



# TOWARDS EXCELLENCE FINANCE ACCREDITATION STANDARDS

NATIONAL PROCESS AND GUIDANCE  
UPDATED SEPTEMBER 2022



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# INTRODUCTION

This document outlines the latest standards for the Towards Excellence Accreditation process which have been reviewed and updated by One NHS Finance (ONF) in partnership the North West Skills Development Network and subsequently approved at the January 2022 NHS Finance Leadership Council (FLC) meeting. This document outlines each stage of the application process at each level, hints and tips for your application and how assessments should be conducted.

# BACKGROUND

The One NHS Finance Towards Excellence Accreditation process is designed to allow the Finance Leadership Council to give due recognition to organisations that have the very best finance skills development culture and practices in place. There are three levels, each designed to reflect the continuous development of your finance function and recognising the highest standards of financial competence and commitment to skills development.

The process is reviewed on a regular basis to ensure it remains fit for purpose. The standards outlined in the document are updated annually for approval in January.

# OVERVIEW

## LEVEL 1

**Good Practice:** Organisations must demonstrate that they are meeting basic levels of good finance staff development practice as described in both national and local strategies and action plans.

Level 1 accreditation applications are self-assessed. Once the required evidence has been collected, sign off from the FD/CFO is needed to confirm that they agree with the assessment.

## LEVEL 2

**High Level of Performance:** The emphasis at this level is on sustained performance. Organisations must demonstrate an overall culture that is innovative and consistently supportive of the development of the finance capability throughout the organisation.

Moving from Level 1 to Level 2 – it is recommended that newly accredited organisations allow a 12 month ‘grow’ period before applying for Level 2, thus allowing a sufficient timeframe for systems and processes to be fully embedded.

Accreditation applications at Level 2 and 3 must be peer reviewed. This process provides an additional level of assurance over and above a self-assessment process. Peer reviewers will be referred to in this document as assessors.

## LEVEL 3

This level will enable demonstration of a **leading-edge NHS finance function** that has an influence on the NHS finance system outside organisational boundaries. Organisations must demonstrate an overall culture that is innovative and consistently supportive of the development of the wider improvement of the NHS finance system and beyond.

Achievement of Level 3 would require access through Level 2, thus showing a significant growth over a further period of at least 2 years. Organisations who have been re-accredited at Level 2 may be able to apply for Level 3

within a shorter timeframe, the timescales of which would be determined by the appointed assessors in conjunction with the ONF team.

All organisations being assessed for Level 3 will need to exhibit evidence against all criteria required for Levels 1 and 2.

## OBJECTIVES

To confirm good finance skills development practice is established and maintained in all NHS organisations across England.

To encourage continuous development of the organisational financial competence through increasingly higher standards of skills development within the finance function, thus enabling organisations to meet the challenges of the changing agenda.

To celebrate the success of organisations who take skills development seriously and so are able to identify continuous improvement of the capability and financial competence of both the finance function and the organisation, as a whole.

## BENEFITS

Creates a development culture, underpinned by a competence-based approach.

Helps promote an environment of professionalism, initiative, enterprise, and innovation.

Excellent tool for sharing good practice across all organisations.

Quality-led approach to service delivery and maintenance of finance quality standards.

Provides workforce with transferrable skills.

Provides a support network amongst finance professionals.

Supports the finance competence within the wider organisation through training and working in partnership with others (including clinicians).

Offers public acknowledgement that the Finance Director/Chief Finance Officer is developing the finance team and finance competence of the wider organisation, in a planned and effective manner, giving reassurance that the professional and technical capability of the function is high quality.

Raises the organisation's profile nationally through One NHS Finance.

## ROLES AND RESPONSIBILITIES

### ROLE OF THE ORGANISATION

The organisation is expected to complete the proformas accurately and to collate evidence for level 2 and 3 in an organised way, ready to hand over to their assessor.

You will be required to organise meetings for your assessment and to respond in a timely manner, should there be any queries about your submission.

### ROLE OF ASSESSOR

Accredited organisations will be expected to nominate a member of their finance team to become an assessor. This is mandatory for Level 3 organisations.

The role of the assessor is pivotal to the accreditation process. It is essential that assessors work in strategic roles where they understand the breadth of finance. Assessors will possess excellent leadership skills, being prepared to tackle differences in evidence between staff and the leadership team. They will be able to effectively communicate their findings and be consistent in applying the evidence. They must be prepared to meet with fellow assessors to share best practice and provide peer support and to ensure that the scheme is owned by the finance profession.

The assessor will be expected to produce the final assessment report and provide feedback to the organisation and the Finance Leadership Council. For continuity and where feasible, the assessor's will have been involved in the respective organisation's previous assessment.

## **OBSERVERS**

Finance colleagues who have not yet conducted an assessment who are keen to support the accreditation process should shadow an assessor conducting an assessment before undertaking one themselves.

When shadowing an assessment, the observing assessor will be paired with a lead assessor and will support them throughout the process. This will include attending all meetings and working through sections of evidence to ensure it is in line with the accreditation standards.

