

HSCIC Board Performance Pack

November 2013 Data

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Executive summary - HSCIC Performance

Programme Achievement

• Additional programmes have been added to the dashboard from LSP and Data & Information Services Directorates.

- Forecast Delivery Confidence for February 2014 is assessed as AMBER GREEN.
- Three projects reporting RED and fourteen AMBER with respect to resourcing.

• Two projects reporting RED, one assessed as AMBER RED and eighteen assessed as AMBER in relation to milestone achievement.

Finance

• Serious concerns around financial management. 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.

• Accuracy of forecasting continues to be another area of concern and is RED. However, progress is being made as the quality of financial reporting has been improved and closer links between financial business partners and departmental managers are continuing to be forged.

• The percentage of staff vacancies has increased on last month and the effect on underspend is still evident. Recruitment activity, as expected, continues to increase across all directorates.

Organisational Health

• We are broadly on track to achieve our target for staff turnover. There has been an upwards trend since the start of the financial year and a further increase in November to 8.9% (against a target of 10%) which is the highest figure so far this year.

Points of Interest

The "Focus on A&E" December 2013 publication was developed to be a compendium of data that would be accessible and engaging to the public and press. It was produced by teams across the business including data departments, communications and the media team. The report was presented in a press briefing on the day of publication by the Chairman, the Medical Director and a statistician. The publication resulted in good media coverage including the front page of the Telegraph and reporting across the BBC. The publication was also well received within the HSCIC leading to very useful engagement with teams across the business.

There is currently significant interest in Improving Access to Psychological Therapies (IAPT) data and the calculation of Key Performance Indicators on people entering treatment and recovering. HSCIC are key to the data aspects. As a result, the Mental Health and Community Care team have been holding stakeholder engagement events with data providers to explain the progress of key data items through loading, validation and processing into the calculation of the KPIs. They are working on an action plan with NHS England and the Department of Health.

The fourth Data Linkage Stakeholder Forum took place in Leeds in November and brought together 130 customers and stakeholders of the Data Linkage and Extract Service to learn more about the service and how the care.data programme will increase the breadth of data available. 98.2% of the delegates rated the event as 'good' or 'very good'. Further information is available on the website at www.hscic.gov.uk/dlsfnov13

On 19 November, the European EHealth Network unanimously approved guidelines on the content of the patient summary dataset to be used for cross-border healthcare. The network comprises the European Commission and 28 countries. The guidelines were developed by Jeremy Thorp, Director of Business Architecture, at the request of the Austrian Ministry of Health. The guidelines build on the pan-European epSOS project, for which Jeremy Thorp is the UK representative, but they remain largely consistent with the specification for the Summary Care Record and the Emergency Care Summary in Scotland. Although the guidelines are not binding, they are intended to form the basis for future work on cross-border data flows.

The final release of a new secure collection, storage and reporting system for the National Child Measurement Programme is being rolled out to local authorities. The system provides the facility to enter and upload data for over a million Reception and Year 6 children; automated calculation of BMI centile and weight status; an export facility to support production of feedback letters to parents; and data progress and quality reporting. Feedback for the new system has been extremely positive from local authority users as well as from Public Health England (PHE) sponsors. The new system is now being rolled into a business as usual (BAU) service fully funded by PHE.

The HSCIC is supporting the implementation of the Information Standards Collection and Extraction Group (ISCEG) ahead of the April 2014 deadline.

The General Practice Extraction Service (GPES) and the Calculating Quality Reporting Service (CQRS) teams have joined forces to implement an integrated end-to-end plan to deliver Quality and Outcomes Framework (QOF) 13/14. The teams are now engaged in testing the extraction capability of the four GP system suppliers and the central Atos GPET-Q (the General Practice Extraction Tool – Query) component which links the GPET-E (the General Practice Extraction Tool – Extract) products, GP practices and the HSCIC. The integration of over 8,000 GP practice systems, and five commercial suppliers is a complex task, but we are on track to deliver QOF 13/14 before the end of this financial year.

Summary Care Record has created over 32 million records. It has also been written into the GP contract for 14/15 which should boost record creation. The patient mailing campaign has concluded and the associated helpline will close at the end of January.

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	А	G	G	A
Customer and Stakeholder Satisfaction	James Hawkins & Dr. Mark Davies	N/A	N/A	A	N/A
Public & Patient Engagement	Dr. Mark Davies	R	N/A	А	A
Reputation	Alan Perkins	N/A	TBC	TBC	TBC
Information Quality	Max Jones	А	A	А	N/A
Incident Resolution	Clare Sanderson	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	G	R	R	A

*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)

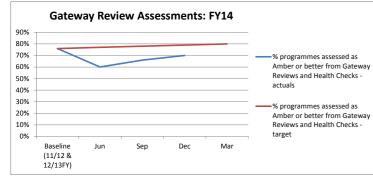
EMT KPIs by Exception

KPI [not shown in order of priority as they have equal weighting]	KPI Owner	Previous Period	Current Period	Current Forecast	Previous Forecast	
Incident Resolution	Clare Sanderson	R	R	R	R	

KPI	Programme Achievement
KPI Owner	James Hawkins

	Р	D	٢	SP	Di	-IS	COMBINED		
Previous RAG	69.0%	A/G							
Current RAG	64.4%	A/G	80.0%	G	52.0%	Α	65.5%	A/G	
Forecast RAG	67.8%	A/G	86.7%	G	60.0%	Α	70.3%	A/G	

Programme Delivery Directorate - Delivery Confidence (Gateway Reviews)



	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:

 Finance Department have introduced a revised method of RAG reporting on 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 results in an overall assessment of Amber or Red for current year budget even though the total may be within tolerance.

Programme Delivery Directorate - Executive Summary

Overall Delivery Confidence is assessed as AMBER/GREEN based on November 2013 Highlight Reports. Successful delivery appears feasible for the majority of projects (14 out of 18 projects rated AMBER or better) but there are some issues raised for awareness:

Resourcing - remains stable with only 2 projects reporting "Red" but 9 reporting "Amber". HSCDS (Choices Managed Service) reports a significant number of vacancies (32, down from 36). NHSmail continues to be under-resourced with 6 vacancies

Key Milestones – milestone achievement for GP2GP and PSNH has improved from "Red" to "Amber". HJIS remains "Red" and 13 projects in total remain "Amber" or worse. 8 of these are due to actual / forecast delays in obtaining business case / ICT spend approval.

Current Year Budget - The financial reporting guidelines mean 14 current year project budgets remain "Red", 13 of which are due to HSCIC admin underspend.

- CQRS GP System Suppliers unwilling to commit to timescales for Enhanced Services until QOF data has been progressed further
- GPSoC Replacement contract signature planned Feb 2014, may be delayed due to multiple complex dependencies.
- NHS Choices Online Channel Infrequent Project board meetings delaying internal sign-off process MPA PVR (Project Validation Review) scheduled 6/12/13.
- ETP Plans in place for 'Fast Track' implementations with aim to increase GP practice deployment before end of current business case 31 March 2014.
- N3 Approval of business case for continuation of N3 services beyond 31/03/2014 for up to 24 months not received in time
- PSNH 'Red' delivery confidence from MPA during Gate 2 June 13. Action plan developed to address recommendations..

