



# TOWARDS EXCELLENCE FINANCE ACCREDITATION STANDARDS

NATIONAL PROCESS AND GUIDANCE  
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## INTRODUCTION

This document outlines each stage of the process for the Towards Excellence Accreditation at each level. It provides hints and tips to support you in developing your application and details how assessments should be conducted.

The standards for the process reviewed and updated annually by One NHS Finance (ONF) in partnership the North West Skills Development Network. This document contains the latest standards which were approved in May 2023 by the NHS Finance Leadership Council.

If your organisation is based in the North West, you will need to use separate guidance that can be found on the Skills Development Network [website here](#).

## 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 and approved by the Finance Leadership Council.

## OBJECTIVES

The Accreditation process was established to confirm good finance skills development practice is in place and maintained in all NHS organisations across England.

It encourages 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. It celebrates 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 which raises the organisation's profile nationally through One NHS Finance.
- It is a tried and tested framework that will give the organisation assurance that the finance team have got the right things in place to support the organisation.
- Lets new potential colleagues know that you are committed to development and have the right things in place to be a great place to work.
- Helps promote an environment of professionalism, initiative, enterprise, and innovation.
- Excellent tool for sharing good practice across all organisations and 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.

# OVERVIEW

There are three levels of Towards Excellence Accreditation, each designed to reflect the continuous development of the finance function and recognising the highest standards of financial competence and commitment to skills development:

## 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 information has been collected, sign off from the FD/CFO is needed to confirm that they agree with the assessment. At Level 1 we don't need evidence to back up what you are saying in the proforma but we do require sign off from the CFO/FD an email to say that the information is a true reflection of practices is sufficient.

## 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 expected 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 assessed by peers. This process provides an additional level of assurance over and above a self-assessment process.

## 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.

The Accreditation programme relies on volunteers from within NHS Finance who are committed to supporting organisations through the process as Assessors. While we strive to pair organisations with Assessors in a timely manner, we do ask for at least 6 months' notice to help us manage the current demand. If we are unable to assign you assessors for the organisation's preferred Accreditation deadline, we will do everything we can to assign you assessors for the following deadline.

# ROLES AND RESPONSIBILITIES

## ROLE OF THE ORGANISATION

As mentioned above it is important that the organisation contact the One NHS Finance team at least 6 months ahead of their preferred assessment deadline in order for the central team to manage demand for assessors, as best we can, at Levels 2 and 3.

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. The organisation will not be assigned an assessor until the proformas are completed.

The organisation is also required to provide an introduction to the organisation to the assessors which will form part of the final report. 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)

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 2 and 3 organisations and assessors are expected to be available to carry out assessments.

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.

Finance colleagues who have not yet conducted an assessment who are keen to support the accreditation process should support an assessment with an experienced assessor before becoming a lead assessor themselves.

Please see our separate Assessor Guide for full details on the role of the assessor.

## LEVEL 1 NATIONAL PROCESS

- Once you have completed your proforma, please submit to [one.finance@nhs.net](mailto:one.finance@nhs.net)
- When submitting please either CC your FD/CFO or attach an email where they have signed off their approval of the application to be a true reflection of the finance department.
- 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.
- 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.
- The recommendation is then put forward 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.

### Things to note:

- Organisations applying for re-accreditation must contact ONF to discuss timelines at least 6 months prior to date of expiry of their current accreditation.
- 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 organisation.
- If further development required for your Level 1 application, ONF will work with organisation to agree actions & next steps.
- Please make sure you have all of the required accreditations with the accountancy bodies before submitting your application. We are no longer accepting applications that are awaiting professional body accreditation, this criteria needs to be met before submission. However we have noted that CIMA have currently paused their application process so you are able to currently submit without CIMA.



