health Partnership – the deputy director of finance job was vacant and would she be interested in applying? In the early stages of pregnancy, she felt she could not take the job. But when she was ready to go back to work after maternity leave, the post was still available.

‘We had many achievements at Dudley and Walsall, but the one that stands out for me is that we built such a fantastic finance team under my leadership.

‘We were just a small Black Country mental health trust and when I started you could cut the office atmosphere with a knife. By the time I left, we had been shortlisted for two national awards, delivered surpluses year on year, we had a good relationship with commissioners and had progressed significantly towards foundation trust status, passing Monitor’s financial viability assessment.’

She stayed there more than four years, including a spell as acting director of finance and performance, before moving to the TDA in 2014.

‘The NHS is good at offering development opportunities and I have never shied away from taking those opportunities,’ says Dinah. ‘I haven’t had a clear, defined career plan; I just went with the flow, taking opportunities as and when they presented themselves to me. But I am grateful for the chances I have been offered and I don’t take them for granted.’

Many colleagues have played a key part in her career. One is Jonathan Tringham, who was head of commissioning finance when she was at South Birmingham PCT.

‘I came into NHS finance thinking it would be a little bit old-fashioned, but he showed me it absolutely was not. I could see how talented he was, how much detail he knew and how he was in command of everything he did.’

Dinah also mentions Ian Baines (former director of finance) and Gary Graham (chief executive) at the Dudley and Walsall mental health trust. ‘They taught me so much. Development isn’t always comfortable and, though I’ve always pushed myself, if I don’t want to do something I think, “yes, it will be scary but I will get to a better place”. These leaders have helped me do that.’"
From the age of 10, Loretta Outhwaite so wanted to be a nurse that she spent much of her teenage years with St John Ambulance and, later, as a Red Cross cadet. ‘My little brother spent much of his childhood pretending to fall off his bike and out of trees so that I could put him in the recovery position or tie him up with slings and splints,’ she laughs.

But her life didn’t turn out quite as expected. After taking her A-levels, Loretta got married and had her first son a year later. ‘In those days nurse training wasn’t very family friendly and it wasn’t something I could pursue, particularly as my husband worked shifts,’ she explains.

Nursing’s loss was accountancy’s gain, and now Loretta is chief finance officer at Isle of Wight Clinical Commissioning Group. ‘The variety is something I very much enjoy,’ she says, ‘along with the complex, ever changing and somewhat unpredictable environment of the NHS. The aspects I enjoy are also the ones that provide the most challenge in the role. I love a challenge.’

Working with public and voluntary sector colleagues is key to this. ‘We have a common bond. We all do our jobs because we are passionate about providing people in need with great services,’ she says.

Loretta joined the NHS when her son was a year old and her mother spotted a job in a local paper for a trainee management accountant post at the local district health authority (later an NHS trust).

Working full-time with a young family while studying for her accountancy exams was exhausting. ‘I can remember waving off my husband and toddler son every Sunday to play in the sunshine while I was stuck indoors poring over my accountancy books,’ she says. The hard work paid off. ‘I loved my job, working with NHS clinicians helping them to manage their budgets, build business cases to develop their services and find ways to make their ever-shrinking allocations stretch to see ever-increasing numbers of patients.’

Several promotions meant she worked in nearly every service area in the organisation, giving her a good understanding of how acute, community, mental health and public health services worked.

The time had come to go to a larger organisation and she moved to what is now Heatherwood and Wexham Park Hospitals NHS Foundation Trust as a directorate accountant. ‘I was part of the service team rather than the finance department, bringing me closer to the front line,’ she says. ‘My favourite task was developing costing, which had just been introduced. I created my own cost collection sheets for the top diagnosis/procedures and worked with clinicians to write the “recipe” for an average patient. The BNF [British National Formulary] became my favourite reading material.’

Life on the front line was interesting. She was given a desk in an old sluice cupboard, an abandoned operating theatre, a microbiology lab (‘I can still remember the smell,’ she says) and, her favourite, a children’s outpatient clinic. ‘I worked a shift in each clinical department, so I could understand what they did – mopping floors in the urology operating theatre, providing support to A&E staff and reassurance to patients and relatives.’

The experience and insight gained as an operational finance manager remains important. ‘As a chief finance officer in a commissioning organisation, it can be a challenge to make the connection between the work I do and the impact on patient care. It is critical I do make that connection to ensure I understand what services people need, what the people providing the services need and that what’s being delivered meets those needs. I therefore spend time with service users, clinical colleagues and providers of services to keep patient care at the heart of everything I do and every decision I make.’

**Value of secondments**

Not afraid to work outside her finance comfort zone, Loretta’s career has featured three very different secondments, the first two in her time at Heatherwood and Wexham Park.

After a year there, she was selected to take part in its annual two-day residential management development course. She made a good impression and was asked to cover the contract manager’s maternity leave.

‘I was launched into the world of performance information,’ she says, ‘managing external relationships with..."
commissioners, setting, negotiating and monitoring contracts with multiple GP fundholders and five health authorities. Incredible experience.’

When the post-holder returned 12 months later, Loretta was given the opportunity of a permanent post, but she declined, opting instead to increase her finance experience. The secondment had given her the confidence to apply for promotion in the finance team and she took a post in financial accounting and treasury management.

Loretta’s new role included her first foray into commissioning, as it included being finance lead for an education consortium. The consortium focused on workforce planning with provider organisations to identify their clinical workforce needs, translating them into training places to purchase from universities and managing the contract delivery.

Loretta’s second secondment – as head of corporate communications – came a few years later. On her first day she received a call telling her that the prime minister and health secretary would visit the hospital a week later and she would have to organise the visit.

It was a sink or swim moment, and she counts the visit as one of her most significant work-related achievements. ‘I decided that if I could cope with that on my first day in a job, I could probably cope with anything,’ she says.

Other tough days followed. ‘Several months later there was a police investigation into suspicious deaths (later dropped), which attracted national media attention. It was one of the hardest things I’ve had to deal with in my career,’ she recalls.

‘After 12 months, I was given the opportunity of the post on a permanent basis, but declined – I did not want to continue with the media management aspect of the job.’

She then spent four years leading the trust’s National Programme for IT project, including the procurement and implementation of an electronic patient record and picture archiving and communication systems.

Despite enjoying the role, Loretta decided to further her finance career and became the trust’s head of strategic financial development. This included leading on the trust’s foundation trust bid and a private finance initiative project to replace its estate.

In 2010, Loretta relocated to the Channel Islands to work for the States of Jersey in its health and social services department. Through promotion, she then went on to corporate finance director for the treasury, chief minister, income tax and economic development departments. ‘It was a difficult decision to break my NHS service, but I felt strongly I needed wider public sector experience to be an effective finance director.’

Loretta’s third secondment was to Jersey’s comprehensive spending review (CSR) team, where she led the reviews of the courts, home affairs, education and health and social services.

Before the CSR was completed, she took the difficult decision, for family reasons but also because she missed working within the NHS, to move back to the UK.

She believes secondments are key to getting the experience to progress up the career ladder. ‘My advice is to grasp every opportunity given to gain additional experience, especially if it is in another operational area or a related organisation or industry.

Well-rounded experience is invaluable. If you’re in a management position, you should seek to offer people secondment opportunities to enable them to do this or support them to find such opportunities.

“The aspects I enjoy are also the ones that provide the most challenge in the role. I love a challenge”

Employment history

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<thead>
<tr>
<th>Year</th>
<th>Position</th>
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<tr>
<td>1989</td>
<td>Heatherwood and Wexham Park Hospitals NHS FT, directorate account’t, women’s and children’s services</td>
</tr>
<tr>
<td>1995</td>
<td>Wycombe District HA, liaison accountant</td>
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<tr>
<td>1997</td>
<td>Directorate account’t (emergency, diagnostic, surgical)</td>
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<tr>
<td>1998</td>
<td>Finance manager (accounting, treasury)</td>
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<tr>
<td>2000</td>
<td>Head of corporate communications (secondment)</td>
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<tr>
<td>2001</td>
<td>NPIF project manager</td>
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<tr>
<td>2005</td>
<td>Head of strategic financial development</td>
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<tr>
<td>2006</td>
<td>States of Jersey, health acting FD, assistant FD, corporate FD, deputy lead CSR</td>
</tr>
<tr>
<td>2010</td>
<td>Isle of Wight PCT, deputy FD, acting chief finance officer</td>
</tr>
<tr>
<td>2013</td>
<td>Isle of Wight CCG, chief finance officer</td>
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Outside interests

As well as spending time with her family – she has two sons – Loretta is a keen runner and baker.

Favourite film Sleepless in Seattle
Favourite book Birdsong, Sebastian Faulks
Favourite TV shows Dr Who; Location, Location, Location; Sherlock
Favourite food Anything Italian
Favourite website Twitter

Qualifications

CIMA
‘It’s not just about the numbers’

After passing her A levels, Yarlini had planned to do a maths degree at Warwick University, but had a last-minute change of heart. ‘I wasn’t entirely sure that maths was for me and also whether it was something I wanted to do for the next four years,’ she explains. This was disappointing news for her parents, who were clear that staying at home and not studying or working was not an option.

This tough love resulted in Yarlini enrolling on a year’s accountancy foundation course at the local university. ‘My father and uncle were accountants, but it wasn’t something I was really considering as a career. It’s fair to say that I fell into it’.

After enjoying the course and finding it relatively easy, she decided to continue with accountancy and in 1989 gained a training post with McIntyre Hudson, a top 20 accountancy firm. Yarlini says this was one of the best decisions she’s made. ‘It was a fantastic three-year training programme, with different placements every six months. It gave me a good grounding in several different areas and made me realise there were aspects of accountancy I found interesting.’ Audit, however, was not one of them and Yarlini was soon looking for her next role.

After she passed her ACCA exams, Yarlini successfully applied for the post of assistant financial accountant at Croydon Community NHS Trust. Undertaking the audits of a private hospital had sparked her interest in healthcare and prompted Yarlini’s move to the NHS.

‘At the time I wasn’t entirely sure I was doing the right thing, but I knew that I could not stay in audit,’ she says. The move turned out to be a good one and the start of Yarlini’s career in the NHS. ‘While there were challenges at the trust, I could really see I was making a difference.’

She also found the diverse nature of her role enjoyable – ‘one minute I was helping sort out the milk tokens, the next I was balancing the ledger’.

A year later, in 1993, she moved to the Bethlem and Maudsley Hospital to gain a promotion to senior financial accountant. The trust was just about to receive trust status and Yarlini recalls it as an exciting time. ‘I loved it,’ she says. ‘There was so much going on and the finance team was fantastic. We had to work hard, but we also played hard.’