# LEVEL 1 NATIONAL PROCESS

## Application Process

### Submission

Once you have completed your proforma, please submit to [one.finance@nhs.net](mailto:one.finance@nhs.net)

When submitting please either CC you FD/CFO or attach a document where they have signed off their approval of your application to be true.

The ONF team will be in touch to let you know that they have received your application and will be checking over it in due course

*Organisations applying for re-accreditation must contact ONF to discuss timelines at least **6 months** prior to date of expiry of their current accreditation*

### Application Checking

The ONF team will review your application and ensure that the criteria have been met.

If there are any areas missing/ not meeting the criteria, you will be contacted and asked to update your proforma or provide some evidence.

When the ONF team are happy, they will confirm that they are happy to send to FLC for final approval. If you do not hold accreditation with all the accountancy bodies that you require. We will send the application to FLC with a caveat, but you will not be awarded your

*Tip – it is better to write in full sentences throughout the proforma rather than bullet points. It makes it easier to create an image of your organization*

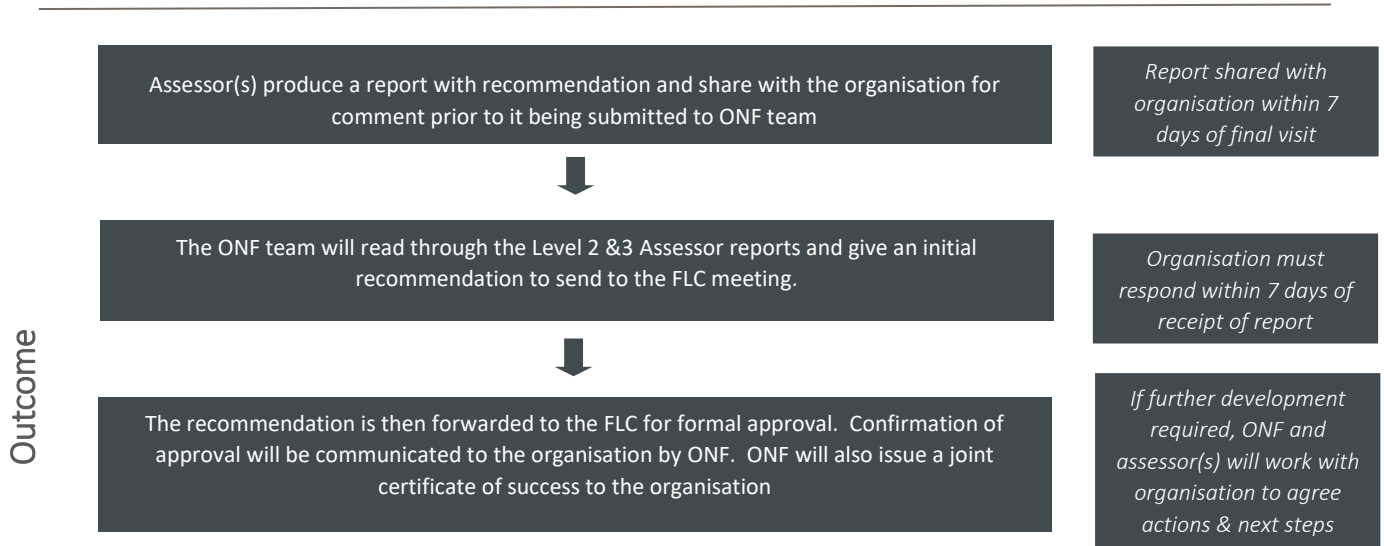
### Outcome

The recommendation is then forwarded to the FLC for formal approval. Confirmation of approval will be communicated to the organisation by ONF. ONF will also issue a joint certificate of success to the organisation

*If further development required, ONF and assessor(s) will work with organisation to agree actions & next steps*

# LEVEL 2 AND 3 NATIONAL PROCESS – ADD WHEN FULL EVIDENCE NEEDS TO BE SENT TO US





## COLLECTION OF EVIDENCE

It is recommended that a finance lead be appointed to support this work across the organisation. However, organisations are encouraged to set up a working group (this is not a one-person process) to ensure it is an inclusive process and to support the collation of evidence to take accreditation forward.

Organisations will be required to submit a RAG rated evidence proforma which should include an outline of the evidence being provided and a list (preferably referenced) of each piece of evidence against each of the criteria to support the application for accreditation.

When applying for Level 2 accreditation, organisations must also include their up-to-date evidence for Level 1. Similarly, for Level 3 accreditation, evidence must be submitted across all three levels to ensure it is current.

Evidence should be collated via electronic format wherever possible. Examples of evidence include meeting minutes, audit reports, PDR/Appraisal forms, case studies, discussion with staff etc.



# APPLYING RAG RATING

The evidence tool provides a column for the organisation to be able to assess the availability of evidence and to apply a RAG rating.

