

Strategic performance report

Strategic delivery:	<input type="checkbox"/> Setting standards	<input type="checkbox"/> Increasing and informing choice	<input checked="" type="checkbox"/> Demonstrating efficiency economy and value
Details:			
Meeting	Authority		
Agenda item	6		
Paper number	HFEA (16/09/2015) 763		
Meeting date	16 September 2015		
Author	Paula Robinson, Head of Business Planning		
Output:			
For information or decision?	For information		
Recommendation	The Authority is asked to note and comment on the latest strategic performance report.		
Resource implications	In budget		
Implementation date	Ongoing – strategic period 2014-2017		
Communication(s)	<p>CMG reviews performance in advance of each Authority meeting, and their comments are incorporated into this Authority paper.</p> <p>The Department of Health reviews our performance at each DH Update meeting (based on the CMG paper).</p> <p>The Authority receives this summary paper at each meeting, enhanced by additional reporting from Directors. Authority's views are fed back to the subsequent CMG performance meeting.</p>		
Organisational risk	<input type="checkbox"/> Low	<input checked="" type="checkbox"/> Medium	<input type="checkbox"/> High
Annexes	Annex 1: Strategic performance scorecard		

1. Introduction

- 1.1 The attached paper summarises the main performance indicators up to the end of June 2015, following discussion by the Corporate Management Group (CMG) at its August performance meeting. Overall performance is good, with very few performance measures in the red, and good progress towards our strategic aims.

2. Recommendation

- 2.1 The Authority is asked to note the latest Strategic Performance Report.

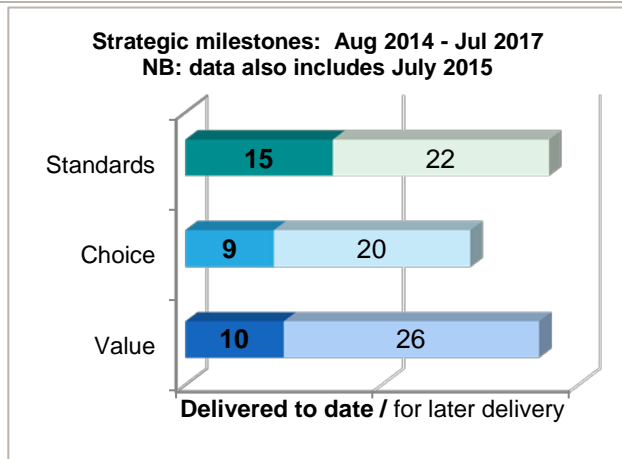
Annex 1: Strategic performance scorecard

1. Summary section

Dashboard – June data

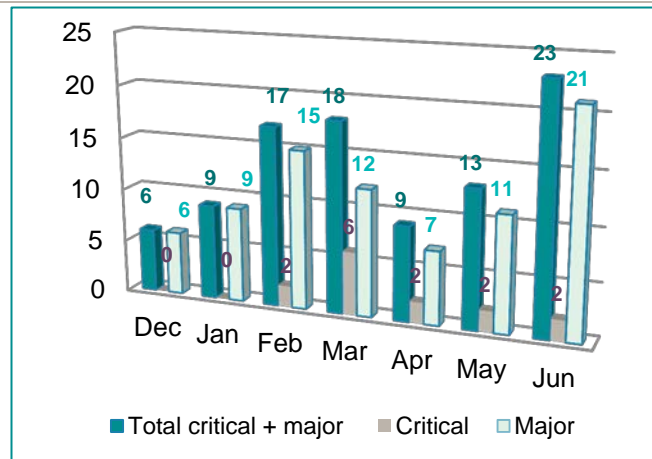
Strategic delivery totaliser

(see overleaf for more detail)



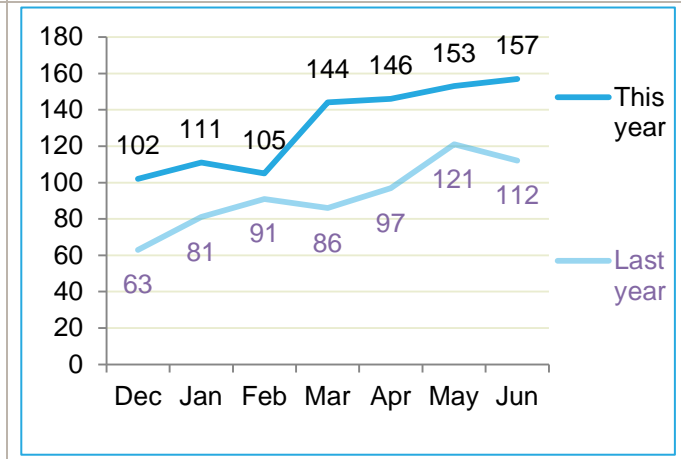
Setting standards:

critical and major recommendations on inspection

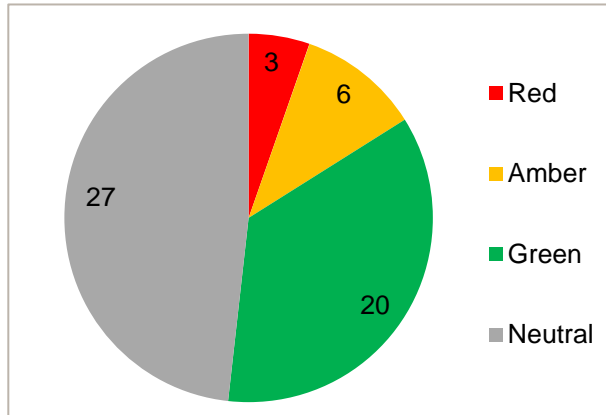


Increasing and informing choice:

public enquiries received (email)