Again, it was the range of activities that appealed. ‘Every day was different,’ says Yarlini. ‘From large capital schemes and treasury management to final accounts. I knew if I was working in the private sector I wouldn’t get exposure to such issues.’

Not long after she joined the trust, Yarlini received a temporary promotion to deputy director of finance to cover a maternity leave. It was a steep learning curve, but was vital in giving her the confidence to carry out a senior management role.

She recalls one particularly tough time. ‘The finance director was on a month’s development course and the other deputy was off because of a family bereavement. I was on my own and thought I wasn’t up to it. But I threw myself into it, and I certainly didn’t get everything right, but nothing went really wrong either.’

When the deputy finance director returned to work after her maternity leave, Yarlini looked for the next step on the ladder. In 1995 she joined Kingston and District Community NHS Trust as chief accountant, where the challenges were different. ‘It was a small trust and there was a question about whether it was viable on its own,’ she says. ‘There was also a range of skills in the finance department, which tested my management skills’.

Family values

Starting a family in 1997 changed Yarlini’s priorities. ‘I returned to work four days a week after my first child was born, but my career had to take a back seat,’ she says. ‘My husband, who’s also an accountant, and the main breadwinner, had a job that involved travelling overseas, so we were not able to equally share childcare responsibilities.’

After the birth of her second child, Yarlini decided not to return to work and focus on her family. ‘I just couldn’t manage it all. I felt as if I wasn’t being fair to my family or my colleagues,’ she explains.

Having a third child led to a three-year career break. But it wasn’t long before she was missing work. ‘I loved spending time with the children, but I needed more. I needed to be intellectually challenged’, she says.

A solution presented itself in the form of a two-day-a-week short-
term role working at the Queen Elizabeth Hospital NHS Trust (now part of Lewisham and Greenwich NHS Trust). A former colleague at the Bethlem and Maudsley had recommended Yarlini for the role. She joined the trust in April 2002 and her first task was putting together the 2001/02 final accounts.

I worried whether I was up to it – for the past three years my head had been full of Teletubbies and the Wheels on the Bus. But it was great to be properly using my brain again.’

While the work was enjoyable, the commute proved difficult and at the end of 2002 she moved to Kingston Primary Care Trust, again on a two-day-a-week basis. The role initially focused on providing commissioning finance support for learning disability and mental health, but the introduction of the new GMS contract provided Yarlini with an opportunity to immerse herself in the intricacies of primary care commissioning.

As her children got older, she took on additional responsibilities and increased her hours – a flexibility she believes would not have been possible in the private sector. ‘The NHS has treated me well and enabled me to develop my career alongside bringing up my children,’ she says.

By the time of the PCT’s demise in March 2013, Yarlini was assistant director of finance. She helped to lead the establishment and authorisation of Kingston CCG.

It was at this point that Yarlini began to think seriously about whether she wanted to become a chief finance officer (CFO). ‘I realised that I had been doing the work of a CFO but not necessarily getting the credit for it,’ she says. ‘Also, the children were of an age where they were needing me less and less’. As a result, she became head of finance at Wandsworth CCG. ‘I’d been working at Kingston for such a long time,’ she says, ‘I realised I needed to get senior commissioning experience elsewhere in order to get a CFO position.’

Wandsworth CCG was particularly attractive because it is the host of the South West London Collaborative Commissioning, with all six CCGs in the area working together to transform services so that they are sustainable and provide high-quality care for patients.

Yarlini particularly enjoyed working on the estates modernisation consultation across mental health trusts in the area – ‘it is really important to create buildings fit for the 21st century, so that patients are safe and make a full and speedy recovery’.

When Kingston CCG advertised for an interim CFO, Yarlini knew she had to apply. She secured the job in January 2015 and since then her appointment has been made permanent.

She is optimistic about the future. ‘Things are constantly changing and I really do think that it is a great time to be working in commissioning.

At the moment, we are focusing on co-commissioning, which will result in much needed changes to patient pathways. It is essential so that the local health economy is sustainable.’

Yarlini is just as clear about her contribution. ‘My role is to evaluate the opportunities, help to manage the risks and make sure that the necessary governance frameworks are in place,’ she says. ‘It doesn’t always make me popular, but I think my colleagues respect that I am always open and honest.’

She concludes: ‘When you become a CFO the accountability suddenly hits you. It’s a huge responsibility, but also a huge honour. I would recommend working in NHS finance to anyone considering a career in accountancy. It’s not just about the numbers; it’s about doing the best for the patients.’

“Things are constantly changing and I really do think that it is a great time to be working in commissioning”
Adam Sewell-Jones admits he had no plans to be an accountant while he was at university studying maths and statistics. The course had been a natural progression for someone good with numbers, but he signed up with no particular career in mind.

‘Most people on the course were headed towards an accountancy career and lots of them wanted to work for the big firms,’ he says. ‘But the thought of being an accountant didn’t excite me and I had no intention of pursuing it. In some ways, I felt I was just going down this route without any control.’

But then a family friend, working as a finance director in the NHS, pointed him in the direction of the NHS national finance training scheme. ‘All of a sudden I realised that doing accountancy in something like the NHS, where the accountancy wasn’t the end goal, could be exactly what I wanted,’ he says.

With a massive oversubscription to the scheme in the year he applied, he didn’t secure a place. But the seed was sown and he applied for and got a trainee management accounting job at his local district general hospital, Basildon and Thurrock General Hospitals NHS Trust.

It turned out to be a good decision. He liked his job and his day-release CIMA training, but what he enjoyed most was being in contact with clinicians and general managers from the outset. ‘My contact with trainees in the big firms, whom I met through studying, made me realise their experience was rather different. They appeared to be kept away from clients at all costs.’

Having qualified, and recognising that the team at Basildon was pretty stable, he decided he needed to look elsewhere to progress his career. A finance manager role at Redbridge Healthcare NHS Trust gave him the opportunity – looking after its learning disability and community services. A year later, the head of the trust’s separate management accounts department left and Adam added this role to his responsibilities.

‘This turned out to be quite significant – it helped me realise that managing the department was more interesting to me than being a finance manager,’ he says. The idea was cemented when he added a business manager role for a private patient unit to his growing responsibilities.

‘It made me recognise that when I moved again I wanted more management in the role,’ he says. This next step took him back to Basildon as general manager for medicine. He admits he was nervous of making the switch as all the other general managers at the trust at the time had a background as senior nurses. However, his financial management skills transferred well and the role worked out. His financial track record, supported by the nursing background of his deputies, proved a good combination.

He stayed for two years, but admits that the job had veered away from what he thought he’d be doing. ‘We were introducing the 12-hour maximum wait in A&E and there were real hands-on challenges in finding beds so that we could meet the new target,’ he says. ‘It was really operational – lots of bed management and firefighting – and not much time to focus on the strategic changes we were keen to progress.’

Work pressures
Adam found it harder to switch off when he left work. ‘In management accounts, there are pressure points particularly around the outturn where people would work late and come in at the weekend,’ he says. ‘But you’d go home and know that nothing was going to happen to the accounts until the next morning.

‘When you went home on a Friday night as general manager of medicine, you’d be worried whether the agency registrar would turn up and, if not, what was going to happen. The 24/7 nature of the role was quite tiring, because I took on a lot of the worry of it. When I eventually moved on, my wife was quite relieved.’

While he’d actively looked to step away from finance, he wasn’t sure he was ready to turn his back on it completely. He was concerned that if he spent too long away, his skills may not be viewed as current.

So he moved to University College London Hospitals NHS Trust as finance manager for the specialist hospitals division. He says the scale and complexity of UCLH – more than three times the turnover of Basildon – was a ‘real eye opener’ requiring ‘a different type of leadership’.

It was also his first exposure to a devolved financial structure, with finance managers embedded in
divisional teams – an arrangement he believes can present challenges when finance managers have to provide appropriate levels of challenge to the service.

In 2004, he moved again, into his first deputy finance director role. At the time, he felt it might have been too soon in his career. But the job was back at Basildon and, having sought his medical director’s advice, he applied ‘to see what happens’.

After being offered the post, he found himself ‘on a real learning curve’ supporting the organisation through its early days as a first wave foundation trust. Three years later, outgoing finance director Trevor Smith suggested he apply to be his replacement. Adam was persuaded, but was surprised when he was offered the job.

“I didn’t want to sit in an office, work on tax returns and never see the light of day. Doing something that matters has been great”

He remembers it as an exciting time. ‘There were still only a handful of foundation trusts and of FT finance directors and you really felt part of something that was breaking new ground – piloting payment by results, for example,’ he says.

He adapted to the board role quickly – helped in part by his general management experience – and heeded advice about appointing the right deputy, enabling him to focus on strategy and scrutiny.

In 2009, as part of a ‘stretch assignment’ for a strategic health authority aspiring chief executives programme, he organised a three-month secondment to the SHA to help develop a patient experience measure – this would become the friends and family test. Plans were made for his deputy, Andy Ray, to step into the director role. However, just before the secondment started, a Care Quality Commission inspection raised concerns about aspects of Basildon and Adam was asked to stay as improvement director. This involved establishing a programme management office and delivering a turnaround plan.

While initially viewed as a three-to-six-month role, further CQC concerns arose and it was a year before Adam returned to his job as finance director.

However, with the appointment of a new chief executive and a focus on demonstrating sustainability, Adam was asked to become deputy chief executive with responsibility for running an ongoing transformation programme. As part of this, he led on performance management and informatics and coordinated the trust response to being put in special measures under the Keogh review.

In August 2015, he moved to Monitor as director of provider sustainability, as part of the regulator’s plan to provide greater levels of support to providers to address current service and financial challenges.

He is convinced that, as an accountant, there is ‘no better job than in the NHS’. ‘Right from the outset I knew I didn’t want to sit in an office, work on someone’s tax return and never see the light of day,’ he says. ‘The ability to do something that matters has been great.’

He thinks the opportunity for finance managers to help improve frontline services will only increase in the coming years. ‘It is tough financially now and, if finance does its job well and supports people to do things more efficiently, you will genuinely be having an impact on patients.’

Drawing on his own career path, he encourages finance managers to take any opportunities to broaden their experience, through either secondments or service manager roles. ‘Time in operational roles can be absolutely invaluable,’ he says.