## LEVEL 2 AND 3 NATIONAL PROCESS

- Email the One NHS Finance team at least 6 months before submission deadline with an expression of interest in being assessed for your next accreditation level.
- Once the organisation has sent the completed proforma to the ONF team and gathered evidence, an Assessor(s) will be assigned. The One NHS Finance team will send an introductory email for the assessors and organisation.
- The organisation then needs to arrange an initial discussion with their assessors to discuss timelines, the best way to share the evidence, whether the assessment will take place online or face to face and meeting dates.
- The organisation then submits the Evidence Schedule and submits evidence as requested by assessor(s) for reviewing (e.g., Skills Development Strategy, perception survey results, ONF engagement).
- The assessors consider organisation readiness and work with organisation until ready for formal assessment.
- Once the assessors have the evidence and have reviewed it, an initial assessment visit/MS Teams call should be scheduled to review evidence and provide feedback to the organisation on any additional information, areas for improvement and make an initial recommendation, based on the evidence, on level applying for.
- Final Assessment to interview finance staff (minimum of 3, ideally 25% of team) in groups and / or 1:1's. Interviews to also include:
  - Finance Director/Chief Finance Officer
  - Non-finance/clinical staff (2 for Level 2, 3 for Level 3)
  - Chief Executive (for Level 3 applications only)
- The Assessors will then produce a report with recommendation and share with the organisation for comment prior to it being submitted to ONF team.
- The ONF team will read through the Level 2 & 3 assessor reports and give an initial recommendation to send to the FLC meeting.
- 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.

### Things to note:

- Organisations applying for re-accreditation or moving up a level must contact ONF to discuss timelines at least 6 months prior to date of expiry of their current accreditation.
- The ONF team will check over your proforma to assess readiness before sending assigning assessors.
- Evidence must be clearly identifiable against all the criteria.
- A written introduction, by the organisation, will also form part of the submission.
- Evidence must be available electronically at least 7 days prior to meetings.
- Initial visit/ meeting must take place at least 8 weeks prior to submission deadline.
- Assessors must share the report with organisation before submitting to the One NHS Finance team to make sure they are happy with everything that is included.
- If further development required, ONF and assessor(s) will work with organisation to agree actions & next steps.

## COLLECTION AND SUBMISSION 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 an 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.

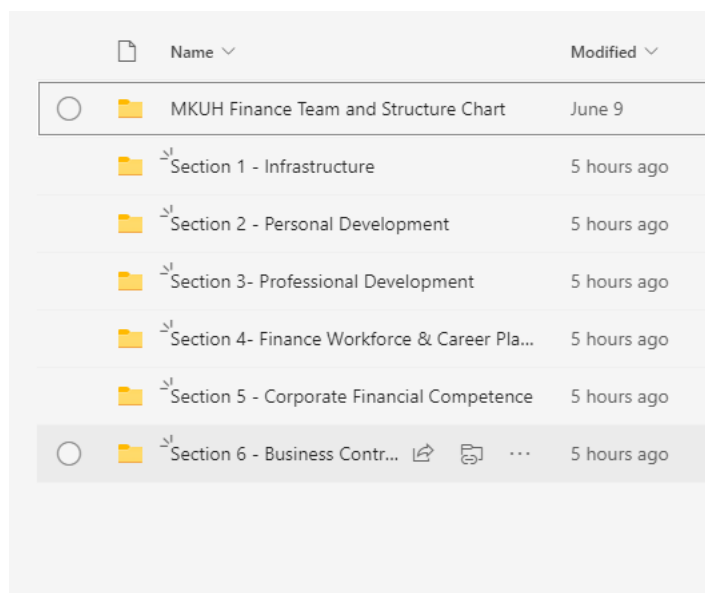
When applying for Level 2 accreditation, organisations must also include their up-to-date evidence for Level 1. Similarly, for Level 3 accreditation, evidence must be submitted across all three levels to ensure it is current.

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.

When pulling together evidence for assessors this should be done in a clear way, see below for examples.