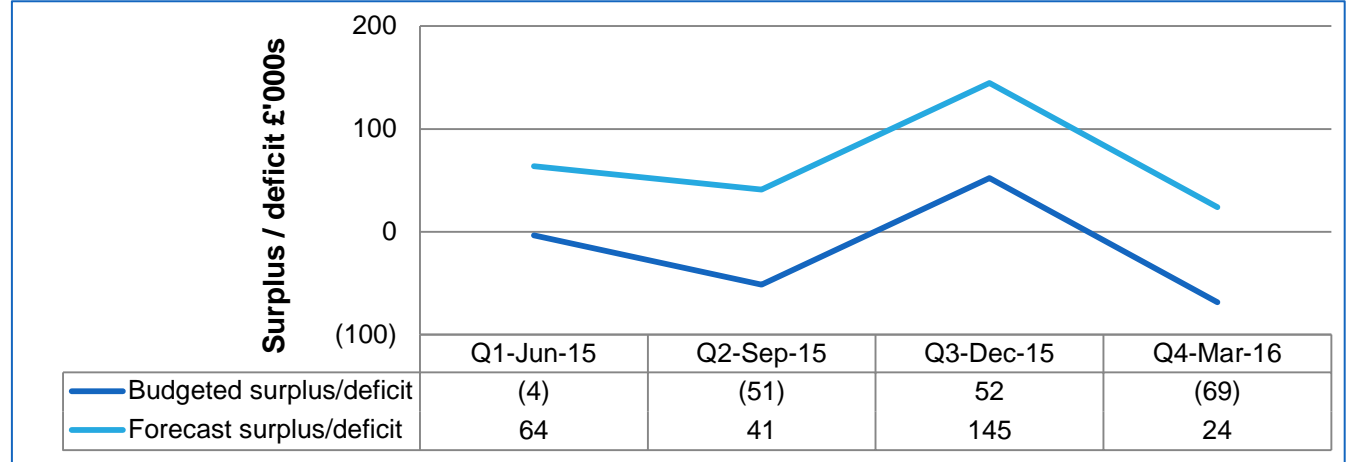


Overall performance - all indicators:



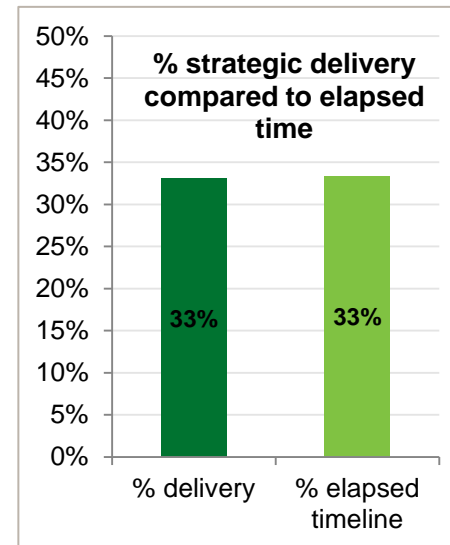
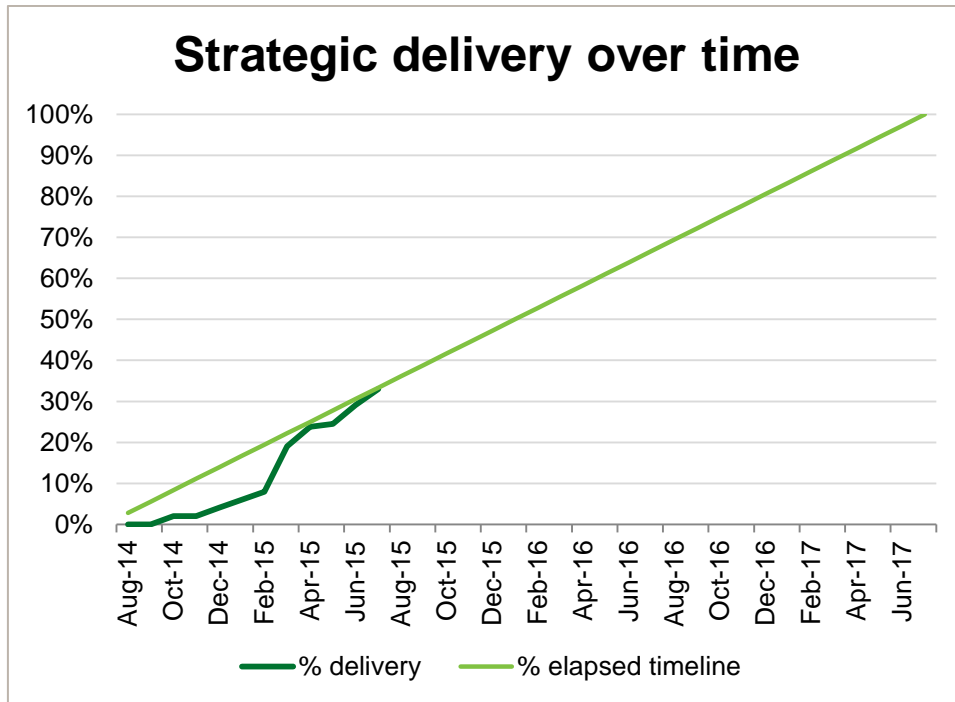
(See RAG status section for detail.)

Efficiency, economy and value: Budget status: cumulative surplus/deficit



Dashboard - Commentary

Strategic delivery (to end of July) – summary:



We are broadly on track, with one third of items completed at one third of the way through the three year strategic period. The calendar of deliverables needs to be reviewed as soon as the detailed plan for Information for Quality (IfQ) programme delivery is available. There is a separate agenda item to update the Authority on progress with IfQ.

Strategic delivery in June and July

Setting standards

June saw the start-up of our counselling support service pilot, which will improve the availability of counselling support for donor-conceived people wishing to access information held on the HFEA Register. The start-up was delayed by two months, owing to initial difficulties in identifying a supplier who could deliver the contract within our budget. The success of the three year pilot will be gauged at annual intervals.

We held a well attended Licensed Centres Panel meeting, engaging with the sector on a range of topics. We also attended the annual ESHRE conference, so as to engage with the wider scientific community on current issues, to inform our policy work. During ESHRE we held a horizon scanning meeting to assist our future planning.

We continued to fulfil our role as an EU competent authority, participating in a competent authorities meeting in June.

Increasing and informing choice

The work to redevelop the website is behind schedule as a result of earlier approval delays, but is now going well. We have made good progress following the procurement of the suppliers Reading Room. The project board is established and meeting regularly to progress the work, and further user research is under way.

In July we published our report 'Improving outcomes for fertility patients: multiple births 2015', looking at elective single embryo transfer (eSET) and multiple birth figures.

