

# Information for Quality programme: update

**Strategic delivery:**       Setting standards       Increasing and informing choice       Demonstrating efficiency economy and value

## Details:

Meeting      Audit and Governance Committee

Agenda item      5

Paper number      AGC (21/03/2017) 526 NJ

Meeting date      21 March 2017

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## Output:

For information or decision?      For information

Recommendation      The Committee is asked to:

- Note the Clinic Portal is now in live
- Note the intention to launch the HFEA website and choose a fertility clinic as live, in April 2017
- Note the intention to 'close' the programme at the end of March 2017
- Note the arrangements for securing completion of the programme components in 2017/18

Resource implications      The Programme budget has now been committed.

Implementation date      During 2016–17 business year

Communication(s)      Regular, range of mechanisms

Organisational risk       Low       Medium       High

Annexes:      None

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## 1. Background

- 1.1.** The Information for Quality (IfQ) programme encompasses:
- The redesign of our website and Choose a Fertility Clinic (CaFC) function
  - The redesign of the 'Clinic Portal' (used for interacting with clinics) and combining it with data submission functionality (Release 2) that is currently provided in our separate system (used by clinics to submit treatment data to us)
  - A revised dataset and data dictionary which will be submitted for approval by the Standardisation Committee for Care Information (SCCI)
  - A revised Register of treatments, which will include the migration of historical data contained within the existing Register
  - The redesign of our main internal systems that comprise the Authority's Register and supporting IT processes.
- 1.2.** Given the importance of IfQ to our strategy, we update the Committee on progress at each meeting and seek approval for direction and actions.
- 1.3.** This paper updates Members on:
- The programme
  - Work in progress – in particular, arrangements in place for data migration
  - Completing the programme
  - Programme budget
  - Risks and issues

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## 2. The IfQ programme

- 2.1.** The IfQ programme is scheduled to conclude in March this year. This paper brings members up to date with progress and sets out the path to conclusion.
- 2.2.** The programme is progressing according to 'agile' principles required by the Government Digital Service (GDS).
- 2.3.** Our attention is now focussed on completing the work necessary to move the HFEA website from Beta to live and producing a Beta version of the treatment submission system (Clinic Portal R2) – see below.
- 2.4.** The Clinic Portal was launched on 19 January 2017, the day following the last Authority meeting. That launch went reasonably well, albeit with some clinics getting in touch about getting access to the portal – given the enhanced security requirements. Most queries were dealt with quickly and effectively but there were frustrations felt by a few clinics. The queries were mostly categorised as 'user error' a frequently misused term: any new system will take some getting used to. Attention now is turning to the transition of the portal to business as usual status and, of course, maximising the potential of the portal as a communication channel and to drive improvements and efficiencies.

### 3. Work in progress

#### Website and choose a fertility clinic

- 3.1.** Since the launch of the Clinic Portal, the primary focus of activity has been on completing the website. Intensive activity has been underway leading to the GDS gateway assessment for authority to live stage, which took place on 8 March 2017. We hope to be able to report the outcome of that assessment at the Authority meeting on 15 March 2017.
- 3.2.** The team has been working very hard on creating new rich content for the website including video clips and animations as well as a home page news feed and a listings feature. We hope to demonstrate these features at the meeting.
- 3.3.** As outlined to the Authority at the previous meeting, we had been expecting the judgment on the judicial review relating to proposals for publishing performance measures within CaFC, by the end of January 2017. To date, this has not been received, and it is still unclear when this might be received. This is obviously frustrating and at this stage we simply do not know what impact this will have on plans to launch the website.
- 3.4.** Due to the delay to the website, and in anticipation of launch (in March/April 2017), we asked clinics (in December 2016) to undertake a verification exercise relating to their performance data in respect of CaFC. This differs from previous years' exercises (due to the new focus on cumulative birth rates) but is necessary to ensure that we can start the new CaFC with a high quality dataset (subsequent verification exercises will be more straightforward). We extended the deadline a month to the end of March 2017, to ease the burden on clinics.
- 3.5.** Until we receive the court judgment we cannot assess the extent of any changes necessary to meet any requirements; we need to complete the CaFC verification exercise; we need to undertake security penetration testing; and we require GDS clearance. However, it is still our hope and intention to launch in April 2017.