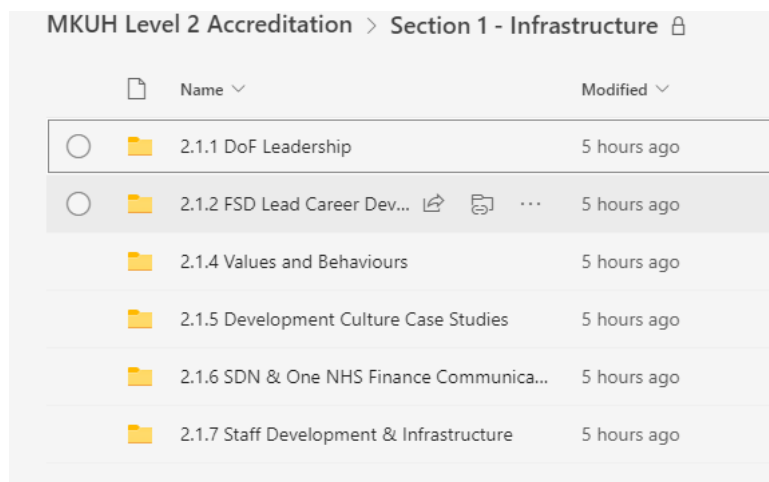
<b>Level 1 – Working document template</b>	 Working document template level 1.xlsx
<b>Level 2 – Working document template</b>	 Working document template level 2.xlsx
<b>Level 3 - Working document template</b>	 Working document template Level 3.xlsx

You should use an agreed platform for sharing the evidence, for example a private channel on the ONF MS Teams group. Then group together and save the evidence in a clear way, for example:

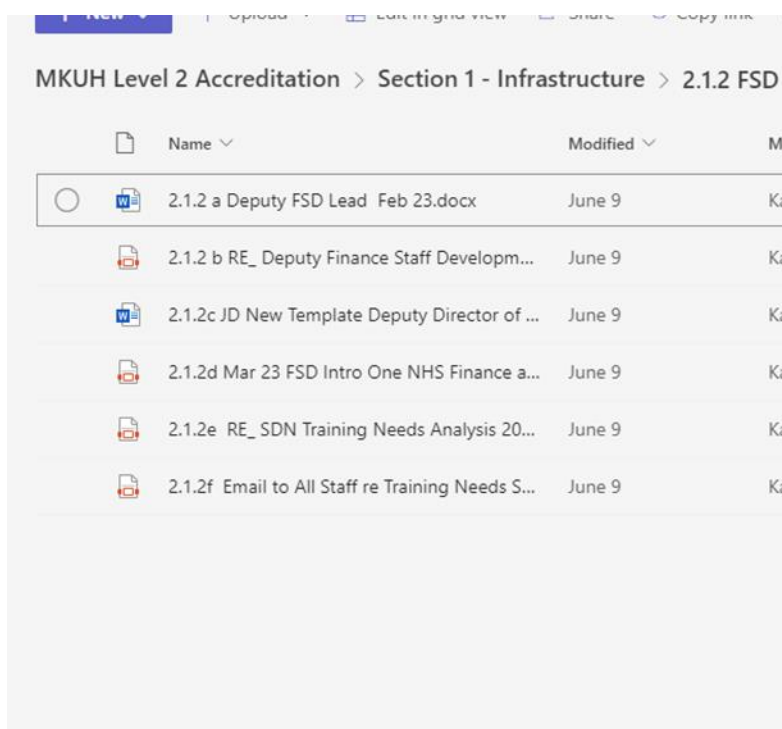




Then have a folder for each criteria within that with the evidence like below:



Then all of the evidence that relates to that criteria within it:



## PRE-ASSESSMENT MEETINGS (FACE TO FACE OR 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. Please see below an example of a meeting timetable. The organisation is responsible for setting up all meetings.

**Timetable for Level 2 Accrediation 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*	<p><b>Assessors:</b></p> <p><b>Shadowing:</b></p> <p><b>Organisation being assessed:</b>                      CFO                      Deputy CFO                      4-5 staff (or 20% if greater) from each team (assessors choose who attends the meetings)</p>		<p>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</p> <p><b>Meeting Timings</b></p> <ol style="list-style-type: none"> <li>1. Introductions (15 mins)</li> <li>2. Meeting with accreditation team to initially discuss the evidence received (1 hour approx.)</li> <li>3. Meeting with CFO (30 minutes)</li> <li>4. Group meeting 1 (45 minutes) *</li> <li>5. Group meeting 2 (45 minutes) *</li> <li>6. Group meeting 3 (45 minutes) *</li> <li>7. Feedback and close (30 minutes)</li> </ol> <p>* 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.</p>
Review Findings and Report Prep Meeting			
Final Report to be submitted to ESNEFT for comment			