**Green** All evidence collected

**Amber** Some evidence provided - evidence exists but needs to collate into a common folder

**Red** No evidence provided

## EVIDENCE SUBMISSION

Submissions must include RAG rated Evidence Schedule Proforma, Employer Accreditation Proforma and written introduction, as part of their application. Proformas must be provided to the assessor(s) in advance of the initial assessment visit.

The written introduction must include the following:

- Information about the organisation (size, geography etc)
- Information about the finance department (including structure, number of staff qualified, studying)
- Skills Development & ONF within your organisation
- Key areas of good practice
- External recognition – examples of influencing & leadership regionally and nationally (Level 3 only)
- Next steps
- Endorsement from Finance Director and a service user (e.g., budget holder)
- Endorsement from the Chief Executive (for Level 3 applications only)

## PRE-ASSESSMENT MEETINGS (FACE TO FACE AND VIRTUAL)

Planned pre-assessment visits/meetings will be carried out to support organisations to agree and set up work plan and to review evidence prior to the formal assessment visit. Please see below an example of a meeting timetable.

### Timetable for Level 2 Accreditation Assessment

Assessors:

Shadowing:

Description	Attendees	Date	Comments
Introduction Meeting			
Planning (Timetable) Meeting			
Evidence to be reviewed by COP 26th March			
Evidence Review Meeting			
Team Meetings*	<b>Assessors:</b> <b>Shadowing:</b> <b>Organisation being assessed:</b> CFO Deputy CFO 4-5 staff (or 20% if greater) from each team (assessors choose who attends the meetings)		Need to decide if meetings will be split so one assessor/shadower leads one meeting or if all assessors/shadowers are one panel for the whole day. If we split the meetings, the day will be shorter but would need to make sure we share our findings in depth and consider if we would get the feel of the organisation as much  <b>Meeting Timings</b> 1. Introductions (15 mins) 2. Meeting with accreditation team to initially discuss the evidence received (1 hour approx.) 3. Meeting with CFO (30 minutes) 4. Group meeting 1 (45 minutes) * 5. Group meeting 2 (45 minutes) * 6. Group meeting 3 (45 minutes) * 7. Feedback and close (30 minutes)  * The group meetings need to include minimum 3 staff in each group and will represent a cross-section of all staff in the organisation (including Payroll if applicable). In total the meetings should aim to involve about 25% of the total finance staff. Given the number of staff within the finance department it might be possible to conclude the discussions within 2 meetings.
Review Findings and Report Prep Meeting			
Final Report to be submitted to ESNEFT for comment			

\* Team Meetings

Meeting with CFO

## Assessment Days

A minimum of two half days will be required for each assessment visit. All visits/meetings should be planned several weeks in advance to ensure that appropriate individuals are available to attend.

Initial visit/meeting will include:

- Introductions/overview of organisation (by organisation's accreditation lead, usually the FSD Lead)
- Detailed review of evidence
- Develop questions in preparation for final visit (See Appendix 2 & 3)
- Feedback to Finance Director/Chief Finance Officer and accreditation lead on any outstanding evidence that may be required, potential areas for improvement and the recommendation that will be put forward regarding level of accreditation.

Final visit/meeting will include:

- Meet and interview finance staff (minimum of 3, ideally 25% of team) plus Finance Director/Chief Finance Officer, non-finance/clinical staff (2 for Level 2 and 3 for Level 3) (for Level 3 applications, this will also include the Chief Executive)
- Determine level of engagement and visibility within the organisation
- Preliminary outcome/closure discussion between assessor(s), Finance Director/Chief Finance Officer and accreditation lead. If this is not possible on the assessment day, a follow-up discussion must be agreed.

## CARRYING OUT VIRTUAL ASSESSMENTS

Assessments can be carried out virtually through an online platform (the preferred option is MS Teams, however where this is not feasible, other platforms can be considered). The process for carrying out a virtual assessment is the same as a face-to-face assessment. The following should be considered when carrying out a virtual assessment:

Agree the online platform and ensure everyone can access it.

Agree how the evidence will be shared (e.g., MS Teams Channel, Future NHS Collaboration Platform, portals etc).

For the final assessment, agree an interview schedule and invite everyone to a meeting for the day on the respective online platform. This avoids having to set up several meetings with different links. Ensure sufficient time is allowed for breaks throughout the day.

An introductory session will take place with the finance team at the start of the final assessment meeting to include introductions, purpose of the meeting and outline of the day and interview process. An ice breaker may also be used.

For interviews, as well as individual meetings, there may also be small group meetings.

Encourage everyone to use their computer camera where feasible.

## ASSESSOR REPORT

Following the final assessment visit, the assessor/lead assessor will be required to:

- write up a report (see Appendix 4 for template)
- review any outstanding documents which may not have been available previously
- highlight areas of good practice and ask permission from the organisation to share more widely by contacting [one.finance@nhs.net](mailto:one.finance@nhs.net)
- forward a copy of the report within **7 days** of the formal assessment visit, to the organisation's Director of Finance/Chief Finance Officer and accreditation lead (usually the FSD Lead) for comment prior to it being presented to the ONF Central Team for formal approval.
- organisations must respond with any feedback within **7 days** of receipt of the assessor report. If no response is received, it will be assumed the organisation is happy the report.