• HJIS - Delivery Confidence A/R instead of A/G awarded at Gate 1 Review in Sept 2013, due to delays caused by redefinition of assurance / approvals process in light of whole life cost rising above £50M.

• NHS e-RS - Work continuing to finalise CCN for transition and exit period (Dec 2013 - Dec 2014), scheduled for signature 11/12/13. Escalations raised to HMT and Cabinet Office for OBC Approval (still outstanding and overdue)

LSP Delivery Directorate - Executive Summary

Overall Delivery Confidence is assessed as GREEN based on October 2013 LSP DD Highlight Reports. It should be noted that BT LSP - South have all but completed their Acute Deployments whereas BT LSP - London have a number of major Acutes planned and this is reflected in the Delivery Confidence of the two programmes. Financial forecast vs budget is 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 - there is no budget in place for care.data or Data Services for Commissioners

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 internally.

• 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 (2016), 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.

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- 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	Owner	Progress
Revisit weighting of projects included in the KPI	10-Jan-14	James Hawkins	On target - no issues original deadline achievable
Other projects to be added to programme achievements including GPES, Spine 2, LSP Programmes,		James Hawkins / Steve	Completed
Care.Data, Data Sets for Commissioners and SUS / PBR	18-Nov-13	Bruggenwirth	
MJ to advise JH and RS of GPES FOT and whether plan 'B' is required	CLOSED	Max Jones	Completed

КРІ	Programme Achievement					
KPI Owner	James Hawkins					

NI I OWIN	51	James n	awkillo																Farrent	-	A/G
						Dr	ogram	mo Do	livory	Dachhaa		vombo	r 2012						Forecas	TRAG	A/G
			Over	rall Delivery	Confidenc		ogram	1	ne Delivery Dashboard - Nov Gateway Delivery Confidence			Key Delivery Milestones				Current year financial forecast vs. budget			Investment justification (BC, MoU etc.) forecast spend status		
		Sep	Oct	Nov	Dec	Jan	Feb	RPA	Gate	Date	RAG	Sep	Oct	Nov		Sep	Oct	Nov	Sep	Oct	Nov
P0004	CP-IS				⇒	A/G	A/G	Med	3	Jul-2012					⇒	TBC		⇒			⇒
P0070	CQRS				⇒			Med	4a	Oct-2013					₽			⇒			⇒
P0010	DMS Connectivity				⇒			N/A	N/A	N/A	N/A				⇒		0	0 ⇒	N/A	N/A	Ŷ
P0012	ЕТР	A/R	A/R	A/R	⇒ A/R	A/R	A/R	High	0	Nov-2012	A/R	,			⇒		U	υ ⇒			⇒
P0014	GP2GP				⇒			L	N/A	N/A	N/A				৵		U	υ ⇒			⇒
P0017	GPSOC				⇒			High	4	Mar-2009	A/G						U	ບ ⇒			⇒
P0208	GPSOC Replacement	5			⇒			High	3	Nov-2013					⇒		U	ບ ⇒			⇒
P0207	HJIS	A/R	A/R	A/R	⇒ A/R	A/R	A/R	Med	1	Sep-2013	A/G				⇒			⇒	N/A	N/A	N/A 🔿
P0026	HSCDS (Choices Service)	A/R			₽			Med	5	Apr-2012					₽		твс	U 🖓		N/A	N/A ➡
P0298	NHS Choices Online Channel	A/R	A/R	A/R	⇒ A/R	A/R	A/R	High	PVR	Dec-2013	TBC	NR		A/R	₽	NR	TBC	U 🖡	NR		твс 🖡
P0024	N3				Ŷ			High	5	Jul-2012	A/G						U	U 🕆			⇒
P0238	NHS e-RS inc. CAB				⇒			High	AAP	Jul-2013					⇒		U	ບ ⇒			⇒
P0030	NHSmail	A/G	A/G	A/G	⇒			High	AAP	Oct-2012					₽		U	υ ⇒			⇒
P0196	NHSmail2		A/G	A/G	⇒ A/G	A/G	A/G	High	2	Jun-2013					⇒		U	ບ ⇒			⇒
P0037	оніт				⇒			N/A	N/A	N/A	N/A				⇒			U 🖡			⇒
P0190	PSNH				⇒	A/R	A/R	н	AAP	Nov-2013					倉		U	υ ⇒			ł
P0051	SCR	A/G	A/G	A/G	⇒ A/G	A/G	A/G	н	0	Feb-2012					⇒		U	υ ⇒			⇒
P0050	Spine 2	A/R			⇒			н	AAP	Sep-2013					⇒		U	ບ ⇒			⇒
Overall Del November	very Confidence for Prog	ramme Deliv	ery:				A/G 64.44%		Novembe GREEN'.	r's Delivery Conf The 3-month fore	idence has d ecast Delive	decreased f	from 69% (0 ce (to Feb 2	October 201 014) remai	I3 da ns 'A	ta) to 64.5 %	%. The over REEN' desp	all Delivery co ite a 6.2 perc o	nfidence RA	G remains	AMBER / since last

November's Delivery Confidence has decreased from 69% (October 2013 data) to 64.5%. The overall Delivery confidence RAG remains 'AMBER / GREEN'. The 3-month forecast Delivery Confidence (to Feb 2014) remains 'AMBER / GREEN' despite a 6.2 percentage point decrease since last period (down from 74% to 67.8%).

5 projects have degraded their 3-month forecast since last month; 1 has upgraded its forecast.

Sourced from the Highlight Reports (Key programme /project RAGs) November-13

February-2014

A/G 67.78%

--------No

Non Comp	letion
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)
IN/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)