**\* Team Meetings**

Meeting with CFO

## BENEFITS OF DIFFERENT ASSESSMENT TYPES

Assessments can be carried out either online or via a face to face site visit. Under both methods the process is still the same format, consisting of the following steps:

- Review of the application form and initial evidence gathering.
- Clarification meeting to discuss the evidence and highlight any possible gaps.
- Meeting with the CFO
- Staff meetings to engage with approximately 25% of the staff in the department.
- Attendance at a finance team meeting.
- Submission of the final report/recommendation to the Finance Leadership Council.

The benefits of carrying out the assessment face to face are as follows:

- Can complete all the meetings in one day.
- Get to see the department first-hand.
- Better face to face engagement in staff meetings.
- Get the opportunity to see the wider Trust.
- Better feel for the culture and diversity within the organisation.

The benefits of carrying out an assessment online are as follows:

- Assessment can be staggered over several days to easily fit around other work commitments.
- No travelling time for assessors.
- Agenda can be more flexible.
- Can assess organisations outside of the region which you might not have previously known much about.

## FACE TO FACE ASSESSMENT DAYS

All visits/meetings should be planned several weeks in advance to ensure that appropriate individuals are available to attend.

The assessment will include:

- Introductions/overview of organisation (by organisation's accreditation lead, usually the FSD Lead)
- Detailed review of evidence
- Develop questions in preparation for staff interviews (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.
- 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. It may be useful to speak to additional stakeholders in order to gain a better understanding of the way in which the finance team engages with the wider organisation for example clinicians or divisional general managers.
- 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.

## VIRTUAL ASSESSMENTS

Currently most assessments are carried out virtually through MS Teams. 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).
- Set up call with CFO and for Level 3 Chief Executive well in advance to ensure it is blocked out in their diaries.
- Set up interviews with 25% staff with no more than 10-12 people in each group. These staff discussions don't necessarily have to take place on the same day, they can be arranged to best suit everyone's schedules.
- Set up calls with budget holders.
- At the beginning of each staff discussion group the assessors will explain the purpose of the meeting and what to expect.
- Encourage everyone to use their computer camera where feasible.

## ASSESSOR REPORT

Following the final assessment visit or online staff discussions, the assessor/lead assessor will be required to:

- write up a report (see Appendix 3 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 to the organisation's accreditation 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 with the report.

## FORMAL APPROVAL

All applications/ reports 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 31 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 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 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.

## 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.E, 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.

Please make sure you have your professional body accreditation before submitting your applications.

# APPENDIX 1 - Towards Excellence Finance Evidence Schedule

<b>1. Infrastructure</b>		
<b>LEVEL 1</b>	<b>LEVEL 2</b>	<b>LEVEL 3</b>
1.1.A The Director of Finance / Chief Finance Officer's job description clearly describes professional leadership, training and development and Equality, Diversity & Inclusion (EDI) responsibilities.	2.1.A There is clear evidence of proactive professional leadership by the Director of Finance / Chief Finance Officer.	3.1.A There are examples of cross-functional leadership beyond the organisation (e.g., working with HFMA, One NHS Finance, NHS England, or professional accountancy bodies; other leadership activities, including informatics, payroll and procurement, can be evidenced).
1.1.B 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 the role(s) in annual objectives and awareness of the role description(s).	2.1.B 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.B There is evidence of proactive involvement in Regional and National working groups / projects (e.g., One NHS Finance, HFMA,SDN etc.) and peer networks such as CFO and Deputy CFO meeting attendance.
1.1.C Involvement in appropriate development networks is recorded (e.g., attendance at FSD Leads meetings, Value Maker forums, HFMA branch committee, involvement in steering groups).	2.1.C Staff development activities are reviewed annually by the Director of Finance / Chief Finance Officer and FSD Lead as appropriate.	3.1.C 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.D Evidence of organisational values and behaviours, including compliance with Code of Ethics for relevant professional bodies.	2.1.D There is evidence that the organisation's values and behaviours are embedded within the finance function.	3.1.D The appraisal process considers the values and behaviours of individuals.
1.1.E Evidence of a finance function organisational chart which identifies the professional status and band of each job and member of the function.	2.1.E There is tangible evidence of a development culture, as evidenced by case studies.	3.1.E 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. There is evidence the organisation uses this data to create an improvement plan.
1.1.F Evidence of workforce information gathering for the finance function (e.g., workforce data collection exercise).		