CIMA

 Basildon and Thurrock General Hospitals NHST, trainee accountant
 Redbridge Healthcare NHST, finance manager
 Basildon and Thurrock General Hospitals NHST, general manager, medicine and elderly
 UCLH NHST, finance manager
 Basildon and Thurrock University Hospitals NHS FT, deputy finance director
 Director of finance and performance
 Deputy chief executive
 Monitor, director of provider sustainability

Favourite TV shows Gogglebox, Car Share and Match of the Day
Favourite film Dead Poets Society
Top three records Say Something, Pentatonix; Carnaval, Wynton Marsalis; Etherwood, Etherwood
Favourite website Twitter
Alternative career choice Doctor
Justine Stalker-Booth recently began a new role as head of financial management for specialised commissioning finance in the NHS England national team, which brings her back to where she started. ‘It’s 30 years since I joined the NHS and in my new role it feels I have gone full circle and returned to London to continue working in an organisation that I feel very proud of,’ she says.

Justine knew she wanted to work in finance. After completing her A levels, which included studying accounting, she went to see a careers adviser to get ideas about what was next. ‘My sixth form work experience included lots of filing in St Mary’s Hospital eye department. I didn’t necessarily want to work in healthcare finance despite my initial connection to the NHS. But as my family have a history of working in the NHS, I guess it was inevitable.’

She lived in Colchester at the time and didn’t know where she wanted to work. The careers adviser gave her a list of London-based vacancies. She says: ‘I applied for jobs at the big accountancy firms, but the interview at Westminster Hospital was first.’

Her application to Westminster Hospital was successful and Justine moved to London. ‘I stayed in nurses’ accommodation and lived in St Stephen’s Nurses’ Home,’ she recalls. ‘I don’t think it exists now, but it would have been on the site of Chelsea and Westminster Hospital.’

Justine really appreciates the start she had and the support she had in her training role, which enabled her to take day release to complete her ACCA qualification.

She worked at Westminster Hospital for three years as a trainee management accountant and progressed in 1988 to St George’s Hospital London as a management accountant. Here, Justine had her first experience of costing by supporting the medical staffing team to cost the trust’s entire medical workforce. She moved back to Colchester in 1990 and became a directorate accountant leading a team of four staff to support the financial management of three clinical directorates and a support service.

Staying at the Colchester-based acute trust, her next role was in costing. Justine improved the way costing was done when she implemented a new system. This role was to have a significant influence on Justine’s career in the years to come.

In 2000, she decided to experience life outside the NHS and joined Capio Healthcare. She found her skills were directly transferable to the new role as a regional accountant working with two private hospitals. ‘At the time, there was more focus on management skills in the private sector,’ she says. ‘As a result I received formal training, learnt more and became a more accomplished manager. The training was really focused on patient experience and I received constructive feedback on my skills and behaviours, which were assessed against the company values. It was the first time I had been involved in this type of exercise and I realised the value of it for me personally.’

It was while working at Capio Healthcare she realised how dedicated and hardworking people were, in the NHS and private sector. She says that it gave her confidence in the skills she had developed and that we can sometimes be too self-critical. Ultimately she missed the NHS and planned her return.

Reaping the rewards
Justine admits her career has not always been planned but her job changes felt right at the time. Working hard pays off, she believes, and puts you in a good position when opportunities arise.

Changes in the structure of the NHS have led to several job changes. ‘Reorganisations in the NHS can be tough though because the day-to-day focus changes, new organisations are established and people are worried about where their future may be,’ she says.

Justine’s current role as head of financial management in NHS England’s specialised commissioning finance team came about as a result of one such restructure. As she explains: ‘I knew the finance director and the role suited what I was looking for next. I wanted to use my knowledge of NHS payment systems and have the opportunity to work with clinical staff to influence how the tariff develops.’

Moving roles hasn’t always been as easy, however, and Justine recalls an early experience. ‘I moved to St George’s Hospital and after a couple
of weeks, the finance director asked whether I was enjoying myself. They said that whilst I was technically very good, they were worried about how quiet I was. Looking back now I’m sure they can’t believe they actually said that! Sometimes it just takes a little more time to settle in.’

A typical day for Justine really depends on the programme of work. ‘We may be reporting and analysing variances – I was monitoring a £1bn budget in East Anglia and the extra zeros really make a difference! ‘Otherwise, I generally work with service leads to understand how money is being spent, what we are commissioning and how services are changing.’

She jokes that a lot more time is spent on email communication now.

‘I remember practising for the month before in the car, at home, everywhere! Fortunately the session went really well, I presented it in a way I thought the GPs would relate to and that wouldn’t be patronising. ‘The audience were really good and afterwards the organiser described the room as buzzing while they talked between themselves about the NHS payment regime. They felt they understood how and why the NHS pays for things and that it isn’t kept a closely guarded secret.’

The best advice Justine has been given for her NHS career is to focus on the next steps. Justine has been able to work in different organisations and she recognises this has been an important part of her development. ‘Having worked in hospitals, I have a really good relationship with my provider colleagues and feel I am a better commissioner’ she says. ‘I’ve worked with one finance director across a number of organisations who has had a significant influence, initially by guiding and encouraging me. I was given a chance to learn and I now always try to give people the best chance to develop. You have to play a role in any team and can achieve so much more than working as an individual. I was encouraged to join the HFMA’s national tariff group and have met lots of different people working together and learning by sharing issues and solutions.’

Justine has some advice for those considering a career in the NHS. ‘Sometimes it can be hard to break into the NHS, but I think it is more about skills than the history’ she says. ‘When I’m interviewing, I look for transferable skills. There are often internal candidates who are very strong, so to break in you need to accentuate how your skills and experiences are relevant. I’d definitely recommend a career in NHS finance. It’s incredibly rewarding and you get to work with so many great people.’

“I am really interested in the NHS vanguard programme. There is the opportunity to be part of something that makes a real difference”

‘When I first started working, there were no personal computers. I still prefer to speak to people and make sure I use technology effectively.’

There is so much happening in the NHS Justine is excited about. ‘I am really interested in the NHS vanguard programme. There is the opportunity to be part of something that makes a real difference, where clinical considerations of how we work and the financial considerations of how we pay for it are brought together.’

Justine is clear about the work she is most proud of. ‘I was asked to deliver a session on the national tariff to 60 GPs during the transition to clinical commissioning groups. I was anxious to start off with, but if people ask me nicely I don’t seem to be able to say no.’ It turned out that Justine’s initial anxiety was well placed – the session ended up being attended by 160 delegates.

‘I remember practising for the month before in the car, at home, everywhere! Fortunately the session went really well, I presented it in a way I thought the GPs would relate to and that wouldn’t be patronising. ‘The audience were really good and afterwards the organiser described the room as buzzing while they talked between themselves about the NHS payment regime. They felt they understood how and why the NHS pays for things and that it isn’t kept a closely guarded secret.’

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Employment history

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<tr>
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<td>2013</td>
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<tr>
<td>2015</td>
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Outside interests

Justine is a keen darts player, and the ladies singles champion for clubs in Colchester. She enjoys the social side and plays darts with her partner a few times a week. When not competing herself, she supports Essex Cricket Club.

Favourite film August Rush

Favourite book PbR Guidance; The World According To Bumble; Start The Car, David Lloyd

Favourite TV shows Pointless and Holby City

Firm focus on joined-up finance

Paul Stocks is not entirely clear how his first job came about. He had been planning to go to university to study public policy but, out of the blue, he received a phone call from Doncaster Metropolitan Borough Council.

‘I don’t know how they heard about me,’ he says. ‘But they asked me whether I was interested in applying for a trainee position. They promised to support my accountancy training and, as I knew I wanted to work in the public sector, it seemed too good an opportunity to pass by.’

Paul quickly knew he had made the right choice. As part of his training at Doncaster MBC, he spent time in different departments, including payroll and internal audit. It gave him a good grounding and a thorough understanding of all aspects of local authority finance. During his time at Doncaster, he passed his accounting technician and CIPFA exams.

After eight years – which ‘flew by’ – Paul decided he should widen his experience and he applied for, and secured, the job of chief accountant at the neighbouring local authority, Selby District Council.

Paul recalls starting the new post. ‘The change was mind blowing. I was responsible for the day-to-day management and control of the accounting, payroll, payments, housing benefits and administration functions,’ he says. ‘I went from having no staff to having 24. It was a shock at first, but before long I realised I was really enjoying myself.’

It was at Selby that Paul believes he really started to develop his management skills. ‘I focused on getting the right people into the right roles and on supporting their development,’ he says.

After four years in the post, Paul decided to look for his next role. ‘I really enjoyed myself at Selby, but after coming to the realisation that the chief finance officer and chief executive weren’t going anywhere anytime soon, I started to look elsewhere,’ he says.

In 1995, Paul became deputy director of finance at Scunthorpe and Goole Hospitals NHS Trust. Again, he was responsible for the day-to-day management of the finance department. He joined the trust just as it was undergoing a period of structural change – it was this that attracted him.

‘It was an opportunity to reform the finance function and to make sure that we had the right systems in place,’ he says.

A difficult financial position meant that Paul’s focus was on ensuring the trust returned to financial balance. He did this by building effective working relationships with clinicians and heads of departments and working with them to identify areas where efficiency could be improved. He also instigated a programme of finance training for non-finance staff.

Five years later Paul was looking for his next challenge. Having experienced working in local government and the NHS, he decided to add central government to his CV and joined the Benefits Agency as its head of financial planning.

The scale of the numbers involved increased significantly with the new job – he was responsible for planning and budgeting for the agency’s income of £2.5bn.

But although he was still in the public sector, Paul missed health. ‘There is something special about the NHS – it matters to people,’ he says. ‘At the agency, I felt too removed from the frontline and from the people we were trying to help. I thought that perhaps being a civil servant didn’t suit me. But I decided to give it another go and applied for a job with NHS Estates.’

Paul started working at NHS Estates – which was an agency of the Department of Health – in 1999, as deputy director of finance. Straight away he felt more at home.

Estates frontline
‘The organisation was very frontline facing,’ he says. ‘There were two key parts to the agency’s work. The first was the policy aspect of NHS estate management, working with the Department of Health. There was also a commercial aspect to the role, which involved working with NHS organisations and advising them on how to make the best use of their estates.

‘My role covered the financial aspects of our policy work and, again, managing the day-to-day running of the finance department. I was also responsible for human resources and information technology. It was really useful to broaden my skill set beyond finance. I was happy to be working in health
again and I realised that I was suited to being a civil servant.’

In 2002, Paul made the move to the Department of Health. Two of the five roles he’s had there were not based in the finance directorate. One was a finance role in the corporate affairs directorate. The other was as deputy director in the commissioning directorate, leading on performance reporting and system design. This involved collating and reporting performance information from the strategic health authorities.

‘While it was still about reporting numbers, it was very different from working in finance,’ he says. ‘It was a bit scary for the first few months. Leadership and stakeholder management were the skills I used most. Spending time outside the finance department and out of your comfort zones really does help with your development.’

