Health & Social Care Information Centre

HSCIC Board Performance Pack

December 2013 Data

Contents

Executive summary - HSCIC Performance

Programme Achievement

● December Overall Delivery Confidence is assessed as AMBER / GREEN with seventeen out of 19 projects rated AMBER compared to fourteen in the previous period.

● The Forecast Delivery Confidence for March 2014 remains AMBER / GREEN.

● Resourcing has improved with only one project reporting RED and seventeen AMBER. This is due to two previously rated RED projects improving and changing to AMBER.

● There has been a significant improvement in Key Milestone Achievement. There are now only two projects reporting RED and sixteen assessed as AMBER.

Finance

● The overall financial position remains RED.

● Operating costs - forecast expenditure has decreased but ambitious recruitment targets remain an issue for the rest of the year

● Staff costs continue to be under budget for the year-to-date. This is due to vacancies not being filled as budgeted. The situation is unlikely to improve in the final quarter, leaving a material underspend against the original budget.

● Accuracy of forecasting continues to be an issue. Despite the RAG changing to GREEN the variance would be 22% if overspend above forecast for central functions is taken in to account. Progress is being made in this area as the quality of financial reporting has improved. Closer links between managers and their financial business partners are also being forged.

Organisational Health

● The active vacancy rate has increased since last month with 245 vacancies and is assessed as RED. A meeting with Directors was held to agree the most effective recruitment strategy. This has resulted in a number of actions to assist in getting to required capacity levels.

● Staff turnover is broadly on track to achieve our target of 10%. There has been an upwards trend since the start of the financial year and a further increase in December to 9.5% (against a target of 10%). This is the highest figure so far this year.

KPI Action Tracker (consolidated list of all live actions)

KPI	Page	Key Actions	Target Date	Status
Programme Achievement	9	Revisit weighting of projects included in the KPI	10/01/2014	Completed - action was discussed and agreed to be removed as it is currently not required
		Other projects to be added to programme achievements including GPES, Spine 2, LSP Programmes, Care.Data, Data Sets for Commissioners and SUS / PBR	CLOSED	All Delivery confidence metrics and RAGs incorporated from D+IS and LSP Directorates as part of December dashboard submission
		Max Jones to advise James Hawkins and Rob Shaw of GPES FOT and whether plan 'B' is required	CLOSED	Plan B discussed and approved at EMT on 21 November
Customer and Stakeholder Satisfaction	15	Conduct first survey with external SROs	31/12/2013	Completed
		Next iteration of the SRO survey to include broader range of SROs	01/03/2014	Not started
		Get copy of inaugural Sponsor survey of satisfaction with HSCIC once survey has been completed	TBC	Not started
		Complete first run of new 'panel' survey (which includes some questions on customer satisfaction)	Jan 14	Completed
Public & Patient Engagement	16	Confirm which relevant organisations (representing patients' interests) to survey	15/12/2013	On target - but original deadline revised
		Develop survey questions for relevant organisations representing patients' interests	31/12/2013	Completed
		Conduct first survey with relevant organisations representing patients' interests	31/01/2014	On target - no issues original deadline achievable
		Check what feedback we have on choices & eReferral as well as pathways	17/02/2014	Not started
Reputation	17	Complete first run of new 'panel' survey (which includes some questions on reputation)	Jan 14	Completed
		Work with Rachel McHale on sourcing further data on social media, include NHS choices in the discussion	April 2014	On target - no issues original deadline achievable
Information Quality	18	Business Improvement Forum approve changes to the IR system	01/01/2014	Target date at risk - issues need addressing
		Go live with amended process for reporting	01/01/2014	Target date at risk - issues need addressing
Incident Resolution	19	Discuss with key directors where problem areas lie & seek support to ensure target days is met	31/03/2014	On target - no issues original deadline achievable
		Confirm the reporting system for incidents to be used across the organisations	31/03/2014	Target date at risk - issues need addressing
		Confirm access to new system	31/06/2014	On target - issues need addressing but original deadline achievable
		Roll out training to all HSCIC target date	31/06/2014	On target - issues need addressing but original deadline achievable
Usefulness of Service	20	Agree initial baseline of economic benefit KPI along with sources of information	31/01/2014	On target - but original deadline revised
		Add further outputs to KPI and refine economic benefit model as appropriate	On going	Not started
Transformation Programme Progress	27	Engagement Programme on 'What is Transformation'	20/12/2013	Fully completed
		Complete all Directorate Level Transformation Mandates	19/12/2013	Fully completed
		Consider Priority Projects and Resource Constraints	19/12/2013	Fully completed
Financial Management (HSCIC)	27	Improve forecasts and plans for future years of both programme and admin so they are based on a 'most likely' basis, rather than the 'best case' and without large contingencies	01/03/2014	On target - no issues original deadline achievable
		New performance indicators will be added to next month's pack (% invoices paid on time, % PO compliance and debtor days)	01/01/2013	Completed
		Agree the method for calculating the overall KPI RAG status	14/02/2014	On target - no issues original deadline achievable

KPI Action Tracker (consolidated list of all live actions)

KPI	Page	Key Actions	Target Date	Status
		Introduce monthly reports for each Directorate on performance against PO target, which will require a change in accounting practice from 1st April so that we code POs directly to I&E rather than Balance Sheet control accounts	01/05/2014	On target - no issues original deadline achievable
Organisational Health	23	Seek exemption from the current ALB recruitment restrictions until the HSCIC is up to its complement (which will be identified by the Zero Based Review (ZBR) Process)	20/11/2013	Fully completed
		Undertake a full review of the end to end recruitment process including handoffs and pinch points with focus on HR and Directorate level constraints	20/11/2013	Fully completed
		Complete approach paper and high level plan	20/12/2013	Fully completed
		Work with Phil Wade to identify Communications Resources to work on employer branding (linked to wider Brand Reputation Transformation Project)	31/12/2013	Fully completed
		Agree approach to deploying project and programme delivery professionals from the Portfolio Pool across the organisation	31/01/2014	On target - no issues original deadline achievable
		Consider potential alternative approaches to business support roles e.g. Rotation, apprenticeship schemes	28/02/2014	On target - but original deadline revised
		Complete Standard Job Descriptions for all priority roles	30/01/2014	On target - issues need addressing but original deadline achievable
		Complete procurement (from Framework) of Recruitment Marketing capability	14/02/2014	On target - but original deadline revised

Points of Interest

Care.data - The national leaflet drop associated with the care.data programme began on 6th January as planned. The leaflet titled 'Better Information Means Better Care' will be delivered to every household in England during January and a patient information line has been set up for patients to call if they have any queries. NHS England is delivering the leaflet drop with the HSCIC supporting the operation of the patient line for members of the public and for GP practices. There has been significant media interest which is expected to continue during January.

The Pharmacy Terminology Service (PTS) and the NHS Classifications Service (NCS) teams within the Information Standards Directorate have implemented a Quality Management System which has provided a focus on business goals thus allowing progress against strategic objectives to be defined and measured. Validation of their commitment to quality is expected to result in accreditation to the international standard for Quality Management (ISO 9001:2008) from the certification body Lloyd's Register Quality Assurance (LRQA) by March 2014.

After several months of concerted effort including undertaking internal audits and training for all PTS and NCS staff, both teams are now in the final stages of preparation for the external audit which will be completed on 14th February 2014.

HSE Data Visualisation - Lifestyles and Surveys have started some new innovative ways to present data. A user friendly graphical presentation of the key facts was also provided to accompany the publication. There are plans to expand on these in the future.

Mental Health and Community Care - IAPT (Improving Access to Psychological Therapies) – Final data quality stakeholder event held and publication plan developed for publications from January onwards. Amendments to analysis for Q2 also identified for implementation in January.

Prescribing and Primary Care - In December, the first full quarterly report of the Innovation Scorecard was published. Publications to date have reported annual data for 2011 and for 2012. This is collaborative work, led by the Prescribing and Primary Care Services team , funded by NHS England, and involves NICE (National Institute for Health and Care Excellence), DH, NHS hospital trusts, and the Life Sciences Industries (Pharma and MedTech).

The fourth "Use of NICE appraised medicines in the NHS in England – 2012" report was published on 21st January. There is significant interest in this report from the pharmaceutical industry and the NHS. This report is the result of collaborative work between HSCIC, NICE , with contributions from the pharmaceutical industry, DH and the NHS. All parties are committed to ensuring that the report contains the best available information that is of best use for the NHS. The report contains a new methodology, which aims to look at variation in prescribing, over time and between organisations. This is an important step forward in understanding the usage of newer and complex medicines – where NICE has appraised multiple medicines and not recommended one over another. The report follows the commitment set out in the 2009 Pharmaceutical Price Regulation Scheme (PPRS) agreement to publish, on an annual basis, metrics for usage by the NHS in England of a number of medicines positively appraised by NICE.

Summary of EMT KPI Performance

EMT KPI [not shown in order of priority as they have equal weighting]	KPI Owner*	Previous Period	Current Period	Current Forecast	Previous Forecast
Programme Achievement	James Hawkins	N/A**	A/G	A/G	N/A**
IT Service Performance	Rob Shaw	G	A	G	G
Customer and Stakeholder Satisfaction	James Hawkins & Dr. Mark Davies	N/A	G	A	A
Public & Patient Engagement	Dr. Mark Davies	R	N/A	A	A
Reputation	Alan Perkins	N/A	A	TBC	TBC
Information Quality	Max Jones	A	A	A	A
Incident Resolution	Rob Shaw	R	R	R	R
Usefulness of Service	Max Jones	A	A	A	A
Financial Management - HSCIC	Carl Vincent	R	R	R	R
Organisational Health	Rachael Allsop	R	R	R	R

*The person who is either accountable or responsible for managing the KPI/PI in terms of monitoring and reporting progress to achieve KPI targets, and taking corrective action if there is a problem (e.g., variation from plan)

**Please note that LSP and D+IS RAG and Highlight report data has been carried forward from the November dashboard to align reporting periods with Programme Delivery. The January Dashboard will report information from December Highlight reports for all 3 directorates.

The RAG traffic light colours are either driven by the unique, specific, numeric tolerances for each indicator (see Appendix 1) – or based on a subjective assessment made by the KPI Owner as follows: GREEN On track; AMBER Problems exist which can be addressed by the KPI owner; RED Serious* or recurring problems exist which require escalation for resolution [*Serious problems could have one or more of the following impacts: KPI targets will be compromised; reputational damage; additional unplanned resources required]

EMT KPIs by exception

EMT KPI [not shown in order of priority as they have equal weighting]	KPI Owner*	Previous Period	Current Period	Current Forecast	Previous Forecast
Incident Resolution	Rob Shaw	R	R	R	R

*The person who is either accountable or responsible for managing the KPI/PI in terms of monitoring and reporting progress to achieve KPI targets, and taking corrective action if there is a problem (e.g., variation from plan)

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KPI	Programme Achievement		PD		LSP		D+IS		COMBINED	
KPI Owner	**James Hawkins**	**Previous RAG**	64.5%	A/G						
		Current RAG	69.5%	A/G	80.0%	G	48.0%	A	**68.0%**	A/G
		Forecast RAG	74.7%	A/G	86.7%	G	56.0%	A	**74.0%**	A/G

Programme Delivery Directorate - Delivery Confidence (Gateway Reviews)

Gateway Review Assessments: FY 13/14

Legend:
— % programmes assessed as Amber or better from Gateway Reviews and Health Checks - actuals
···· % programmes assessed as Amber or better from Gateway Reviews and Health Checks - target
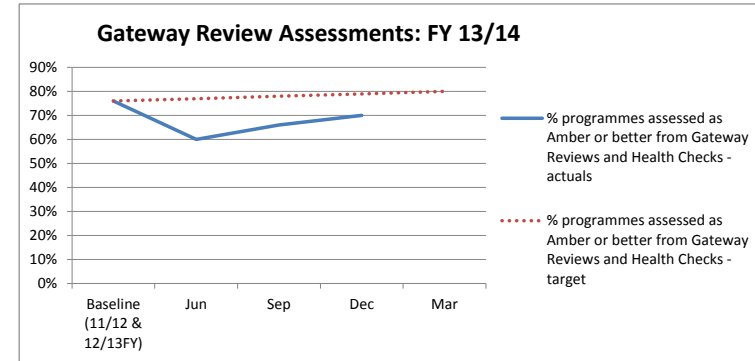
	Baseline (11/12 & 12/13FY)	Jun	Sep	Dec	Mar
% programmes assessed as Amber or better from Gateway Reviews and Health Checks - actuals	**76%**	60%	66%	**70%**	
% programmes assessed as Amber or better from Gateway Reviews and Health Checks - target	76%	77%	78%	79%	80%

The chart above relates to the indicator set for the Programmes Delivery Directorate to achieve 80% of delivery confidence assessments of Amber or better for Gateway Reviews. Baseline of 76% based on % achieved during 2011/12 and 2012/13 - Currently at 70% based upon 10 Gateway Reviews completed this Financial Year up to 31st December 2013.

Notes about this page:
1. Finance Department introduced a revised method of RAG reporting in Oct-13 for current year budgets to reflect the different categories of project expenditure: HSCIC Admin, Programme Revenue and Programme Capital. Any area of expenditure that is deemed to be outside of agreed corporate tolerances will result in an overall assessment of Amber or Red for current year budget even though the total may be within tolerance.

Please note that LSP and D+IS RAG and Highlight report data has been carried forward from the November dashboard to align reporting periods with Programme Delivery. The January Dashboard will report information from December Highlight reports for all 3 directorates.

