

Information for Quality (IfQ) Programme – Managing Risks

Strategic delivery:	☑ Setting standards	andards 🗷 Increasing and 🗷 informing choice		Demonstrating efficiency economy and value					
Details:									
Meeting	AGC								
Agenda item	5								
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Meeting date	21 September 2016								
Author	Nick Jones, Director of Compliance & Information								
Output:									
For information or decision?	For information								
Recommendation	The Committee is asked to note this report.								
Resource implications	As outlined								
Implementation date	Ongoing								
Communication(s)	Ongoing								
Organisational risk	□ Low	☐ Medium		☑ High					
Annexes									
Annex A –									

1. Introduction and summary

- 1.1. The purpose of this report is to provide the Committee with a progress report on the IfQ programme. The Programme is now running through its 'public beta' phase for both the new Website and Clinic Portal. The next phase 'Release two' has completed its planning phase and partially started its development.
- **1.2.** Following the legal injunction brought by a clinic in July 2016 now lifted, a judicial review has been scheduled in December 2016 and therefore the delivery plan has been updated including the next GDS assessment.
- **1.3.** The consequences of the updated timeline as well as the judicial review have been assessed and the risks are currently being mitigated at a programme and corporate level.
- **1.4.** Annex A sets out the proposed updated timeline for the remaining IfQ Beta phase, leading both to 'live' and to the next DH/GDS assessment.

2. IfQ projects update

2.1. IfQ Beta phase/GDS update

- The Clinic Portal was released to public beta one week later on 12 July 2016. Further
 development and improvements will continue throughout beta including user testing as well as
 collecting feedback. The Government Digital Service (GDS) assessment of the Clinic Portal to
 enable progression to 'live' is scheduled for October 2016.
- We had planned to make the beta version of the website available to the public a few weeks after showing it to clinics. However, we were prevented from doing so due to an injunction granted by the High Court on 14 July following an application brought by a clinic. This injunction was lifted following our application and the website proceeded to full public beta on 12 August 2016. The judicial review proceedings will place on 19 and 20 December 2016.
- We have launched a significant period of user testing and the gathering of feedback about aspects
 of the website. Visitors to the website are asked to complete a survey, and to date there have
 been over 500 visits to the beta site.
- The feedback from public beta will be one element of the evidence that will inform the Authority's
 decision on the final shape of the new website. We will also be inviting the IfQ Advisory Group to
 meet again to help inform the set of recommendations that we will put to the Authority at its
 meeting in November 2016.
- With the Judicial Review pending the GDS assessment to enable the website to 'go live' has been pushed back to January 2017.
- There are several consequences that flow from this delay. Two operational issues worth highlighting here are:
 - The current HFEA website content management system is dated and is no longer supported by the original supplier, which can lead to instability from time to time. This has been managed to date but this risk remains as long as it remains as our official site.
 - There has been a concentration of resources in preparing the website for beta launch. This reallocation of resources has had an effect on planning assumptions, in particular relating to development work necessary for Release 2 the data submission module.

2.2. If Q release 2

- This relates to the treatment data submission system, much awaited by clinics. It is 'release 2' because it forms part of the Clinic Portal (Release 1). Substantial work is now progressing, such that development work and design work can progress at pace. However, the additional work set out in section 2.1 above has meant that our end October 2016 release expectations for EDI users (those clinics submitting directly to the HFEA) are unlikely to be met. A revised plan is now being developed and an update of the timeline is available in the Annex A.
- The revised plan has been agreed by SMT in September, subject to some additional considerations.
- That said we are engaging with EPRS providers (suppliers of patient reporting systems to around half of all clinics) and who have been notified of the development path to March 2017 (the latest acceptable implementation date) such that they are well prepared. They have access to the technical architecture that will underpin the system which has met with general approval. We plan to maintain close levels of engagement to enable gradual adoption of the necessary ways to 'connect' to the Authority and maintain necessary security.
- The Standardisation Committee for Care Information (part of NHS Digital) accreditation process
 for the 'UK ART dataset' and its implementation is on-track. It is an intensive process requiring the
 submission of substantial documentation considered by several committees but is a good external
 test of the thoroughness by which we have gone about our work.