Previous RAG Current RAG

A/G

КРІ	Programme Achievement
KPI Owner	James Hawkins

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

						Ρ	rogra	imme	De	livery	Dashb	oard - N	ovem	ber 201	3									4
		N/A N/A N/A N/A N/A N/A Image: Strategy of the st			Quali	ty Mana	agement	against p	lan	Program	ime / Proje	ect end date	Curren	t Investmen approval s		ion	ICT Sp	end Appro	oval status	5	Reso	urcing Aga	inst Plan	
-		Sep	Oct	Nov	Se	р	Oct	Nov		Sep	Oct	Nov	Sep	Oct	Nov		Sep	Oct	Nov		Sep	Oct	Nov	
P0004	CP-IS	N/A	N/A	N/A					⇒			⇒				⇒				⇒				⇒
P0070	CQRS			-					⇒			⇒				⇒				⇒				⇒
P0010	DMS Connectivity	N/A	N/A	N/A				N/A	₽			⇒				⇒	N/A	N/A	N/A	⇒				⇒
P0012	ETP								⇒			⇒				⇒				⇒				⇒
P0014	GP2GP				тв	с			⇒			Ŷ				⇒	N/A	N/A	N/A	⇒				⇒
P0017	GPSOC								⇒			⇒				⇒				⇒	N/A	N/A	N/A	⇒
P0208	GPSOC Replacement								₽			⇒				⇒				⇒				⇒
P0207	HJIS	N/A	N/A	N/A					৵			⇒				⇒				⇒				⇒
P0026	HSCDS (Choices Service)			C 1				С	倉			⇒				⇒		N/A	N/A	♠				⇒
P0298	NHS Choices Online Channel	NR	TBC	TBC	N	२	твс	TBC	⇒	NR		⇒	NR			⇒	NR			⇒	NR			⇒
P0024	N3								⇒			⇒				⇒				₽				⇒
P0238	NHS e-RS inc. CAB								⇒			⇒				₽				₽				⇒
P0030	NHSmail			1					₽			⇒				⇒				⇒				⇒
P0196	NHSmail2								⇒			⇒				⇒				⇒				⇒
P0037	оніт								⇒			⇒	N/A	N/A	N/A	⇒	N/A	N/A	N/A	♠	NR	N/A	N/A	⇒
P0190	PSNH			1					₽			⇒				⇒				₽				⇒
P0051	SCR			=					⇒			⇒				⇒				⇒				⇒
P0050	Spine 2								⇒			⇒				₽				⇒				⇒
Overall Deli November	very Confidence for Program	nme Delivery	y:				A/G 64.44%		Nov GR	vember's D EEN'. The 3	elivery Con 3-month for	fidence has de ecast Delivery	creased fr Confidend	om 69% (Oc æ (to Feb 20	tober 2013 14) remain	data) s 'AM	to 64.5%. BER / GRE	The overall EN' despite	l Delivery c e a 6.2 per	onfide centa	ence RAG r ge point de	emains 'AN crease sinc	IBER / .e last	
February-2	2014						A/G 67.78%			iod (down fi rojects have		67.8%). their 3-month	forecast s	nce last mor	ith; 1 has u	pgrad	led its fored	ast.			- •			

67.78%

Sourced from the Highlight Reports (Key programme/project RAGs)

November-13

Non Completion

ion Comp	Dietion
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)
	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

KPI Own	Owner James Hawkins						1												Current	RAG	
							•												Forecast	t RAG	
									LSP D) ashboa	rd - Nove	mber 2	2013								
			Ove	erall Delive	ery C	onfidence	RAG			Gateway De	livery Confiden	се	Key	Delivery M	ilestones	Current	year finan vs. budg	cial forecast et			cation (BC, spend statu
		Sep	Oct	Nov		Dec	Jan	Feb	RPA	Gate	Date	RAG	Sep	Oct	Nov	Sep	Oct	Nov	Sep	Oct	Nov
P0183	South Community Programme		A/G	A/G	⇒				Med	3	Dec-2012	A/G			⇒			⇒	•		
P0182	South Ambulance Programme				⇒	A/G	A/G	A/G	Med	3	Dec-2013	A/G			⇒			⇒			
P0181	South Acute Programme		A/G	A/G	⇒	A/G	A/G	A/G	High	2	Dec-2012	A/G			⇒			⇒			
P0047	BT LSP - South				⇒				High	5	Nov-2012	A/G			⇒			⇒			
P002	BT LSP - London				₽				High	N/A	N/A	N/A			⇒			⇒			
P0031/00	CSC LSP				⇒				High	N/A	N/A	N/A			⇒			⇒			
Overall Del	livery Confidence for Prog	ramme Deliv	ery:				÷														
Novembe	r-2013							G 80.00%			rst month that LS ast to remain GR										
February-	2013							G 86.67%			ent year budget b									3- (ee	

KPI Programme Achievement (D+IS) Previous RAG **KPI Owner** James Hawkins Current RAG

G 86.67%

26/11/2013)

26/11/2013)

						[Data a	nd Info	rmatio	on Servio	ces Dash	board ·	- Novei	mber 2	013						
			Over	all Delive	ry Co	onfidence	RAG			Gateway Deli	very Confiden	ce	Key D	Delivery Mi	lestones	Current	year finano vs. budg	cial forecast et			cation (BC, spend status
		Sep	Oct	Nov		Dec	Jan	Feb	RPA	Gate	Date	RAG	Sep	Oct	Nov	Sep	Oct	Nov	Sep	Oct	Nov
P0294	National Tariff System (NTS)		A/R	A/R	₽	A/R	A/R	A/R	Med	N/A	N/A	N/A	твс	A/R	Ŷ	TBC	U	Ŷ	N/A	N/A	N/A ⇒
твс	care.data	A/R	A/R	A/R	₽	A/R			High	N/A	N/A	N/A			⇒	N/A	N/A	0 介	N/A	N/A	Ŷ
P0265	Data Services for Commissioners				⇒	A/R	A/R	A/R	твс	N/A	N/A	N/A	NR		⇒	NR	ο	• ●	NR		⇒
P0281/03	GPES		A/R		Ŷ				твс	4	Dec-2012		NR	NR	Ŷ	NR	NR	0 ↓	NR	NR	Ŷ
твс	sus				⇒				Med	See Spine	See Spine	See Spine	NR	NR	Ŷ	NR	NR	Ŷ	NR	NR	Ŷ

Overall Delivery Confidence for Programme Delivery:	
November-2013	A 52.00%
February-2013	A 60.00%

Non Completion

NR

No report provided

template

This is the first month that Data and Information Services have input into the Delivery Confidence KPI. The current month overall delivery confidence RAG is AMBER in November and is forecast to remain static in 3 months' time. This reflects the challenges facing our programmes during this period.

Sourced from the Highlight Reports (Key programme /project RAGs)

Sourced from the Highlight Reports (Key programme /project RAGs)

KEY

February-2013

Trend RAG improvement 倉 from previous month RAG same as previous month RAG decrease from ₽

No Programme or Project Board took place that month (pre-dating NHS England monthly requirement for submission) NB

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 N/A

previous month

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) TBC

Previous RAG

Forecast RAG

КРІ	Programme Achievement (LSP)
KPI Owner	James Hawkins

Previous RAG	
Current RAG	
Forecast RAG	

								LSP	Da	ashboa	ard - N	lovemb	er	2013								P.			
		Benefits	s realisatio	n confidence	Qual	lity Man	agement	against p	lan	Program	nme / Proj	ect end date		Current In a	vestment pproval st		on	ICT Sp	end Appro	val status	;	Resou	urcing Aga	iinst Plan	
		Sep	Oct	Nov	S	ер	Oct	Nov		Sep	Oct	Nov		Sep	Oct	Nov		Sep	Oct	Nov		Sep	Oct	Nov	
P0183	South Community Programme								⇒				•				♠				⇒				₽
P0182	South Ambulance Programme			1	1				♠				ŀ		NB		倉		NB		个		NB		Ŷ
P0181	South Acute Programme				ŀ				⇒				•				⇒				⇒				⇒
P0047	BT LSP - South								⇒				•				⇒				⇒				⇒
P002	BT LSP - London				N	I/A	N/A	N/A					•				⇒				⇒				₽
P0031/00	CSC LSP								♠				•				⇒				⇒				⇒
Overall Deli	very Confidence for Progra	mme Deliver	ry:					_																	
November	-2013					G	80.00%					it LSP have in d is forecast t													
February-2	2013					G	86.67%	•				of challenge (51.250 dd					
Sourced fro	om the Highlight Reports (K	ey programr	ne /project F	RAGs)	Nove	ember-1	3	•																	