#### Release 2 – data submission component

- 3.6.** Progress on this element of IfQ has slipped because of the additional work required on the launch of the portal and the website. Section four, sets out the implications of this further. However, it is important to emphasise the foundations that have been put in place to enable us to proceed to completion over the summer.
- 3.7.** Over the last 12 months, the Register has been subject to a thorough overhaul, and cleansing exercise. Critical data fields have been reviewed for error, absence or duplication and resolved, wherever possible. The most serious errors – so-called 'severity 1' errors – which would have prevented data migration to take place have all been resolved, thanks to the hard work of the team and clinics.

#### Register data migration

- 3.8.** Data migration is planned to take place over five stages (or 'trial loads') – each 'test' migration reports on anomalies, which are fixed in advance of progression to the next test. Trial load 1 took place last year and trial load 2 has just been completed. The gaps between each get progressively shorter as the anomalies are dealt with. As expected, a

number of issues were identified, and the data migration team is working productively in clearing the backlog.

- 3.9.** As highlighted to Authority previously, we have engaged Northdoor PLC, a specialist in large-scale data migration exercises, to audit our process. The two-stage audit aims to assure the Senior Responsible Owner, the Senior Management Team and the Authority that our approach to data migration conforms with our data migration strategy and that all steps have been taken to ensure the integrity of the data being migrated.
- 3.10.** Northdoor's preliminary audit was completed at end January 2017 and gave positive feedback on our processes. Their scrutiny was thorough and detailed, and we draw comfort from this. The second phase of Northdoor's audit is scheduled for May 2017, as we move to trial load 3 – with a final check just prior to migration.
- 3.11.** Between trial load 1 and trial load 2 the data migration team made changes to the data to better reflect the changes in the new data dictionary. The team is currently checking that all the changes have been implemented correctly and have improved the quality of the data, as well as checking that the changes have not affected the data any unforeseen ways.

#### Treatment data submission system

- 3.12.** The submission system (to be integrated within the Clinic Portal) is awaited eagerly by clinics, together with clinics using third party suppliers to link to it.
- 3.13.** Much foundation work has taken place – including substantial user requirements' feedback; detailed mapping of all processes such that the sequencing for questions on the users' screen have been mapped; front-end designs in line with the design of the website and portal; and development activity. We are over half way towards completion but there is still much to do.

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## 4. Completing the programme

- 4.1.** By the end of March (the official end of the programme) a very substantial amount of our overall ambition will have been achieved. The data submission system requires completion, as noted above, and there is ongoing work to do to realise the benefits of a new system to derive intelligence.
- 4.2.** A feature of the Programme to date has been the challenging nature of balancing so many complementary activities – the portal, website, cleansing, migration; with many components dependent on the involvement of the same individuals and skills. Since late last year our focus has been very much on completing one or more aspects to make the overall task more manageable – an approach that has been largely welcomed.
- 4.3.** We are of the view that we need to recognise the problems of the past and configure the remainder of the work differently. To that end we will close the formal aspects of the Programme on 31 March and scope the outstanding work as a project of activity – albeit a very important one – within our business plan commitments for 2017-18. It will be very important that we do not conflate the closure of the programme with any dilution of our commitment to deliver the final elements. Our stakeholders will demand nothing else.

- 4.4.** Such an approach also fits with our plans for organisational change currently being discussed with staff, and with our expectations as regards budget and capital allowances – both consistent with our longer-term expectations to support a new IT estate. Further detail in relation to this will be presented at the meeting.