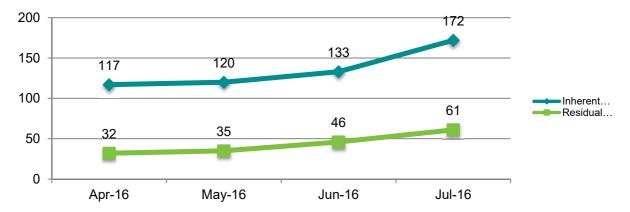
2.3. IfQ data cleansing/Migration

- Data Cleansing and Migration work is slightly behind schedule, also as a result of diversion of some resources. Data cleansing work remains primarily focused on dealing with 'severity 1' items (relating to treatment involving donor gametes), with all issues expected to be resolved this month.
- If necessary, the data migration of the existing (cleansed) database to a new structure can still
 occur by October 2016. However, this issue will be further addressed alongside broader
 discussions about overall timeframes for the Programme.
- Arrangements to provide assurance services for the data migration are now in place. We have commissioned an expert in data migration to provide a review of all steps we have taken and will take prior to transfer. This is intended to provide a further check and balance to the Senior Responsible Owner, and in turn the Audit and Governance Committee.
- Whilst most clinics have been cooperative in fixing errors (and we worked hard to minimise the
 quantum of tasks they had to undertake) there are issues with some centres in failing to deal
 swiftly with our requests and we continue to monitor progress closely, escalating our action as
 necessary.

3. IfQ risks and issues

3.1. Overall update

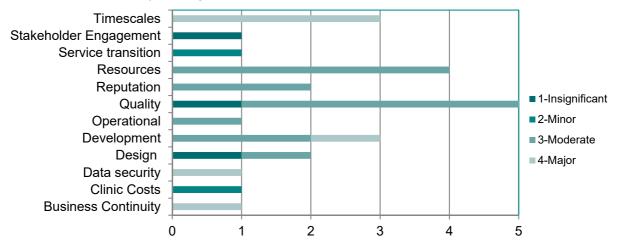
The line graph below represents the overall IfQ risk score, which combines the perceived impact
and likelihood of the current risks on hand each month. The overall risk score for the IfQ
Programme has significantly increased this month. The main risk added rotates around EPRS
providers and the impact on treatment fees and potential delay in R2.



• The major risks are associated with timescales, data security, development and business continuity.

3.2. Strategic Risk Update

- Three new inter-related strategic risk sources arising due to IfQ have been escalated to the corporate Risk register. These risks were the various impacts of Electronic Patient Record System (EPRS) providers not making the necessary changes to their systems to submit clinic treatment data to the new Register structure following IfQ release 2. (
- The risk areas affected are firstly RM1 (the risk of a loss of regulatory authority), because any
 gaps in data could impact effective regulatory monitoring. Secondly, IfQ1 (the risk to improved
 information access), since any data that had not been provided would then not be available to
 provide to patients through Choose a Fertility Clinic. And finally, FV1 (financial viability risk of
 overspend) could be impacted if the HFEA were not able to bill clinics for treatments that they had
 undertaken but not reported to us.
- Work to develop further mitigation plans for these risks, alongside the finance and compliance departments is currently in progress.



4. IfQ budget

4.1. The current budget position (excluding VAT) for 2016/17 is as follows:

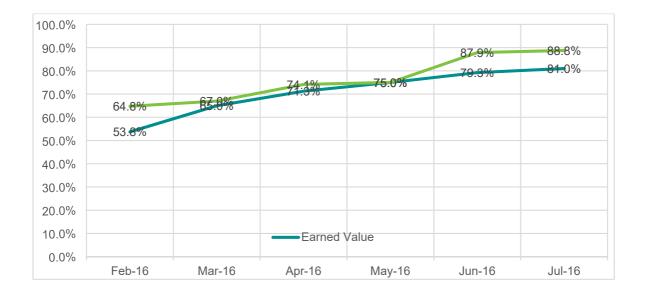
Total IfQ budget May 2016	Budget this F/Y	Planned spend	Actual to date	Monthly Variance
1,227,402	£619,025	£1054,946	£1036.530	£18,416
	(16/17)	(July 16)	(July 16)	(The variance is due to the security, class consultants, IS contingency pot and data migration consultancy not being spent as forecasted.)

4.2. The delay to the programme will have financial consequences, with the effect being worked through at the time of writing.

5. Earned value

The spend to date has raised slightly comparing to the earned value, this is mainly due to the
delay caused by the injunction and the impact on Beta completion. Also note that the RR
resources issues remain a blockage to complete Beta and has a noticeable impact on work
completion and therefore the earned value.

Period	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Earned Value	53.8%	65.5%	70.0%	75%	79%	81%
Spend to date	64.8%	67.0%	74.1%	75%	87%	88%



6. Recommendation:

- **6.1.** The Audit and Governance Committee is asked to:
 - Note progress, risks and the budget position on IfQ.
 - Note in particular the update on the new risks.

7. Annexes:

Annex A: Timeline for the remaining IfQ Beta phase