1.1.G Evidence of regular team briefings or similar communication methods including circulation of appropriate training and development networks' newsletters.	2.1.G 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.G There is clear evidence of staff participation with SDN and One NHS Finance at all levels within the organisation.
1.1.H Evidence of resources being made available for staff development (e.g. Training Policy, use of local and national training and development partners)	2.1.H An effective staff development infrastructure exists and addresses key issues.	
1.1.I Evidence of signed One NHS Finance Director of Finance / Chief Finance Officer Declaration.		
1.1.J A planned induction process for finance staff is in place, addressing both organisational and local / departmental issues.	2.1.J Regular updates are provided for finance staff on organisational, functional and operational changes.	3.1.J Regular updates are provided for finance function staff on regional and national policy changes.
1.1.K The organisation has at least one FFF Value Maker 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.	2.1.K There is evidence of a proactive relationship between the organisation and appropriate development networks (e.g. membership of steering groups, presenting at Leads meetings, FFF Value Maker and FACE groups). At least one FACE in the organisation must have level 2 FACE certification.	3.1.K 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.L There is evidence of effective use of the Finance Innovation Forum's peer reviewed innovations in the review and improvement of financial processes.	2.1.L There is evidence of the effective use of the Finance Innovation Forum's peer reviewed innovations in the review and improvement of processes & relationships within the wider organisation, including the submission of one innovation for peer review and a peer reviewer from the organisation.	

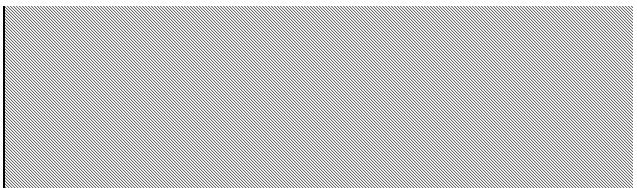
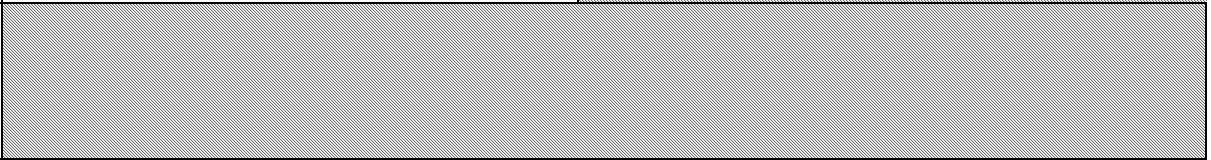
<p>1.1.M The organisation has at least 1 active Health and Wellbeing champion e.g. engages in MS Teams group to share ideas with other champions</p>	<p>2.1.M The organisation's Health and Wellbeing champion(s) have attended HWB champion training and there is evidence of how the role is working within the organisation</p>	<p>3.1.M The organisation's Health and Wellbeing champion(s) are connecting and sharing their work across the system i.e. have presented to other organisations on their work and its impact.</p>
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<b>2. Personal development</b>		
<b>LEVEL 1</b>	<b>LEVEL 2</b>	<b>LEVEL 3</b>
1.2.A Every member of the finance function has an up to date job description and agreed objectives which are reviewed periodically.	2.2.A The personal objectives of members of the finance function are reviewed and set on at least an annual basis.	
1.2.B All staff have annual appraisals which lead to Personal Development Plans (PDPs); and there is evidence that the National Finance Academy competency framework or organisational equivalent is used for development purposes.	2.2.B Personal Development Plans are actively managed and all staff have 6 monthly reviews.	3.2.B Individuals can demonstrate progress against their PDP, including regular in year reviews of progress.
1.2.C All members of the finance function are encouraged to maintain a Personal Development Portfolio or equivalent.	2.2.C All staff maintain a Personal Development Portfolio or equivalent, which includes job descriptions and qualifications.	3.2.C 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.D All staff are encouraged to and have access to a mentor, coach or sponsor, should they so wish. This should include the ONF Sponsorship Programme.	2.2.D 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.D 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.E 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.E Staff are encouraged to share learning within the function.	3.2.E Staff have opportunities for regular protected learning time.
1.2.F No Standard	2.2.F The organisation has put forward an accreditation assessor who has, as a minimum, shadowed an assessment.	3.2.F The organisation has at least one active accreditation assessor who made themselves available to carry out an assessment in the last year.