After a couple of years, Paul returned to the finance directorate to lead the finance business partnering function, as well as financial planning and budgeting across the Department and its arm’s length bodies.

A serious illness in 2013, however, resulted in Paul taking three months off work and gave him a chance to take stock. On his return to work, he had a shift of focus and worked on the Department’s financial management improvement programme. It involved looking at the way finance was delivered in the Department, re-engineering some processes, improving the capability and introducing a learning and development culture.

Paul sees the experience he gained at the start of his career as valuable grounding for his work at the Department, but he says he’s also had to learn new skills.

‘Being able to write well is a prerequisite of being a good civil servant,’ he says. ‘It is a skill that doesn’t come naturally to all accountants, so if you are working at the department you need to develop the skills yourself or surround yourself with people who can write well.’

Paul’s current role could be seen as one of the most challenging in healthcare finance. As deputy director group finance – financial control, he oversees financial management and reporting across the Department – that’s more than 400 bodies, revenue budgets of £110bn and capital budgets of £4.8bn. And 2014/15 was a particularly challenging year.

The job might seem removed from patient care, but some of Paul’s work is directly relevant. He was recently involved in setting up financial arrangements to support the treatment of ebola, working closely with the Ministry of Defence.

Paul has also taken part in the initiative to reconnect civil servants in the Department with the frontline of health and social care. He spent five days working in an accident and emergency department.

‘It was a reminder about what we are here for,’ he says. ‘Connecting with clinicians and managers helps you to see the challenges they face and how the work we do has an impact on them. I’d recommend finance staff do something similar – it really does give you a different perspective.’

Paul may not have started his career with a plan, but he knew he didn’t want to take the same route as his class mates. He grew up in a South Yorkshire mining village, where a large majority of his school friends went to work in the pits. Even then, he knew qualifications and ambition would give him choices. ‘You always need to be in charge of your own destiny,’ he says. ‘Be proactive and don’t just let things happen to you.’

**“Spending time outside the finance department and out of your comfort zones really does help with your development”**

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**Employment history**

**Qualifications** CIPFA

1981 Doncaster MBC, various accountancy/internal audit posts

1989 Selby District Council, chief accountant

1993 Scunthorpe and Goole Hospitals NHST, deputy FD

1998 Benefits Agency, head of financial planning

1999 NHS Estates, deputy FD

2002 Department of Health, corporate affairs head of finance and business planning

2003 Strategy and business head of finance

2005 Head of performance reporting and system design

2007 Deputy director group finance – financial management and partnering

2014 Deputy director group finance – financial control

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**Outside interests**

Paul spends much of his spare time as a taxi service for his three daughters, but he likes socialising and watching football and is a keen supporter of Sheffield Wednesday.

**Favourite book** McCarthy’s Bar: A Journey of Discovery in Ireland, Pete McCarthy; CAMRA Good Beer Guide

**Favourite film** Brassed Off; Life of Brian

**Favourite TV show** Blackadder; Match of the Day

**Top three songs** That’s Entertainment, The Jam; Trampled Underfoot, Led Zeppelin; Hope Street, The Levellers

**Alternative career** Something football-related or a politician
In touch with the technical side

Ray Thomas joined the NHS from the private sector and has worked at the same trust for 17 years.

At university Ray studied mathematics and, following his degree, he wasn’t clear on his next steps. ‘I enjoyed myself at university and spent a lot of time socialising’ he says. ‘When I graduated I didn’t want to be an actuary like many of my classmates and I faced a shock that I had to grow up and get a job. The next natural step for a maths graduate seemed to be a career as an accountant.’

Ray took a training role at Deloitte Haskin & Sells in Chester. It was a small regional office of the firm and had the training culture of a big accountancy firm. Shortly after joining, the regional office was sold as part of an organisation-wide rationalisation. ‘Our office became Conway & Co,’ he explains. ‘But despite things changing, the new organisation still had links with the large firms and access to training.’

Ray completed his ICAEW studies and joined another local firm as an audit manager. ‘I joined Hacker Young in 1992 and worked there for a few years until I moved to KPMG,’ he says. ‘At KPMG, I worked in the owner-managed business practice before moving into corporate transactions.’

Ray’s first experience working in the NHS was on a secondment from KPMG to the Cardiothoracic Centre in Liverpool. ‘It was a small and well run centre. I took an operational role for six months and it was really interesting. I could see the benefit to the community and the intangible benefits of working in the NHS.’

Ray returned to KPMG but not for long. He and his wife had just had their second baby, as he explains. ‘It was a very busy time for us. We moved house around the same time and I wanted a better balance between my work and home life.’ The challenges of spending time at work, having a new baby and settling into the new house prompted Ray to look for a different role.

‘There was a job advertised at the Countess of Chester Hospital NHS Trust,’ he says. ‘It is my local hospital and where my children were born. I knew the care there was excellent and I wanted to build on my good experience on secondment previously at the Cardiothoracic Centre.’

Ray joined the trust as the chief financial accountant with responsibility for financial reporting. ‘The role was particularly attractive because of its technical nature. It suited my experience and my introduction was spent bringing a number of controls checks and reconciliations up to date ready for the preparation of the final accounts.’

Ray describes the transition to the NHS as straightforward. ‘The people working at the trust were brilliant and very supportive. This continues to be my experience working across the NHS more widely. But there were challenges: the trust was in a turnaround situation at the time and I had to get involved early on to ensure the trust had sufficient cash to continue operating.’

Changes to the structure saw Ray take on additional responsibilities. ‘I worked for a deputy director of finance, who later became the director,’ he says. ‘She tweaked the organisation structure to remove the deputy role and I took on responsibility for financial systems.’

Changing roles

Ray became assistant director of finance for financial services and systems (later retitled assistant chief finance officer) and recruited his successor into the chief financial accountant role. Supported in the day-to-day activities, he was able to focus on developing and implementing a new e-procurement system, which he describes as one of the highlights of his career.

‘I was helping design a new system with the developer of our financial ledgers. Other large enterprise system developers offered something similar but it made sense to develop our own integrated solution for our financial ledger,’ he says.

‘Our new e-procurement system was implemented at the trust and shared by the developer with other NHS clients. There is no doubt our procurement improved and it set a course for continued improvement.’

The trust was successful in its foundation trust application and became one of the first 10 in the country. Ray saw his skills play a key part in the application process. ‘Cash was king,’ he says. ‘The long-term financial strategy challenged us to set out what our future financing requirements were. At this time, the NHS had not been used to thinking...’
about cash in this way, as much of
the focus had been on the bottom
line. There was a perception of a
commercial skills gap in the NHS and
I was able to bring experience of the
corporate side of accounting to the
finance team. NHS trusts had been
good organisations but they were
becoming more business-like.’

Ray has experienced a number of
technical changes in his time working
for the NHS. He says keeping his
professional competence up to
date is essential. ‘There are a large
number of NHS training courses
available and, more recently, Future-
Focused Finance [FFF] has played
a role. The NHS finance profession
has a good reputation and there
are great opportunities for personal
development. FFF builds momentum
benefits to the trust from improved
procurement but these come at a
price. The challenge in my role is to
assess whether making the capital
investment will pay back and promote
sustainable improvement to our
financial position.’

The focus of Ray’s role is
increasingly on managing cash as,
like many other trusts, the financial
position at Countess of Chester has
deteriorated in recent years. ‘The trust
plans to play its role in transforming
the local health economy. We
are projecting a financial deficit.
Working with the council, CCG and
community trusts, there is a desire for
stabilisation (sorting out the deficit)
and transformation (taking the longer
view of service development). My
challenge is helping the trust manage
its short-term financing requirements
as well as investing in the future.’

Ray sees effective treasury
management and investment in
the correct projects as the key to
maintaining quality of services.
‘Carrying on as we are won’t fix the
deficit,’ he says. ‘If we under-invest
now, we risk making the situation
worse. We have invested in a
number of modern wards and new
departments that really add value
to the patient experience, maintain
service quality and help control
infection. Investments like these are
an opportunity to generate a return
for the patient, rather than simply
increasing the cost base.’

Ray also sits on national technical
issues groups to influence the
direction of the NHS finance
profession. He is a founding member
of the HFMA Foundation Trust
Finance Technical Issues Group – a
key forum during the development of
the foundation trust regime. He is
also a member of the Department
of Health Bodies’ Accounts Liaison
Group, where issues affecting annual
accounts are discussed, as well
the NHS Pension Scheme Advisory
Board, which considers how the
pension scheme operates.

‘It’s a great way to help the NHS at
a national level,’ he says. ‘My trust
benefits, as the issues we discuss are
relevant, and it helps my continual
professional development.’

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“There are great opportunities for personal development. FFF builds momentum for improvement”

for improvement on the platform
that already exists.’

As assistant chief finance officer,
Ray’s role involves much of the
day-to-day leadership of the finance
department and ongoing system
development. For example, his role
involves aligning the trust’s system
development to the Department of
Health’s e-procurement strategies.

He says: ‘Changes to national
strategies will have an impact on how
we work as a trust. I have to consider
the implications of a potentially large
systems upgrade to ensure we can
continue to work with our suppliers.

‘We are a member of the cohort
of 22 involved in the Carter review
of procurement and efficiency in
the NHS. There will be financial

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CURRICULUM VITAE

Employment history
Qualifications FCA
1989 Deloitte Haskins &
Sells/Conway &
Co, ACA training
1992 Hacker Young,
audit manager
1996 KPMG, manager
including a
secondment to the
Cardiothoracic
Centre in Liverpool
1998 Countess of
Chester Hospital
NHS FT, chief
financial accountant
and assistant
director of finance/
chief finance officer

Outside interests
Ray enjoys cycling and achieved one
of his childhood ambitions when he
bought a Dawes ultra galaxy touring
bike to ride to work. He describes
himself as a gadget freak and drives
an electric car, which he says is the
best gadget he’s ever had.

Favourite film Shaun of the Dead
Favourite book Daemon by Daniel
Suarez
Favourite TV shows The Walking
Dead
Top three records The Rake’s Song,
The Decemberists; Scare Away the
Dark, Passenger; 36D, Beautiful
South
Favourite food Reasonably spicy
curry
Alternative career Architect
Alison Tonge’s life was changed by a book, leading to a career in NHS finance, general management and healthcare commissioning. ‘I went to sixth form to do archaeology and languages and I hated it,’ she says. ‘I was some way into my A-levels, but I decided to change tack.’

She bumped into a business studies teacher, who gave her a book on Keynesian economics. ‘I got hooked on understanding how things work in the economy and then went down the road of business, economics and law at A-level.’

From there, she studied economics at university, and retains an interest in the subject to this day. Local government offered the best way to apply her economics degree, she decided, and she got a job as a trainee accountant at Manchester City Council, studying for the CIPFA qualification.