Efficiency, economy and value

There has been a great deal of planning, sequencing and technical preparation work for the IfQ projects to improve the clinic portal and our information systems. The first 'agile sprint' of work began with our contractors in July, following the successful completion of tendering. As part of the IfQ programme, we will need to prepare an organisational blueprint setting out the way we will need to work in order to fully realise the benefits of the programme once it is delivered. This work has been rescheduled for the autumn as a result of the earlier approval delays.

Our annual report and accounts were successfully completed and laid in Parliament at the end of June, in keeping with statutory requirements.

Red/amber/green status of performance indicators

The red key performance indicators (KPIs) shown in the 'overall status - performance indicators' pie chart on the dashboard are as follows:

Total number of outstanding errors in the system taking into account the eight weeks centres are given to resolve.

This rose by 13% in June, compared to a target of reducing this by 5% or more each month.

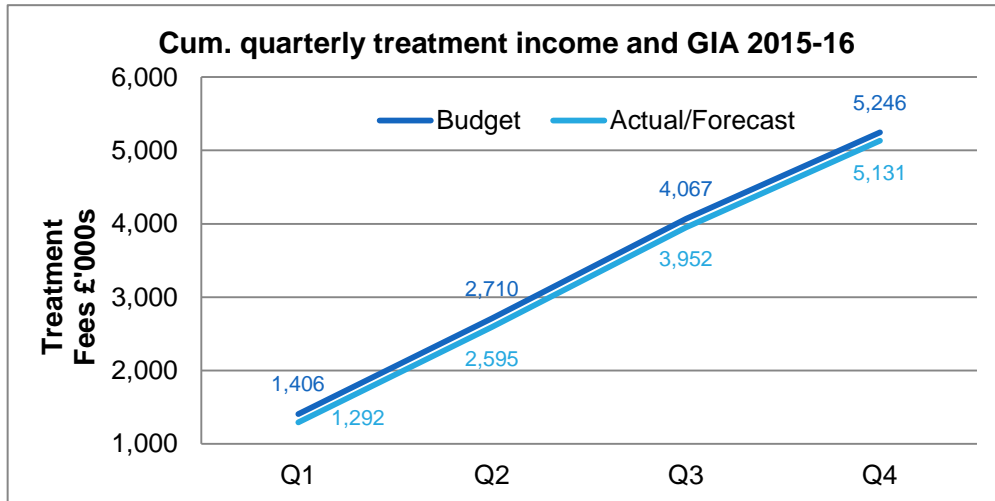
This is likely to be because we are focusing our staff resources on improving the quality of our data for the future, through IfQ. This means that at present we are not able to do as much proactive work with clinics on resolving errors in the data they submit. The effort we are investing in IfQ is critical to improving the situation – it will pay off in the long run, by greatly reducing both the error rate and the effort involved for clinics in submitting the data. Meanwhile, we are managing the situation by following up with the clinics who have the most errors, and CMG will continue to monitor the situation closely each month.

The average number of working days between a licensing committee date and minutes being finalised.

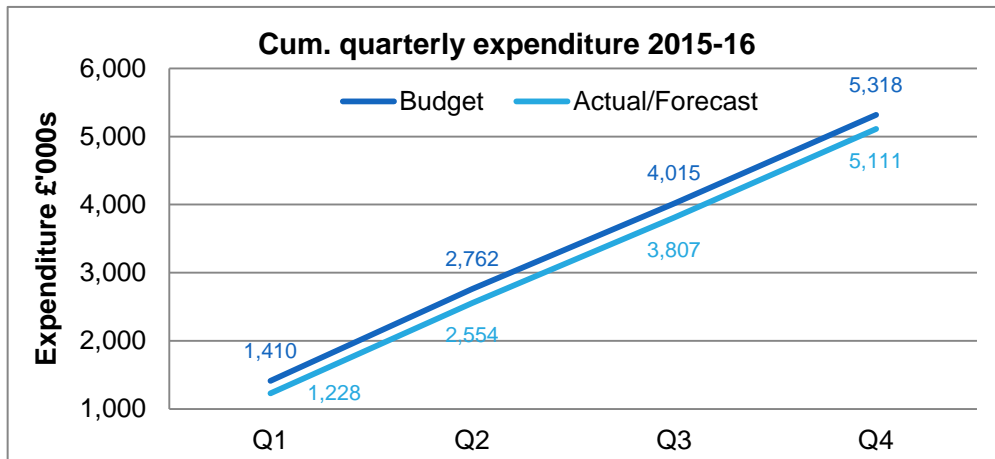
The KPI aim is for 100% of licensing minutes to be finalised within 10 working days. One set of Statutory Approval Committee (SAC) minutes fell just outside this KPI, resulting in a performance score of 78% in June. Another, narrower, version of this indicator focusing solely on PGD decision times was missed for the same reason.

Budget status

The dashboard shows the overall surplus/deficit position. The budget (planned) compared to actual figures are close together because we are only a few months into the financial year and are yet to re-forecast. The graphs below show how the surplus or deficit has arisen.



This graph shows our budgeted (planned) licence fee income and grant-in-aid (GIA) compared to what is actually happening. The first quarter of the year has shown that we have not reached budget (a shortfall of £114k). This was due to the GIA drawdown being short £40k and a drop in treatment fees. The GIA will be drawn down in Q2 instead. The remaining eight months we are expecting to achieve our budget (hence the closeness of the lines in the graph). However another review at the end of quarter two may show significant changes with new information.



This graph is the second component that makes up the surplus/deficit. This excludes costs relating to IfQ, since this is being funded from reserves and accounted for separately.

We are currently spending budget but against reduced income and our year end forecast is showing an under spend of £207k. Again this may change after our detailed review in October.