## FORMAL APPROVAL

All applications for Accreditation should be sent to [one.finance@nhs.net](mailto:one.finance@nhs.net).

The annual application deadlines are 30 April, 31 August, and 30 December each year.

The Finance Leadership Council (FLC) will make the final decision on the recommendation for accreditation which will be based on the full assessor report, a copy of the RAG rated evidence schedule and the written introduction from the organisation. The FLC may request further evidence to support a final decision. Assessors will provide additional feedback to organisations as appropriate.

The organisation will receive confirmation of the approval and certificate of success from the ONF team following the FLC meeting.

## LENGTH OF ACCREDITATION/EXPIRY/EXTENSION REQUESTS

Accreditation will expire after 3 years (accreditation certificates will identify the date for renewal). Organisations will be expected to maintain continuous accreditation, so should plan for reassessment as the expiry period approaches. Applications should be submitted in writing by the Finance Director/Chief Finance Officer to the ONF team initially.

However, should expiry occur, a timeframe will be agreed for organisations to submit for re-accreditation, within a period of no longer than 6 months. Organisations who do not become re-accredited during this period will no longer be accredited and will be expected to commence at Level 1.

In exceptional circumstances a further extension period (maximum 3 months) may be granted. Requests must be submitted in writing by the Finance Director/Chief Finance Officer to the ONF team initially.

## ACCREDITATION LOGO/BRANDING

Upon achieving Towards Excellence Finance accreditation, organisations will be issued with an accreditation logo and guidance on how to use the logo on organisations' communications (e.g., emails) by ONF.

## SHARED SERVICE ARRANGEMENTS

NHS Shared service organisations who can demonstrate that they operate as a standalone organisation, will be eligible to apply for accreditation. This may, but not exclusively be, demonstrated by a level of autonomy in the business planning and operation of the organisation, the existence of a management board comprising members drawn from those organisations that use the service and service level agreements with client organisations.

## EMPLOYER ACCREDITATION

Training Partner and CPD Accreditation is mandatory with the appropriate bodies for all NHS organisations that:

- Have responsibility for the professional training of AAT, ACCA, CIMA, and ICAEW students
- Have responsibility for the professional development of AAT, ACCA, and CIMA qualified finance staff

The One NHS Finance National Accreditation board have agreed that accreditation with CIPFA will no longer be compulsory under criterion 1.3.5, which covers the requirement for professional body accreditation. This was decided following the introduction of a fee by CIPFA to apply for their professional accreditation. Organisations wishing to secure CIPFA accreditation are still encouraged to do so.

## APPENDIX 1 - Towards Excellence Finance Evidence Schedule

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
1. Infrastructure	1.1.1 The Director of Finance / Chief Finance Officer's job description clearly describes professional leadership responsibilities.	2.1.1 There is clear evidence of proactive professional leadership by the Director of Finance / Chief Finance Officer.	3.1.1 There are examples of cross-functional leadership beyond the organisation (e.g., working with HFMA, One NHS Finance, NHS England and NHS Improvement, or professional accountancy bodies; other leadership activities, including informatics, payroll and procurement, can be evidenced).
	1.1.2 A Finance Skills Development (FSD) Lead and Student Skills Development (SSD) Lead (where applicable) are in place (or there is a shared role where appropriate), with recognition of role in annual objectives or job description.	2.1.2 The FSD Lead role is incorporated into the organisation's career development structure (e.g., there is a deputy FSD Lead in place).	3.1.2 There is evidence of proactive involvement in Regional and National working groups / projects (e.g., One NHS Finance, HFMA,SDN etc.).
	1.1.3 Skills Development Network (SDN) involvement is recorded (e.g., attendance at Leads meetings, involvement in steering groups, action plans resulting from Network meetings etc.).	2.1.3 SDN activity is reviewed annually by the Director of Finance / Chief Finance Officer and FSD Lead as appropriate.	3.1.3 There is evidence of ongoing external recognition of the finance function's positive impact (e.g., journal articles, awards, involvement in working groups, leading on projects etc.).
	1.1.4 Evidence of organisational values and behaviours, including compliance with Code of Ethics for relevant professional bodies.	2.1.4 There is evidence that the organisation's values and behaviours are embedded within the finance function.	3.1.4 The appraisal process considers the values and behaviours of individuals.
	1.1.5 Evidence of a finance function organisational chart which identifies the professional status and band of each job and member of the function.	2.1.5 There is tangible evidence of a development culture, as evidenced by case studies.	3.1.5 Staff have opportunity to feedback on whether they feel valued and supported by participating in appropriate surveys, including separating the finance responses in the national staff survey.