Heading to health
She moved to health in 1987, first with the regional health authority as a financial planner, then to North Manchester Health Authority as a financial accountant.

With the introduction of the purchaser-provider split and NHS trusts, she shifted to the provider sector in 1990. For the next eight years, she was deputy director of finance at Stockport Healthcare NHS Trust, setting up and managing the new organisation’s finance function and leading on a first-wave private finance initiative scheme.

A two-year spell in consultancy at SECTA/Tribal followed. ‘From early in my career, I worked on strategic initiatives and, going into consultancy, I was involved in issues such as service change. I’d always been interested in the bigger picture and making changes through specific pieces of work, such as the private finance initiative, capital development and writing business plans.

‘I was interested in the numbers telling the story – and still am. For me, it’s about using financial information and knowledge to make improvements.’

Commissioning fitted well with these interests and she worked in several primary care trusts. ‘I was working in providers on big strategic projects and when commissioning came along, it felt like it was a good fit,’ says Alison.

‘Commissioning as we know it doesn’t exist anywhere else. The nearest thing everywhere you go is to do with strategy, performance and planning – I’ve always worked in these areas.’

Nevertheless, between 2009 and 2012, Alison served as executive vice-president, strategy and performance, at Canadian integrated care provider Alberta Health Services. Despite the nation’s lack of familiarity with commissioning – ‘they would not know what you were talking about’ – she was able to bring a range of skills and experiences to the job.

‘It has the same challenges and issues, so you can transfer your experience and knowledge from the NHS. However, it is really important to understand the context. Canada is a massive country – you can’t assume a change that works in one area will work in another.’

On Alison’s return to the UK, she went back into commissioning organisations, arriving in her current role – NHS England (North) regional director of specialised services commissioning – early in 2015. There, she leads a team of three operational units, with a budget of £4bn and 90 contracts.

‘It’s an opportunity to improve quality and equity by improving access for patients. At the same time, we have massive financial issues to deal with in specialised commissioning,’ she says. ‘It’s innovative work – which I like – improving the offer to the public and patients by achieving better access and better value for money in a sophisticated way. Delivering both of these motivates me.’

Many colleagues have influenced her. ‘I try to seek out people who I can learn from. Things stick in your mind – phrases or approaches to meetings. One colleague told me to go into meetings with trust rather than mistrust – the more I look back on it, the more I see how right he was.

‘People teach you things and often they don’t know they’re doing it. For me it’s usually the way they approach things rather than knowledge – how they tackle issues with personal resilience and knowledge.’

Alison says the best piece of career advice she has been given is to work outside your comfort zone. ‘When I worked in consulting in particular, I was amazed by how much you can
learn very quickly. I always tell people now that if you are going into a job and feeling comfortable it’s probably not the best job for you if you want to be stretched and to learn.’

Development opportunities tend to happen when there is something with a glaring need to be done, she says. ‘I think I have made my own opportunities. When I see something that needs improving, I get fired up and from that comes a development opportunity.’

Alison singles out three major career achievements, one of which is coming back from Canada and re-establishing herself in the NHS.

“Moving to Canada and being able to apply my knowledge is an achievement. People still contact me now about work I did”

‘It could have gone wrong. I didn’t plan anything and thought I would do some contract work, but I knew I wanted to join the service again and start contributing. It has been a hard slog and I think I’m not quite back to the level where I left.’

Not that she regrets her time in Canada. In fact, she sees it as another of the top achievements in her career. ‘Moving to Canada and being able to apply my knowledge and be successful is an achievement. People still contact me now about work I did there,’ she says.

‘In the end, my post was restructured and I didn’t have a role there. That could have been a setback, but I am proud of myself for not letting it set me back. I always try to take the positive out of things and have kept my network over there.’

A third standout career point happened during her time at Stockport PCT. ‘I worked with the doctors on a forerunner to CCGs, setting up an innovative membership structure based on a social enterprise. PCT resources were devolved to this structure. This was 10 years ago and I still see the doctors now. It was really innovative and cutting edge at the time. It went slightly against the grain.’

Patient focus
Alison has recently been involved in projects that will have a direct impact on patients’ lives – solid accountancy work on patient pathways and location of services. She has helped develop new collaborative commissioning structures across the North of England and taken a lead role nationally in developing and supporting collaborative commissioning partnerships.

She is also leading the development of a strategy and service review programme for the North and with a national group.

Having worked inside and outside the NHS, in the private sector, in commissioners and providers, in finance and general management, as well as in another healthcare system, she has a perspective that is rare. ‘Outside the NHS, it’s less about the constraints of governance; it’s all on delivery and achievements. You learn a lot about the importance of delivering to a timescale and cost to meet clients’ expectations. In contrast to that, in the NHS delivery isn’t always the number one thing – there’s also relationship management, politics with a small p and long-term collaboration.’

Alison may have moved away from day-to-day NHS finance, but she believes it is important for all managers to keep services to patients in mind, no matter how far from the front line of care. ‘You are three steps back from the service change, but you have to get that reassurance that what you are doing helps – that it’s pushing us forward rather than dancing around or outside of it. You have got to ask people, “Is this helpful?” Sometimes bright ideas do not reflect what’s needed.’

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**Employment history**

<table>
<thead>
<tr>
<th>Year</th>
<th>Position</th>
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<tbody>
<tr>
<td>1990</td>
<td>Stockport Healthcare NHST, deputy FD</td>
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<tr>
<td>1998</td>
<td>SECTA/Tribal, senior consultant</td>
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<tr>
<td>2000</td>
<td>North Stoke PCT, deputy CEO/director of finance and estates</td>
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<td>2002</td>
<td>Stockport PCT, director of finance and estates</td>
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<td>2005</td>
<td>Deputy CEO</td>
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<td>2007</td>
<td>NHS North West, exec director, health system and development</td>
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<td>2009</td>
<td>Alberta Health Services (Canada), executive VP, strategy and performance</td>
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<tr>
<td>2012</td>
<td>NHS South East London Cluster, finance director</td>
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<td>2012</td>
<td>NHS England (Cheshire), area director/ director commissioning</td>
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<tr>
<td>2015</td>
<td>NHS England (North), regional director of specialised services</td>
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<tr>
<td>From</td>
<td>NHS England (West Midlands), director of commissioning operations</td>
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</table>

**Outside interests**

Alison enjoys spending time with her family and hiking and yoga.

**Favourite film** Groundhog Day

**Favourite book** A Short History of Nearly Everything, Bill Bryson

**Favourite TV shows** Homeland, 24 and Would I Lie To You?

**Top three songs** My Aim Is True, Elvis Costello; New York, New York, Frank Sinatra; Rolling in the Deep, Adele

**Favourite food** Thai – and my husband’s wonderful lasagne

**Alternative career** Lawyer
Richard Wheeler always wanted a professional career that gave him the opportunity for further study. After completing a degree in mathematics, he embarked on a path to become an accountant in the private sector. Now director of finance at East Midlands Ambulance Service NHS Trust, he has a track record of developing services and supporting innovation.

Richard started work in 1989 at Rawlinsons Chartered Accountants, a small firm in Peterborough. His clients were mainly small to medium-sized enterprises, private companies and their subsidiaries and housing associations. ‘Despite the great training I received, which enabled me to pass my ACA exams and become an audit manager, I couldn’t see my long-term future as an accountant within a firm,’ he says.

In a competitive job market, Richard became finance manager at Isle College Further Education Corporation. The college had just transferred from being under local government control and Richard spent six years there, eventually as finance director. ‘We grew the business to about £6m turnover,’ he says. ‘The college operated in a small, rural and deprived area, so we knew it was important to the local community. Young people who had attainment below the national average when they joined were leaving with excellent qualifications.’

There were lots of challenges along the way, which gave Richard good problem-solving experience. They also helped him move to his next role as East of England Regional Development Agency’s head of finance. The agency had a track record for embracing technology and its financial system was doing a lot more than Richard had seen happening in other organisations.

‘There was a lot of money available at the time for the right projects and we were involved in many different activities,’ says Richard. ‘For example, we managed land and property and supported education services, creating a regional identity working with the tourist board.’

He sees another success during his time with the agency as renegotiating a change to a VAT methodology that resulted in a £1m repayment.

The agency had a track record for embracing technology and its financial system was doing a lot more than Richard had seen happening in other organisations.

‘Budget holders had access to financial information that was run in real time and operational managers were able to make updates directly in the system,’ he explains. ‘This use of technology gave us the platform to have confidence in the financial decisions we were making and the projects we invested in.’

When the organisation restructured, the finance director moved on and Richard covered the role for six months before looking for his next opportunity. Richard was attracted to the NHS by the diverse range of organisations and services it provides. He also had a desire to improve business practices and put the NHS onto a better financial footing.

He became head of finance at Leicester, Northamptonshire and Rutland Strategic Health Authority (SHA), where he gained a good understanding of the NHS and developed an overview of what was going on in the area.

FD ambitions

He used this role to start the transition to becoming a director of finance. ‘At the time, there were a lot of mergers and changes to the structure in the NHS, which reduced the number of job opportunities available to me,’ he says. ‘Also, adverts seemed to require 20 years’ NHS finance experience. I knew my skills were transferable and arranged for an existing director of finance to be my mentor.’

Richard’s work at the SHA strayed into education, where he was involved in medical, nurse and undergraduate education and training. ‘We worked with universities, university hospital trusts and education confederations [similar to today’s local education training boards] to establish undergraduate programmes,’ says Richard.

‘Our university partner described us as leading the country in what we were setting up. There had been little work in joining up finance and outcomes before.’

In 2006, Richard moved to East Midlands SHA as deputy director of finance. He describes it as transitioning people and bringing two former organisations together into new business premises. The
organisation experienced a period of instability but Richard was able to focus on the opportunity for change. He recalls outsourcing of a number of services to NHS Shared Business Services (SBS). ‘We were the very first in the East Midlands to do so,’ he says. ‘We streamlined support services and it was a big success. This achieved 30% cost savings.

‘From there, we had an opportunity to work across organisations for bigger economies of scale and we supported others to do so as well. This led to nine out of the 10 PCTs in the area transferring services to SBS, as well as a number of trusts.’

Part of Richard’s time at East Midlands SHA was spent on secondment to United Lincolnshire Hospitals NHS Trust, as director of finance. ‘It was a great opportunity to work in a provider organisation,’ he says. ‘I had a good knowledge of the sector from my time at the SHA and this role gave me an opportunity to apply my experience differently and improve the business activities of a provider.’