Quality and safety of care

As agreed previously, the following items are most meaningful when reported on an annual basis. The following items will be presented to the Authority each year in September (and these items therefore appear on the agenda for today’s meeting):

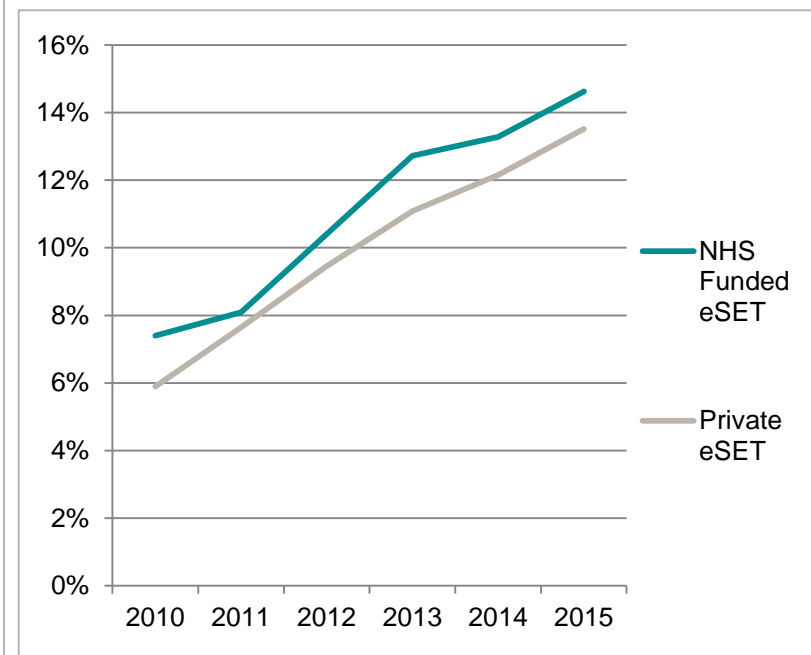
- number of risk tool alerts (and themes)
- common non-compliances (by type)
- incidents report (and themes).

The following figures and graphs were run on 13 August 2015.

ESET split by private/NHS:

Funding	Year					
	2010	2011	2012	2013	2014	2015
NHS Funded:						
Recorded as eSET	4293	4903	6263	7868	8437	5542
	7%	8%	10%	13%	13%	15%
Not recorded as eSET	19284	19493	17868	17719	17824	10120
	33%	32%	30%	29%	28%	27%
Private:						
Recorded as eSET	3422	4630	5696	6854	7718	5122
	6%	8%	9%	11%	12%	14%
Not recorded as eSET	31018	31545	30400	29388	29536	17104
	53%	52%	50%	48%	47%	45%

Graph: eSet % trends NHS/private:

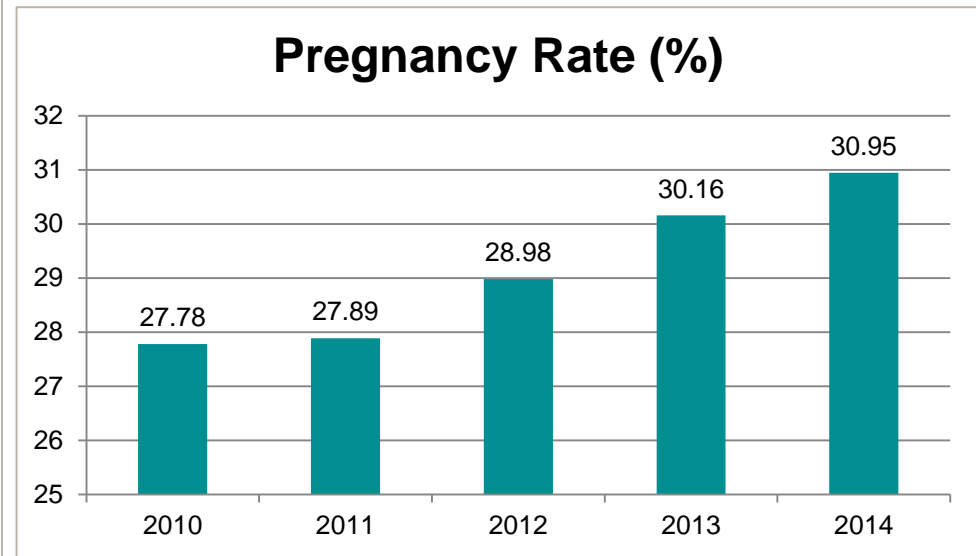


Explanatory text: Looking at all IVF treatment forms; counting those records that the clinics recorded as eSET.

Unfiltered success rates as % - pregnancies (rather than outcomes, since this provides a better real-time picture):

Years	All cycles	Pregnancies	Pregnancy rate
2010	58017	16117	27.78
2011	60571	16895	27.89
2012	60227	17453	28.98
2013	61829	18646	30.16
2014	63515	19658	30.95

Graph showing the pregnancy rate over recent years:



Explanatory text: Looking at all IVF treatment forms, and providing a count of pregnancies - as recorded on the early outcome form.

2. Indicator section

Key performance and volume indicators – June data:

Indicator	Performance	RAG	Recent trend ¹	Aim ²	Notes																								
Setting standards: improving the quality and safety of care through our regulatory activities.																													
Licensing decisions made: - By ELP - By Licence Committee	15 0	↓	<table border="1"> <caption>Licensing Decisions Data</caption> <thead> <tr> <th>Month</th> <th>ELP</th> <th>Licence Committee</th> </tr> </thead> <tbody> <tr><td>Dec</td><td>3</td><td>0</td></tr> <tr><td>Jan</td><td>8</td><td>2</td></tr> <tr><td>Feb</td><td>7</td><td>0</td></tr> <tr><td>Mar</td><td>5</td><td>2</td></tr> <tr><td>Apr</td><td>6</td><td>0</td></tr> <tr><td>May</td><td>9</td><td>2</td></tr> <tr><td>Jun</td><td>15</td><td>0</td></tr> </tbody> </table>	Month	ELP	Licence Committee	Dec	3	0	Jan	8	2	Feb	7	0	Mar	5	2	Apr	6	0	May	9	2	Jun	15	0	No KPI – tracked for workload monitoring purposes	Volume indicator (no KPI target).
Month	ELP	Licence Committee																											
Dec	3	0																											
Jan	8	2																											
Feb	7	0																											
Mar	5	2																											
Apr	6	0																											
May	9	2																											
Jun	15	0																											
Setting standards: improving the lifelong experience for donors, donor-conceived people, patients using donor conception, and their wider families.																													
Percentage of Opening the Register requests responded to within 20 working days	100% (24)	★	<table border="1"> <caption>OTR Requests Data</caption> <thead> <tr> <th>Month</th> <th>Number of requests</th> <th>% OTR requests within 20 days (KPI = 100%)</th> </tr> </thead> <tbody> <tr><td>Dec</td><td>16</td><td>100%</td></tr> <tr><td>Jan</td><td>8</td><td>100%</td></tr> <tr><td>Feb</td><td>22</td><td>100%</td></tr> <tr><td>Mar</td><td>30</td><td>100%</td></tr> <tr><td>Apr</td><td>29</td><td>100%</td></tr> <tr><td>May</td><td>23</td><td>100%</td></tr> <tr><td>Jun</td><td>24</td><td>100%</td></tr> </tbody> </table>	Month	Number of requests	% OTR requests within 20 days (KPI = 100%)	Dec	16	100%	Jan	8	100%	Feb	22	100%	Mar	30	100%	Apr	29	100%	May	23	100%	Jun	24	100%	Maintain at 100% 	KPI: 100% of complete OTR requests to be responded to within 20 working days (excluding counselling time)
Month	Number of requests	% OTR requests within 20 days (KPI = 100%)																											
Dec	16	100%																											
Jan	8	100%																											
Feb	22	100%																											
Mar	30	100%																											
Apr	29	100%																											
May	23	100%																											
Jun	24	100%																											