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
	1.1.6 Evidence of workforce information gathering for the finance function (i.e., workforce data collection exercise).	2.1.6 There is evidence that SDN and One NHS Finance related issues are communicated on a regular basis (e.g. standing agenda item on team meetings).	3.1.6 There is clear evidence of staff participation with SDN and One NHS Finance at all levels within the organisation.
	1.1.7 Evidence of regular team briefing or similar communication methods including circulation of One NHS Finance and the Skills Development Network newsletters.	2.1.7 An effective staff development infrastructure exists and addresses key issues.	3.1.7 There is clear evidence of active participation with ONF (e.g. Finance and Clinical Educator, Value Maker, work-streams). At least one FACE in the organisation must have level 3 FACE certification.
	1.1.8 Evidence of resources being made available for staff development (e.g., Training Policy, use of local SDN programme, HFMA etc.)	2.1.8 There is evidence of a proactive relationship between the organisation, One NHS Finance and the Skills Development Network (e.g. membership of steering groups, presenting at Leads meetings, ONF Value Maker, ONF FACE etc.). At least one FACE in the organisation must have level 2 FACE certification.	3.1.8 Regular updates are provided for finance function staff on regional and national policy changes.
	1.1.9 Evidence of signed Future-Focused Finance (ONF) Director of Finance / Chief Finance Officer Declaration.	2.1.9 Regular updates are provided for finance staff on organisational, functional, and operational changes.	
	1.1.10 A planned induction process for finance staff is in place, addressing both organisational and local / departmental issues.		
	1.1.11 The organisation has at least one ONF Value Maker, Health and Wellbeing Champion and one Finance and Clinical Educator (FACE) and allows them sufficient time to undertake those roles. One FACE in the organisation must have level 1 FACE Certification.		

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
2. Personal development	1.2.1 Every member of the finance function has an up to date job description and agreed objectives.	2.2.1 The personal objectives of members of the finance function are reviewed and set on at least an annual basis.	3.2.1 Individuals can demonstrate progress against their PDP, including regular in year reviews of progress.
	1.2.2 All staff have annual appraisals which lead to Personal Development Plans (PDPs); and there is evidence that the National Finance Academy competency framework and curriculum, used for development purposes.	2.2.2 Personal Development Plans are actively managed and all staff have 6 monthly reviews.	3.2.2 There is clear evidence that all staff within the finance function are offered training opportunities, including those not actively studying, and evidence that this is successful.
	1.2.3 All members of the finance function are encouraged to maintain a Personal Development Portfolio or equivalent.	2.2.3 All staff maintain a Personal Development Portfolio or equivalent.	3.2.3 Active participation in mentoring, coaching and sponsorship programmes, with positive outcomes for participants that can be demonstrated. This should include the National Finance Academy Sponsorship Programme.
	1.2.4 All staff have access to a mentor, coach or sponsor, should they so wish. This should include the National Finance Academy Sponsorship Programme.	2.2.4 All staff are encouraged to make use of an appropriate mentoring, coaching or sponsorship system. This should include the National Finance Academy Sponsorship Programme.	3.2.4 Staff have opportunities for regular protected learning time.
	1.2.5 All staff have access to a variety of learning materials (e.g. One NHS Finance initiatives online learning, local SDN events, local development programmes, HFMA etc.)	2.2.5 Staff are encouraged to share learning within the function.	

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
3. Professional development	1.3.1 There is a proactive support process in place for students which can be shown to be successful.	2.3.1 Where possible, active involvement with the wider student community can be evidenced (e.g., cadet and apprenticeship programmes, internships, foundation degree, undergraduate placements, graduate training scheme etc.).	3.3.1 There is evidence that, wherever possible, finance staff participate in external secondments and job shadowing and that staff from other organisations are accepted for secondments and shadowing opportunities. These can be shown to have had a positive impact on individuals' development.
	1.3.2 There is evidence that finance staff have access to a range of experiences outside their normal job role through internal and external secondments, job shadowing etc.	2.3.2 There is evidence that, wherever possible, external secondments and job shadowing are encouraged for appropriate finance staff and that seconded staff are accepted from other organisations.	3.3.2 The organisation can demonstrate a broader commitment to the professional development of the finance function's staff (e.g., internal training courses, based on staff needs, for professionally qualified, studying and non-qualified staff).
	1.3.3 There is evidence that success is recognised and celebrated within the function.	2.3.3 There is evidence that success is celebrated within the organisation and beyond.	3.3.3 Significant ongoing involvement with professional development across the NHS and beyond the organisation can be demonstrated.
	1.3.4 Individuals are actively encouraged to network.	2.3.4 There is evidence of networking across relevant local networks (e.g. involvement in working groups, One NHS Finance, Local SDN networks, Student Forum, etc.,).	3.3.4 The wider organisation sees the finance function as a professional contributor to the organisation's business.
	1.3.5 The organisation is registered with all the relevant professional bodies for both Continuing Professional Development (CPD) and Training purposes.	2.3.5 There is demonstrable evidence that the professional development of the finance function has led to continuous improvement of service provision to the organisation.	3.3.5 There is evidence that all students are studying for professional qualifications via the apprenticeship route and utilisation of the levy can be demonstrated, where appropriate.
	1.3.6 Where a professional qualification is an essential criterion for a post within the finance function, there is evidence of CPD compliance and the continued membership of a professional body by the post-holder.	2.3.6 There is evidence that some students are studying for professional qualifications via the apprenticeship route and utilisation of the levy can be demonstrated, where appropriate.	



STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
	1.3.7 There is evidence to demonstrate that consideration is given to using the apprenticeship route and levy funding for staff who wish to study for professional examinations, where appropriate.		

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
4. Finance Workforce & Career Planning	1.4.1 There is a finance skills development strategy & action plan, linking to the One NHS Finance National Development Strategy and training & development guidelines in place.	2.4.1 An annual report of finance skills development progress is published for wide circulation within the function and across the organisation.	3.4.1 The function can demonstrate how identified competence gaps are being addressed and filled.
	1.4.2 The finance function's competence has been assessed – using the National Finance Academy competency framework and curriculum, the KSF (or equivalent) & PDPs to highlight skills gaps.	2.4.2 Finance function competence analysis and skills gaps are formally reviewed at least annually.	3.4.2 The National Finance Academy Equality & Diversity Commitment Charter is used whenever recruiting to a finance function vacancy, including when using recruitment consultants.
	1.4.3 The diversity of the finance function is measured and compared with the diversity of the local population and plans are in place to correct any significant differences, linking to the national One NHS Finance Diversity Action Plan.	2.4.3 The diversity of the finance function is measured, and actions have been taken to correct any significant differences between the diversity of the function and that of the local population.	3.4.3 The organisation can demonstrate the implementation of successful succession planning / talent management initiatives
	1.4.4 The finance function has completed the checklist in the One NHS Finance Diversity and Inclusion Resource Pack, is aware of the Equality and Diversity Commitment Charter and has an Inclusion and Diversity ambassador who is active in regional network meetings.	2.4.4 Consideration is given to One NHS Finance Equality & Diversity Commitment Charter when recruiting staff to the finance function, including when using recruitment consultants.	3.4.4 There is evidence that the finance function supports individuals to gain wider knowledge, understanding and experience across the finance health and social care system (e.g. secondments outside the organisation).

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
	1.4.5 There is evidence of succession planning / talent management within the finance function.	2.4.5 There is a clear commitment to succession planning / talent management, including arrangements through joint working with other relevant organisations, where appropriate / necessary.	3.4.5 The finance function can demonstrate evidence of cumulative improvements because of investment in staff development.
	1.4.6 There is evidence that members of the finance function have access to knowledge of finance issues across local health and social care systems.	2.4.6 There is evidence that the finance function keeps up to date with finance issues across health and social care.	3.4.6 There is evidence that the organisation has measures in place to identify appropriate support at work and a mechanism to help staff access this where necessary.
	1.4.7 There is a prioritised training plan in place for the finance function that identifies resource requirements.	2.4.7 The organisation can demonstrate that the finance function's training plan is being implemented.	
	1.4.8 There is evidence that work / life balance is recognised and encouraged.	2.4.8 Where appropriate, there is evidence to demonstrate that work / life balance issues are being addressed and resolved.	

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
5. Corporate Financial Competence	1.5.1 A regular (i.e. at least annual) assessment of the financial training requirements of non-finance staff is undertaken. This should cover Board Directors and budget holders / managers as a minimum.	2.5.1 There is a funded and monitored resource plan in place to support the financial training needs of non-finance staff which should include evidence of training provided by ONF Finance and Clinical Educators.	3.5.1 There is an annual review of the effectiveness of the financial training provided for non-finance staff. Examples of good practice within the organisation are shared with ONF's Finance and Clinical Educators Network.
	1.5.2 A perception / opinion survey of the services provided by the finance function is undertaken at least annually. <i>(For shared service organisations: through regular reviews with client organisation(s)).</i>	2.5.2 Active attention is paid to the Finance function's profile within the organisation. (For shared service organisations: Active attention is paid to the team's profile with client organisation(s)).	3.5.2 Consideration is given to external best practice and benchmarking to inform the development of the finance function.
	1.5.3 Budget holders / users of the service have on-line access to relevant financial information to encourage their involvement in, and responsibility for, budget management.	2.5.3 There is evidence of a proactive approach to the development of financial competence across the organisation.	3.5.3 The finance function is integrated within the organisation (e.g., leading on key projects, chairing committees, contributing to divisional boards etc.). (For Shared Service organisations: The team can demonstrate that it works on key projects in conjunction with client organisation(s)).
	1.5.4 There is an organisational Business Plan in place.	2.5.4 There is evidence that the finance function plays a strong and active role in future financial planning within the organisation.	3.5.4 There is clear evidence of involvement in and influence on the NHS and public sector change agenda (e.g., membership of regional and national working groups; contributions to regional and national work-streams; etc.).
	1.5.5 There is evidence of collaborative teamwork with clinicians and non-finance staff across the organisation.	2.5.5 There is active engagement with clinicians and service users to improve services and efficiency whilst reducing waste.	3.5.5 There is evidence that the finance function provides a leadership role in educating non-finance staff (e.g., corporate presentations.)