In his next role, at Oxford University Hospitals NHS Trust, Richard was named HFMA Deputy Director of Finance of the Year 2012, partly in recognition of completing the 2012/13 merger accounts of Oxford Radcliffe and Nuffield Orthopaedic Centre.

This was the only trust merger in that year – a complex year with technical accounting changes taking place alongside the merger. The changes complicated the production of the accounts, but they were successfully delivered on time.

Richard remembers considering carefully whether a director of finance role was right for him. ‘It is something I’d always wanted to do,’ he says. ‘When the time came, I had coaching around my skills and abilities to see whether it was important to me and something I was still interested in. I’ve worked with really good finance directors and have a good personal network to take advice from.’

Richard made the transition to director of finance and sees the mentoring support he had from a successful chief executive as key.

He has seen an interesting change in his working pattern since 2014, when he became director of finance at East Midlands Ambulance Service NHS Trust. ‘I have responsibility for finance, procurement, logistics and estates,’ he says.

‘Ambulance service staff are on the road most of the time and it can be a challenge to catch up with people. I prefer to speak to colleagues rather than wade through emails, so when I can I get out of the office, including riding out with ambulance crews and visiting our different premises to keep in touch with life at the sharp end.

‘My office time is spread across the day-to-day financial operations and catching up with projects with the team, maintaining relationships with auditors and regulators and working with my executive colleagues.’

Looking back, Richard says: ‘I have seen my level of experience increase and I have a much greater awareness of what to focus on, how to measure the real impact of things and whether they really are a big issue.

‘There is a lot of excellent support and advice for finance staff working in the NHS – Future-Focused Finance aims to build a platform and develop the role of the finance team. It’s good to have this support network across multiple organisations. Building up contacts is a great way to know who to talk to and get advice on how to approach aspects of our work – there is a terminology, structure and culture to the NHS that can take time to learn when you first join.’

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**Curriculum Vitae**

**Employment history**

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<thead>
<tr>
<th>Year</th>
<th>Position</th>
<th>Organisation</th>
</tr>
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<tbody>
<tr>
<td>1989</td>
<td>Trainee Audit Manager</td>
<td>Rawlinsons Chartered Accountants</td>
</tr>
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<td>1993</td>
<td>Finance Manager</td>
<td>Isle College Further Education Corporation</td>
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<tr>
<td>1999</td>
<td>Deputy Director of Finance</td>
<td>East of England Regional Development Agency</td>
</tr>
<tr>
<td>2005</td>
<td>Head of Finance</td>
<td>Leicester, Northamptonshire and Rutland SHA</td>
</tr>
<tr>
<td>2006</td>
<td>Deputy Director of Finance</td>
<td>East Midlands SHA/ Midlands and East SHA Cluster</td>
</tr>
<tr>
<td>2011</td>
<td>Head of Finance</td>
<td>East Midlands Ambulance Service NHS Trust</td>
</tr>
<tr>
<td>2012</td>
<td>Director of Finance</td>
<td>Oxford University Hospitals NHS Trust</td>
</tr>
<tr>
<td>2014</td>
<td>Director of Finance</td>
<td>East Midlands Ambulance Service NHS Trust</td>
</tr>
</tbody>
</table>

**Outside interests**

Outside work, Richard spends time with his family. A keen cyclist, he enjoys the Tour de France and mountain biking with his son.

**Favourite film** A fistful Of Dollars

**Favourite book** Anything by James Patterson

**Favourite TV shows** Football on BT Sport and Suits

**Top three records** Closer, Joy Division; Under The Iron Sea, Keane; Diamond Life, Sade

**Favourite food** Fish and chips
A career in management and finance always interested Robert White. And it quickly became clear that healthcare was where he was to pursue it. However, having grown up in the Canadian province of Saskatchewan, it wasn’t initially obvious he would spend the vast majority of his career in the NHS.

Being the offspring of a finance director and a matron may have had an influence on his choice of career, but Robert declared his healthcare ambitions at the University in Saskatoon, one of the province’s two major cities. He chose a healthcare administration major for the last two years of his bachelor of commerce degree. He even set up, and became president of, the business school’s healthcare administration society.

His first job saw him become general manager of a continuing care organisation, which involved ‘doing everything but the healthcare’. He feels lucky to have had early experience of working closely with clinical staff, residents and relatives and, more widely, with the department of health and trade bodies.

‘Everything’ also included preparing the year-end accounts, a task made easier after he installed an integrated accounting system to replace the paper-based ‘books’. It was during this role he started studying towards his certified management accountant qualification, which he finished in the UK – proving his dedication with flights home for exam preparation weekends! The recent unification of the three main accountancy bodies in Canada has created a new chartered professional accountant designation, so he is getting used to being ‘R White, CPA, CMA’.

With ties to the UK, an opportunity to relocate overseas arose. Robert found healthcare roles, initially in Wimbledon and then central London as financial controller of a private hospital offering general and specialist services.

It was here he became aware of the growing opportunities in the NHS’s emerging internal market. He took advantage of these in 1992, joining Southmead Health Services NHS Trust in Bristol as senior finance manager. Part of the attraction was the potential to further his career – even at this point, he had his sights set on a finance director role. ‘I could see a significant career progression opportunity in the NHS,’ he says.

He admits it took a while to settle into the service, with its unique language and, most significantly, its high degree of central direction – something he hadn’t experienced in the independent sector. He remembers a number of accountants were making the switch from the private sector to the NHS at the time and that not all of them could adjust. Robert was advised to get as much experience as possible of all parts of the service. He has taken this to heart, working over the years in mental health, learning disability services, regional rehabilitation, general acute, teaching hospitals and supporting commissioning and primary care at a health authority level.

For 10 years he was on the board of Midtech Innovations, the intellectual property hub for the NHS in the West Midlands, and spent a similar amount of time on the HFMA’s national Financial Management and Research Committee. He also found time to complete a masters degree in accounting and finance.

Robert says he has learnt from some influential leaders. Stephen Day (former HFMA chairman) and Steve Webster (former HFMA finance director of the year) were both in Bristol when he started (and on his interview panel). He later worked with Mark Britnell and Peter Shanahan at University Hospital Birmingham. And he also singles out John Adler, his chief executive at Sandwell and West Birmingham Hospitals NHS Trust.

Having seen leaders successfully distinguish between the issues and programmes that require their direct input and those that can be delegated, Robert has attempted to put this into practice himself.

From Bristol, Robert moved to Barnet Healthcare NHS Trust as deputy finance director for three years before taking the same role in Solihull Health Authority, moving up to acting finance director.

Scaling up

In 2000, he joined major teaching hospital University Hospitals Birmingham NHS Trust (UHB) as head of financial management and planning. He became finance director in 2003, leading on finance, contracting and procurement.

This was a big shift in organisation size. At close to £400m turnover (at
the time), UHB was one of the biggest
trusts in the country and was in the
first cohort of teaching hospitals to
be given foundation status. Robert
was heavily involved in the trust’s FT
application, with authorisation in July
2004. The new status brought new
challenges for NHS finance managers
– a payment system in the form of
payment by results, new flexibilities
and regulatory requirements. But the
trust was also in the throes of working
up a major capital project, financed
under the private finance initiative, to
build a hospital that would open as
the new Queen Elizabeth Hospital in
2010.

In 2005, staying in the West
Midlands, Robert moved to
the £435m Sandwell and West
Birmingham Hospitals NHS Trust as
director of finance and performance
management, where he was to
stay for more than eight years – a
result of being part of a ‘well-led
stable senior management team
with a shared objective to modernise
healthcare services in the area’.

His experience of the UHB PFI
project was to stand him in good
stead – Sandwell had already started
on a journey towards its own new
hospital, the Midland Metropolitan
Hospital, replacing two district general
hospitals. After a strategic business
case assessment in 2006, there were
significant revisions and then a pause
while the PFI process itself was
subject to national review.

The scheme came out of this as a
pilot for the new PF2 funding scheme
and was approved to proceed by the
NHS Trust Development Authority
and Department of Health in 2014.
The trust is working towards an
opening in about four years.

Robert believes the part he and his
team played in the improvement of
the trust’s efficiency and elimination
of its financial deficit was his most
notable work-related achievement.

The trust’s £5.7m deficit in 2005/06,
his first year, was to be its last in
his stay at Sandwell and all support
loans were repaid. ‘We had some
external assistance to identify the
problem areas and were told we were
inefficient everywhere. The upside
was that it became everyone’s issue
to resolve,’ he says.

In 2014, the attraction of working
in a national capacity drew him
to the NAO, but he could also
see that the work would sustain a
connection to health and social care
services as well as with NHS finance
professionals.

He believes the NAO has a major
part to play to support the NHS in
meeting its challenges through the
influence and authority drawn from
its independence. He points to its
autumn 2014 reports on Public Health
England’s grant to local authorities
and the financial sustainability of NHS
bodies as important early outcomes
in his new role. ‘It is a privilege to
work for this organisation and I fully
appreciate the responsibility to uphold
its high standards.’

Robert insists that continuous
development is vital for NHS
accountants. He says he can still
remember key moments, such as
being urged to realise his potential,
along with other delegates, at the
HFMA Fincare campus in 1993 by
then NHS Executive finance director
Gordon Greenshields. He also
says being asked to lead projects
outside his area of expertise created
opportunities to learn new skills.

Over his career, he has become
convinced that meeting service and
financial challenges is best done
collaboratively across whole health
systems – and this is where financial
staff have an opportunity to make a
real difference to patient care.

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**Robert believes being asked to lead projects outside his area of expertise created opportunities to learn new skills**

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**Employment history**

**Qualifications** Chartered Professional Accountant (Canada)

1989 Churchill Clinic, financial controller

1992 Southmead Health Services NHST, senior finance manager

1994 Barnet Healthcare NHST, deputy director of finance

1997 Solihull HA, deputy director of finance – acting finance director

2000 University Hospitals Birmingham NHS FT, head of financial management and planning; director of finance

2005 Sandwell and West Birmingham Hospitals NHST, director of finance and performance management

2014 National Audit Office, director, health

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**Outside interests**

A keen cyclist, on and off road, Robert competes in the occasional sprint triathlon. He plays tennis – his double-handed backhand is a work in progress. ‘It’s an age thing’ he says. He supports a local Scouts group as treasurer, despite his boys having long since left.

**Favourite book** The Last Crossing, Guy Vanderhaeghe

**Favourite TV programme** The Thick of It

**Favourite meal** Pasta puttanesca

**Alternative career choice** Brewing real ale
Manufacturing a career change

The finance profession was always on the cards for Kate Whiting. A career advisory questionnaire at school identified accountancy as the profession for her, based on her aptitude for mathematics and desire to earn a good salary. This led to her studying accountancy and finance at university, and six months before she graduated she started to think seriously about what to do next.