¹ Blue dashed line in graphs = KPI target level. This line may be invisible when performance and target are identical (eg, 100%).

² Direction in which we are trying to drive performance. (Are we aiming to exceed, equal, or stay beneath this particular KPI target?)

Indicator	Performance	RAG	Recent trend ¹	Aim ²	Notes
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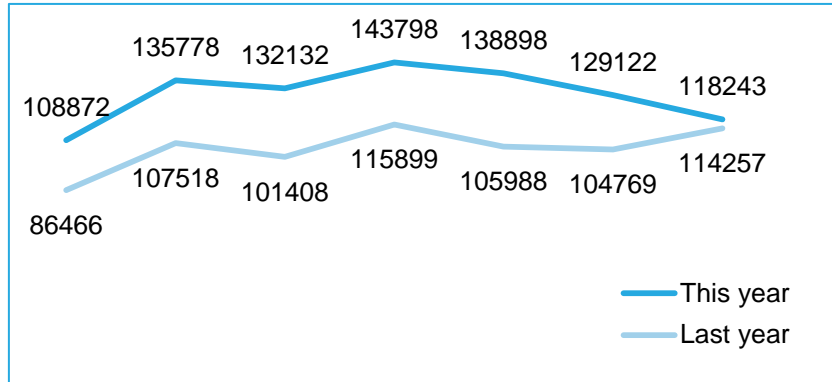
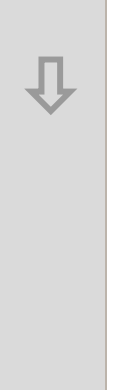
Increasing and informing choice: using the data in the Register of Treatments to improve outcomes and research.

See graphs focused on quality of outcomes – after dashboard page.

Increasing and informing choice: ensuring that patients have access to high quality meaningful information.

Number of visits to the HFEA website (cw previous year)

118,243
114,257



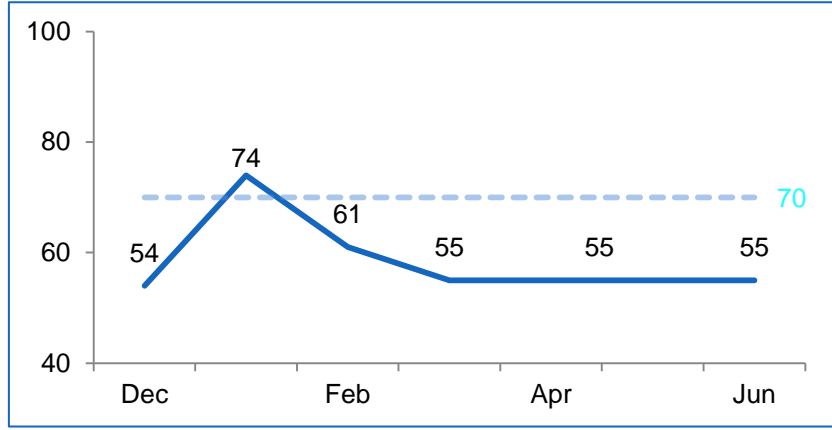
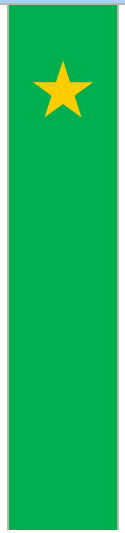
No KPI – tracked for general monitoring purposes.

Volume indicator showing general website traffic compared to the same period in previous year. Measured on the basis of 'unique visitors'.

Efficiency, economy and value: ensuring the HFEA remains demonstrably good value for the public, the sector and Government.

Average number of working days taken for the whole licensing process, from the day of inspection to the decision being communicated to the centre.

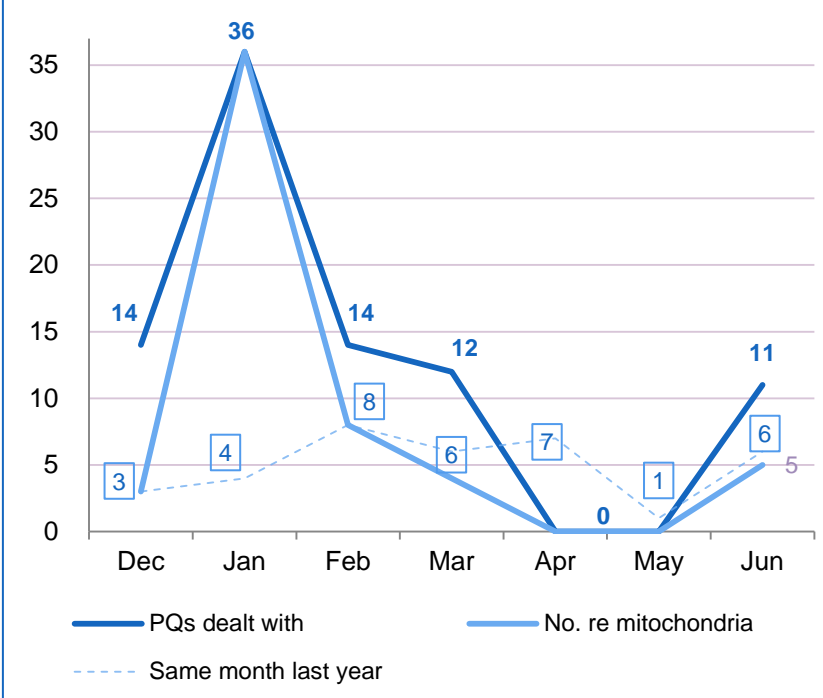
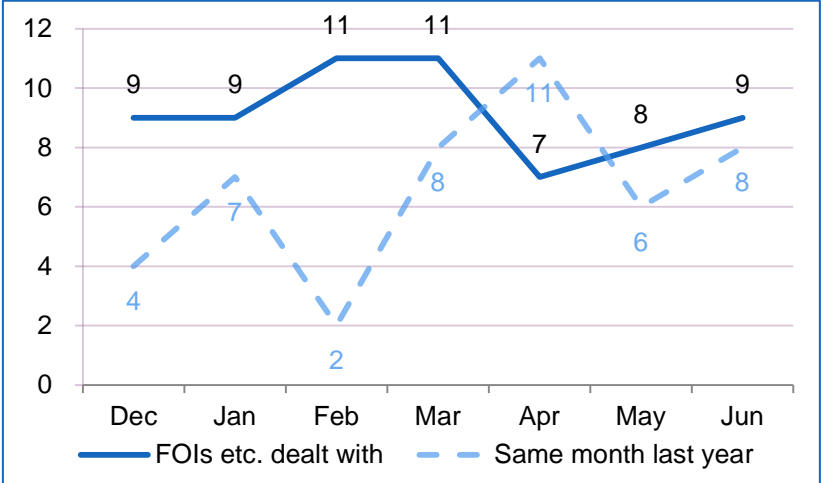
55 working days