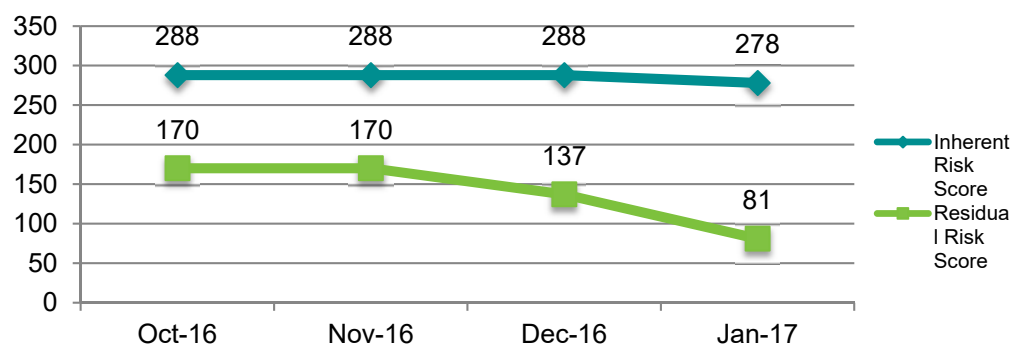
## 5. Programme budget

- 5.1.** Our IfQ budget this year 2016-17 was £527,000 (revised upwards to £619,00 in May 2016) within an overall revised budget for 2015-17 of £1.227m. Projections to year end are that expenditure will be slightly below this.
- 5.2.** We have now concluded our contractual commitments to Reading Room, our principal external supplier. We spent a little time in January and February agreeing the final schedule of work, which resulted in our requiring them to complete a slightly smaller amount of work, resulting in a contract underspend of just under £30,000 – which we have reallocated to other priorities – to ensure that we complete as much work as possible relating to R2 the data submission system, this financial year. To this end we have secured the services of three independent contractors to the end March 2017.
- 5.3.** The earned value and spend to date have progressed slightly, this is reflecting the final stage of the programme for both portal and websites, although the portal has gone live critical work remain to be done for the website.

Period	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17
Earned Value	86%	88.5%	90.6%	91.1%	91.9%	92.3%
Spend to date	91%	92.1%	92.9%	93.1%	93.2%	93.2%

## 6. IfQ risks and issues

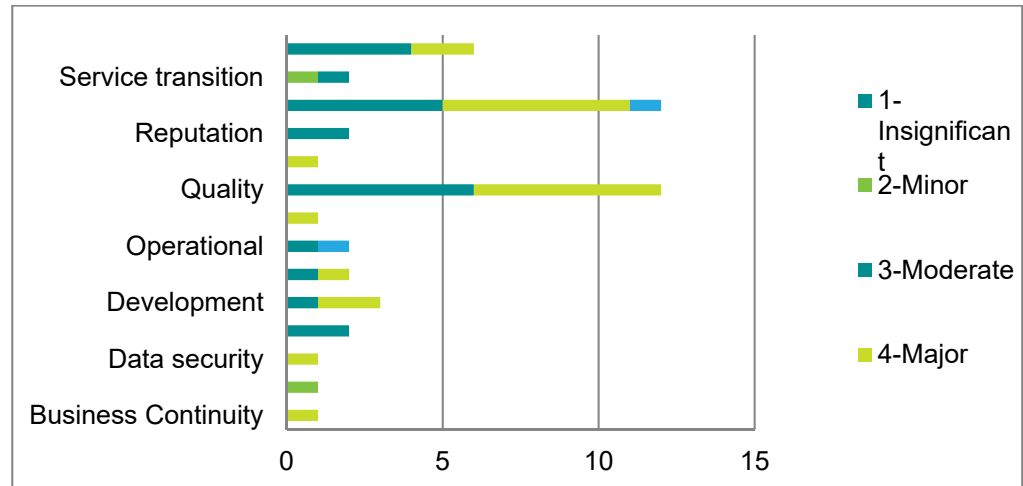
- 6.1.** The below line graph represents the overall IfQ risk score, which combines the perceived impact and likelihood of the current risks on hand each month. A number of the risks have been reviewed and updated in the last month and the risk scores, both inherent and residual, have decreased.



- 6.2.** In addition to IfQ-specific risks, the Corporate Management Group has also recently reviewed the strategic risk register, and added a risk relating to the organisational

changes that will be implemented over the coming months. There is a potential risk to the delivery of release two, arising from the impact of the changes on key teams.

- 6.3.** The IfQ risk log will continue to be monitored and updated over the next month, as will the impacts of the organisational restructuring, as these play out over time.
- 6.4.** The major risks are associated with resources, timescales, regulatory monitoring, quality, financial, development, patient information, data security and business continuity.



## 7. Recommendation

### 7.1. The Committee is asked to:

- Note the Clinic Portal is now in live
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