Programme Delivery Directorate - Executive Summary

Overall Delivery Confidence is assessed as AMBER / GREEN based on December 2013 Highlight Reports. Successful delivery appears feasible for the majority of projects (17 out of 19 projects rated AMBER or better - Up from 14 last period) but there are some issues raised for awareness:

Resourcing - Last period's resourcing status has improved significantly. 3 programmes have upgraded and only 1 has downgraded their RAG - No programmes are reporting RED (2 last period)

Key Milestones – Significant improvement - 5 programmes have upgraded and 1 (NHSmail) have downgraded their status. Only NHSmail report RED due to a high priority CCN forecast to be 2 months overdue. 9 projects remain AMBER, mainly due to actual / forecast delays in obtaining business case / ICT spend approval.

Current Year Budget - The financial reporting guidelines mean 17 current year project budgets remain "Red", 16 of which are due to underspend (Project and / or admin). 3 projects are reporting a significant admin underspend against FY budget (NHS eRS, NHSmail and Choices, the Online Channel).

● NHSmail 2 are the only project to downgrade delivery confidence. Delays to OJEU process and concern about hitting the HMT approval milestone for OBC are the main causes
● CQRS - QOF Milestone 1, 2 and 3 currently behind schedule due to issues encountered during First-of-type activities
● GPSoC Replacement - completion of procurement by end Mar 2014 may be delayed due to multiple complex dependencies
● ETP – Increased confidence in the 'Fast Track' implementation plan up to March 2014 has resulted in a forecast 3-month delivery confidence RAG upgrade to A/G
● N3 - Approval of business case for continuation of N3 services beyond 31/03/2014 forecast for Feb 2014
● CtOC - New MPA Review Process held (Project Validation Report - PVR) held in November with AMBER assessment awarded, pending final documentation being received
● PSNH – AAP in Nov 13 recognised credible, material progress made since 'Red' delivery confidence from MPA during Gate 2 June 13. Project End date upgraded to AMBER based on Tolerance Exception Report being accepted but timelines and dependency on N3 still remain challenging
● HJIS - Now AMBER due to endorsement of SOC by ISCG. Tolerance Exception agreed to postpone HMT approval to Mar 2014. GMPP validity TBC, pending confirmation of whole life costs (c.£50M)
● NHS e-RS -CCN for transition and exit period finalised (Dec 2013 to Dec 2014). HMT and Cabinet Office for OBC conditional approval. RAG upgraded to GREEN.

LSP Delivery Directorate - Executive Summary

● Overall Delivery Confidence is assessed as GREEN based on November 2013 LSP DD Highlight Reports.
● Transformation activity is progressing to plan with ring-fenced interviews for Band 9 and 8d's commencing in early January 2014.
● Preparation has commenced for the MPA Programme Assurance Review which is scheduled to take place in mid February 2014 the scope of which covers BT and CSC.
● Financial forecast vs budget is still reported as 'Red' for BT LSP – South and London and CSC to reflect an underspend due to RIO deployments originally planned for FY13/14 being moved into 14/15 due to a 14 week delay in BT delivery (arrested by HSCIC), and for CSC a new deployment profile for Lorenzo, in addition to reconfiguration of the Repurpose Fund and withdrawal and slippage of CCNs.

Data and Information Services - Executive Summary
Overall Delivery Confidence is assessed as AMBER based on November 2013 Highlight Reports. Successful delivery is uncertain for the NTS, care.data and Data Services for Commissioners (DSFC). There are a number of issues raised for awareness:

Resourcing - Constraints are causing delays and most programmes have raised it as an issue.
Current Year Budget – Although no budget was set at the beginning of the year for care.data and DSFC the programmes are forecasting and tracking spend.
Business Case / Investment Justification - Business Case cover is not yet in place for care.data and NTS although their Strategic Outline Cases are in the internal approvals process. The SOC for Data Services for Commissioners is being developed.

● NTS - Although the business case and ICT spend approvals are progressing to a timeline which will enable an NTS system to be produced by the end of the HSCIC SUS service, approvals and timelines to deliver NHS & SUS continuity post BT in December 2014 require immediate attention.
● care.data - In addition to approvals, a major focus is delivery of primary-secondary care linked dataset. Preparations for extraction of primary care data to support this are well underway. A phased rollout is being readied over a 3 month period with full extractions anticipated in May 2014 (first extraction from March). Public awareness activity in support of this has been announced.
● DSfC - The programme and service delivery is pending an outline of direction, requirements and funding from NHS England.
● GPES - Revised ways of working implemented and the teams are working effectively under the new arrangements. The revised plan is progressing to schedule although contingency remains low.

Key Actions to rectify variance from target	Target Date		Progress
Revisit weighting of projects included in the KPI	10-Jan-14		Completed - action was discussed and agreed to be removed as it is currently not required
Other projects to be added to programme achievements including GPES, Spine 2, LSP Programmes, Care.Data, Data Sets for Commissioners and SUS / PBR	CLOSED		All Delivery confidence metrics and RAGs incorporated from D+IS and LSP Directorates as part of December dashboard submission
Max Jones to advise James Hawkins and Rob Shaw of GPES FOT and whether plan 'B' is required	CLOSED		Plan B discussed and approved at EMT on 21 November

KPI	Programme Achievement
KPI Owner	James Hawkins

Previous RAG	A/G
Current RAG	A/G
Forecast RAG	A/G

Programme Delivery Dashboard - December 2013

		Overall Delivery Confidence RAG							Gateway Delivery Confidence				Key Delivery Milestones				Current year financial forecast vs. budget				Investment justification (BC, MoU etc) forecast spend status			
		Oct	Nov	Dec		Jan	Feb	Mar	RPA	Gate	Date	RAG	Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec	
P0004	CP-IS	A	A	A	→	A/G	A/G	A/G	Med	3	Jul-2012	A	A	A	A	→	G	G	U	↓	G	G	G	→
P0070	CQRS	A	A	A		A	A	A	Med	4a	Oct-2013	A	G	A	A	→	G	G	U	↓	G	G	G	→
P0010	DMS Connectivity	G	G	G	→	G	G	G	N/A	N/A	N/A	N/A	G	G	G	→	U	U	U	→	N/A	A	G	↑
P0012	ETP	A/R	A/R	A/R	→	A	A	A/G	High	0	Nov-2012	A/R	A	A	A	→	G	G	G	→	G	G	G	→
P0014	GP2GP	G	G	A/G	↓	A	A	A	Low	N/A	N/A	N/A	R	A	A	→	U	U	U		G	G	G	→
P0017	GPSOC	G	G	G		G	G	G	High	4	Mar-2009	A/G	A	G	G	→	U	U	U		G	G	G	→
P0208	GPSOC Replacement	A	A	A		A	A	A	High	3	Nov-2013	A	U	U	U		R	R	R		G	G	G	→
P0207	HJIS	A/R	A/R	A	↑	A	A	A	Med	1	Sep-2013	A/G	R	R	A	→	G	G	G	→	N/A	N/A	N/A	→
P0026	HSCDS (Choices Service)	G	A	G	↑	G	G	G	Med	5	Apr-2012	G	A	A	G	↑	TBC	U	U		N/A	N/A	N/A	→
P0298	NHS Choices Online Channel	A/R	A/R	a	→	A	A	A	High	PVR	Dec-2013	A	A/R	A/R	A	↑	TBC	U	U		A	TBC	G	↑
P0024	N3	G	A	A		A	A	A/G	High	5	Jul-2012	A/G	A	G	A	→	U	U	U		G	G	G	→
P0238	NHS e-RS inc. CAB	A	A	G	↑	G	G	G	High	AAP	Jul-2013	A	A	A	G	→	U	U	U		G	G	G	→
P0030	NHSmail	A/G	A/G	A/G	→	A	A	A	Low	AAP	Oct-2012	G	G	A	R	↓	U	U	U		G	G	G	→
P0196	NHSmail2	A/G	A/G	A/G	↓	A	A	A	Med	2	Jun-2013	A	A	A	A	→	R	R	R		G	G	G	→
P0037	OHIT	A	A	A		G	G	G	N/A	N/A	N/A	N/A	G	G	G	→	G	U	U		G	G	G	→
P0190	PSNH	R	R	R	→	R	A/R	A	High	AAP	Nov-2013	R	R	A	G	↑	O	O	O		G	A	A	→
P0051	SCR	A/G	A/G	A/G		A/G	A/G	A/G	High	0	Feb-2012	A	G	G	G		U	U	U		G	G	G	→
P0049	Spine Extension	NR	NR	A/G	-	G	G	G	Med	3	May-2012	A/G	NR	NR	G	-	NR	NR	U	-	NR	NR	G	-
P0050	Spine 2	A	R	A	↑	A	A	A	High	AAP	Sep-2013	A	A	A	A	→	U	U	U		A	A	A	→

Overall Delivery Confidence for Programme Delivery:

December-2013	A/G 69.47%
March-2014	A/G 74.74%

Sourced from Highlight Reports (Key RAGs)   December-13

December's Delivery Confidence has **increased** from **64.5%** (Nov 2013 data) to **69.5%** . The overall Delivery confidence RAG remains 'AMBER / GREEN'. The 3-month forecast Delivery Confidence (to Mar 2014) remains 'AMBER / GREEN' despite a **6.9 percentage point increase** since last period (up from **67.8%** to **74.7%**). 5 projects have upgraded their 3-month forecast since last month; 1 has downgraded its forecast (NHSmail 2).
NOTE: SPINE Extension is a new addition this period, which has partially contributed to the increase in delivery confidence scores.

Non Completion

NR	No report provided (pre-dating NHS England monthly requirement for submission / Programme Delivery reporting standard initiation)
NB	No Programme or Project Board took place that month (pre-dating NHS England monthly requirement for submission)
N/A	Data item is not applicable to programme or project (for example, MOUs may not be responsible for Benefits Realisation or be accountable for ICT Spend Approval) or was not mandated on historical template
TBC	Data item was not available at the time of report production (for example, discrepancies with budget figures or a lack or information around the progression of an approval)

KPI	Programme Achievement
KPI Owner	James Hawkins

Previous RAG	A/G
Current RAG	A/G
Forecast RAG	A/G

Programme Delivery Dashboard - December 2013

		Benefits realisation confidence				Quality Management against plan				Programme / Project end date				Current Investment Justification approval status				ICT Spend Approval status				Resourcing Against Plan			
		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec	
P0004	CP-IS	N/A	N/A	N/A	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→
P0070	CQRS	A	A	A	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→
P0010	DMS Connectivity	N/A	N/A	N/A	→	G	N/A	N/A	→	G	G	G	→	A	A	A	→	N/A	N/A	N/A	→	G	G	G	→
P0012	ETP	R	R	R	→	R	R	A	↑	A	A	A	→	G	G	G	→	G	G	G	→	A	A	G	→
P0014	GP2GP	G	G	G	→	A	A	A	→	A	G	G	→	G	G	G	→	N/A	N/A	N/A	→	A	A	A	→
P0017	GPSOC	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	N/A	N/A	N/A	→
P0208	GPSOC Replacement	G	G	G	→	G	A	G	→	G	G	G	→	G	G	G	→	G	G	G	→	A	A	A	→
P0207	HJIS	N/A	N/A	N/A	→	A	G	G	→	a	A	A	→	A	A	A	→	A	A	A	→	A	A	A	→
P0026	HSCDS (Choices Service)	G	N/A	N/A	→	G	N/A	N/A	→	R	R	R	→	A	A	A	→	N/A	N/A	N/A	→	R	R	A	↑
P0298	NHS Choices Online Channel	TBC	TBC	TBC	→	TBC	TBC	A	↑	a	A	G	↑	A	A	A	→	A	A	G	↑	A	A	A	→
P0024	N3	G	G	G	→	G	A	A	→	A	A	A	→	A	A	A	→	G	A	A	→	A	A	A	→
P0238	NHS e-RS inc. CAB	G	G	G	→	G	G	G	→	G	G	G	→	A	R	G	↑	G	R	G	↑	G	G	G	→
P0030	NHSmail	A	G	G	→	G	A	A	→	G	G	G	→	G	G	G	→	G	G	G	→	R	R	A	↑
P0196	NHSmail2	G	G	G	→	R	R	A	→	A	A	A	→	A	A	A	→	A	A	A	→	G	G	A	↓
P0037	OHIT	G	G	A	↓	G	G	G	→	G	G	R	↓	N/A	N/A	N/A	→	N/A	N/A	N/A	→	N/A	N/A	N/A	→
P0190	PSNH	A	G	G	→	A	A	A	→	R	R	A	↑	A	A	A	→	G	A	A	→	A	A	A	→
P0051	SCR	A	A	A	→	A	A	A	→	G	G	G	→	G	G	G	→	G	G	G	→	A	A	A	→
P0049	Spine Extension	NR	NR	G	-	NR	NR	G	-	NR	NR	G	-	NR	NR	G	-	NR	NR	G	-	NR	NR	A	-
P0050	Spine 2	A	A	G	↑	A	A	G	↑	G	G	G	→	G	A	A	→	A	A	R	↓	A	A	A	→

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NOTE: SPINE Extension is a new addition this period, which has partially contributed to the increase in delivery confidence scores.

