## Information for Quality (IfQ) Programme – Managing Risks

### Strategic delivery:
- [ ] Setting standards
- [ ] Increasing and informing choice
- [x] Demonstrating efficiency economy and value

### Details:
- **Meeting**: AGC
- **Agenda item**: 5
- **Paper number**: HFEA (16/03/2016) 488
- **Meeting date**: 16 March 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
  - [x] High
- **Annexes**: Annex A - Beta plan and IFQ high level delivery plan
1. **Introduction and summary**

1.1. The purpose of this report is to provide the Committee with progress on the IfQ programme. The Programme is now currently around the half way point of the Beta phase of release and is building tangible components of the Website and Clinic Portal. In early May, both will be subject to assessment by the Department of Health (DH), and Government Digital Service (GDS), to ensure it meets requisite standards, and before the release of ‘Public Beta’ stage.

1.2. The programme is on track to showcase the website and clinic portal at the HFEA annual conference on 24 March 2016.

1.3. Annex A sets out the overall timeline for IfQ, together with the more detailed plan for Beta – to July 2016.

2. **IfQ projects update**

2.1. **IfQ website**

- Work has continued on the CaFC Search tool. This work has included design work, front end development, API work by the internal systems team and back end development. This has led to the delivery of fully working CaFC search tool albeit with some minor bugs to resolve and some small design enhancements taking place.

- The website content template has also been produced. The design has then been developed enabling the HFEA team to begin inputting new website content to Umbraco – the content management system we have selected.

- The stakeholder group met recently where the CaFC search design and CaFC prototype were shared with the group, which were received positively - and with further feedback being included in the upcoming design work.

- Work has continued on the drafting of new website content this has involved working with internal HFEA teams, sharing with Authority members and with external stakeholders.

2.2. **IfQ clinic portal**

- Decisions have taken on the content of the inspection, risk & performance pages; security and incentivising good behaviours by clinics by our not being able to access a clinic’s pages – to ‘help’ them out. This enhances overall security;

- Design of front-end, and back-end development has been has been undertaken on the user-management and access control; and on front-end development of Knowledge Base and Licensing & Authorisation pages;

2.3. **IfQ internal system**

- The ‘Internal Systems’ team is making good progress through the ‘back end’ work to support the Website and Clinic Portal Release 1 Beta stage.

- The team has also continued work on cross programme technical dependencies for release 1, with the team on track. Key work completed included data validation work and synchronisation
mechanisms between different components of the internal systems architecture – it integrates well.

- The team is now turning their attention to understanding the upcoming work to support Release 2 of IfQ (how clinics’ submit treatment data to us - and therefore a key component) and gathering the associated requirements for key pieces of the work. Initial conversations are now taking place regarding the way we will keep data secure, and facilitate our new Register and EDI system – and to do so alongside the work completed to date in Release 1.

2.4. Data migration

- The team’s time has been divided between data migration efforts and cleansing work to support the forthcoming Fertility Trends report – publishing on 24 March 2016 – particularly data regarding egg freezing.

- To meet our commitments to centres we need to review errors before they are returned so that any which we can resolve will not be sent to centres. Our focus is on ‘severity one’ errors – that is those that unless resolved will prevent data migration.

- We will be using the HFEA conference to highlight clinics’ responsibilities here in what is likely to be a burdensome (albeit necessary) task. That said the volume of errors for each clinic to resolve is likely to be manageable.

- We are currently seeking a third party supplier to be in place to provide assurance as regards our data migration strategy commitments, that is to ensure that we have carried out all the necessary ‘health check’ assessments prior to the migration of existing Register data to the new Register database.

3. IfQ risks and issues

- 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. The overall risk score for the IfQ programme has increased.

- The major risks score are associated with resources, development, timescale, resilience and data security.
The upcoming DH/GDS approval has also been identified as a major risk for the project. The impact on the timeline could be significant due to the length of the process and the external interdependencies.

4. **IfQ budget**

4.1. Our forecast at year end has been reviewed. We expect that £945k of our original total budget (£1,135k) will now be spent. There will be some carry-over to 2016/17 which may be in the region of £200k.

4.2. Beta expenditure (only) has been approved as follows:

<table>
<thead>
<tr>
<th>Category of expenditure</th>
<th>Planned at Nov 2015</th>
<th>Recommended for approval</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reading Room costs</td>
<td>£196,878</td>
<td>£196,878</td>
<td>£0</td>
</tr>
<tr>
<td>Internal Systems</td>
<td>£217,627</td>
<td>£321,546</td>
<td>+£103,919</td>
</tr>
<tr>
<td>Programme support</td>
<td>£41,376</td>
<td>£42,029</td>
<td>+£653</td>
</tr>
<tr>
<td>IfQw Project manager backfill</td>
<td>£3,206</td>
<td>£3,239</td>
<td>+£33</td>
</tr>
<tr>
<td>Other</td>
<td>£0</td>
<td>£355</td>
<td>+£355</td>
</tr>
<tr>
<td>Total</td>
<td>£459,087</td>
<td>£564,047</td>
<td>+£104,960</td>
</tr>
</tbody>
</table>

- The cost of Beta phase is £104,960 higher than the amount approved by IfQ Programme Board in November 2015, as it accounts for the extension of Beta’s end date from end March 2016 to end June 2016. This increase is contained within the overall IfQ budget of £1.134m and does not increase the costs associated with Reading Room’s services.

- The Committee is also reminded that one of the consequences of such an extensive programme on a small overall staff group is that a material amount of internal HFEA resources are absorbed within the IfQ programme and not reflected in the overall programme budget – which predominantly relate to suppliers, contractors, programme management (now substantially reduced) and ‘backfill’ costs.
5. **Earned value**

- The programme has been in building tangible products and the jump in the earned value reflects this statement. We expect the earned value to continue increasing toward March as we progress through Beta.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Earned Value</td>
<td>35.0%</td>
<td>36.5%</td>
<td>38.3%</td>
<td>39.3%</td>
<td>41.3%</td>
<td>47.5%</td>
</tr>
<tr>
<td>Spend to date</td>
<td>43.7%</td>
<td>44.9%</td>
<td>47.7%</td>
<td>49.0%</td>
<td>59.6%</td>
<td>61.3%</td>
</tr>
</tbody>
</table>
6. **Recommendation: The Audit and Governance Committee is asked to:**

6.1. Note progress, risks and the budget position on IfQ.
## Annex A - IfQ Beta Schedule at end Beta Sprint 4 (17/2/16)

<table>
<thead>
<tr>
<th>Proposed key dates / deadlines</th>
<th>Sprint Commence date</th>
<th>Sprint Complete date</th>
<th>Proposed Sprints by phase</th>
<th>Clinic Portal Features</th>
<th>Website Features</th>
</tr>
</thead>
</table>
Annex A - IfQ Delivery Plan - At end Beta Sprint 4 (17/2/16)