Programme Achievement (D+IS)

						Data	and In	formatio	n Serv	vices D	ashboar	d - No	vembe	r 2013						
		Benefits	realisatior	confiden	ce	Quality Ma	anagement	t against plan	Program	nme / Proje	ect end date		Investment approval st	Justification atus	ICT Sp	end Appro	val status	Reso	urcing Aga	inst Plan
		Sep	Oct	Nov		Sep	Oct	Nov	Sep	Oct	Nov	Sep	Oct	Nov	Sep	Oct	Nov	Sep	Oct	Nov
P0294	National Tariff System (NTS)	N/A	N/A	N/A	⇒	N/A	N/A	N/A ⇒	TBC		Ŷ			ł			⇒			⇒
твс	care.data	N/A	N/A		ᠿ	N/A	N/A	1			⇒			ł			⇒			⇒
P0265	Data Services for Commissioners	NR			⇒	NR		⇒	NR		⇒	NR		⇒	NR		⇒	NR		⇒
P0281/03	GPES	NR	NR	N/A	₽	NR	NR	^	NR	NR	ŕ	NR	NR	1	NR	NR	∱	NR	NR	î
твс	SUS	NR	NR		个	NR	NR	Ŷ	NR	NR	Ŷ	NR	NR	Ŷ	NR	NR	个	NR	NR	Ŷ

Overall Delivery for Programme Delivery: November-2013

This is the first month that Data and Information Services have input into the Delivery Confidence KPI. The current month overall delivery confidence RAG is AMBER in November and is forecast to remain static in 3 months' time. This reflects the challenges facing our programmes during this period.

Sourced from the Highlight Reports (Key programme /project RAGs)

KEY

February-2013

Trend RAG improvement from previous ᠿ month RAG same as previous month \Rightarrow

₽ RAG decrease from previous month

November-13

Non Completion

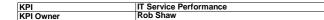
A 52.00%

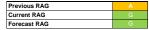
A 60.00%

No report provided (pre-dating NHS England monthly requirement for submission / Programme Delivery reporting standard initiation) NR No Programme or Project Board took place that month (pre-dating NHS England monthly requirement for submission) NB

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 N/A historical template TBC

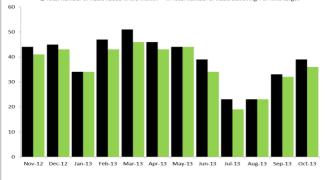
Data item was not available at the time of report production (for example, discrepancies with budget figures or a lack or information around the progression of an approval)





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

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



Changes in this report: New HSSI graph added, along with number of services measured totals for Availability and Response Times, in line with HSCIC Board feedback.

Caveats: Although service performance targets remain static each month, the number of services being reported against varies due to contractual reporting cycles, e.g. 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 75 services measured, following receipt of the latest Spine Quarterly Service Report in early October.

Commentary:

Availability: October was a very positive month for live service Availability with all 75 services reported against either achieving or exceeding their average Availability targets. There were a small number of individual site level failures against services in London (1 CRS site failure and 1 Local PACS site failure) and the South (1 CRS site failure), where the average Availability measure was still achieved or exceeded.

Response Times: On the whole, Response Times performance was good across all services with 39 out of 42 services reported against having achi eved or exceeded their Response Times targets, with the exceptions being Choose & Book and RiO in both London and the South, all of which experienced failures, resulting in the RAG status of A mber for this indicator.

The root cause of the RiO performance failures in London and the South has not yet been identified. Although there were a number of failures, the magnitude of failure was quite small so any impact to users would have been minimal. There has been a number of service improvement activities focussed on RiO performance implemented in recent months and the position is improving month on month. There has also been significant focus on Response Times during development, testing and service introduction of RiO R2 which is currently being rolled out.

The Choose and Book Response Times failure was primarily due to a HSSI on 23rd October, as noted below, with the root cause being an issue with the Oracle shared memory pool, the memory pool was flushed to resolve the incident and Oracle has recommended the installation of a patch.

HSSI Fix Times: October saw the number of HSSI's in the month rise to 38 which is in line with trend over the last 12 months. Over 25% of those HSSI's (10) came from Acute or Ri O services in London although differing root causes were presented for most and all were fixed within SLA target. All other HSSI's were also resolved within the Fix Time Service Level aside from two - a Severity 2 Incident which manifested itself as a CQRS issue but was caused by GPES which took 79 hr 32mins against a target of 6 hours and an incident on Choose and Book which was escalated from a Severity 1 due to the time it took to resolve, which was 8hr 49 mins against a target of 4 Hours for a Severity 2 - uses of both the Choose and Book Professional application and Patient Web application will have experienced degraded performance on a number of transactions between 07:41 and 16:30 on Wednesday 23rd October 2013.

Since the reporting period of October and the generation of this commentary (6 December) the following HSSI's have occurred which are worthy of note:

1/11/13 - RiO unavailable for all sites in London and the South between 21:20 and 22:42

14/11/14 - Patient Demographics Service was unavailable between 22:10 and 23:18

19/11/13 and 20/11/13 - Electronic Transmission of Prescriptions experienced performance degradation for 1 hour on the afternoon of 19th and morning of 20th.

19/11/13 - Choose and Book service unavailable to all users from 13:51 to 00:58

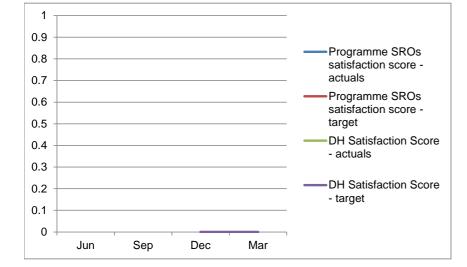
19/11/13 - Lorenzo users at multiple sites were unable to book or cancel appointments, the resolution involved failing the datab ase over which resulted in an outage at affected sites from 4:35 to 5:22

HSSI Volumetrics:

Average elapsed time between Severity 1 HSSIs being opened in October 2013: 1 Day, 2 Hours, 29 Minutes Average elapsed time between Severity 2 HSSIs being opened in October 2013: 0 Days, 15 Hours, 48 Minutes