KEY

Non Completion

NR	No report provided (pre-dating NHS England monthly requirement for submission / Programme Delivery reporting standard initiation)
NB	No Programme or Project Board took place that month (pre-dating NHS England monthly requirement for submission)
N/A	Data item is not applicable to programme or project (for example, MOUs may not be responsible for Benefits Realisation or be accountable for ICT Spend Approval) or was not mandated on historical template
TBC	Data item was not available at the time of report production (for example, discrepancies with budget figures or a lack or information around the progression of an approval)

KPI	Programme Achievement (LSP)
KPI Owner	James Hawkins

Previous RAG	
Current RAG	G
Forecast RAG	G

LSP Dashboard - December 2013

ID	Name	Overall Delivery Confidence RAG							Gateway Delivery Confidence				Key Delivery Milestones				Current year financial forecast vs. budget				Investment justification (BC, MoU etc) forecast spend status			
		Oct	Nov	Dec		Jan	Feb	Mar	RPA	Gate	Date	RAG	Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec	
P0183	South Community Programme		A/G	A/G	→	G	G	G	Med	3	Dec-2012	A/G	A	G	G	→	G	G	G	→	G	G	G	→
P0182	South Ambulance Programme		A	A	→	A/G	A/G	A/G	Med	3	Dec-2013	A/G	A	A	A		G	G	G		G	G	G	
P0181	South Acute Programme		A/G	A/G	→	A/G	A/G	A/G	High	2	Dec-2012	A/G	A	A	A		G	G	G		G	G	G	
P0047	BT LSP - South		G	G	→	G	G	G	High	5	Nov-2012	A/G	A	A	A		U	U	U		G	G	G	
P002	BT LSP - London		A	A	→	A	A	A	High	N/A	N/A	N/A	A	A	A		U	U	U		A	A	A	
P0031/00	CSC LSP		G	G	→	G	G	G	High	N/A	N/A	N/A	G	G	G		U	U	U		G	G	G	

Overall Delivery Confidence for Programme Delivery:

December-2013	G 80.00%
March-2014	G 86.67%

Sourced from Highlight Reports (Key RAGs)   December-13

This is the second month that LSP have input into Delivery Confidence KPI. However, the RAG data for December has been frozen since November to align the reporting period with Programme Delivery. From next month onwards, all RAGs will be updated based on the same Highlight Reporting period. Current delivery confidence RAG is GREEN and is forecast to remain GREEN in 3 months' time. The Executive summary provides additional commentary.

KPI	Programme Achievement (D+IS)
KPI Owner	James Hawkins

Previous RAG	
Current RAG	A
Forecast RAG	A

Data and Information Services Dashboard - December 2013

ID	Name	Overall Delivery Confidence RAG							Gateway Delivery Confidence				Key Delivery Milestones				Current year financial forecast vs. budget				Investment justification (BC, MoU etc) forecast spend status			
		Oct	Nov	Dec		Jan	Feb	Mar	RPA	Gate	Date	RAG	Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec	
P0294	National Tariff System (NTS)	R	A/R	A/R	→	A/R	A/R	A/R	Med	N/A	N/A	N/A	NR	A/R	A	↑	NR	U	G	↑	N/A	N/A	N/A	→
P0291	care.data	A/R	A/R	A/R	→	A/R	A	A	High	N/A	N/A	N/A	A	A	A		N/A	N/A	O	↑	N/A	N/A	A	↑
P0265	Data Services for Commissioners	R	R	R	→	A/R	A/R	A/R	TBC	N/A	N/A	N/A	NR	R	R		NR	O	O	→	NR	R	R	
P0281/03	GPES	NR	NR	A/R	↑	A/R	A/R	A/R	TBC	4	Dec-2012	A	NR	NR	A	↑	NR	NR	O	↓	NR	NR	G	
P0042	SUS	NR	NR	G	↑	G	G	G	Med	See Spine	See Spine	See Spine	NR	NR	G	↑	NR	NR	G	↑	NR	NR	G	↑

Overall Delivery Confidence for Programme Delivery:

December-2013	A 48.00%
March-2014	A 56.00%

Sourced from Highlight Reports (Key RAGs)   December-13

This is the second month that D+IS have input into Delivery Confidence KPI. However, the RAG data for December has been frozen since November to align the reporting period with Programme Delivery. From next month onwards, all RAGs will be updated based on the same Highlight Reporting period. Current delivery confidence RAG is AMBER and is forecast to remain AMBER in 3 months' time. The Executive summary provides additional information about areas of challenge.

KEY

Trend

↑	RAG improvement from previous month
→	RAG same as previous month
↓	RAG decrease from previous month

Non Completion

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NB	No Programme or Project Board took place that month (pre-dating NHS England monthly requirement for submission)
N/A	Data item is not applicable to programme or project (for example, MOUs may not be responsible for Benefits Realisation or be accountable for ICT Spend Approval) or was not mandated on historical template
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KPI	Programme Achievement (LSP)
KPI Owner	James Hawkins

Previous RAG	
Current RAG	G
Forecast RAG	G

LSP Dashboard - December 2013

		Benefits realisation confidence				Quality Management against plan				Programme / Project end date				Current Investment Justification approval status				ICT Spend Approval status				Resourcing Against Plan			
		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec	
P0183	South Community Programme	A	A	A	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→
P0182	South Ambulance Programme	A	A	G	↑	G	G	G	→	G	G	A	↓	G	NB	G	↑	G	NB	G	↑	A	NB	G	↑
P0181	South Acute Programme	G	G	A	↓	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	R	G	G	↑
P0047	BT LSP - South	A	A	A	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	A	A	A	→
P002	BT LSP - London	A	A	A	→	N/A	N/A	N/A	→	A	A	A	→	G	G	G	→	G	G	G	→	A	A	A	→
P0031/00	CSC LSP	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→	G	G	G	→

Overall Delivery Confidence for Programme Delivery:	
December-2013	G 80.00%
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Sourced from Highlight Reports (Key RAGs)   December-13

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KPI	Programme Achievement (D+IS)
KPI Owner	James Hawkins

Previous RAG	
Current RAG	A
Forecast RAG	A

Data and Information Services Dashboard - December 2013

		Benefits realisation confidence				Quality Management against plan				Programme / Project end date				Current Investment Justification approval status				ICT Spend Approval status				Resourcing Against Plan			
		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec		Oct	Nov	Dec	
P0294	National Tariff System (NTS)	N/A	N/A	N/A	→	N/A	N/A	N/A	→	NR	G	A	↓	A	G	A	↓	A	A	A	→	A	A	A	→
TBC	care.data	N/A	N/A	A	↑	N/A	N/A	G	→	G	G	G	→	G	G	A	↓	A	A	A	→	A	A	A	→
P0265	Data Services for Commissioners	NR	R	R	→	NR	R	R	→	NR	R	R	→	NR	R	R	→	NR	R	R	→	NR	R	R	→
P0281/03	GPES	NR	NR	N/A	↓	NR	NR	G	↑	NR	NR	A	↑	NR	NR	G	↑	NR	NR	G	↑	NR	NR	A	↑
TBC	SUS	NR	NR	G	↑	NR	NR	G	↑	NR	NR	G	↑	NR	NR	A	↑	NR	NR	G	↑	NR	NR	G	↑

Overall Delivery Confidence for Programme Delivery:	
December-2013	A 48.00%
March-2014	A 56.00%

Sourced from Highlight Reports (Key RAGs)   December-13

This is the second month that D+IS have input into Delivery Confidence KPI. However, the RAG data for December has been frozen since November to align the reporting period with Programme Delivery. From next month onwards, all RAGs will be updated based on the same Highlight Reporting period. Current delivery confidence RAG is AMBER and is forecast to remain AMBER in 3 months' time. The Executive summary provides additional information about areas of challenge.

KEY

Trend

↑	RAG improvement from previous month
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Non Completion

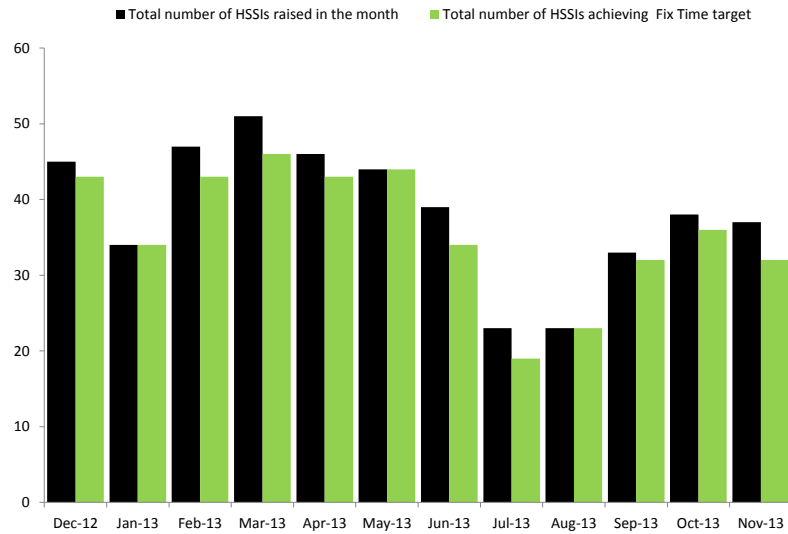| NR	No report provided (pre-dating NHS England monthly requirement for submission / Programme Delivery reporting standard initiation)
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Changes in this report: HSSI volumetrics data at the end of the commentary section now only includes HSSI's resulting from HSCIC services.

Caveats: Although service performance targets remain static each month, the number of services being reported against varies due to contractual reporting cycles. For example, in the Sep-13 KPI report, there were 66 services measured for Availability in the Sep-13 reporting month, however this figure has now increased to 77 services measured, following the subsequent receipt of the latest Spine and SUS Quarterly Service Reports, in November and December 2013 respectively.

Higher Severity Service Incident (HSSI) Fix Time Achievement Analysis - Last 12 months

Legend: ■ Total number of HSSIs raised in the month   ■ Total number of HSSIs achieving Fix Time target

Commentary:

Availability: November was generally a positive month for live service Availability with 63 of the 66 services reported against either achieving or exceeding their average Availability targets.

There was, however, a significant outage of the Choose and Book Service which lasted from 13:58 on 19th November to 00:48 on 20th November. The root cause was a failure of the primary a network switch, followed by a failure of the secondary network switch upon failover. The issue was further compounded by configuration issues being experienced during resolution activities. This resulted in Availability failures for both the core hours measure and the non-core hours measure.

London Acute Services also failed the average Availability target due to significant outages at Barts, Croydon University Hospital and Imperial College. The failures at Barts and Imperial were due to a power supply failure - HP confirmed a Design and Build issue where single points of failure exist. This is being followed up with BT. The Croydon failure was caused by network connectivity issues and the failure of a server.

Response Times: For the majority of services, Response Times performance was good in the reporting month with 37 out of 42 services reported against having achieved or exceeded their Response Times targets. There were, however, Amber level failures on RiO in both London and the South for the fifth consecutive month, and Critical Level failures on iPM in both NE and NWWM and on Lorenzo at University Hospitals Morecambe Bay.

The root cause of the RiO performance failures in London and the South are believed to be due to a configuration issue and BT has implemented a design change which they believe will address the issue. Performance will be monitored closely.

The Critical Level failures on iPM and Lorenzo are still under investigation by CSC.

HSSI Fix Times: November saw the number of HSSI's in the month fall by 1 to 37 which remains in line with trend over the last 12 months. Two of those HSSI's were related to Clinical Safety and none related to Security incidents - the first clinical safety incident was related to Lorenzo which was applying incorrect timestamps against some appointments and the second was a Microtest issue whereby the wrong drug name had been printed on a prescription. 32 of the HSSI's were resolved within the Fix Time Service Level, leaving 5 that failed to meet that target as follows: the Choose and Book HSSI on the 19th November, referenced in the Availability section above, took 10 hrs. 50min to resolve, against a Fix Time target of 2 hours. CSC experienced 3 Severity 2 incidents that failed the SLA, one at Royal Bolt on Hospital which took 18 hrs. 51mins to resolve against an SLA of 4 Hrs. and 2 at University Hospitals Morecambe Bay which took 22hrs 52mins and 9hrs 49mins to resolve, both against an SLA of 4hrs. The final HSSI that failed the Fix Time target was an EMIS Severity 2 Incident on the 13th of the month which took 5hrs 9 mins to resolve, again st a Fix Time SLA of 4 hours.

Since the reporting period of November and the generation of this commentary (9 January) the following HSSI's have occurred which are worthy of note:
5/12/13 - TMS database issues between 14:55 and 15:20
13/12/13 - iPM was unavailable to multiple trusts between 8:56 and 10:36
18/12/13 - Choose and Book Appointment booking response times peaked to 30 seconds between 15:00 and 15:40
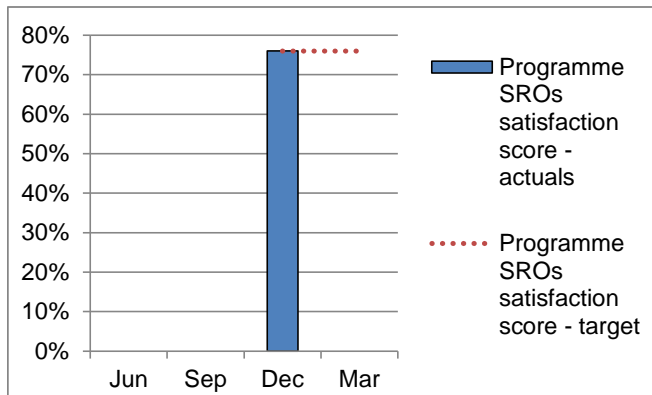
HSSI Volumetrics: Average elapsed time between a HSSI being logged where a HSCIC service was at the root cause in November 2013: 19 hours 27 minutes

Performance Indicators	Target	Dec-12	Dec-12 RAG	Jan-13	Jan-13 RAG	Feb-13	Feb-13 RAG	Mar-13	Mar-13 RAG	Apr-13	Apr-13 RAG	May-13	May-13 RAG	Jun-13	Jun-13 RAG	Jul-13	Jul-13 RAG	Aug-13	Aug-13 RAG	Sep-13	Sep-13 RAG	Oct-13	Oct-13 RAG	Nov-13	Nov-13 RAG
No. of Services achieving Availability target	All Services to achieve individual targets (but see caveat)	79		79		77		75		75		76		77		78		75		73		76		63	
No. of Services breaching Availability target, but not to a critical level	0	1	A	0	G	2	A	4	A	4	A	3	A	1	A	0	G	2	A	4	A	0	G	3	A
No. of Services breaching Availability target at a critical level	0	0		0		0		0		0		0		0		0		0		0		0		0	
Total No. of Services measured for Availability Performance >>>>		80		79		79		79		79		79		78		78		77		76		75		75	
No. of Services achieving Response Times target	All Services to achieve individual targets (but see caveat)	42		42		41		43		43		42		44		42		42		41		39		37	
No. of Services breaching Response Times target, but not to a critical level	0	1	R	1	R	2	R	0	R	0	R	2	R	1	A	3	A	2	A	4	A	4	A	2	R
No. of Services breaching Response Times target at a critical level	0	2		2		2		2		2		1		0		0		0		0		0		3	
Total No. of Services measured for Response Time Performance >>>>		45		45		45		45		45		45		45		45		44		44		42		42	
Total number of Higher Severity Service Incidents (HSSIs)	N/A	45		34		47		51		46		44		39		23		23		33		38		37	
Total number of HSSIs achieving Fix Time target		43	G	34	G	43	A	46	A	43	A	44	G	34	A	19	A	23	G	32	G	36	A	32	A
% HSSIs achieving Fix Time target	95%	96%		100%		91%		90%		93%		100%		87%		83%		100%		97%		95%		86%	

Key Actions			Target Date	Owner	Progress

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

KPI	Customer and Stakeholder Satisfaction		Previous RAG	N/A
KPI Owner	James Hawkins and Dr Mark Davies		Current RAG	G
			Forecast RAG	A

	Jun	Sep	Dec	Mar
Programme SROs satisfaction score - actuals			76%	
Programme SROs satisfaction score - target			76%	76%

The current RAG status is GREEN due to the Programme SRO Satisfaction score . The forecast RAG is AMBER as there are areas of improvement within our Responsiveness and Customer Satisfaction PIs that need addressing.