She researched the prospect of working for one of the large audit firms but decided industry was the way to go. It was at this point she first considered the NHS. ‘I could see the real benefits of being an accountant in the NHS and being part of an organisation that had an impact on people’s lives, but at the time the NHS training scheme professional body of choice was CIPFA. At that stage, the risk of limiting my career choices to the public sector was too big,’ she explains.

Straight after graduating, Kate began to work for ICL, which was later acquired by Fujitsu Services. ICL was a large British computer company that manufactured hardware, developed software and provided professional services to a wide range of clients. As a graduate trainee, she spent six months in a variety of finance roles. As Kate recalls ‘while the ICL training scheme was a great grounding, the perks were nowhere near those of the NHS scheme. All the studying happened at weekends and I only had time off to take the exams.’

By 2002, ICL’s turnover was £1bn and it employed more than 20,000 people. Kate began to feel like a very small cog in a big wheel and was getting little job satisfaction. ‘Our purpose was clear, but there was very little passion from the staff. People just saw jobs as jobs and I didn’t want to become like that myself,’ she says.

Attracted by the idea of working for a smaller company, in 2002 Kate joined the Adelphi Group – a medical communications agency whose primary role is to support pharmaceutical companies with market research and bringing new drugs to market. ‘There were only 600 employees and at the time it felt like my career moved from one extreme to the other. What really attracted me was the opportunity to have a much broader role to expand my skills,’ she says.

As well as being responsible for the traditional aspects of managing accounts, Kate also led on negotiation of client contracts. ‘It was great experience. We didn’t have a legal team, so I dealt with any contractual issues, including drafting contracts, negotiating with clients, agreeing confidentiality and non-competition clauses.

‘It was the first time I’d done something other than pure accounting and I loved it!’ she remembers.

After six years, Kate started to think about making a move. ‘Working at Adelphi was a fantastic experience and I could have stayed there for ever, but I felt I needed a new challenge,’ she says. So when Kate received an email from CIMA about job opportunities in the NHS, she thought seriously again about working in healthcare.

She saw an advert for a divisional accountant at Salford Royal NHS Foundation Trust and applied straight away. She was attracted by working in the public sector and fulfilling her passion to make a difference.

New chance to flourish
The culture at Salford enabled Kate to flourish. ‘The flat structure meant that there were always new opportunities for the finance team. If there was a project going on, people were encouraged to put their hands up and get involved. The divisional accountants were involved in key developments as well as monthly management accounts’ she says.

A highlight for Kate was leading the financial work on the creation of Salford’s urgent and emergency care village. ‘Working with clinicians, managers and commissioners to set up the village was a privilege and seeing it up and running was a real thrill,’ she says.

In 2011, the FT took over responsibility for providing community services in Salford, which increased the size of Kate’s portfolio. It also coincided with Kate having her daughter and taking maternity leave. On her return, there was some restructuring within the team, which meant that Kate’s old job no longer existed and she was given a different role – senior business accountant, projects and corporate.

It was a promotion that Kate did not want at that time. ‘I felt that I would be one step removed from
the divisions, and working with them was what I really enjoyed. But it was presented to me as a development opportunity and the finance director was very persuasive. He wanted someone in the post who knew the organisation well and had a good reputation for working with clinical colleagues. Looking back, it was the best thing that could have happened.

As part of her role, Kate led large trust-wide projects, such as the costing work that fed into the HFMA’s report on seven-day services.

Kate credits Tony Whitfield, the former finance director at Salford, for influencing her career and how she approaches her work. ‘Tony made it clear what he expected from his finance team and what our purpose was. He led by example and always put patients first. He encouraged us to deliver financial viability through engagement with clinicians to do the best for patients and get most value from our money’ she says.

Spurred on by Tony and keen to get closer to the action, Kate applied for a general management post with responsibility for Salford’s acute medical specialties. ‘I wanted to explore whether I should take my career in a different direction. I was offered the post on a one-year secondment basis. It was a risk, but there was comfort in knowing that if I didn’t like it I could go back to finance’ she says.

For Kate working in general management was a real eye-opener. ‘I can’t explain how hard it was’ she says. ‘It was absolutely relentless, especially when you add the on-call commitments into it. The responsibility weighed heavily on my shoulders and sometimes I felt I couldn’t leave until patients were safe. I found myself working longer and longer hours, which is difficult with a young family. I rarely felt like I could switch off.’

There were positives. Kate earned the respect of her clinical colleagues for trying something outside her comfort zone and it gave her exposure to the pressures her colleagues were facing. ‘I thought we worked hard in finance, and we do, but it is very different in general management,’ she says. ‘Finance has its peaks and troughs but generally speaking we know that when we go home we can switch off’.

Kate completed the secondment and while she was glad she’d done it, she was keen to move back to finance, but not to forget about her operational experience.

The role of finance director, specialist medicine at Central Manchester NHS Foundation Trust ticked the boxes. ‘I was sad to leave Salford, but I needed to experience what the rest of the NHS was like and get a different perspective. The role is finance but based within the division, so is a perfect balance for me,’ she says. Her role is in the specialist medicine division and she reports in to the director of financial strategy but with a dotted line into the division.

She has relished the challenge of working at Central Manchester. ‘The trust is over twice the size of Salford and is an amalgamation of several hospitals. The budget for my division alone is more than £150m. Getting to understand how things work has been a challenge – eight months after joining, I am getting there’ she says.

Central Manchester too is benefiting from Kate’s experience. As she explains: ‘I now know I am asking the right questions. I can see where the problems are likely to arise and can suggest ways to overcome them. I’d recommend spending time in an operational role, it really does make you a better accountant’.

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“I was sad to leave Salford, but I needed to experience what the rest of the NHS was like and get a different perspective”

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Employment history

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<thead>
<tr>
<th>Year</th>
<th>Role/Location</th>
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<tbody>
<tr>
<td>2000</td>
<td>ICL, finance graduate trainee</td>
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<tr>
<td>2002</td>
<td>Adelphi Group, project/commercial accountant</td>
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<td>2008</td>
<td>Salford Royal NHS FT, business accountant</td>
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<tr>
<td>2012</td>
<td>Senior business accountant</td>
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<tr>
<td>2013</td>
<td>Senior manager – acute medicine</td>
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<tr>
<td>2014</td>
<td>Central Manchester NHS FT, finance director – specialist medicine</td>
</tr>
</tbody>
</table>

Outside interests

Being a mother to a nearly four-year-old daughter with a full-time job doesn’t leave much time for hobbies. Kate keeps fit by chasing round after her daughter and running when she can. She has also just moved house and is getting more involved in village life.

Favourite book *We Need to Talk About Kevin*, Lionel Shriver

Favourite film *Dirty Dancing*

Favourite TV shows *Strictly Come Dancing, Location, Location, Location, and Masterchef*

Top three songs *Greatest Day, Take That, Sit Down, James; Ain’t Nobody, Rufus and Chaka Khan*

Favourite food Moules-frites

Alternative career choice ‘I’d love to have my own wedding dress shop’ I’d sell shoes too’
Finding the right chemistry

With a degree in chemical engineering, Paul Williams is well equipped to grasp technical detail both in the scientific field and in his chosen career, accountancy. But as well as developing his analytical skills, chemical engineering also gave him an aptitude for redesigning and streamlining processes.

That’s not been lost on those interviewing him for jobs over the years and it has led him to roles that have developed these skills.

At school he enjoyed science and maths – learning how to solve problems and understand how things work. He was encouraged to turn his interests into a ‘real world’ job, but he also wanted a vocation with travel prospects. ‘My parents were in the diplomatic service and I lived in India and Barbados, so I was seeking a job that offered the chance to travel.’

But, while he relished the practical aspects of chemical engineering, he admits he ‘did not quite enjoy it enough’. He knew he wanted to work in the public sector, so Paul decided to do a business management course (European business management at Manchester Business School).

He then applied to and was accepted into the local government and CIPFA-supported graduate finance scheme, Finance the Future, and he trained at the London Borough of Havering.

‘It struck a chord with me,’ he says. ‘They wanted people to help change the agenda across the public sector and in local government in particular. They were looking for people who wanted to change services in a positive way to achieve value for money. Having done the business course, and with my experience designing and improving processes, I went to the assessment centre and enjoyed the dynamic with the other people. I thought it really represented the values of the public sector. I was delighted to be successful.

‘On my first day in finance I didn’t know what a debtor or creditor was. My colleagues were key in supporting my development alongside my professional studies.’

He worked predominantly in adult and children’s services – challenging areas with high demand and tight budgets, so greater risk of overspending. Havering was seen in funding allocations as a relatively affluent London borough, so grant money was constrained. He quickly gathered skills in assessing and practically implementing savings initiatives.

‘It was good experience. The risk of overspending meant the focus was on delivering value and almost always within existing resources. I worked with some excellent service managers who could relate to financial considerations, even if they didn’t always adhere to them.’

His process redesign skills shone through and he was heavily involved in leading the operational finance team’s implementation of new ways of working. ‘It included stripping out the transactional elements of the work we were doing,’ says Paul. ‘It was where I got my interest in working in the management of a finance team to improve the team itself, focusing on systems and processes.’

He spent six years at Havering before moving into health, at Great Ormond Street Hospital NHS Foundation Trust. He says this was another natural step. ‘There are lots of transferrable skills, although health has a lot of specific practices I had to learn,’ says Paul. ‘At the time I got the role, my colleagues were saying it was difficult to make a move into health, so I was grateful for the opportunity. For a number of years, I had worked with pooled budgets and partnerships across social, health and third sectors.’

Joining the HFMA

He subscribed to the HFMA, and its publications and events helped get him up to speed quickly. ‘It was good to see patient-level costing being talked about and used, as well as service line reporting,’ he says. ‘This is something we’d tried to do in the local authority in terms of segmental reporting and unit cost of service. But it did seem to be more widely regarded as a good thing in the NHS.’

Having spent time looking at the impact of schools becoming academies, he had experience of costing for a couple of years before he moved to health.

While at Great Ormond Street, Paul worked closely with clinicians and general managers. ‘Some of that was about recognising that not every service is going to be the same. In addition to ensuring sustainable and viable services, the role was supporting innovation in treatments...
and the way hospital services were delivered. I worked with a very good team and we had a wide range of experiences, not all health, which complemented each other,’ he says.

After almost two years, he moved on. ‘I wanted to go to Deloitte to see if there was a better way of doing things,’ he says. ‘I enjoyed it. There was a broader range of problems at different public sector clients and a more standardised approach to reaching a solution.