Performance Indicators	Target	Nov-12	Nov-12 RAG	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
No. of Services achieving Availability target	All Services to achieve individual targets (but see caveat)	78		79		79		77		75		75		76		77		78		75		72		75	
No. of Services breaching Availability target, but not to a critical level	0	2	A	1	A	0	G	2	A	4	А	4	A	3	A	1	A	0	G	2	А	4	A	0	G
No. of Services breaching Availability target, but not to a critical level	0	0		0		0		0		0		0		0		0		0		0		0		0	
Total No. of Services measured for A	Availability Performance >>>>	8	0	8	30	7	9	7	'9	7	9	7	9	7	79	7	8	7	'8	7	7	7	76	7	5
No. of Services achieving Response Times target	All Services to achieve individual targets (but see caveat)	39		42		42		41		43		43		42		44		42		42		40		39	
No. of Services breaching Response Times target, but not to a critical level	0	4	R	1	R	1	R	2	R	0	R	0	R	2	R	1	A	3	A	2	A	4	A	3	A
No. of Services breaching Response Times target at a critical level	0	2		2		2		2		2		2		1		0		0		0		0		0	
Total No. of Services measured for Re-	sponse Time Performance >>>>	4	5	4	15	4	5	4	15	4	5	4	5	4	45	4	5	4	15	4	4	4	14	4	12
Total number of Higher Severity Service Incidents (HSSIs)	N/A	44		45		34		47		51		46		44		39		23		23		33		38	
Total number of HSSIs achieving Fix Time target	IVA	41	Α	43	G	34	G	43	Α	46	Α	43	А	44	G	34	A	19	А	23	G	32	G	36	A
% HSSIs achieving Fix Time target	95%	93%		96%		100%		91%		90%		93%		100%		87%		83%		100%		97%		100%	
Key Actions												Target Date								Status					

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



Jun

Programme SROs satisfaction

Programme SROs satisfaction

score - actuals

Sep

No

baseline

There is no new performance narrative or current RAG to add to this report.

score - target		TBC	TBC		
DH Satisfaction Score - actuals	No baseline				
DH Satisfaction Score - target		TBC	TBC		
Key Actions				Target Date	Status
Conduct first survey with external SRO	S			31/12/2013	On target - iss achievable
Get copy of inaugural Sponsor survey	of satisfaction wit		nce survey	has the	Not started

Dec

TBC

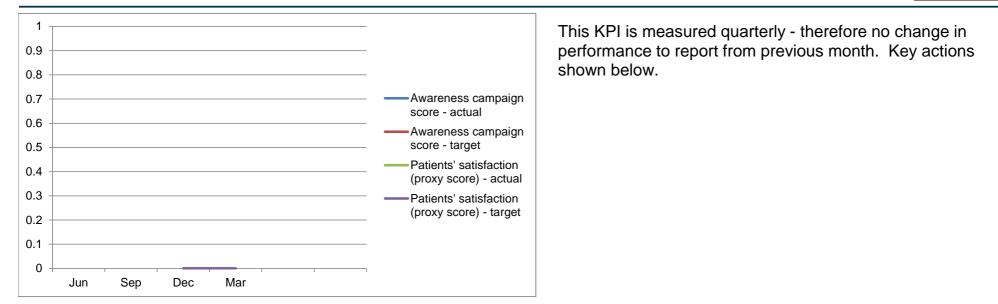
Mar

TBC

Conduct first survey with external SROs	31/12/2013	On target - issues need addressing but original deadline achievable
Get copy of inaugural Sponsor survey of satisfaction with HSCIC once survey has been completed	tbc	Not started
Rob Shaw and Max Jones to send Mark Davies surveys for N3, CSC and Accenture	Mid Dec 13	Completed
Complete first run of new 'panel' survey (which includes some questions on customer satisfaction)	Jan 14	On target - but original deadline revised

KPI	Public & Patient Engagement
KPI Owner	Dr Mark Davies

Previous RAG	R
Current RAG	N/A
Forecast RAG	A

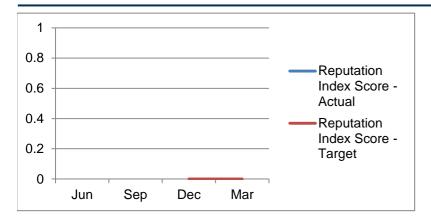


	Jun	Sep	Dec	Mar
Awareness campaign score -		No		
actual		baseline		
Awareness campaign score - target			TBC	твс
Patients' satisfaction (proxy		No		
score) - actual		baseline		
Patients' satisfaction (proxy score) - target			TBC	TBC

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	Not started
Conduct first survey with relevant organisations representing patients' interests	31/01/2014	Not started
Review results from Awareness Campaign	31/01/2014	On target - no issues original deadline achievable

KPI	Reputation
KPI Owner	Alan Perkins

Previous RAG	N/A
Current RAG	ТВС
Forecast RAG	TBC



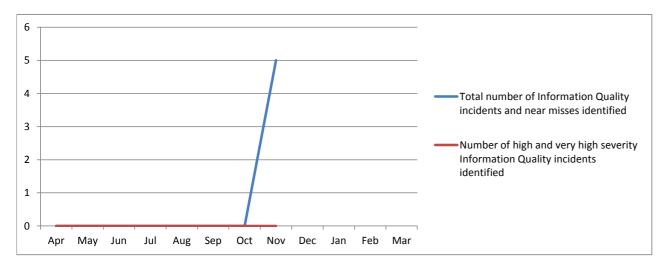
This KPI is measured 6-monthly - therefore there is no change in performance to report from the previous month.

	Jun	Sep	Dec	Mar
Reputation Index		No		
Score - Actual		baseline		
Reputation Index Score - Target			TBC	TBC

Key Actions	Target Date	Status
Complete first run of new 'panel' survey	Jan 14	On target - but original deadline revised

KPI	Information Quality
KPI Owner	Max Jones

Previous RAG	Α
Current RAG	Α
Forecast RAG	Α



It is difficult to assess what to expect for the number of Information Quality incidents. The incidents reported in November include typos in reports, errors in calculations, incorrect reference data applied to the data, and an external customer querying the methodology used for creating indicators. There were no high or very severity incidents reported this month.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Total number of Information Quality incidents and near misses identified	N/A	5										
Number of high and very high severity Information Quality incidents identified	N/A	0										

Key Actions	Target		Status
Agree Info Quality incident baseline from Incident Reporting (IR) longlist	Date 20/11/2013		Completed
Amend Incident Reporting capture Info Quality requirements	01/12/2013		Completed
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 measurem escalated problems	ent of KPI; b)	actions taker	by the KPI owner to address variances from target; or c) actions taken by Board or EMT to rectify

KPI	Usefulness of Service
KPI Owner	Max Jones

Previous RAG	Α
Current RAG	Α
Forecast RAG	Α

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, 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.

In the absence of this quantitative information, the RAG score 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. Customers are also making use of our extract service and our information appears frequently in the media. However, there is further work needed to expand the range and usefulness of the data we make available.

Target Date		Status
31/01/2013		On target - but original deadline revised
On going		Not started
	Date 31/01/2013	Date 31/01/2013

Forecast v Budget

КРІ	Financial Management (HSCIC)
KPI Owner	Carl Vincent

	Budget (£m)	Actual (£m)	% Variation
Year to date Actual v Budget	£144.2m	£127.9m	11.3%

Budget (£m)

£221.2m

Forecast (£m)

£200.1m

HSCIC Operating costs

The forecast expenditure has decreased from £206m at month seven to £200m at month eight, including reductions from staff costs of £0.7m and non-staff costs of £5.8m, 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 latter four months 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 probably be nearer the top end of our estimate of £15m - £20m for the full year and this is where DH expect us to end the year.