Stakeholder Satisfaction
• The first SRO satisfaction survey has been successfully completed. This initial survey was sent out to SROs of our GMPP projects. A total of five responses covering 8 projects were received. Each SRO was asked to rate their satisfaction, on a scale of 0 to 5 on the following seven criteria areas: Service Strategy, Programme Delivery, Service Delivery, Business Change, Comms & Stakeholder Engagement, Benefits Realisation and an Overall General Satisfaction Score.
• The chart opposite currently reflects the average "Overall General Satisfaction Score". Other scores have not been counted for this period but will be tracked for future trend analysis.
• Feedback noted the benefits realisation, Communications and Stakeholder Engagement and Service Delivery areas as the weakest, scoring <4, with various issues noted. Programme leads are engaging with SROs as part of on-going Programme governance and engagement to agree improvement plans, to increase the score above target moving forward.
• In FY 14/15 it is intended to widen the scope to non-GMPP SROs.
• Please note this data is sensitive due to the small sample size, where one result or non return could impact the overall score significantly.

Responsiveness
Our survey of customers contains some positive feedback alongside clear areas of attention. It provides a benchmark of opinions of the organisation, measured against key objectives in our strategy. Over 40% felt the HSCIC was a 'customer focused, responsive organisation', a quarter were undecided, but a third disagreed giving us a known focus for attention. Response to 'immediate ' enquiries is sound; our enquiry team have just published the annual YTD figures that show that of 62k enquiries, 76% were answered immediately and 12% within 5 days. Of visitors to our website in October/November 2013 about 6 out of 10 could find what they were looking for. Analysis of the remaining respondents however shows that they were looking for data we did not hold or were asking subjective questions. National health and social care organisations have expressed a clear desire to work collaboratively with HSCIC strategy, but there is a perception that it is hard and bureaucratic to access data.

Customer Satisfaction
There is a high trust in our services and 50% having received a consistent level of service. Additionally, the same figure feel we have the services they need. A third, however, do not receive the service they require and understanding and remedying this rapidly, is key. Nonetheless positive indicators do emerge from our products and services. The latest annual user survey results for NHSmail in November recorded an increase in user satisfaction and service use. The most recent satisfaction surveys for N3 service provision and   PACS in the North, East, Midlands (October 2013) both recorded improvements in several areas.

Key Actions	Target Date		Status
Conduct first survey with external SROs	31/12/2013		Completed
Next iteration of the SRO survey to include broader range of SROs	01/03/2014		Not started
Get copy of inaugural Sponsor survey of satisfaction with HSCIC once survey has been completed	TBC		Not started
Complete first run of new 'panel' survey (which includes some questions on customer satisfaction)	Jan 14		Completed

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

KPI	Public & Patient Engagement		Previous RAG	R
KPI Owner	Dr Mark Davies		Current RAG	N/A
			Forecast RAG	A
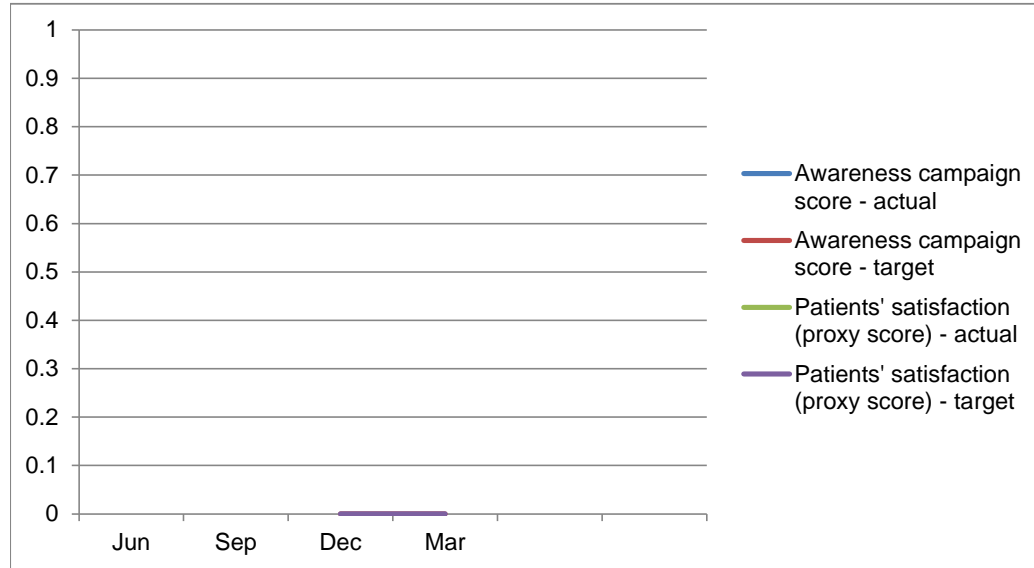
This KPI is measured quarterly - therefore no change in performance to report from previous month. Key actions shown below.

	Jun	Sep	Dec	Mar
Awareness campaign score - actual		No baseline		
Awareness campaign score - target			TBC	TBC
Patients' satisfaction (proxy score) - actual		No baseline		
Patients' satisfaction (proxy score) - target			TBC	TBC

Key Actions	Target Date		Status
Confirm which relevant organisations (representing patients' interests) to survey	15/12/2013		On target - but original deadline revised
Develop survey questions for relevant organisations representing patients' interests	31/12/2013		Completed
Conduct first survey with relevant organisations representing patients' interests	31/01/2014		On target - no issues original deadline achievable
Review results from Awareness Campaign	31/01/2014		On target - no issues original deadline achievable
Check what feedback we have on choices & eReferral as well as pathways	17/02/2014		Not started

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

| KPI	Reputation	Previous RAG	N/A
KPI Owner	Alan Perkins	Current RAG	A
		Forecast RAG	TBC

● The interim response from our first survey of customers has been received and contains some positive feedback alongside clear areas for attention. It provides a benchmark of opinion about the organisation and measures views against key objectives in our strategy.

● Trust in the organisation is good with over 70% trusting the HSCIC to 'produce the high quality data and information I need' and to ' manage the IT systems it is responsible for'. It was also a strong result that over 8 out of 10 felt confidential patient data was 'safe and secure' in our hands.

● Two thirds thought 'staff capabilities' were good, however customer service requires attention as, whilst 50% had consistent levels of customer service from the HSCIC, this was balanced by about one third who had not.

● There were significant numbers (about 30%) who felt we did not contribute to reducing bureaucracy or were not innovative. This equalled the number who agreed with these statements with about half being unsure.

● As we expected there is clearly work to do, but encouragingly a majority (60%) agreed that HSCIC plays 'a critical role in helping England achieve the best possible health outcomes'.

● The latest independent media coverage report from November records that the HSCIC generated 175 articles across press, broadcast and online sources reaching a potential audience of 27.4 million and was predominantly positive at 97%, with the remaining 3% neutral.

● In December HSCIC's new report 'Focus on A&E' reinforced this with a press briefing attended by all national broadcast and print health correspondents. The resulting good coverage across the BBC network and most daily newspapers reflected the purpose of both the report and briefing, in presenting a balanced overview of A&E activity with a view to building understanding with the media about this data and also HSCIC's role as an independent, authoritative organisation.

● In November more than 130 delegates from a range of organisations attended a stakeholder event to learn about the HSCIC's Data Linkage and Extract Service and how the care.data programme will increase the breadth of data available ,with 98.2% of delegates rating the event as 'good' or 'very good'.

● The latest annual user survey results for NHSmail recorded an increase in user satisfaction and service use. The daily use of NHSmail among the 650,000 active users in the health service has grown by 13% over the past year. The results show 85% of users are now using NHSmail daily, compared to 72% the year before – and the levels of satisfaction have gone up to 79% compared to 76% in 2012.

● Achievements are also continuing to be recognised elsewhere for example BJSS, an IT consultancy, and the HSCIC's HES team have won the Public Sector Project of the Year category of the Techworld Awards for the re-engineering of the NHS Hospital Episode Statistics (HES) data platform.

● Our national reputation has been enhanced by the request for testimonials, invitations to speak, chair and facilitate events

● In addition to this our International reputation has been enhanced by our building of international contacts and requests for comments for articles, advice and presentations. Further information on the number of visits to the Developing Informatics Skills & Capability (DISC) websites can be found on page two of the MI report (Appendix 5).

Key Actions	Target Date		Status
Complete first run of new 'panel' survey (which includes some questions on reputation)	Jan 14		Completed
Work with Rachel McHale on sourcing further data on social media, include NHS choices in the discussion	April 2014		On target - no issues original deadline achievable

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

KPI	Information Quality		Previous RAG	A
KPI Owner	Max Jones		Current RAG	A
			Forecast RAG	A
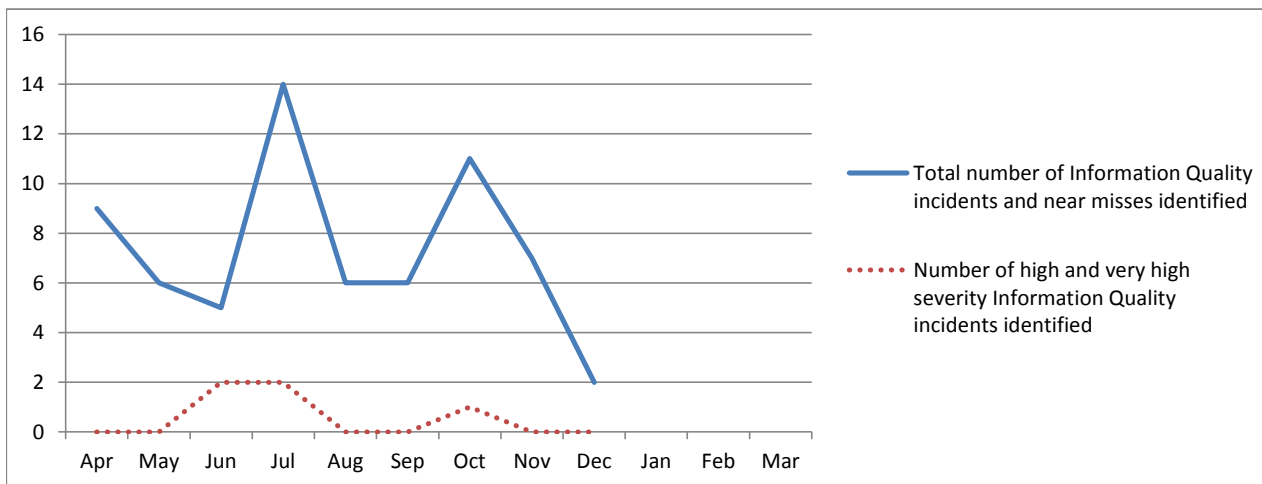
There were two Information Quality incidents identified in December 2013. One related to sending internal HSCIC staff "at risk" letters to the wrong address. The other related to a small error in a publication (a table in the 32 page PROMS report). Neither were high or very high impact.