‘The private sector does things differently. In the value for money work I did at Deloitte, I learned that if there is a barrier to progress, it is recognised and addressed more quickly using an established framework to assess the what, why and how.’

Paul says the best piece of career advice he has received is to keep developing yourself and be patient. ‘When the right job comes along you have to be ready to take it,’ he says. ‘You could go and find it for yourself, but don’t stress yourself out by swimming against the current.’

He sees one of his greatest achievements as returning to lead the team where he first trained three years earlier. ‘Before I went back, I thought about how I would be perceived – maybe people there had wanted the role themselves or had been there a long time.

‘It was a really great opportunity and although the relationship changed with my colleagues, they were instrumental in developing my approach to management.’

Would he do anything differently? ‘I’d take more time and enjoy things more,’ he replies. ‘I have been quite determined in terms of working hard and trying to get as much experience as I can.’ He admits this has affected his work-life balance at times. ‘I am exceptionally grateful to my family, particularly my wife, who are also in the process of renovating their house.

‘The private sector does things differently. In the value for money work I did at Deloitte, I learned that if there is a barrier to progress, it is recognised and addressed more quickly using an established framework to assess the what, why and how.’

He also spent time producing information to be used by finance teams to support their work, including an analysis of the impact of an acute trust estate reconfiguration as part of an integrated business plan.

This attracted him to the HFMA research manager post. Speaking just over a week into the job, he says: ‘My career focus now is on softer skills – EQ-type development for myself and the people around me to support the technical learning I traditionally follow. I’ve known the HFMA for years and am proud to be working here.

‘I have always chosen to work in tougher areas to challenge myself … so I was progressing.’

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<tr>
<th>Year</th>
<th>Role</th>
<th>Organisation</th>
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<tr>
<td>2006</td>
<td>London Borough of Havering, including three years’ training with Society of London Treasurers’ graduate finance scheme</td>
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<tr>
<td>2012</td>
<td>Great Ormond Street Hospital NHS FT, finance manager and then senior finance manager</td>
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<tr>
<td>2014</td>
<td>Deloitte, manager – finance operations and support, audit advisory</td>
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<tr>
<td>2015</td>
<td>HFMA, research manager</td>
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Outside interests
As well as playing golf when he can, Paul and his wife spend their free weekends and holidays travelling around the country in their beloved Volkswagen camper van. They are also in the process of renovating their house.

Favourite film Enemy of the State
Favourite book The Shepherd, Frederick Forsyth
Favourite TV show Scrubs
Top three songs Title and Registration, Death Cab for Cutie; Multi-Love, Unknown Mortal Orchestra; Lampshades on Fire, Modest Mouse
Favourite food South Indian
Favourite website Google
Finding the right work-life balance

Janet Wood is working hard on behalf of patients, not currently as an NHS accountant but as a non-executive director and audit committee chair.

She came into the role at South Essex Partnership NHS Trust in 2005, bringing a wealth of NHS and private sector experience. The trust was bidding for foundation status at the time and, while it had refreshed its non-executive team, it had not found a non-exec with an accountancy background.

In 2006, the trust became one of the first mental health and learning disability foundation trusts.

Asked whether it is difficult to be a former NHS accountant whose job is to hold her executive colleagues to account, she replies: ‘Having been on the other side, I take the supportive route, but when I get worried about something, I will give them a hard time. But they know it’s because I’m worried that I’m giving them a hard time.’

However, she adds: ‘We have been incredibly lucky – we’ve never been in deficit and we’ve met all our financial targets.’

That’s not to say she does not believe improvements could be made. ‘In the early years, the buildings were not really fit for purpose. One of the things I have been really proud of is helping drive through investment on new buildings.’

This includes a Procure21 scheme and private finance initiatives, which have delivered a new hospital and secure unit.

Janet was also keen to link quality and financial strategies, introducing quality impact assessments before they were introduced nationally.

‘We came up with the concept of widening the remit of the audit committee,’ she says. ‘We don’t just talk about financial systems and risk management. We also look at clinical systems, how to improve, adopt best practice and do things better for patients.’

Under Janet’s leadership, the committee looks at compliance with mental health legislation and also commissions work from its internal auditors, the board and clinicians to give it assurance.

‘It’s about always trying to put the patient at the forefront of the conversation. Potentially there are too many conversations where the patient does not come into it, but we try very hard to come back to the patient. I or another non-executive director or the finance director will be saying, “But what about the patients?”’

Janet started in accountancy when she was at school. ‘It was probably a bit more like bookkeeping but I found it very easy. At the time I was thinking about hotel management, but I went for accountancy,’ she says.

‘At that time, to go to the Institute [of Chartered Accountants of Scotland], you had to have a relevant degree. I wanted to do history and English literature, but instead took business and accountancy.’

After graduating, she took a job with Deloitte in Edinburgh, which she describes as ‘a great three or four years’. She was involved in the audit of large companies, insolvency, value for money and accounts preparation, working with a variety of clients, including small businesses, pension funds, district councils and banks. ‘It was a good grounding for running a finance department,’ she says.

Chartered path
She passed her Institute exams first time. ‘I decided to become a chartered accountant as I thought then the world’s your oyster – it’s a good qualification and you can go where you want.’

She decided to move to London and the first job she got was in the NHS – at Redbridge Health Directly Managed Unit. She admits this wasn’t by design.

For someone coming into the NHS as a qualified accountant with experience of the private and voluntary sectors, as well as other parts of the public sector, this was a frustrating experience at first.

‘Some of the people I worked for were working towards qualification and they didn’t, to my mind, understand how to keep accounts or prepare business cases. The unit was trying to become a trust and it was struggling without project management skills,’ she says.

But it improved. A finance director was recruited from KPMG in the first year she was there. Nevertheless, she decided to move on, becoming chief accountant at South Essex Health Authority.

‘The team was great,’ she recalls. ‘I had a straight line to the finance director and the staff were excellent.'
It was also only 10 minutes walk from my home."

It was a friendly workplace, with less than 100 staff, and she made friends in and out of the finance team. ‘When the authority took on the family health services authority, I was lucky enough to be promoted to become a locality finance manager, taking on budget-setting for GP fundholders and contract negotiation with the acute. I was starting to move to the front office.’

Was this a natural career progression? ‘There is pressure to take that step, but some people are better at the technical stuff. I think if you are happier being chief accountant, be one.’

As national health policy evolved

her role became one of primary care group finance manager. But in 1999 she took a career break. ‘I broke the mould after my first child. Potentially I was moving towards becoming a primary care trust finance director, but it’s difficult to ensure you are caring for your child in those sorts of jobs, as you can’t just walk away. I didn’t want to pay someone to bring my children up for me.’

An opportunity came out of the blue in 2000, however, when she was offered a job as HFMA committee secretary. This fitted well with her family commitments, as the job only took up two and a half days a month.

As well as supporting the association’s three standing technical committees – corporate governance and audit; financial management and reporting; and accounting and standards – she also worked on the HFMA events and publications, including the *Introductory guide to NHS finance*, the *Audit committee handbook* and preparing a monthly email bulletin for HFMA members.

**Key influences**

Janet says there are two main influences on her career. The first was a teacher during her first year in accountancy who was able to bring the subject to life. She is still in touch with her.

The second was a chief executive of the health authority. ‘It struck me that he never took credit for something that someone else did. If it was a paper to the board, for example, he always let them present it themselves. In too many organisations, a director will present a paper when someone else has done all the work.’

She is grateful for the development opportunities she has been offered. ‘At the health authority, the director of finance was keen to encourage us to get involved in the HFMA. I went to the HFMA spring school a couple of times, which were great development opportunities.

‘In my current role, I go to a lot of NHS Providers events and I did a course for aspirant chairs two or three years ago. However, the one thing that showed me was that I don’t want to be a chair. It’s higher profile and it would have a lot more impact on my work-life balance. But if I had to cover, I’d be happy to do it.’

Janet is in her third term as a chief financial officer, and is happy to do it.”

**Employment history**

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<tr>
<th>Year</th>
<th>Position</th>
<th>Organisation</th>
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<tbody>
<tr>
<td>1998</td>
<td>Deloitte (Edinburgh)</td>
<td>NHS FT, non-executive director</td>
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<tr>
<td>1992</td>
<td>Redbridge Health Directly Managed Unit, special projects accountant and capital accountant</td>
<td>NHS FT, non-executive director</td>
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<td>1993</td>
<td>South Essex Health Authority, chief accountant</td>
<td>NHS FT, non-executive director</td>
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<td>1993</td>
<td>Locality finance manager</td>
<td>NHS FT, non-executive director</td>
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<td>1996</td>
<td>Primary care group, finance manager</td>
<td>NHS FT, non-executive director</td>
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<td>1999</td>
<td>Career break</td>
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</tr>
<tr>
<td>2000</td>
<td>HFMA, committee secretary</td>
<td>NHS FT, non-executive director</td>
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<tr>
<td>2005</td>
<td>South Essex Partnership University NHS FT, non-executive director</td>
<td>NHS FT, non-executive director</td>
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</table>

**Outside interests**

Outside work, Janet is very involved in her children’s schools – she set up and chaired the primary school PTA and is currently a director of their secondary school, sitting on the finance committee.

**Favourite film** *The American President, Moonstruck*

**Favourite book** Crime thrillers by Karin Slaughter, Linda Fairstein and Marc Giminez

**Favourite TV shows** *CSI, NCIS, Masterchef and Modern Family*

**Top three songs** *The Winner Takes it All, Abba; Stars from Les Misérables, Anthem from Chess*

**Favourite food** Mexican

**Favourite websites** Amazon, BBC News

**Alternative career** Singing on the West End stage
Next steps

If you are interested in a future working in NHS finance, please contact Future-Focused Finance for further information at futurefocusedfinance@nhs.net

Acknowledgements

The authors of this briefing were:
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@ Future-Focused Finance and the Healthcare Financial Management Association, 2015
About Future-Focused Finance

In February 2014, the six heads of the finance profession in the NHS came together to form the Finance Leadership Council and to initiate Future-Focused Finance.

Future-Focused Finance is about ‘Making People Count’ by ensuring that everyone connected with NHS finance has access to the relevant skills, methods and opportunities to influence decision making in support of the provision of high-quality patient services. It offers a vision for NHS finance to aspire to over the next five years. That includes everyone who works in finance, in every role at every level, those we work with to deliver services and the patients and communities that use and support those services.

Any enquiries should be sent to futurefocusedfinance@nhs.net or info@hfma.org.uk or posted to the address below.

About the HFMA

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

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

HFMA
1 Temple Way
Bristol BS2 0BU
T 0117 929 4789
F 0117 929 4844
E info@hfma.org.uk
www.hfma.org.uk www.futurefocusedfinance.nhs.uk