Forecast accuracy of 10.3% for the month is due to RED variances in all directorates, from Clinical & Public Assurance at 11% to Information Assurance at 33% and HR&T at 36%

Management action

% Variation

9.5%

	Nov Actual (£m)	Nov Forecast (£m)	% Variation
Forecast accuracy	£11.8m	£13.2m	10.3%

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.

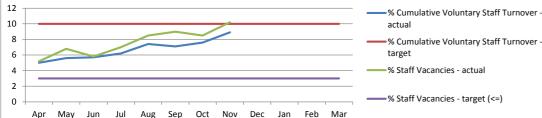
The Zero Based Review process also included a collection of reforecast figures for 2013/14, which we believe has led to an increased understanding by individual teams of their costs, and is probably the reason for the increased forecast underspend on the HSCIC operating costs. The on-going process of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

Note: for more information please see Appendix 2 - Management Accounts

Key Actions	Target Date	Status
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	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	On target - but original deadline revised

KPI	Organisational Health
KPI Owner	Rachael Allsop

Previous RAG	G
Current RAG	R
Forecast RAG	R



lun Jul Aug Sen Oct Nov Dec Jan Feb Ma

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
% Cumulative Voluntary Staff Turnover - actual	5	5.6	5.7	6.2	7.4	7.1	7.6	8.9				
% Cumulative Voluntary Staff Turnover - target	10	10	10	10	10	10	10	10	10	10	10	10
% Staff Vacancies - actual	5.2	6.8	5.8	7	8.5	9	8.5	10.2				
% Staff Vacancies - target (<=)	3	3	3	3	3	3	3	3	3	3	3	3
% training activity - actual		N/A		86%								
% training activity - target	80%			80%				80%			100%	

Cumulative Voluntary Staff Turnover

Cumulative voluntary turnover rate was 8.9% at November. Whilst voluntary turnover remains about the same as October the cumulative number of voluntary leavers is steadily increasing and growing closer to target. 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 230 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 232 vacancies and is RED rated. 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 at the same time as turnover is increasing. Most of the activity is still related to posts that have been vacant over an extended period as a consequence of the centrally imposed vacancy freeze. A meeting with Directors was held to agree the most effective recruitment strategy for filling priority posts. This has resulted in a number of actions to assist in effectively getting to required capacity levels, summarised below.

The RAG status of this KPI has been reviewed to align with the cumulative reporting of voluntary turnover. This has amended the status to RED for previous months.

Turnover is anticipated to be AMBER 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

Training Activity

A second training needs analysis (TNA) was launched inviting employees to submit their technical and vocational training needs by the end of November and we are seeking approval from each Director. The scope of requirement for 'Skills for Business and Management' training has been established through the initial TNA (with nothing fundamentally different being revealed by the 2nd TNA). This category of training will be provided through Civil Service Learning in the new financial year. Professional Leads are continuing to develop the HSCIC professions and their training schemes. As Accredited Professional Training is not yet approved by the Transformation Board it is not covered by this metric.

An AMBER rating is forecast for Q3 as a number of newly approved needs are anticipated to require action towards the end of the guarter creating a peak in activity. This is expected to go GREEN early within Q4 as the training is

Key Actions	Target	Stat	tus
	Date		
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)	20/12/2013	On ta	arget - but original deadline revised
Hold a strategic recruitment meeting with all Directors to review vacancies and plan in light of the ZBR outputs.	20/11/2013	Com	pleted
Hold a strategic recruitment meeting with all Directors to review vacancies and plan in light of the ZBR outputs.	20/11/2013	Com	pleted
Based on ZBR returns and future years financial pressures provide high level assessment of level of additional posts we could comfortably recruit to this year without putting ourselves at too much risk for future years	28/11/2013	Com	pleted
Identify priority recruitment and agree fast track approach to job descriptions, grading and recruitment.	28/11/2013	Com	pleted
Identify the external recruitment agencies framework which could be used and whether a transition exemption could be applied.	30/11/2013	Com	pleted
Complete paper setting out approach to priority recruitment and high level plan.	20/12/2013	On ta	arget - no issues original deadline achievable
Work with Phil Wade to identify Communications Resources to work on employer branding (linked to wider Brand Reputation Transformation Project)	31/12/2013	On ta	arget - no issues original deadline achievable
Complete Standard Job Descriptions for all priority roles	30/11/2013	On ta	arget - no issues original deadline achievable
Complete procurement (from Framework) of Recruitment Marketing capability.	30/01/2014	On ta	arget - 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

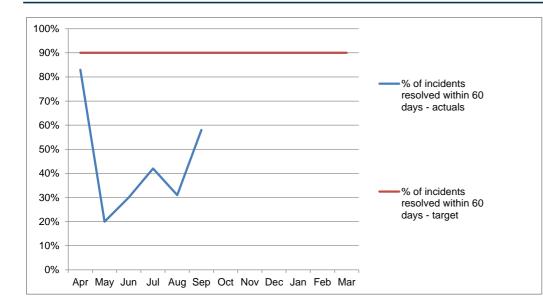
Note:

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

Cumulative turnover has been calculated on an approximate basis through combining turnover information for the legacy organisations NHS IC and NHS CFH, however 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).

KPI	Incident Resolution	Previous RAG R	
KPI Owner	Clare Sanderson	Current RAG R	
		Forecast RAG R	



Percentage of incidents resolved within 60 days: September 2013 – 58%

September 2013 is the latest month available which would enable all incidents to be resolved within 60 days. 58% of incidents raised in September 2013 were resolved within 60 days. This is an improvement on recent months, but 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 November which had been resolved within 60 days: November 2013 – 38%

There were 21 incidents resolved during November, compared to 8 new incidents identified. This has reduced the number of incidents in the backlog. The backlog is currently large and incidents have been outstanding for a long time, so although it is good that the incidents are being resolved, the timeliness indicator will inevitably be distorted by historical practice.

Number of Incidents reported November 2013 - 8

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 may discourage reporting.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
% of incidents resolved within 60 days - actuals	83%	20%	30%	42%	31%	58%						
% 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%	36%	38%				
Number of Incidents reported	12	10	10	19	13	12	19	8				

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	n for incider	nts-to be us	sed across	the organ	isations			31/03/2014		On target - no issues original deadline achievable					
Confirm access to new syste	Confirm access to new system							31/06/2014	14 On target - issues need addressing but original deadline achieva						
Roll out training to all HSCIC target date								31/06/2014		On target - issues need addressing but original deadline achievable					