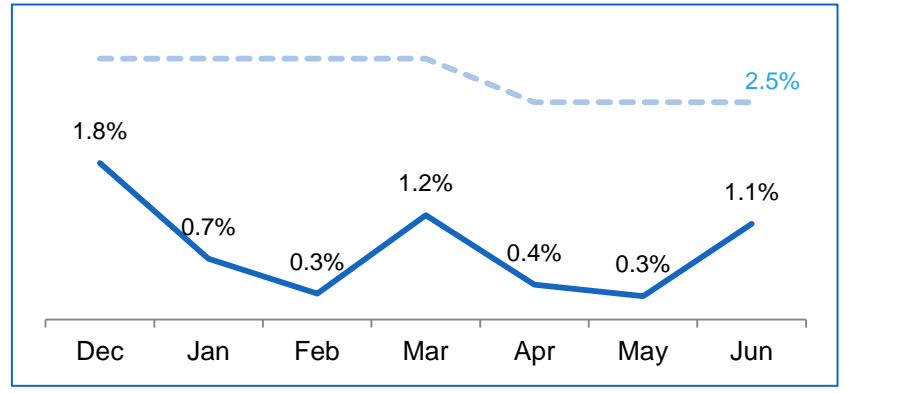


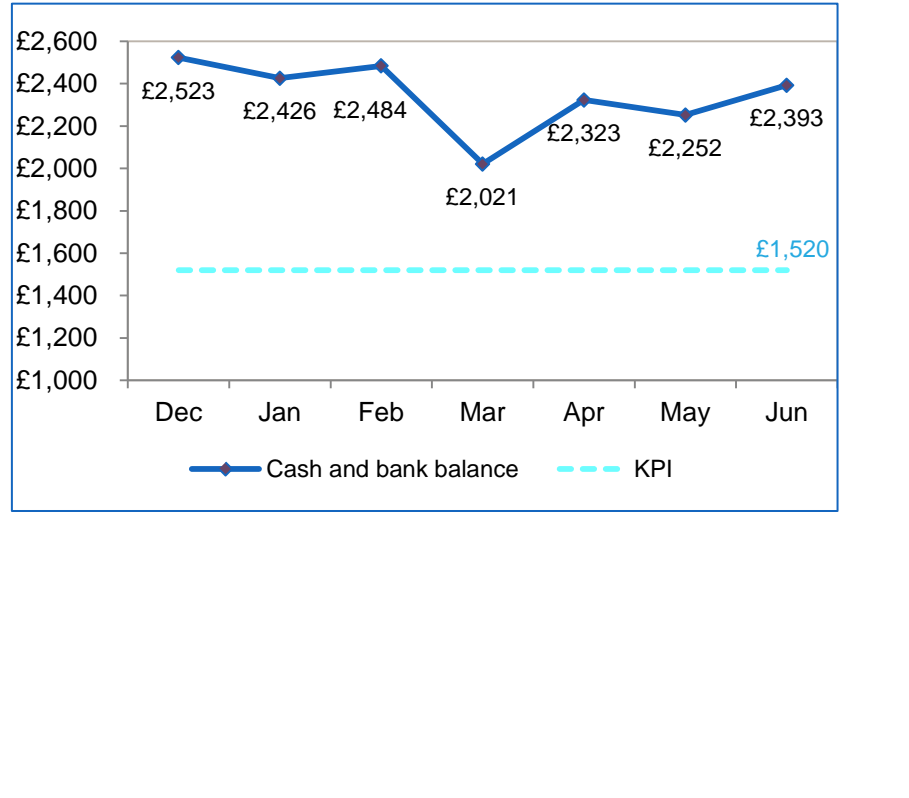



Maintain at 70wd or less

KPI: Less than or equal to 70 working days.

Indicator	Performance	RAG	Recent trend ¹	Aim ²	Notes
<p>Monthly percentage of PGD applications processed within three months (66 working days).</p> <p>Average number of working days taken.</p>	<p>100%</p> <p>45</p>	<p>★</p> <p>★</p>		<p>Reach and maintain 100%</p>	<p>KPI: 100% processed (i.e. considered by LC/ELP) within three months (66 working days) of receipt of completed application.</p>
<p>Annualised (rolling year) percentage of PGD applications processed within three months (66 working days)</p> <p>Average number of working days taken.</p>	<p>93%</p> <p>50</p>	<p>↑</p> <p>★</p>		<p>Reach and maintain 100%</p>	<p>KPI: As above. (Annualised score). Performance has reached target, but the annualised figure is still being adversely affected by complex multi-type applications received during the rolling year, which take longer to process.</p>

Indicator	Performance	RAG	Recent trend ¹	Aim ²	Notes
<p>Number of requests for contributions to Parliamentary questions</p>	<p>Total = 11</p>	<p>↑</p>		<p>No KPI – tracked for general monitoring purposes.</p>	<p>Volume indicator. The number received in January 2015 was nine times that received in January 2014.</p>
<p>Number of Freedom of Information (FOI), Environmental Information Regulations (EIR) requests and Data Protection Act (DPA) requests</p>	<p>9</p>	<p>↑</p>		<p>No KPI – tracked for general monitoring purposes.</p>	<p>Volume indicator.</p>