All incidents recorded on the Incident Reporting (IR) system have now been reviewed and Information Quality incidents recorded as such. It has therefore been possible to produce the historic time series this month.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Total number of Information Quality incidents and near misses identified	9	6	5	14	6	6	11	7	2			
Number of high and very high severity Information Quality incidents identified	0	0	2	2	0	0	1	0	0			

Key Actions	Target Date		Status
Business Improvement Forum approve changes to the IR system	01/01/2014		Target date at risk - issues need addressing
Go live with amended process for reporting	01/01/2014		Target date at risk - issues need addressing

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

KPI	Incident Resolution		Previous RAG	R
KPI Owner	Rob Shaw		Current RAG	R
			Forecast RAG	R
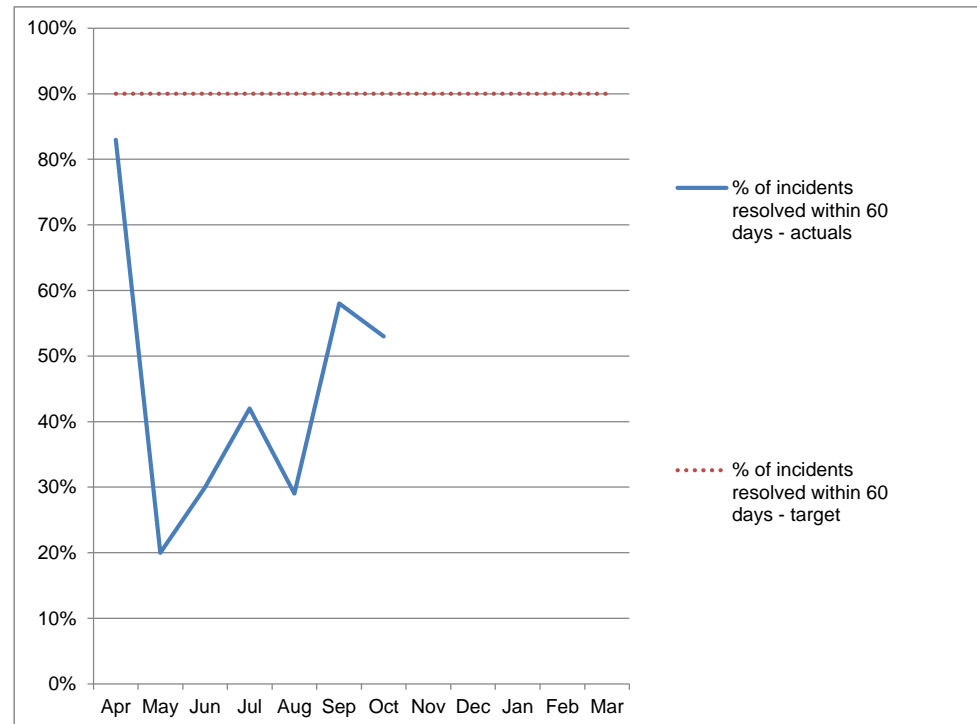
Percentage of incidents resolved within 60 days: October 2013 – 53%
October 2013 is the latest month available which would enable all incidents to be resolved within 60 days. 53% of incidents raised in October 2013 were resolved within 60 days. This is still a long way from the target of 90%. More rigorous management action has been applied this month. There is still a significant back log of incidents due to increased workloads and the teams being severely under resourced which will mean this KPI will remain RED for the foreseeable future.
Note: The Incident System which is used as the basis for these figures is currently not used across the whole organisation. Work is underway to establish which system is to be used, and once that has been decided, work will progress on rolling it out.

Percentage of incidents resolved in December which had been resolved within 60 days: December 2013 – 43%
There were 14 incidents resolved during December, the same number as new incidents identified. The backlog is currently large and incidents have been outstanding for a long time.

Number of Incidents reported December 2013 – 14
In the drive to improve quality across the board, we need to develop a learning culture, where incidents or near misses are reported, investigated, shared and the organisation learns from the experience. As such we will not be setting a target as we need to encourage incident reporting and feel setting a target would discourage reporting.

Note: This KPI is currently under redevelopment

The trend is often erratic. The numbers are small and thus changes appear exaggerated. The RED RAG status relates to the percentage of incidents identified in October 2013, resolved within 60 days. There were 19 incidents identified in October 2013, 15 incidents (of which 1 was "high" impact) and 4 near misses (of which 1 was "very high impact"). 53% of the 19 incidents had been resolved within 60 days against a target is 90%. Near misses are where something is spotted internally just prior to something going out of the organisation. The "high impact" incident was an extract of MHMDS data which was sent to CQC prior to official publication. The "Very high impact" near miss was a security pass giving access to all HSCIC server rooms in Trevelyan Square which was found in a fire box during an office move.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
% of incidents resolved within 60 days - actuals	83%	20%	30%	42%	29%	58%	53%					
% of incidents resolved within 60 days - target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
% of reported incidents raised and recorded	47%	53%	25%	78%	57%	67%	39%	38%	43%			
Number of Incidents reported	12	10	10	19	14	12	19	11	14			

Key Actions	Target Date		Status
Discuss with key directors where problem areas lie & seek support to ensure target days is met	31/03/2014		On target - no issues original deadline achievable
Confirm the reporting system for incidents to be used across the organisations	31/03/2014		Target date at risk - issues need addressing
Confirm access to new system	31/06/2014		On target - issues need addressing but original deadline achievable
Roll out training to all HSCIC target date	31/06/2014		On target - issues need addressing but original deadline achievable

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

KPI	Usefulness of Service		Previous RAG	A
KPI Owner	Max Jones		Current RAG	A
			Forecast RAG	A

The major HSCIC programmes will look to use the remainder of 2013/14 to set a baseline for some of the programmes, with a view to monitoring in 2014/15. They currently anticipate that this will reuse an existing source of information such as the GMPP (Government Major Projects Portfolio) returns.

For Data and Information Services, initial figures have been obtained on open data downloads from our website and equivalent advertising value of media coverage and figures will shortly be obtained on outputs from the extract service. Further work is needed to quality assure, and in some instances refine these, before they can be incorporated in the KPI.

Whilst this quantitative information is being refined, the RAG score is based on a qualitative judgement and remains AMBER. It is currently rated for Data and Information Services and reflects the fact that a number of HSCIC datasets are made available as open data and that there are case studies where customers have made significant use of them. Our information appears frequently in the media, in particular the Focus on A&E report that was released in December. Feedback from Information Intermediaries is that our extract service is vital to their outputs, but they would welcome a more streamlined approvals process. Alongside this, there is further work needed to expand the range and usefulness of the data we make available.

Key Actions	Target Date		Status
Agree initial baseline of economic benefit KPI along with sources of information	31/01/2014		On target - but original deadline revised
Add further outputs to KPI and refine economic benefit model as appropriate	On going		Not started

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

	Budget (£m)	Actual (£m)	% Variation
KPI	**Financial Management (HSCIC)**		
KPI Owner	**Carl Vincent**		

		Previous RAG	**R**
		Current RAG	**R**
		Forecast RAG	**R**

	Budget (£m)	Actual (£m)	% Variation
Year to date Actual v Budget	£161.5m	£144.0m	**10.9%**

	Budget (£m)	Forecast (£m)	% Variation
Forecast v Budget	£221.2m	£200.1m	**9.5%**

	Dec Actual (£m)	Dec Forecast (£m)	% Variation
Forecast accuracy	£13.0m	£12.9m	**0.4%**

HSCIC Operating costs
The forecast expenditure remains at £200m, giving a forecast underspend for the year of £21m, partially offset by reduced income of £4m. The forecast still contains very ambitious recruitment targets for the final quarter of the year, particularly in relation to the DH reprocurements. This suggests we can expect the forecast underspend to continue to rise and we will end the year near the top of our estimate of £15m - £20m for the full year; this is where DH expect us to end the year. The KPI for forecast v budget is expected to remain Red for the remainder of the year.

The Forecast Accuracy variance of 0.4% for the month is Green; however, this is due to a Red KPI for overspend above forecast for Central functions (including an accrual of £2m for potential redundancy costs) offsetting Red KPIs for underspend against forecast in all other Directorates (except HR, which is Amber). Without the Central overspend, the forecast accuracy variance would have been 22%.

Management action
It was difficult over the first half of the year to provide the individual Directorates and managers with good financial management information because internal re-organisations since the budget was agreed means the cost centres were not aligned to the new structures. However, we are making progress in this area and the quality of monthly financial management information is improving. Alongside this, we are aiming to increasingly improve the engagement between managers and financial business partners as the staff in the finance team are appointed to their permanent posts.

The Zero Based Review process also included a collection of reforecast figures for 2013/14, which we believe has led to an increased understanding by individual teams of their costs, and is probably the reason for the increased forecast underspend on the HSCIC operating costs. The on-going process of internal challenge should support this process further.

Note: for more information please see Appendix 4 - Management Accounts

Key Actions to rectify variance from target	Target Date		Progress
Improve forecasts and plans for future years of both programme and admin so they are based on a 'most likely' basis, rather than the 'best case' and without large contingencies	Mar-14		On target - no issues original deadline achievable
New performance indicators will be added to next month's pack (% invoices paid on time, % PO compliance and debtor days)	Jan-13		Completed

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

KPI	Financial Management (HSCIC)		Previous RAG	TBC
KPI Owner	Carl Vincent		Current RAG	TBC
			Forecast RAG	TBC

Better Payment Practice - Cumulative Performance Year to Date
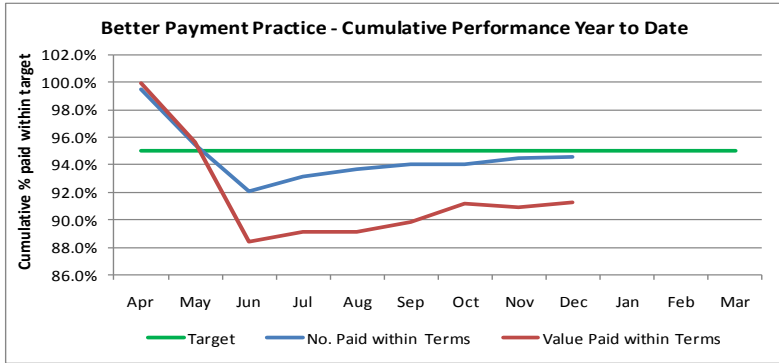
BETTER PAYMENT PRACTICE	Target (%)	Actual (%)	Variation
Cumulative % number paid within target	95%	95%	(0)%
Cumulative % value paid within target	95%	91%	(4)%

Performance against the Better Payment Practice targets continued its generally improving trend. Performance for payment of non-NHS suppliers continued to exceed the target on both measures, while performance in respect of NHS suppliers continued to be considerably lower than target.

Debtors > 90 days overdue
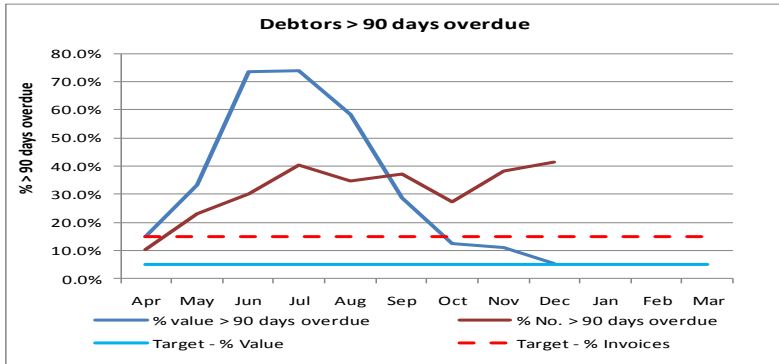
DEBTOR DAYS	Target (%)	Actual (%)	Variation
Cumulative % value of debt over 90 days	5%	6%	1%
Cumulative % volume of invoices unpaid over 90 days	15%	41%	26%

The % value of debtors over 90 days reduced from 10.9% in November to 5.6% in December. This was largely due, however, to the high value of invoices raised during December, and the consequent increase in total debtors outstanding (up from £5.1m at the end of November to £8.2m at the end of December), rather than solely through a reduction in the value of debt older than 90 days. One invoice of £2.2m to DH had a particularly distorting effect on the December figures. The % number of invoices over 90 days increased from 38.2% to 41.4% in the month. This is largely due to current efforts being concentrated on collecting higher value invoices, rather than low value volume.

AP Invoices Processed via Purchase Order vs. Total AP Invoices Processed Cumulative Year to Date
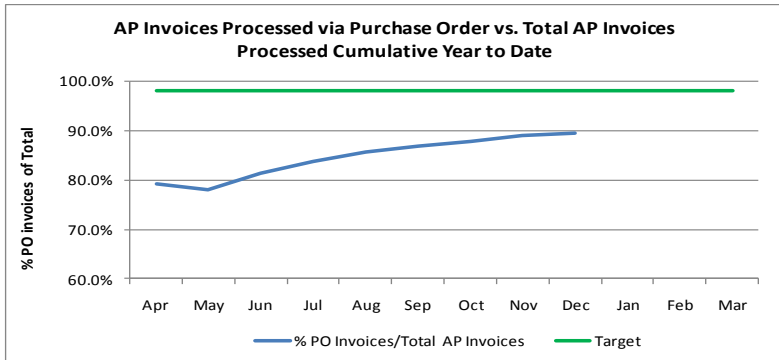
PURCHASE ORDER INVOICES	Target (%)	Actual (%)	Variation
Cumulative % of relevant invoices that are paid against a purchase order	98%	90%	(8)%

Slowly improving against target, up from 89.0% cumulative to November. Target is 98% of AP transactions for which a purchase order is appropriate. 9% of AP transactions are currently considered outwith the target; these primarily relate to the payment of payroll deductions (e.g. childcare vouchers, union subs), travel contracts (e.g. Expotel/Redfern), non-staff expenses, medical screening costs, catering costs, postage, couriers, rent, utilities and telephones.
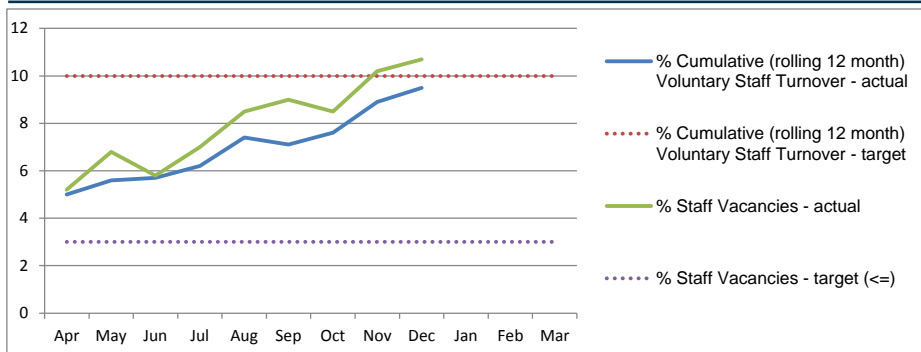
Data Source: NHS SBS

Key Actions	Target Date		Progress
Agree the method for calculating the overall KPI RAG status	Feb-14		On target - no issues original deadline achievable
Introduce monthly reports for each Directorate on performance against PO target, which will require a change in accounting practice from 1st April so that we code POs directly to I&E rather than Balance Sheet control accounts	May-14		On target - no issues original deadline achievable

Actions recorded here are either actions taken by the KPI owner or actions taken by Board or EMT to rectify escalated problems

Legend:
- % Cumulative (rolling 12 month) Voluntary Staff Turnover - actual
- % Cumulative (rolling 12 month) Voluntary Staff Turnover - target
- % Staff Vacancies - actual
- % Staff Vacancies - target (<=)

Cumulative Voluntary Staff Turnover

Cumulative voluntary turnover rate was 9.5% at December (for the period Jan-Dec '13). Whilst voluntary turnover decreased in December, anticipated for this time of year, the cumulative number of voluntary leavers is steadily increasing and growing closer to target. Due to this voluntary turnover is AMBER rated, in the absence of performance ratings it is not possible at this stage to identify whether good performers are leaving the HSCIC which would impact this rating. The HR function is beginning to explore options to distinguish between positive, neutral and negative turnover linked to work on PDR, Succession Planning and an improved approach to exit interviews. It is likely to be some months before we are able to introduce robust measures to refine this indicator.