Glossary of Terms

AAP	- Assurance of Action Plan	LSP	- Local Service Provider
ALB	- Arms Length Body	MoU	- Memorandum of Understanding
BC	- Business Case	MPA	- Major Projects Authority
CAB	- Choose and Book	N3	- NHS National Network
CCN	- Contract Change Notice	NB	- No Board
CEO	- Chief Executive Officer	NHS IC	- NHS Information Centre
CfH	- Connecting for Health	NME	- North, Midlands and East
CPIS	- Child Protection Information Sharing	NR	- No Report
CQRS	- Calculating Quality Reporting Service	NTS	- National Tariff System
CRM	- Customer Relationship Management	NWWM	- North West and West Midlands
CRS	- Care Records Service NHS	OBC	- Outline Business Case
CSC	- Computer Sciences Corporation	OGC	- Office of Government Commerce
CSL	- Critical Service Level	OHIT	 Offender Health Information Technology
D & IS	- Data & Information Services	OSL	- Operating Service Level
DH	- Department of Health	PACS	- Picture archiving and communications system
DMS	- Defence Medical Services	PbR	- Payment by Results
e-RS	- Electronic Referral Service	PD	- Programme Delivery
ETP	- Electronic Transmission of Prescriptions	PHSO	- Parliamentary and Health Service Ombudsman
EMT	- Executive Management Team	PI	- Performance Indicator
EPS	- Electronic Prescription Service	PLACE -	 Patient-Led Assessments of the Care Environment
FL1	- Failure Level 1	PSNH	- Public Service Network for Health
FY	- Financial Year	QOF	 Quality and Outcomes Framework
GPES	- General Practice Extraction Service	RAG	- Red, Åmber, Green
GPSoC	- GP Systems of Choice	ROCR	- Review of Central Returns
HJIS	- Health & Justice Information Service	RPA	- Risk Potential Assessment
HMT	- Her Majesty's Treasury	SCR	- Summary Care Record
HSCIC	- Health and Social Care Information Centre	SIAM	- Service Integration and Management
HSCDS	- Health & Social Care Digital Service	SLA	- Service Level Agreement
HSJ	- Health Service Journal	SME	- Subject-Matter Expert
HSSI	- Higher Severity Service Incident	SME	- Small and Medium Enterprises
IN PS	- In Practice Systems	SOC	- Strategic Outline Case
ICT	- Information and Communications Technology	SRO	- Senior Responsible Owner
ISCG	- Informatics Services Commissioning Group	SSD	- Systems & Service Delivery
ISO	- International Organization for Standardization	SUS	- Secondary Uses Service
JNCC	- Joint Negotiation and Consultation Committee	TBC	- To be Confirmed
KM	- Knowledge Management	TUPE	- Transfer of Undertakings (Protection of Employment)
KPI	- Key Performance Indicator	ZBR	- Zero Based Review

Appendix 1 - Transformation Programme

Organisation wide Transformation

Through a combination of the Strategy and Transformation seminars, attendance at directorate transformation project boards, SMTs and team meetings and through the Leadership Forum and Championing Change Forum, face to face engagement about the Transformation Programme has taken place with approximately 350 staff over the last period. Areas of note in the last period includes:

Strategic Projects:

Work has focussed on defining the projects with definitions for Stakeholder Relationship Management, Patient and Citizen Approach and Brand Reputation prepared. There has been slippage defining the Publications Review and Innovations Hub due to resource constraints.

People Projects:

- The organisation wide **Values** workshops have been taking place with mixed levels of attendance. Feedback will be collated for agreement of the final values pack in January.

- More detailed communications on the **Professional Groups** has prompted positive staff feedback but has also resulted in a refinement in some of the areas. All definitions are now due to be completed by 20th December with staff selection due to commence after Christmas. Whilst this is a slippage against the November report this has allowed for a broader debate and input into the groups.

- Line Management Development Phase 1 (Policies) has commenced on a small scale and will be widened out in January and work has progressed on the Line Management Charter. Priority Cohort Recruitment activity has brought forward some of the activity within the **Recruitment and Talent Attraction** project and the **Reward Review** approach has been developed.

Operational Management Projects: 38 Corporate Policies have now been completed and these will be launched 13th December. The new Operational Governance arrangements will be communicated w/c 16th December. The PwC Financial Management Systems Review has been completed.

Integration Projects: Work on the Contact Centre / Helpdesk Strategy remains on track. Service Management and Integration (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 produced for Programme Delivery and Data and Information Services and the approach for Clinical and Public Assurance proposed.

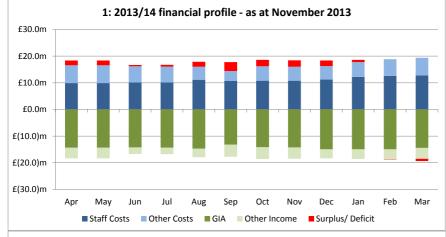
Within the LSP Delivery Directorate the results of consultation have been addressed and a further 5 day consultation was held on the final changes document with feedback built in. The implementation process is being developed for final agreement and communication. 'At Risk' letters are due to be sent to staff before 20th December. Direct Transfers have been finalised and all agreed transfers took place 2nd December.

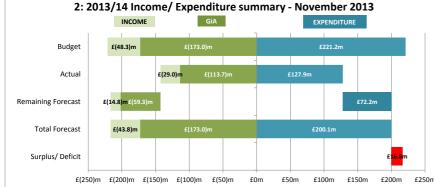
Overall Status

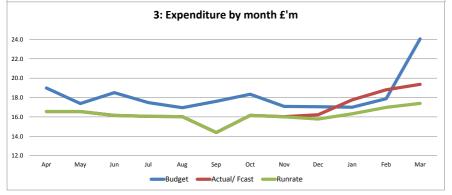
The overall status for the Programme remains at Amber / Green (equivalent to Green for EMT KPI reporting). Positive progress has been made in a number of areas however some slippage has been experienced. A common theme for project slippages has been resource constraints and prioritisation of Transformation work in relation to other organisation priorities (ref risks 14450 and 144530). The December Transformation Programme Board will consider a response to this and will consider overall prioritisation of the Transformation Projects.

The Programme Definition Document has been updated following feedback from the Programme Board incorporating more work on outcomes and is available for final

Key Actions	Target Date	Status
Engagement Programme on 'What is Transformation'	20/12/2013	On target - no issues original deadline achievable
Complete all Directorate Level Transformation Mandates	19/12/2013	On target - no issues original deadline achievable
Consider Priority Projects and Resource Constraints	19/12/2013	On target - no issues original deadline achievable







HSCIC Financial Summary November 2013

The year-to-date outturn for the first eight months of the year has resulted in £14.8m 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 £16.8m, 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 £10.0m 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 slide 4.

Other costs are £6.0m 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 £5.4m and £1.1m 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). The full year forecast is £12.2m under budget - this is material change for the previous month, where the forecast was £3.6m under budget. This is due to a) additional budget of £2.9m for depreciation being included, b) reduction in professional fees forecast by £1.2m,c) £1.2m reduction in depreciation forecast for GPES asset not yet in use and d) reduction in forecast of £2.4m for CPIS expenditure which will now be incurred by DH as work on Spine 2 asset (with a corresponding reduction in Income).

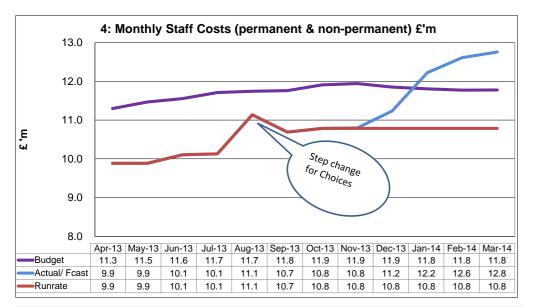
Non-GiA Income is £0.9m below budget year-to-date and is forecast to end the year £4.5m under budget. The £4.5m includes increase to budget for £8.7m of unbudgeted income streams from DH for Programme expenditure, offset by decreases including £13.0m for income that was to cover budgeted costs that will not now be incurred. Further detail is shown on slide 5.