<b>3. Professional development</b>		
<b>LEVEL 1</b>	<b>LEVEL 2</b>	<b>LEVEL 3</b>
1.3.A There is a proactive support process in place for students, which can be shown to be successful.	2.3.A 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.).	
1.3.B 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.B 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.B 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.C There is evidence that success is recognised and celebrated within the function.	2.3.C There is evidence that success is celebrated within the organisation and beyond.	3.3.C 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.D Individuals are actively encouraged to network.	2.3.D 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.D Significant ongoing involvement with professional development across the NHS and beyond the organisation can be demonstrated.
1.3.E The organisation is registered with all the relevant professional bodies for both Continuing Professional Development (CPD) and Training purposes.		
1.3.F 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.F 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.F The wider organisation sees the finance function as a professional contributor to the organisation's business.
1.3.G 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.	2.3.G 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.	3.3.G There is evidence that all students are encouraged to access studying for professional qualifications via the apprenticeship route and utilisation of the levy can be demonstrated, where appropriate.
1.3.H Evidence of engaging with One NHS Finance networks in the local system/ICS	2.3.H Evidence of finance teams working across ICS and/or regions, e.g. finance departments sharing best practice and policies	3.3.H Evidence of sustained successful working across ICS and/or regional partners.

<b>4. Finance Workforce &amp; Career Planning</b>		
<b>LEVEL 1</b>	<b>LEVEL 2</b>	<b>LEVEL 3</b>
1.4.A 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.A An annual report of finance skills development progress is published for wide circulation within the function and across the organisation.	
1.4.B The finance function's competence has been assessed – using the National Finance Academy competency framework or organisational equivalent to highlight skills gaps.	2.4.B Finance function competence analysis and skills gaps are formally reviewed at least annually.	3.4.B The function can demonstrate how identified competence gaps are being addressed and filled.
1.4.C 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.C 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.	
1.4.D 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.D 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.D The National Finance Academy Equality & Diversity Commitment Charter is used whenever recruiting to a finance function vacancy, including when using recruitment consultants.
1.4.E There is evidence of succession planning / talent management within the finance function.	2.4.E There is a clear commitment to succession planning / talent management, including arrangements through joint working with other relevant organisations, where appropriate / necessary.	3.4.E The organisation can demonstrate the implementation of successful succession planning / talent management initiatives
1.4.F 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.F There is evidence that the finance function keeps up to date with finance issues across health and social care.	3.4.F 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).
1.4.G There is a prioritised training plan in place for the finance function that identifies resource requirements.	2.4.G The organisation can demonstrate that the finance function's training plan is being implemented.	3.4.G The finance function can demonstrate evidence of cumulative improvements because of investment in staff development.

<p>1.4.H There is evidence that work / life balance is recognised and encouraged and a positive approach to flexible working is taken across the department e.g. a hybrid or flexible working policy</p>	<p>2.4.H There is a positive approach to flexible working and where appropriate staff are given the opportunity to work in a way that works for the service and supports their work life/balance</p>	
<p>1.4.I There is evidence that the organisation has measures in place to identify appropriate support and adjustments at work to facilitate home working and a mechanism to help staff access these where necessary.</p>		
<p>1.4.J Evidence that the finance department is aware of the finance careers website and promotes the site where possible. <a href="https://financecareers.nhs.uk/">https://financecareers.nhs.uk/</a></p>	<p>2.4.J Evidence that the finance department is contributing to content on the finance careers website e.g. widening engagement/ access/ employability content. <a href="https://financecareers.nhs.uk/">https://financecareers.nhs.uk/</a></p>	<p>3.4.J The organisation has delivered at least 2 in person/ virtual career sessions in schools, colleges, or universities in the last 12 months to promote NHS Finance as a career.</p>