Voluntary exits are higher than the start of the calendar year which is likely be in line with more opportunities becoming available in the UK market. However, the current restrictions within the ALB sector mean that HSCIC vacancies are advertised internally prior to public release. The organisation has around 240 internal opportunities and this means that staff are still more likely to seek internal opportunities against the recovering UK market. As individuals gain internal promotion this leaves another post vacant, perpetuating the situation. A number of actions (see below) are planned to address this.

Staff Vacancies

The active vacancy rate has increased since last month with 245 vacancies and is RED rated. This includes approx 70 new roles since last month bearing in mind that a number of roles have been filled and others remain active as they progress through the stages of the recruitment process. It is recognised that recruitment activity is taking place across all Directorates as they review and restructure to meet HSCIC requirements creating a peak in activity. A meeting with Directors was held to agree the most effective recruitment strategy for establishing the HSCIC. This has resulted in a number of actions to assist in effectively getting to required capacity levels. Good progress is being made and actions and progress are summarised below.

Turnover is anticipated to be GREEN next month as this steadily increases however the overall forecast for organisational health is RED in the short term until the benefit of the approach to recruitment is realised, during 2014.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
% Cumulative (rolling 12 month) Voluntary Staff Turnover - actual	5	5.6	5.7	6.2	7.4	7.1	7.6	8.9	9.5			
% Cumulative (rolling 12 month) Voluntary Staff Turnover - target	10	10	10	10	10	10	10	10	10	10	10	10
Cumulative (rolling 12 month) number of leavers - actual	92	103	110	113	140	135	145	169	181			
% Staff Vacancies - actual	5.2	6.8	5.8	7	8.5	9	8.5	10.2	10.7			
% Staff Vacancies - target (<=)	3	3	3	3	3	3	3	3	3	3	3	3
% training activity - actual	N/A			86%			12-32%					
% training activity - target	80%			100%			80%			100%		

Training Activity

The second training needs analysis (TNA) was closed in November to coincide with the outcome of mid-year appraisals. Meetings were arranged with each Director for sign off during December. We have not yet received a full signoff from all directors. As indicated in the previous report we asked staff to focus on the remaining Technical and Vocational courses of the year (as the impending solution to address Skills for Business requirements will be delivered through Civil service Learning from the 1st April). However, in practice staff continued to inform us of the whole variety of training (including 97 requests for Skills for Business). The indicator for QTR 3 is red because of difficulties in scheduling the necessary approval meetings during the Christmas period which also caused delays to supplier responses. However, we remain confident that we will be in a position to deal with the outstanding 161 Technical and Vocational requests in QTR 4 (60 and a further 101 awaiting director approval).

  12% of approved training requests have been invited (which includes Skills for Business which will be dealt with from April by Civil Service Learning).

  32% of approved Technical and Vocational requested have been invited.

Key Actions	Target Date		Status
Seek exemption from the current ALB recruitment restrictions until the HSCIC is up to its complement (which will be identified by the Zero Based Review (ZBR) Process)	20/11/2013		Fully completed
Undertake a full review of the end to end recruitment process including handoffs and pinch points with focus on HR and Directorate level constraints	20/11/2013		Fully completed
Complete approach paper and high level plan	20/12/2013		Fully completed
Work with Phil Wade to identify Communications Resources to work on employer branding (linked to wider Brand Reputation Transformation Project)	31/12/2013		Fully completed
Agree approach to deploying project and programme delivery professionals from the Portfolio Pool across the organisation	31/01/2014		On target - no issues original deadline achievable
Consider potential alternative approaches to business support roles e.g. Rotation, apprenticeship schemes	28/02/2014		On target - but original deadline revised
Complete Standard Job Descriptions for all priority roles	30/01/2014		On target - issues need addressing but original deadline achievable
Complete procurement (from Framework) of Recruitment Marketing capability	14/02/2014		On target - but original deadline revised

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

Note:

Voluntary turnover includes only those leaving the HSCIC through voluntary employee resignations and retirements as a percentage of average headcount across a rolling 12 months.

Cumulative turnover has been calculated on an approximate basis through combining turnover information for the legacy organisations NHS IC and NHS CFH to achieve data for a rolling 12 month period, the information is not available for other legacy organisations.

The vacancy rate shows the number of active vacancies (i.e. Approved vacancies where recruitment has commenced) as a percentage against the planned establishment (i.e. current staff and active vacancies).

Appendix 1 - KPI RAG Tolerances

KPI title	KPI formula and/or PI titles and formula(e)	KPI/PI Tolerance Use SPECIFIC numeric or the generic TOLERANCES shown in the Cell note
Public and Patient Engagement	Awareness campaign score	As Above
	Patients' satisfaction (proxy score)	As Above
Information Quality (output)	Total number of reported information quality incidents and near misses	Green: On track Amber: Problems exist which can be addressed by the KPI owner Red: Serious* or recurring problems exist which require escalation for resolution [*Serious problems could have one or more of the following impacts: KPI targets will be compromised; reputational damage; additional unplanned resources required]
	Number of reported high and very high information quality incidents	Green: On track Amber: Problems exist which can be addressed by the KPI owner Red: Serious* or recurring problems exist which require escalation for resolution [*Serious problems could have one or more of the following impacts: KPI targets will be compromised; reputational damage; additional unplanned resources required]
Incident resolution	% of incidents resolved within 60 days	Green: Over 90% resolved within 60 days Amber: 75-90% Red: Less than 75%
	% of reported incidents raised and recorded	TBC
	Total number of reported incidents	Until such time as we have a numeric baseline, the following subjective tolerances will be used: Green: On track Amber: Problems exist which can be addressed by the KPI owner Red: Serious* or recurring problems exist which require escalation for resolution [*Serious problems could have one or more of the following impacts: KPI targets will be compromised; reputational damage; additional unplanned resources required]
Programme Achievement	% assessed as Amber or better from Gateway Reviews and Health Checks	GREEN = within 10% of target AMBER = between 11% and 20% of target RED = more than 20% off target
	Overall RAG score - Delivery Confidence Note: the KPI Owner will make an overall assessment of "Delivery Confidence" across the portfolio. However, the individual programmes are independently scored by OGC/SRO for 'Delivery Confidence'.	RED - successful delivery of the project/programme appears to be unachievable. There are major issues on project/programme definition, schedule, budget, required quality or benefits delivery which at this stage do not appear to be manageable or resolvable. The project/programme may need re-baselining and/or overall viability re-assessed AMBER/RED - successful delivery of the project/ programme is in doubt with major risks or issues apparent in a number of key areas. Urgent action is needed to ensure these are addressed and whether resolution is feasible AMBER - Successful delivery appears feasible but significant issues already exist, requiring management attention. These appear resolvable at this stage if addressed promptly, should not present a cost/schedule overrun AMBER/GREEN - Successful delivery appears probable, however constant attention will be needed to ensure risks do not materialise into major issues threatening delivery GREEN - Successful delivery appears highly likely and there are no major outstanding issues that at this stage appear to threaten delivery significantly

Appendix 1 - KPI RAG Tolerances (Contd.)

KPI title	KPI formula and/or PI titles and formula(e)	KPI/PI Tolerance Use SPECIFIC numeric or the generic TOLERANCES shown in the Cell note
IT Service Performance	Number of services achieving Availability target	Green = 100% OSL passes Amber = 1+ FL1 breach
	Number of services breaching Availability target, but not to a critical level	Red = 1+ CSL breach, >=5% FL1 breaches
	Number of services breaching Availability target at a critical level	Key: OSL - Operating Service Level (target achieved); FL1 - Failure Level 1 (target breached); CSL - Critical Service Level (target breached)
	Number of services achieving response time target	Green = 100% OSL passes Amber = 1+ FL1 breach
	Number of services breaching response times target, but not to a critical level	Red = 1+ CSL breach, >=15% FL1 breaches
	Number of services breaching response time target at a critical level	Key: OSL - Operating Service Level (target achieved); FL1 - Failure Level 1 (target breached); CSL - Critical Service Level (target breached)
	% HSSIs achieving Fix Time target	Green = 95% or better Amber = 80-94% Red = < 80%
Usefulness of Service	Value of economic benefit (proxy for usefulness)	TBC
Financial Management	% variation forecast outturn of revenue versus budget	GREEN +0.5% to +3% AMBER +3% to +5% RED Over 5% and under +0.5%
	% variation forecast outturn of DH Programme expenditure versus budget (revenue)	GREEN +0.5% to +3% AMBER +3% to +5% RED Over 5% and under +0.5%
	% variation forecast outturn of DH Programme expenditure versus budget (capital)	GREEN +0.5% to +3% AMBER +3% to +5% RED Over 5% and under +0.5%
	% accuracy of forecasting revenue	GREEN = forecast accuracy within 2% AMBER = forecast accuracy more than 2% but less than 4% RED = forecast accuracy more than 4%
	% accuracy of forecasting DH Programme expenditure (revenue)	GREEN = forecast accuracy within 2% AMBER = forecast accuracy more than 2% but less than 4% RED = forecast accuracy more than 4%
	% accuracy of forecasting DH Programme expenditure (capital)	GREEN = forecast accuracy within 2% AMBER = forecast accuracy more than 2% but less than 4% RED = forecast accuracy more than 4%
	% invoices paid within target	GREEN = More than 95% AMBER =90-95% RED = less than 90%
	% value paid within target	GREEN = More than 95% AMBER =90-95% RED = less than 90%
	% value of debt over 90 days	GREEN = Less than 5% AMBER = 5%-10% RED = More than 10%
	% volume of invoices unpaid over 90 days	GREEN = Less than 15% AMBER = 15%-20% RED = More than 20%
	% of relevant invoices paid against a purchase order	GREEN = More than 98% AMBER =93%-98% RED = Less than 93%
Organisational Health	% of training activity	GREEN = 85% or more of invitations sent AMBER = between 84% and 70% of invitations sent RED = < 70% of invitations sent
	% of staff who have had their competency baselined against new competency framework	Measurement will not start until 1/7/14
	% of staff vacancies	GREEN = 10% or less AMBER = more than 10% but less than 12% RED = more than 12%
	% Cumulative Voluntary Staff turnover	GREEN = 10% -12% AMBER = 9 and 13% RED = Above 13% and below 9%
Reputation	Reputation - subjective assessment	In the absence of a numeric baseline, the following subjective RAG assessments will be used: Green: On track Amber: Problems exist which can be addressed by the KPI owner Red: Serious* or recurring problems exist which require escalation for resolution [*Serious problems could have one or more of the following impacts: KPI targets will be compromised; reputational damage; additional unplanned resources required]

Appendix 2 - Glossary of Terms

AAP	- Assurance of Action Plan
ALB	- Arms Length Body
BC	- Business Case
CAB	- Choose and Book
CCN	- Contract Change Notice
CEO	- Chief Executive Officer
CfH	- Connecting for Health
CPIS	- Child Protection Information Sharing
CQRS	- Calculating Quality Reporting Service
CRM	- Customer Relationship Management
CRS	- Care Records Service NHS
CSC	- Computer Sciences Corporation
CSL	- Critical Service Level
CtOC	- Choices The Online Channel
D & IS	- Data & Information Services
DH	- Department of Health
DMS	- Defence Medical Services
e-RS	- Electronic Referral Service
ETP	- Electronic Transmission of Prescriptions
EMT	- Executive Management Team
EPS	- Electronic Prescription Service
FL1	- Failure Level 1
FY	- Financial Year
GPES	- General Practice Extraction Service
GMPP	- Government Major Projects Portfolio
GPSoC	- GP Systems of Choice
HJIS	- Health & Justice Information Service
HMT	- Her Majesty's Treasury
HSCIC	- Health and Social Care Information Centre
HSCDS	- Health & Social Care Digital Service
HSJ	- Health Service Journal
HSSI	- Higher Severity Service Incident
IN PS	- In Practice Systems
ICT	- Information and Communications Technology
ISCG	- Informatics Services Commissioning Group
ISO	- International Organization for Standardization
JNCC	- Joint Negotiation and Consultation Committee
KM	- Knowledge Management
KPI	- Key Performance Indicator

LSP	- Local Service Provider
MoU	- Memorandum of Understanding
MPA	- Major Projects Authority
N3	- NHS National Network
NB	- No Board
NHS IC	- NHS Information Centre
NME	- North, Midlands and East
NR	- No Report
NTS	- National Tariff System
NWWM	- North West and West Midlands
OBC	- Outline Business Case
OGC	- Office of Government Commerce
OHIT	- Offender Health Information Technology
OSL	- Operating Service Level
PACS	- Picture archiving and communications system
PbR	- Payment by Results
PD	- Programme Delivery
PHSO	- Parliamentary and Health Service Ombudsman
PI	- Performance Indicator
PLACE	- Patient-Led Assessments of the Care Environment
PSNH	- Public Service Network for Health
QOF	- Quality and Outcomes Framework
RAG	- Red, Amber, Green
ROCR	- Review of Central Returns
RPA	- Risk Potential Assessment
SCR	- Summary Care Record
SIAM	- Service Integration and Management
SLA	- Service Level Agreement
SME	- Subject-Matter Expert
SME	- Small and Medium Enterprises
SOC	- Strategic Outline Case
SRO	- Senior Responsible Owner
SSD	- Systems & Service Delivery
SUS	- Secondary Uses Service
TBC	- To be Confirmed
TUPE	- Transfer of Undertakings (Protection of Employment)
ZBR	- Zero Based Review

Appendix 3 - Transformation Programme

Organisation wide Transformation
Areas of note in the last period includes:

Strategic Projects: Following approval at the December Transformation Programme Board, work is now progressing on **Stakeholder Relationship Management** and **Patient and Public Involvement** projects and these are now being jointly managed. The **Brand Reputation** definition was also considered and approved at the December Transformation Programme Board. There has been slippage defining the Publications Review and Innovations Hub due to resource constraints. The **Publications Review** will be considered at the January Transformation Programme Board and interviews are taking place mid January for an **Innovations** Lead.