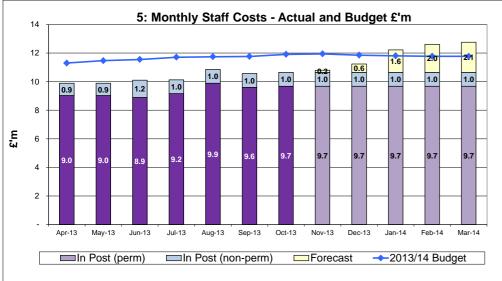
Graph information

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 8 months of actual costs and 4 months of anticipated costs.

Graph 3 shows monthly trend of gross expenditure for the organisation for the original budget (blue), the latest forecast (red) (8 months of actual costs and 4 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).





HSCIC Financial Summary November 2013 - Staff Expenditure

Staff costs are £10.0m under budget for the year-to-date (averaging £1.3m 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 £8.3m

- 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 £14.0m.

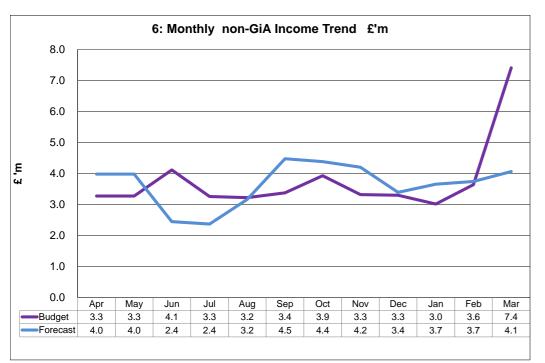
- A plausible but ambitious estimate of 20 net vacancies being filled each month (at an estimated cost of \pounds 50k per role) gives a projected underspend on staff costs of \pounds 12.8m.

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 (purple), the latest forecast (blue) (8 months of actual costs and 4 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 (red). 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.



HSCIC Financial Summary November 2013 - Income

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 £5.8m 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 November 2013

Statement of Comprehensive Net Expenditure

FINANCIAL RESULTS TO 30th NOVEMBER 2013

	8 Months ending 30 November 2013				Nonths end March 20	•					12 Mo	nths Endin	ig 31 March	n 2014				
		REVENUE		REVENUE								REVE	-					
	Budget YTD	Actual YTD	Var Fav- <mark>(Adv)</mark>	Budget 13/14	F'cast 13/14	Var Fav- <mark>(Adv)</mark>	Actual Apr	Actual May	Actual Jun	Actual Jul	Actual Aug	Actual Sep	Actual Oct	Actual Nov	F'cast 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	(115.3)	(113.7)	1.6	(173.0)	(173.0)	0.0	(14.4)	(14.4)	(14.2)	(14.4)	(14,7)	(13.2)	(14.2)	(14.2)	(14.9)	(14.9)	(14.9)	(14.4)
Income	(29.9)	(29.0)	0.9	(48.3)	(43.8)	4.5	(4.0)	(4.0)	(2.4)	(2.4)	(3.2)	(4.5)	(4.4)	(4.2)	(3.4)	(3.7)	(3.7)	(4.1)
Income	(145.2)	(142.7)	2.5	(221.3)	(216.8)	4.5	(18.3)	(18.3)	(16.7)	(16.7)	(17.9)	(17.7)	(18.6)	(18.4)	(18.3)	(18.6)	(18.7)	(18.5)
													, ,					
Permanent Staff	85.9	74.9	(11.0)	129.3	118.8	(10.5)	9.0	9.0	8.9	9.2	9.9	9.6	9.7	9.7	10.2	10.9	11.3	11.5
Non Permanent Staff	7.5	8.5	1.0	11.3	13.4	2.1	0.9	0.9	1.2	1.0	1.3	1.1	1.1	1.1	1.0	1.3	1.3	1.3
Staff Costs	93.4	83.4	(10.0)	140.6	132.3	(8.3)	9.9	9.9	10.1	10.1	11.1	10.7	10.8	10.8	11.2	12.2	12.6	12.8
Professional Fees	20.4	15.0		29.8	23.8		2.4	2.4	2.4	3.2	0.4	1.0	1.3	1.8	1.7	2.0		
Information Technology	7.4	6.3		10.8	10.2		0.5	0.5	0.8	0.6	1.5	0.7	1.0	0.6	1.1	0.9		
Travel & Subsistence	3.6	2.7		5.4	4.6		0.2	0.2	0.3	0.3	0.5	0.2	0.5	0.4	0.5	0.5		0.5 1.0
Accommodation	7.6	7.8		11.2	11.7		0.9	0.9	0.9	0.9	1.4	1.0	0.9	0.9	1.0	1.0	-	1.0
Marketing, Training & Events	1.0	0.9		1.5	1.5		0.0	0.0	0.1	0.1	0.2	0.1	0.2	0.2	0.1	0.1		0.2
Office Services	2.1	2.0		3.1	3.0		0.2	0.2	0.3	0.2	0.3	0.3	0.2	0.3	0.3	0.3		0.3
Other	1.3	4.3		7.7	4.4		1.5	1.5	0.6	(0.0)	(0.0)	(0.4)	0.6	0.4	(0.3)	0.2	-	
Depreciation / Amortisation	7.3	5.8	(11.0	9.3		0.8	0.8	0.5	0.7	0.7	0.7	0.7	0.7	0.7	0.7		1.1
Non Staff Costs	50.7	44.7	(6.0)	80.7	68.5	(12.2)	6.7	6.7	6.0	6.1	4.9	3.7	5.4	5.2	5.1	5.7	6.3	6.8
		(0.0)			(* (*		(0.0)	(0.0)	(0.0)	(2.2)	(2.2)	()	(0,0)	(2.2)	(0.0)	(2.2)	(0,0)	(
Internal Recharge - Estates	(0.0)	(0.0)	(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	· · · ·	0.2	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	0.1	(0.1)	(0.2)	(0.2)	(0.6)	(0.3)	(0.0)	(0.0)	0.1	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.1)	(0.1)	(0.1)
Internal Recharges	0.2	(0.2)	(0.3)	(0.1)	(0.7)	(0.6)	(0.0)	(0.0)	0.1	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.1)	(0.1)	(0.1)
Total Cost	144.2	127.9	(16.3)	221.2	200.1	(21.1)	16.6	16.6	16.2	16.1	16.0	14.4	16.2	16.0	16.2	17.8	18.8	19.4
(Surplus)/ Deficit	(1.0)	(14.8)	(13.8)	(0.1)	(16.8)	(16.6)	(1.8)	(1.8)	(0.5)	(0.7)	(1.9)	(3.3)	(2.4)	(2.4)	(2.1)	(0.8)	0.1	0.9