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
6. Business Controls and Policy	1.6.1 The organisation can demonstrate it is meeting its statutory financial duties.	2.6.1 Finance KPIs are established and regularly reported to the Board and / or Board Committees.	3.6.1 There is evidence of demonstrable improvement in performance against KPIs.
	1.6.2 There is an organisational Corporate / Integrated Governance Framework (including SFIs) and appropriate Risk Management systems.	2.6.2 There is evidence that the finance function complies with the organisation's Corporate Governance Framework and Risk Management systems.	3.6.2 There is evidence that staff throughout the organisation are fully aware of their obligations in respect of the organisation's SFIs.
	1.6.3 There are written procedure notes available to staff for all financial systems and all procured systems are supported by detailed system manuals.	2.6.3 A set of fully reconciled summary accounts and relevant supporting notes are produced for the organisation at least twice a year.	3.6.3 A set of fully reconciled summary accounts and relevant support notes are produced for the organisation at least quarterly.
	1.6.4 The Finance Director / Chief Finance Officer works with colleagues in HR to ensure that the contracts of senior finance staff include a requirement to comply with the Code of Conduct for NHS Managers.	2.6.4 The organisation produces income and expenditure reports for each service on a quarterly basis and uses the information to monitor performance and to ensure clinical engagement to inform decision-making at both the service and organisation level.  (Providers only)	3.6.4 The organisation produces income and expenditure reports for each service on a monthly basis and uses the information to monitor performance and to ensure clinical engagement to inform decision making at both the service and organisation level. (Providers only)
	1.6.5 The function can demonstrate that staff are kept apprised of changes in relevant policies / legislation (e.g., HR & Procurement).	2.6.5 Business continuity plans are in place for each department within the finance function (e.g., financial accounts, management accounts, financial planning etc.).	3.6.5 Business continuity plans are in place for each team within the finance function (e.g., accounts payable, accounts receivable etc.).
	1.6.6 A set of fully reconciled summary accounts and relevant support notes are produced for the organisation annually.	2.6.6 The finance function can demonstrate proactive engagement with Internal and External Audit providers through continual dialogue and action being taken to mitigate risks identified in year.	3.6.6 There is clear evidence of the finance function being proactively involved in integrated governance and risk management.
	1.6.7 The organisation produces annual income and expenditure statements for each service. (Providers only)	2.6.7 Where financial services are outsourced, Service Level Agreements for those services are regularly monitored, with appropriate action taken where agreements are not honoured.	

STANDARD	LEVEL 1	LEVEL 2	LEVEL 3
	1.6.8 A business continuity plan is in place for the finance function.	2.6.8 There is evidence of the effective use of the Finance Innovation Forums peer reviewed innovations in the review and improvement of processes & relationships within the wider organisation, including the submission of one innovation peer review.	
	1.6.9 The finance function is involved in creating the annual audit work plans and can demonstrate that it takes appropriate action on receipt of recommendations in internal and external audit reports. (For Shared Service organisations: The organisation can demonstrate that it works closely with their clients' external auditors).		
	1.6.10 Signed Service Level Agreements are in place for financial services, where these are outsourced.		
	1.6.11 If the organisation procures new finance systems or services, it should be able to demonstrate that it has secured value for money by so doing and should follow current best practice guidance for procurement.		
	1.6.12 There is evidence of effective use of the Finance Innovation Forums peer reviewed innovations in the review and improvement of financial processes.		

This document, along with the relevant Evidence Schedule Proformas, can be found on the One NHS Finance website: [www.onenhsfinance.nhs.uk](http://www.onenhsfinance.nhs.uk) They will be continuously updated.

## APPENDIX 2 - EXAMPLE ASSESSMENT QUESTIONS (LEVELS 2)

Assessors will meet with a minimum of 3 finance staff (ideally 25% of the headcount) to establish their views on personal and professional development opportunities within their organisation. Informal chats with staff can be via:

- Discussions with staff during walk round department
- Group discussions
- Telephone discussions organised in advance by the FSD Lead, where required
- Assessor(s) may request in advance who they would like to speak to based on the organisation structure

### SAMPLE QUESTIONS – FINANCE STAFF

- Do you have an up to date job description for your role?
- Do you have an annual PDR/Appraisal? When was your last one?
- Do you have a KSF outline/core values or similar, which is/are incorporated into your PDR/Appraisal discussion?
- How do you record learning and development (including CPD) activity?
- What qualifications do you hold? Are you currently studying? What level of support do you receive?
- Have you undertaken any training recently? If so what?
- Do you have access to a study buddy/mentor?
- How do you record learning and development activity?
- How is learning & development fed back to the team from staff who have been on training events?
- What opportunities do you have for further training?
- How do you find out what's going on in your organisation/department?
- How does your management team communicate with you around departmental, organisational, regional and national updates plus skills development activity)?
- Are you encouraged to get involved in any activities outside of the finance function?
- Do you have any interaction with colleagues from other NHS organisations?
- Who is your FSD Lead & Student Lead?
- Do you feel you are kept up to date with skills development activities/opportunities e.g. Skills Development Network, HFMA, Future-Focused Finance?
- Do you feel valued as a team member?
- Are secondment opportunities/job shadowing/job swaps encouraged within the organisation and the department?
- What do you know about the Skills Development Network?
- Are there any improvements that could be made by the department to further help your development?