Indicator	Performance	RAG	Recent trend ¹	Aim ²	Notes																
<p>Staff sickness absence rate (%) per month.</p>	<p>1.1%</p>		 <table border="1"> <caption>Staff sickness absence rate (%) per month</caption> <thead> <tr> <th>Month</th> <th>Rate (%)</th> </tr> </thead> <tbody> <tr><td>Dec</td><td>1.8%</td></tr> <tr><td>Jan</td><td>0.7%</td></tr> <tr><td>Feb</td><td>0.3%</td></tr> <tr><td>Mar</td><td>1.2%</td></tr> <tr><td>Apr</td><td>0.4%</td></tr> <tr><td>May</td><td>0.3%</td></tr> <tr><td>Jun</td><td>1.1%</td></tr> </tbody> </table>	Month	Rate (%)	Dec	1.8%	Jan	0.7%	Feb	0.3%	Mar	1.2%	Apr	0.4%	May	0.3%	Jun	1.1%	 <p>Maintain 2.5% or less</p>	<p>KPI: Absence rate of ≤ 2.5%. Public sector sickness absence rate average is eight days lost per person per year (3.0%).</p>
Month	Rate (%)																				
Dec	1.8%																				
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<p>Cash and bank balance</p>	<p>£2,393k</p>		 <table border="1"> <caption>Cash and bank balance</caption> <thead> <tr> <th>Month</th> <th>Balance (£k)</th> </tr> </thead> <tbody> <tr><td>Dec</td><td>£2,523</td></tr> <tr><td>Jan</td><td>£2,426</td></tr> <tr><td>Feb</td><td>£2,484</td></tr> <tr><td>Mar</td><td>£2,021</td></tr> <tr><td>Apr</td><td>£2,323</td></tr> <tr><td>May</td><td>£2,252</td></tr> <tr><td>Jun</td><td>£2,393</td></tr> </tbody> </table>	Month	Balance (£k)	Dec	£2,523	Jan	£2,426	Feb	£2,484	Mar	£2,021	Apr	£2,323	May	£2,252	Jun	£2,393	 <p>Reduce</p>	<p>KPI: To move closer to minimum £1,520k cash reserves (figure agreed with DH).</p>
Month	Balance (£k)																				
Dec	£2,523																				
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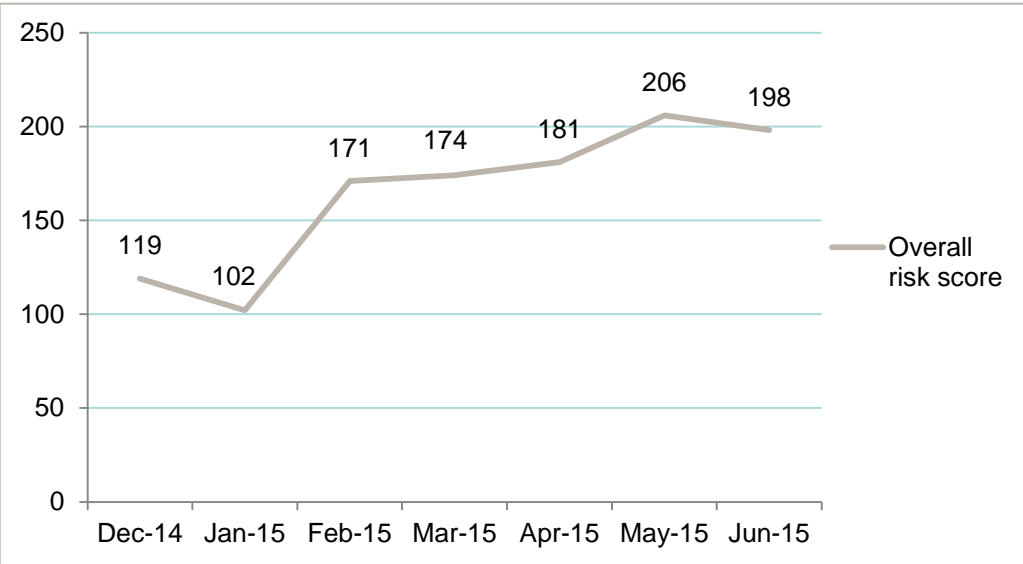
Indicator	Performance	RAG	Recent trend ¹			Aim ²		Notes	
Management accounts:	Income & Expenditure Account		Jun-2015						
	Accounting Period Cost Centre Name Department Name								
				Year to Date			Full Year		
				Actual YTD	Budget YTD	Variance YTD	Forecast	Budget	Variance
				£	£	£	£	£	£
	Income								
	Grant-in-aid			240	280	- 40	1,120	1,120	-
	Licence Fees			1,052	1,125	- 73	4,047	4,120	- 73
	Other Income			51	2	50	57	6	51
	Total Income			1,343	1,406	- 63	5,223	5,246	- 22
	Revenue costs - Charged to Expenditure								
	Salaries (excluding Authority)			649	677	27	2,717	2,744	- 27
	Shared Services			22	23	0	91	91	- 0
	Employer's NI Contributions			48	61	13	234	247	- 13
	Employer's Pension Contribution			135	143	8	571	579	- 8
	Authority salaries inc. NI Contributions			37	36	- 0	146	146	0
	Temporary Staff costs			-	-	-	-	-	-
	Other Staff costs			70	70	- 1	271	258	13
	Authority/Committee costs			27	35	8	160	166	- 6
	Other Compliance costs			15	9	- 6	55	39	16
	Other Strategy costs			26	57	31	175	175	-
	Facilities costs incl non-cash			86	93	7	348	355	- 7
	IT costs costs			28	26	- 2	104	106	- 1
Legal costs			79	164	85	310	340	- 30	
Professional Fees			29	17	- 12	78	68	10	
Total Revenue costs			1,251	1,410	159	5,260	5,314	- 54	
Total Surplus/(Deficit) before Capital & Project costs			92	- 3	222	- 37	- 69	32	
IFQ & Other Project costs - Reserves funded									
Other Capital costs			-	-	-	100	100	-	
TOTAL NET ACTIVITY			23	- 89	239	- 1,292	1,323	32	