## 5. Corporate Financial Competence

LEVEL 1	LEVEL 2	LEVEL 3
1.5.A A regular review and 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.A 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 FFF Finance and Clinical Educators.	3.5.A There is a regular review of the effectiveness of the financial training provided for non-finance staff. Examples of good practice within the organisation are shared with FFF's Finance and Clinical Educators Network.
1.5.B A perception / opinion survey of the services provided by the finance function is undertaken periodically. (For shared service organisations: through regular reviews with client organisation(s)).	2.5.B 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.B Consideration is given to external best practice and benchmarking to inform the development of the finance function.
1.5.C Budget holders / users of the service have direct access to relevant financial information to encourage their involvement in, and responsibility for, budget management.	2.5.C There is evidence of a proactive approach to the development of financial competence across the organisation.	3.5.C 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.D There is an organisational Board approved Annual Financial Plan in place.	2.5.D There is evidence that the finance function plays a strong and active role in future financial planning within the organisation.	3.5.D 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.E There is evidence of collaborative teamwork with clinicians and non-finance staff across the organisation.	2.5.E There is active engagement with clinicians and service users to improve services and efficiency whilst reducing waste.	

## 6. Business Controls and Policy

LEVEL 1	LEVEL 2	LEVEL 3
<p>1.6.A There is evidence that the finance function complies with the organisation's Corporate / Integrated Governance Framework (including SFIs)</p>	<p>2.6.A There is evidence that staff throughout the organisation are fully aware of their obligations in respect of the organisation's SFIs.</p>	
<p>1.6.B There are written procedure notes available to staff for all financial systems and all procured systems are supported by detailed system manuals.</p>		
<p>1.6.C 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.</p>		
<p>1.6.D The function can demonstrate that staff are kept apprised of changes in Standard Financial Instructions and relevant legislation and policies (e.g. HR &amp; Procurement).</p>		

<p>1.6.E The organisation produces annual service line income and expenditure statements for each service. (Providers Only)</p>	<p>2.6.E The organisation produces service line 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)</p>	<p>3.6.E The organisation produces service line 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)</p>
<p>1.6.F business continuity plan is in place for the finance function.</p>	<p>2.6.F Business continuity plans are in place for each department within the finance function (e.g. financial accounts, management accounts, financial planning etc.).</p>	<p style="background-color: #cccccc;"></p>
<p>1.6.G 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).</p>	<p>2.6.G 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.</p>	<p style="background-color: #cccccc;"></p>
<p>1.6.H Signed Service Level Agreements are in place for financial services, where these are outsourced.</p>	<p>2.6.H Where financial services are outsourced, Service Level Agreements for those services are regularly monitored, with appropriate action taken where agreements are not honoured.</p>	<p style="background-color: #cccccc;"></p>
<p>1.6.I 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.</p>	<p style="background-color: #cccccc;"></p>	

1.6.J There is evidence that the finance function complies with the organisation's risk management systems.	2.6.J There is clear evidence of the finance function being proactively involved in integrated governance and risk management.	
1.6.K The finance department has completed the <a href="#">HFMA Improving NHS financial sustainability basics checklist</a> (or equivalent) and has an action plan in place.	2.6.K The finance department has completed the HFMA Improving NHS financial sustainability basics checklist (or equivalent), has an action plan in place and is working towards that plan.	3.6. K The finance department has completed the HFMA Improving NHS financial sustainability Basics checklist (or equivalent) and can demonstrate improvement from carrying out their action plan
1.6.L The finance department has reviewed the <a href="#">NHS England Grip and Control</a> (or equivalent) Checklist.	2.6.L The finance department has completed an external governance checklist and has an action plan in place to address any areas of concern.	3.6.L The finance department has completed an external governance checklist and can demonstrate improvements from carrying out their action plan.
1.6.M Where a breach in a control process is identified there is evidence that an escalation process is in place.	2.6.M Evidence that there is a process of mitigation in place where control processes are breached to improve the process.	3.6.M Evidence that any learning from breach of control processes is shared.
1.6.N The finance team is aware of the organisational Green Plan.	2.6.N The finance team is aware of the organisational Green Plan and is actively promoting it.	3.6.N The finance team can demonstrate the effectiveness and impact of the organisational Green Plan.