People Projects:
- The organisation wide **Values** workshops took place through December with approximately 150 staff attending. Improvements to the values definitions will be considered by the January Transformation Programme Board and the final set of values and definitions launched in February.
- More detailed communications on the **Professional Groups** has prompted positive staff feedback and has resulted in a refinement in some of the areas. All definitions are now completed. Further communications were issued at the end of December and staff will be asked to select into a profession in January.
- **Line Management Development** Phase 1 (Policies) has commenced on a small scale and will be widened out in January and February. The Champion Change Forum in January informed the development of the Line Management Charter.
- Priority Cohort Recruitment activity has brought forward some of the activity within the **Recruitment and Talent Attraction** project including work on employer brand.
The **Reward Review** approach was approved by the Transformation Programme Board in December and the new PDR process is being developed to be launched for the start of FY14/15.

Operational Management Projects: The 38 Corporate Policies approved in the last period were launched with staff on 13th December. The new Operational Governance arrangements were communicated to staff w/c 16th December. The PwC Financial Management Systems Review has been completed and the outputs considered by the Transformation Programme Board in December; an implementation plan is now being developed.

Integration Projects: Work on the Contact Centre / Helpdesk Strategy continues and will report at the end of January. SIAM approach re-planned to recognise need to focus in 2014 on replacement national services. New workstream added to put all services under SIAM Governance by end 2014, with priority services by end June 2014.

Directorate Transformation
Directorate Transformation Project Mandates have been approved for the Programme Delivery and Data and Information Services directorates and the approach for Clinical and Public Assurance until 31st March 14 has been agreed.

Within the LSP Delivery Directorate on the 20th December all staff within the Directorate were placed 'At Risk of Redundancy'. Staff were asked to 'opt-in' to be considered for roles in early January and the process of confirming 'slot ins', agreeing individuals in 'ring-fenced' completion and interviewing for roles in the new structure is now in progress.
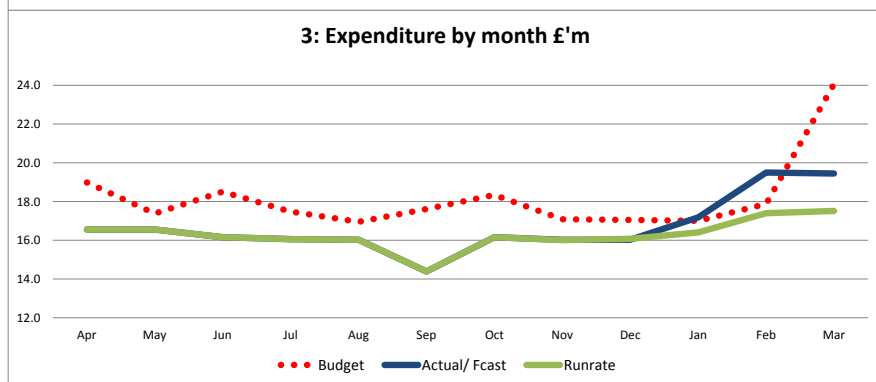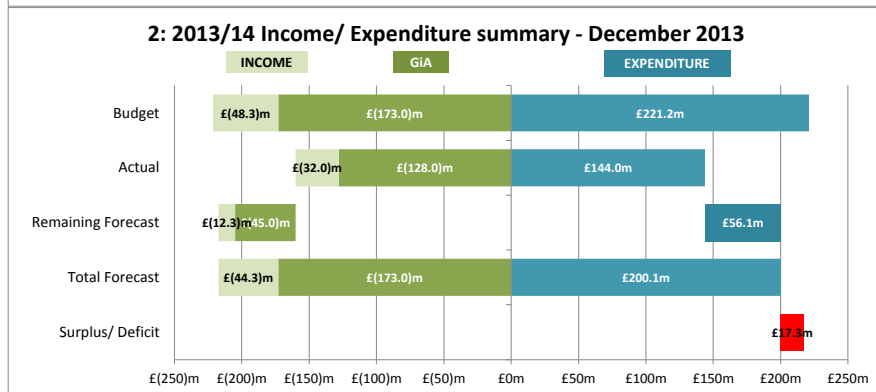
Overall Status
The overall status for the Programme remains at Amber / Green (equivalent to Green for EMT KPI reporting). The KPI forecast for next month is also Green. Positive progress has been made in a number of areas however some slippage has been experienced. A common theme for project slippages has been resource constraints and prioritisation of Transformation work in relation to other organisation priorities. The December Transformation Programme Board considered and agreed the priority Transformation Projects.

The Programme Definition Document has been updated and was approved at the December Transformation Programme Board.

Key Actions	Target Date		Status
Engagement Programme on 'What is Transformation'	20/12/2013		Fully completed
Complete all Directorate Level Transformation Mandates	19/12/2013		Fully completed
Consider Priority Projects and Resource Constraints	19/12/2013		Fully completed

Actions recorded here are either: a) actions to progress measurement of KPI; b) actions taken by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify escalated problems

HSCIC Financial Summary
December 2013

1: 2013/14 financial profile - as at December 2013

Legend: Staff Costs, Other Costs, GiA, Other Income, Surplus/ Deficit

2: 2013/14 Income/ Expenditure summary - December 2013

	INCOME	GiA	EXPENDITURE
Budget	£(48.3)m	£(173.0)m	£221.2m
Actual	£(32.0)m	£(128.0)m	£144.0m
Remaining Forecast	£(12.3)m £(45.0)m		£56.1m
Total Forecast	£(44.3)m	£(173.0)m	£200.1m
Surplus/ Deficit			£17.3m

3: Expenditure by month £'m

Legend: Budget, Actual/ Fcast, Runrate

Summary
The year-to-date outturn for the first nine months of the year has resulted in £16.1m surplus. This is primarily due to budgeted vacancies not being filled as planned. The latest consolidated forecast of all the directorates/ cost centres indicates a surplus for the year of £17.3m, but still contains very ambitious recruitment assumptions. It is now likely that the final outturn will be near the top end of our estimate for the year of £15m - £20m; this is where DH expect us to end the year.

The key drivers for the current financial position are:

Staff costs are £11.1m under budget for the year-to-date, due to vacancies not being filled as budgeted. It is likely that there will a significant underspend on staff costs for the full year - Further detail is shown on the next page.

Other costs are £6.2m under budget for the year-to-date; however, this includes additional costs of £2.8m for DH (previously CfH) programme expenditure which is offset by additional income from DH. Professional fees and IT costs are £6.8m and £1.3m under budget year-to-date respectively (primarily due to budget expenditure being phased evenly across the year whereas some actual costs have not yet been incurred). Actual expenditure on Professional Fess was lower in December than in previous months due to adjustments made following a review of required accruals as part of the Month 9 close process. An accrual has been included this month for £2.0m for potential redundancy costs.

Non-GiA Income is £1.4m below budget year-to-date and is forecast to end the year £4.0m under budget. The £4.0m includes increase to budget for £9.0m of unbudgeted income streams from DH for Programme expenditure, offset by decreases including £12.9m for income that was to cover budgeted costs that will not now be incurred. Further detail is shown on the final slide of the appendix.

Graph information
Graph 1 shows staff and non-staff costs above the axis (blue) against the Grant-in-Aid and other income streams below the axis (green), with the monthly surplus or deficit in red.

Graph 2 shows the full year financial position against budget for income, GiA and expenditure, with the full year forecast split between 9 months of actual costs and 3 months of anticipated costs.

Graph 3 shows monthly trend of gross expenditure for the organisation for the original budget (blue), the latest forecast (red) (9 months of actual costs and 3 months of expected costs) and an extrapolation (runrate) of the position if the current staff position remained at December levels for the remainder of the year (green).

HSCIC Financial Summary
December 2013 - Staff

4: Monthly Staff Costs (permanent & non-permanent) £'m

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Budget	11.3	11.5	11.6	11.7	11.7	11.8	11.9	11.9	11.9	11.8	11.8	11.8
Actual/ Fcast	9.9	9.9	10.1	10.1	11.1	10.7	10.8	10.8	10.7	11.6	12.9	12.7
Runrate	9.9	9.9	10.1	10.1	11.1	10.7	10.8	10.8	10.7	10.7	10.7	10.7

Step change for Choices

5: Monthly Staff Costs - Actual and Budget £'m

Legend: In Post (perm) — In Post (non-perm) — Forecast — 2013/14 Budget

Staff costs are £11.1m under budget for the year-to-date (averaging £1.2m per month), due to vacancies not being filled as budgeted.

It is unlikely that the recruitment needed to realise the full year forecast will happen in its entirety and that there will be a material underspend against the original budget, higher than the currently forecast underspend of £9.3m.

 - An extrapolation to the end of the year assuming no further change to net headcount for the remainder of the year gives a projected underspend on staff costs of £14.2m.

 - A plausible but ambitious estimate of 20 net vacancies being filled each month (at an estimated cost of £50k per role) gives a projected underspend on staff costs of £13.7m.

As part of the Zero Based Review 2014/15 budgeting process, there continue to be challenges to all recruitment assumptions that underpin the forecast, to result in a more robust and realistic forecast position that will better inform decision making for the remainder of the year.
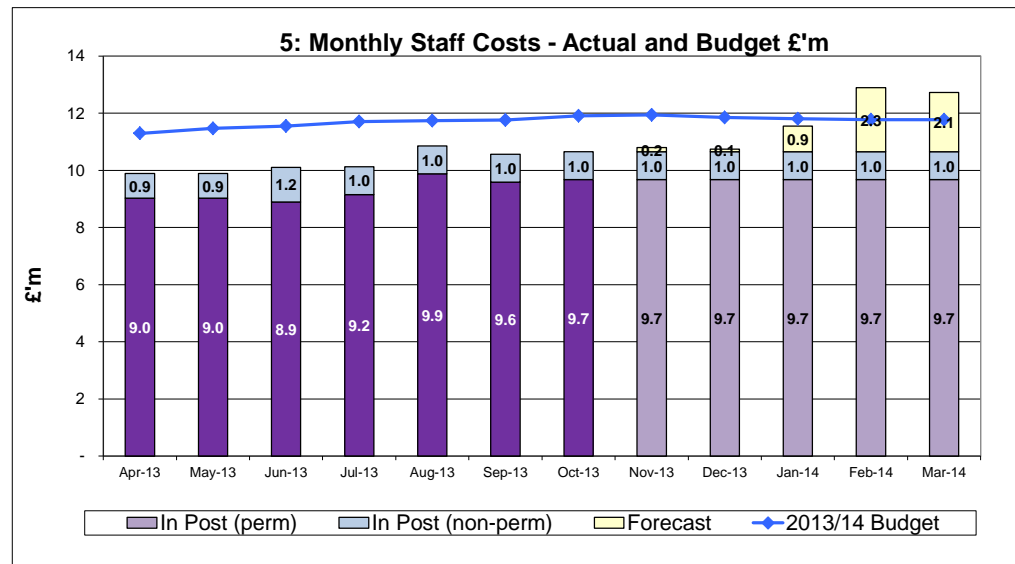
Graph information
Graph 4 shows the monthly trend of staff costs for the organisation for the original budget (blue), the latest forecast (red) (9 months of actual costs and 3 months of expected costs) and an extrapolation (runrate) of the position if the current staff position remained at November levels for the remainder of the year (green). The significant increase in August is due to the in-sourcing of Choices staff from Capita.

Graph 5 shows the forecast position in more detail, distinguishing between the current permanent (purple) and non-permanent (blue) staff costs plus the forecast increases for the remainder of the year (yellow). The blue line shows the original budget.

Appendix 4 - Management Accounts

HSCIC Financial Summary
December 2013 - Income

6: Monthly non-GiA Income Trend   £'m

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
⋯⋯ Budget	3.3	3.3	4.1	3.3	3.2	3.4	3.9	3.3	3.3	3.0	3.6	7.4
── Forecast	4.0	4.0	2.4	2.4	3.2	4.5	4.4	4.2	3.0	4.0	4.2	4.1

The latest full year forecast includes some material movements in both directions. Increases primarily relate to unbudgeted income streams from DH for Programme expenditure, particularly £6.1m for Choices to cover the cost of the staff insourcing from Capita on 1st August and £2.9m for DH programme costs incurred by HSCIC in April / May post-transition. Decreases include £13.0m for income that was to cover budgeted costs that will not now be incurred, including on GPES, ODP, Pathways and CPIS.

Work is on-going to address the continuing uncertainty over income streams. Until there is greater clarity and certainty for the Income streams, there will remain uncertainty around the overall forecast net surplus/ deficit position for the organisation for the year.