Indicator	Performance	RAG	Recent trend ¹	Aim ²	Notes
Commentary:	<p data-bbox="407 210 1220 247">Summarised management accounts June 2015 – commentary</p> <p data-bbox="407 263 2049 367">Treatment fee income up to end of June is approximately 6% less than expected. Grant-in-aid drawn down is 14% less than budgeted. These negative variances are reduced slightly by the interest received on late payment of treatment fees. The shortfall of GIA will be corrected in September's drawdown.</p> <p data-bbox="407 383 2049 662">Year to date revenue costs are 11% below budget as of 30 June 2015. In this first quarter a detailed review of the remaining nine months expenditure has been undertaken with all directorates. At this point in time we are forecasting under spends in the following areas: staff costs (£48k), facilities costs (£7k), Authority and Committee costs (£6k) and legal costs (£30k) – we received costs from a legal case that has been credited to the legal budget. There are expected over spends totalling £39k. £13k relates to staff travel due to increased inspections and more home workers costs. Within Compliance there is an over spend of £8k which relates to assessment of PGD applications costs which are currently being reviewed. Professional fees are more than expected due to Corporation Tax (£10k) that will need to be paid on interest received from an old debt.</p>				

IfQ indicators:

Frequency / trigger point	Metric	Purpose	Latest status:																																																								
At programme set-up / major reorganisation / new tranche	MSP health check overall score achieved / maximum score as a %	Is the programme set up to deliver?	June: Annual health check will be done after agile sprint zero.																																																								
Monthly	Timescales: burndown chart showing remaining estimate of work.	Is there scope creep/over-run?	June: Measure to follow once agile sprints commence and plans are in place to measure against.																																																								
Monthly	Cost: earned value (% complete * estimated spend at completion)	Is the spend in line with milestone delivery?	<p>There are four things we can attribute value to: websites and CaFC; Clinic Portal; Register and internal systems; defined dataset, discovery, stakeholder engagement etc. Currently, 25% of the value of the 1.8M programme cost at completion has been attributed to each project.</p> <table border="1"> <thead> <tr> <th colspan="7">Earned value</th> </tr> <tr> <th>Project</th> <th>Jan-15</th> <th>Feb-15</th> <th>Mar-15</th> <th>Apr-15</th> <th>May-15</th> <th>Jun-15</th> </tr> </thead> <tbody> <tr> <td>Websites and CaFC</td> <td>1.00%</td> <td>1.00%</td> <td>1.00%</td> <td>1.00%</td> <td>10.00%</td> <td>10.00%</td> </tr> <tr> <td>Clinic Portal</td> <td>1.00%</td> <td>1.00%</td> <td>1.00%</td> <td>1.00%</td> <td>10.00%</td> <td>10.00%</td> </tr> <tr> <td>Register and internal systems</td> <td>1.00%</td> <td>1.00%</td> <td>1.00%</td> <td>2.00%</td> <td>5.00%</td> <td>6.00%</td> </tr> <tr> <td>Discovery</td> <td>98.00%</td> <td>98.00%</td> <td>100.00%</td> <td>100.00%</td> <td>100.00%</td> <td>100.00%</td> </tr> <tr> <td>IfQ Total earned value</td> <td>25.25%</td> <td>25.25%</td> <td>25.75%</td> <td>26.00%</td> <td>31.25%</td> <td>31.50%</td> </tr> <tr> <td>% of spend to date</td> <td>27%</td> <td>28%</td> <td>29%</td> <td>30%</td> <td>31%</td> <td>31%</td> </tr> </tbody> </table>	Earned value							Project	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Websites and CaFC	1.00%	1.00%	1.00%	1.00%	10.00%	10.00%	Clinic Portal	1.00%	1.00%	1.00%	1.00%	10.00%	10.00%	Register and internal systems	1.00%	1.00%	1.00%	2.00%	5.00%	6.00%	Discovery	98.00%	98.00%	100.00%	100.00%	100.00%	100.00%	IfQ Total earned value	25.25%	25.25%	25.75%	26.00%	31.25%	31.50%	% of spend to date	27%	28%	29%	30%	31%	31%
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IfQ indicators:

Frequency / trigger point	Metric	Purpose	Latest status:																
Monthly	Quality: category A requirements dropped or postponed during this period	Are key requirements being lost from the programme which could trigger a change in the business case?	<p>June: To be worked up now that suppliers are in place. This will be reported from July data onwards.</p>																
Monthly	Stakeholder engagement: combined stakeholder engagement score	Are we keeping stakeholders with us? Is it getting better or worse?	<p>June: A method for capturing this will need to be built into stakeholder plans for the programme – might need to report quarterly. Consideration will be built in the communications programme.</p>																
Monthly	Risks: sum of risk scores (L x I)	Is overall risk getting worse or better (could identify death by a thousand cuts)?	 <table border="1"> <caption>Overall risk score data</caption> <thead> <tr> <th>Month</th> <th>Overall risk score</th> </tr> </thead> <tbody> <tr> <td>Dec-14</td> <td>119</td> </tr> <tr> <td>Jan-15</td> <td>102</td> </tr> <tr> <td>Feb-15</td> <td>171</td> </tr> <tr> <td>Mar-15</td> <td>174</td> </tr> <tr> <td>Apr-15</td> <td>181</td> </tr> <tr> <td>May-15</td> <td>206</td> </tr> <tr> <td>Jun-15</td> <td>198</td> </tr> </tbody> </table>	Month	Overall risk score	Dec-14	119	Jan-15	102	Feb-15	171	Mar-15	174	Apr-15	181	May-15	206	Jun-15	198
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IfQ indicators:

Frequency / trigger point	Metric	Purpose	Latest status:
Monthly	Software: burndown chart	Shows new items added and estimated delivery of the product backlog (or items marked for delivery)	June: To be worked up once the product backlog is in place (during the early period of delivery, following full approval and completion of tendering). Reporting will start from August data.
Quarterly	Benefits: value (£) of tangible benefits planned to the delivered by the programme	Is the value of the benefits increasing or decreasing – could trigger a review of the business case?	June: No figure available at this stage - to be worked up post-approval and completion of both tendering and then Sprint Zero. Reporting is expected to be able to commence from September onwards.