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

## APPENDIX 2 - EXAMPLE ASSESSMENT QUESTIONS (LEVELS 2&3)

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. Assessors will ask questions based on the evidence provided. Below are some examples of the sorts of questions that might be asked:

### LEVEL 2: 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?
- How do you record learning and development (including CPD) activity? Do you have a Personal Development Plan and is it reviewed with you at least 6 monthly? 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 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 record learning and development (including CPD) activity? Do you have a Personal Development Plan and is it reviewed with you at least 6 monthly? 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, One NHS 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 and or One NHS Finance?
- Are there any improvements that could be made by the department to further help your development?
- How do you celebrate success, personal or departmental?
- What flexible working arrangements are available for you? Does anyone use them?
- Would you recommend your organisation as a great place to work?
- Can you tell us about engagement with budget holders and what sort of training you provide?
- Can someone tell us about their experience of coaching and or mentoring?
- What are the key elements of the finance skills training strategy?
- Why should the assessors accredit your organisation?
- How can you demonstrate organisation and professional leadership by senior finance team?



## **SAMPLE QUESTIONS – 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 important is the finance team in delivering the whole agenda; how confident are you?
- Have you received any finance training lately? If so, when was it? How was it?
- Would you know who to go to if you needed further advice? Are you comfortable seeking further advice?
- How do the finance teamwork with you to reduce waste and deliver efficiencies?

## **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?
- 

## **LEVEL 2 & 3 SAMPLE QUESTIONS - DIRECTOR OF FINANCE/CHIEF FINANCE OFFICER**

- What has the organisation developed since the last Accreditation assessment?
- What is the current position on One NHS Finance?
- How can you demonstrate organisation and professional leadership by yourself and your senior finance team?
- Can you tell us about your strategy to develop the finance department?
- EDI is an important agenda for NHS finance. Can you talk to us about the diversity in your current team and any actions you have taken or are planning?
- How do you review the training activity that your staff have undertaken?
- 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 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?
- Can you tell us what makes you proud of your staff. is there anything specific that they have achieved that sticks in your mind?
- How do you engage with your staff and ensure they are up to date with changes that are going on?
- What could you, either as the FD or as a department do better in relation to staff engagement, development and continual improvement?
- Can you give an example of how you have led your team to streamline processes and make efficiency savings?
- Can you tell us a bit more about the organisational approach to CIPs and finances role in supporting this?

## 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?
- Why should we accredit your Finance Team?

## APPENDIX 3 - ASSESSOR REPORT TEMPLATE

### ONE NHS FINANCE TOWARDS EXCELLENCE ACCREDITATION INPUT ORGANISATION NAME - ASSESSOR REPORT

#### Overview of organisation

- Brief overview of organisation (services, size etc).
- Details of finance department
  - Structure
  - no. of finance staff
  - how many qualified staff, studying etc
- This is also a chance for the organisation to sell themselves and share the process they have been through to pull together their application.

#### Overall Assessment

- Details on how assessment was carried out, visits to department or online, 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.

#### **Key areas of Good Practice**

- A couple of paragraphs on good practice seen throughout the assessment.

#### **Highlights and key strengths.**

- (Bullet points with explanation)

#### **Values and behaviours**

- Evidence of how embedded within organisation.

#### **Staff Engagement/ One NHS Finance Engagement**

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

#### **External Commitment (Level 3 applications only)**

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

#### **Areas for Improvement**

- Any areas for enhancement/ongoing development/in progress (Bullet points with explanation)

#### **Conclusion & Recommendation**

Appendix could include

- Meetings timetable
- The proforma

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