Income will be reforecast as part of the Zero Base Review process to ensure that there is a complete and robust picture of expectations for the remainder of the year and this is being used to take forward discussions with other organisations to agree the income streams for the coming year.
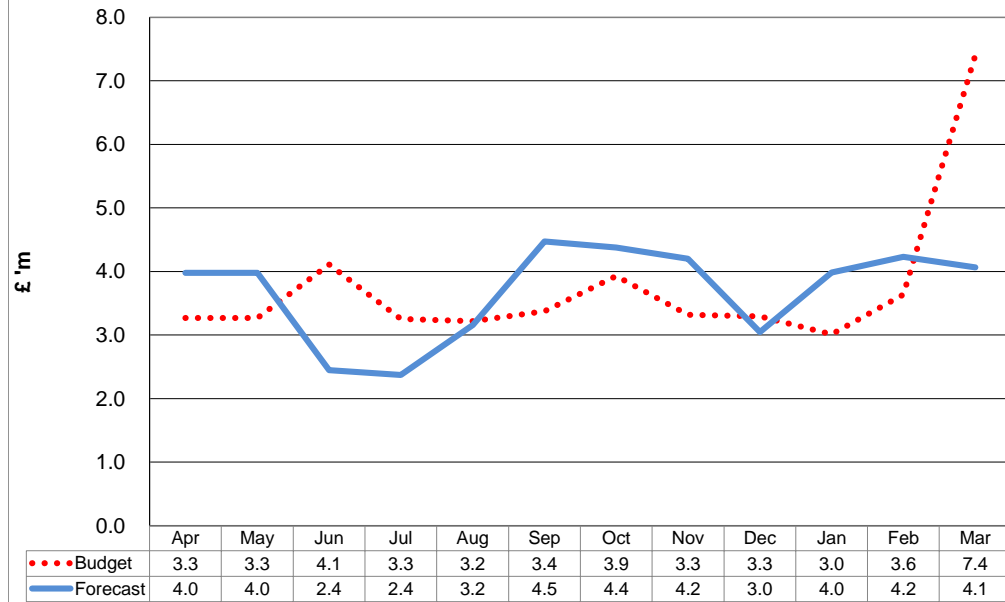
Graph information
Graph 6 shows the monthly trend of non-GiA income for the organisation for the original budget and the latest forecast (8 months of actual income and 4 months of expected income).

2013/14 FINANCIAL DETAIL as at December 2013

Statement of Comprehensive Net Expenditure | **FINANCIAL RESULTS TO 31st DECEMBER 2013**

	9 Months ending 31 December 2013			12 Months ending 31 March 2014			12 Months Ending 31 March 2014											
	REVENUE			REVENUE			REVENUE											
	Budget YTD	Actual YTD	Var Fav-(Adv)	Budget 13/14	F'cast 13/14	Var Fav-(Adv)	Actual Apr	Actual May	Actual Jun	Actual Jul	Actual Aug	Actual Sep	Actual Oct	Actual Nov	Actual Dec	F'cast Jan	F'cast Feb	F'cast Mar
	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m	£'m
Grant in Aid	(129.8)	(128.0)	1.8	(173.0)	(173.0)	0.0	(14.4)	(14.4)	(14.2)	(14.4)	(14.7)	(13.2)	(14.2)	(14.2)	(14.2)	(15.2)	(15.2)	(14.7)
Income	(33.5)	(32.0)	1.4	(48.3)	(44.3)	4.0	(4.0)	(4.0)	(2.4)	(2.4)	(3.2)	(4.5)	(4.4)	(4.2)	(3.0)	(4.0)	(4.2)	(4.1)
Income	**(163.2)**	**(160.0)**	**3.2**	**(221.3)**	**(217.3)**	**4.0**	**(18.3)**	**(18.3)**	**(16.7)**	**(16.7)**	**(17.9)**	**(17.7)**	**(18.6)**	**(18.4)**	**(17.3)**	**(19.2)**	**(19.4)**	**(18.7)**
Permanent Staff	96.7	84.8	(11.9)	129.3	118.4	(10.9)	9.0	9.0	8.9	9.2	9.9	9.6	9.7	9.7	9.9	10.6	11.6	11.4
Non Permanent Staff	8.5	9.4	0.9	11.3	13.0	1.7	0.9	0.9	1.2	1.0	1.3	1.1	1.1	1.1	0.9	1.0	1.3	1.3
Staff Costs	**105.2**	**94.2**	**(11.1)**	**140.6**	**131.3**	**(9.2)**	**9.9**	**9.9**	**10.1**	**10.1**	**11.1**	**10.7**	**10.8**	**10.8**	**10.7**	**11.6**	**12.9**	**12.7**
Professional Fees	22.3	15.4	(6.8)	29.8	22.9	(6.9)	2.4	2.4	2.4	3.2	0.4	1.0	1.3	1.8	0.4	2.0	2.8	2.7
Information Technology	8.3	7.0	(1.3)	10.8	9.8	(1.0)	0.5	0.5	0.8	0.6	1.5	0.7	1.0	0.6	0.8	0.9	0.8	1.1
Travel & Subsistence	4.1	3.2	(0.9)	5.4	4.6	(0.9)	0.2	0.2	0.3	0.3	0.5	0.2	0.5	0.4	0.4	0.5	0.5	0.5
Accommodation	8.5	8.6	0.2	11.2	11.7	0.4	0.9	0.9	0.9	0.9	1.4	1.0	0.9	0.9	0.9	1.0	1.1	1.0
Marketing, Training & Events	1.1	1.0	(0.1)	1.5	1.5	(0.0)	0.0	0.0	0.1	0.1	0.2	0.1	0.2	0.2	0.1	0.1	0.1	0.2
Office Services	2.4	2.3	(0.1)	3.1	3.1	(0.0)	0.2	0.2	0.3	0.2	0.3	0.3	0.2	0.3	0.3	0.3	0.2	0.3
Other	1.4	5.8	4.4	7.7	6.3	(1.4)	1.5	1.5	0.6	(0.0)	(0.0)	(0.4)	0.6	0.4	1.6	0.2	0.2	0.1
Depreciation / Amortisation	8.3	6.6	(1.7)	11.0	9.4	(1.6)	0.8	0.8	0.5	0.7	0.7	0.7	0.7	0.7	0.8	0.7	1.1	1.1
Non Staff Costs	**56.2**	**50.0**	**(6.2)**	**80.7**	**69.3**	**(11.4)**	**6.7**	**6.7**	**6.0**	**6.1**	**4.9**	**3.7**	**5.4**	**5.2**	**5.3**	**5.8**	**6.7**	**6.9**
Internal Recharge - Estates	(0.0)	(0.1)	(0.0)	(0.1)	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Internal Recharge - IT	0.1	0.0	(0.1)	0.2	0.0	(0.2)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Internal Recharge - Staff	0.0	(0.1)	(0.1)	(0.2)	(0.5)	(0.3)	(0.0)	(0.0)	0.1	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.1)	(0.1)
Internal Recharges	**0.1**	**(0.2)**	**(0.3)**	**(0.1)**	**(0.6)**	**(0.5)**	**(0.0)**	**(0.0)**	**0.1**	**(0.1)**	**(0.0)**	**(0.0)**	**(0.0)**	**(0.0)**	**(0.0)**	**(0.1)**	**(0.1)**	**(0.1)**
Total Cost	**161.5**	**144.0**	**(17.6)**	**221.2**	**200.1**	**(21.1)**	**16.6**	**16.6**	**16.2**	**16.1**	**16.0**	**14.4**	**16.2**	**16.0**	**16.0**	**17.2**	**19.5**	**19.5**
(Surplus)/ Deficit	**(1.7)**	**(16.1)**	**(14.4)**	**(0.1)**	**(17.3)**	**(17.1)**	**(1.8)**	**(1.8)**	**(0.5)**	**(0.7)**	**(1.9)**	**(3.3)**	**(2.4)**	**(2.4)**	**(1.3)**	**(2.0)**	**0.1**	**0.7**

Appendix 5 - Management Information - Developing Informatics Skills & Capability (DISC)

As this is a baseline report the figures below are displayed mainly in tables. For future reports the information is likely to be shown in graphs and charts to more clearly demonstrate progress.

a)	We have been able to influence our stakeholders to help raise awareness and improve appreciation of informatics capability and professionalism development.		
Demonstrated by:	Number of informatics professionals on a public register and committed to annual CPD-evidenced re-accreditation		
Details	**Date Range**		**Quantity**
The UK Council for Health Informatics Professionals (UKCHIP) – registrants (levels 1, 2 and 3)	In total, up to 31/12/2013		491
The UK Council for Health Informatics Professionals (UKCHIP) – student and affiliate registrants	In total, up to 31/12/2013		32

b)	The promotional coverage has been increased (including positive media coverage)	
Demonstrated by:	Number of papers/articles/reports/case-studies produced	
Details	**Date Range**	**Quantity**
Articles published	01/04/2013 – 31/12/2013	11
Case studies published	01/04/2013 – 31/12/2013	5
Blogs published	01/04/2013 – 31/12/2013	2

c)	We provide useful information on our web sites. We have got platform(s) to use to promote our work. We have UK and international reach.		
Demonstrated by:	Hits on websites (including: unique visitors, new visitors, returning visitors, length of stay, number of pages accessed, visitor's country, demographic, etc.)		
Details	**Date Range**		**Quantity**
Health Informatics Career Framework (HICF) website – total number of visits	01/04/2013 – 31/12/2013		8,685 (see following page for full stats)
Embedding Informatics in Clinical Education (eICE) website – total number of visits	01/04/2013 – 31/12/2013		43,135 (see following page for full stats)

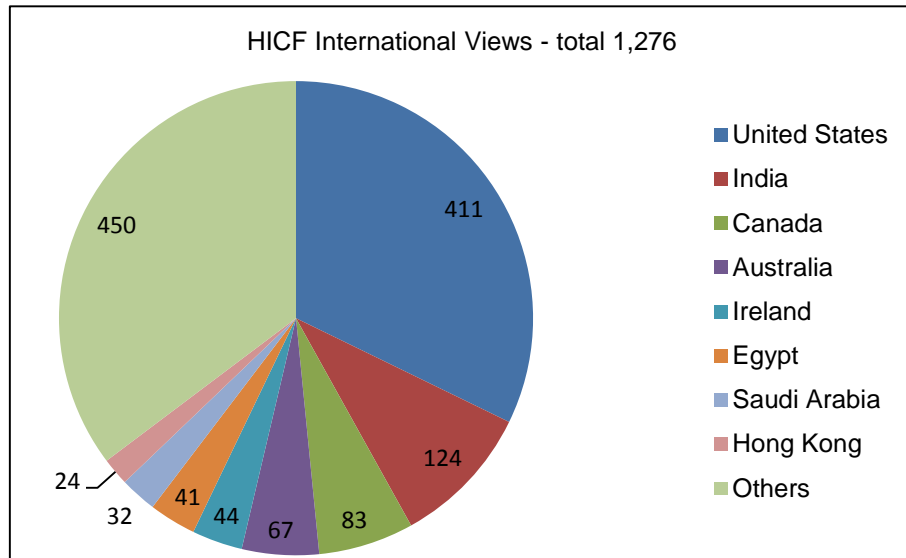| d)	We provide relevant information on our web sites.		
Demonstrated by:	Number of registrations [on websites]		
Details	**Date Range**		**Quantity**
Embedding Informatics in Clinical Education (eICE) website – number of individuals registered	In total, up to 31/12/2013		10,842
Embedding Informatics in Clinical Education (eICE) website – number of organisations registered	In total, up to 31/12/2013		67
Health Informatics Career Framework (HICF) – registrants on website	In total, up to 31/12/2013		Approx 400
Registrants completing Informed e-learning modules	In total, up to 31/10/2013		3,478

Appendix 5 - Management Information - Developing Informatics Skills & Capability (DISC)

e)	What is the uptake of our resources, products and services?		
Demonstrated by:	Number of instances 1-2-1 support is provided, web sites stats, number of registrations, completion of activity – where appropriate etc.		
Details		**Date Range**	**Quantity**
Health Informatics Career Framework (HICF) website –		In total, up to 31/12/2013	(see following page for full stats)
Embedding Informatics in Clinical Education (eICE) website –		In total, up to 31/12/2013	(see following page for full stats)
eICE android app downloads		01/04/2013 – 31/12/2013	136
eICE iTunes app downloads		01/04/2013 – 31/12/2013	294
Informed e-learning modules completed		In total, up to 31/10/2013	3,478
Health Informatics Professionalism Videos – five videos hosted on Youtube.		In total, up to 31/12/2013	2,828
Webinar registrants – across 12 webinars		01/04/2013 – 31/12/2013	397
ESR Roadshow – Health Informatics Areas of Work attendees		4 events	Approx 260
Health and Social Care Innovation Exchange members		In total, up to 31/12/2013	51

Additional Information - Website Statistics

Health Informatics Career Framework (HICF)
01/04/2013 – 31/12/2013

Visits	8,685
Unique Visitors	6,395
% New Visits	71.72%
Page views	40,022
Pages / Visit	4.61
Avg. Visit Duration	00:04:26

HICF International Views - total 1,276

United States 411, India 124, Canada 83, Australia 67, Ireland 44, Egypt 41, Saudi Arabia 32, Hong Kong 24, Others 450

Embedding Informatics in Clinical Education (eICE)
01/04/2013 – 31/12/2013

Visits	43,135
Unique Visitors	21,814
% New Visits	49.55%
Page views	428,749
Pages / Visit	9.94
Avg. Visit Duration	00:16:43

eICE International Views - total 1,489

United States 355, Other (88 Countries) 623, India 110, Ireland 102, Guernsey 98, Australia 74, Qatar 50, Malaysia 39, Canada 38