### SAMPLE QUESTIONS – SENIOR FINANCE COLLEAGUES/NON-FINANCE/CLINICAL COLLEAGUES

- How does the finance team interact with the rest of the organisation and does the organisation value what finance are doing? Can this be demonstrated e.g., through perception survey results?
- Is the organisation and its staff aware of and take responsibility for finance?
- How do the finance team demonstrate involvement in strategic programmes, and can you provide an example of this? (e.g., reconfiguration)
- How can you demonstrate organisation and professional leadership by senior finance team?
- What are the key elements of the finance skills training strategy?
- How important is the finance team in delivering the whole agenda; how confident are you?

## APPENDIX 3 - EXAMPLE ASSESSMENT QUESTIONS (LEVEL 3)

### SAMPLE QUESTIONS - FINANCE STAFF

- Can you tell me a bit about your career path and how the organisation has supported this?
- How is the finance training plan developed and what support have you personally had?
- What are the key elements of training available?
- How are PDPs developed, owned, supported, and reviewed?
- How does the Trust ensure that staff have had development opportunities and demonstrated CPD?
- How does the induction process work for finance and non-finance (with finance responsibilities) staff?
- How do you develop individuals within your team?
- How do your objectives link to the organisation's objectives?
- Do you have visibility and access to senior finance leaders in the Trust (e.g., Director of Finance/Chief Finance Officer/Deputy)?
- How does finance work with rest of organisation including clinical colleagues?
- How has the organisation progressed since the last Towards Excellence accreditation?
- Are you or your colleagues involved in working groups and regional/national training groups? Is this encouraged?
- How are exam successes communicated and celebrated?
- Are financial procedures notes in place for all systems?
- What does the organisation do well? What could it do better?

### SAMPLE QUESTIONS - DIRECTOR OF FINANCE/CHIEF FINANCE OFFICER

- What has the organisation developed since the last Accreditation assessment?
- What is the current position on Future-Focused Finance?
- How can you demonstrate that the investment in finance staff development has improved services/ financial performance?
- How do the finance team demonstrate involvement in strategic programmes, and can you provide an example of this? (e.g., reconfiguration)
- What are the key elements of the finance skills training strategy?
- What training takes place at Board level?
- How can you demonstrate organisation and professional leadership by senior finance team? CPD?
- How do you demonstrate external influence and giving back to the NHS?

### SAMPLE QUESTIONS - CHIEF EXECUTIVE

- How has the role and involvement of the finance team developed over the last 3 years?
- How important is the finance team in delivering the whole agenda; how confident are you?
- How does the finance team interact with the rest of the organisation and does the organisation value what finance are doing?
- Is the organisation and its staff financially aware and take responsibility for finance?
- How do you see finance's role in supporting strategic programmes?
- How involved/ visible is the finance team in the external environment outside the trust?
- What are the Strengths/ weaknesses of the team?

# APPENDIX 4 - ASSESSOR REPORT TEMPLATE

TOWARDS EXCELLENCE FINANCE ACCREDITATION

NAME OF ORGANISATION ASSESSING

LEVEL OF ACCREDITATION

ASSESSOR REPORT

Background

*Brief overview of organisation plus details of finance department (structure, no. of finance staff, how many qualified, studying etc).*

Overall Assessment

*Details on how assessment was carried out, visits to department, discussions with staff etc.*

*For Level 2 assessments, if Level 1 accreditation was attained over 12 months prior to the current assessment being done, then organisations must be able to demonstrate that they are meeting the requirements for Level 1 and 2.*

*For Level 3 assessments, organisations need to be able to demonstrate that they are still meeting the requirements for Level 1 and Level 2.*

Staff interviewed

*Names and job titles*

External Commitment (Level 3 applications only)

*Leadership examples beyond local organisation / influence on local and national agenda etc.*

Highlights & Key Strengths

Key Areas of Good Practice

One NHS Finance Engagement

*Evidence of how One NHS Finance is embedded within organisation.*

Values & Behaviours

*Evidence of how embedded within organisation.*

Any areas for enhancement/ongoing development/in progress

Conclusion & Recommendation

NB. This report is subject to approval from the Finance Leadership Council based on the caveats made above.

Name of Assessor(s)

Job Title

Organisation

Date