

**BOARD PAPER - NHS ENGLAND**

**Title:** NHS Performance Report

**From:** Karen Wheeler, National Director: Transformation and Corporate Operations

**Purpose of paper:**

- To inform the Board of progress of the performance of NHS England and the NHS as a whole on a range of performance indicators and finance.

**Actions required by the Board:**

- To note the contents of the NHS Performance Report.

## Performance Report

### Introduction

1. This report provides an update to the NHS England Board on indicators covering:
  - NHS performance on Constitution Standards and other commitments; and
  - NHS England Performance.

### Summary

2. **NHS Performance.** The NHS Constitution targets remain the most challenging area of performance.
3. **NHS England Performance.** Over 75% of our delivery areas are on target or being managed within a reasonable level of risk – i.e. rated AMBER to GREEN. This report therefore focuses on the remaining 25% of business areas and programmes rated RED or AMBER/RED.

### NHS Performance

4. **Experience.** Friends and Family Test data are from August 2014 published on the basis of the percentage of patients recommending a particular service. This methodology will be included in future Performance Reports once trend data become available.
5. **Inequalities.** No new data published.
6. **Waiting Times.** Five waiting times indicators remain below the operational standard.
7. £250m of additional funding has been made available to fund additional long waiters activity and, where relevant, provider level recovery plans are in place to ensure waiting times standards are met. Further action is in hand to review and re-profile these additional activity plans so that the providers meet referral to treatment (RTT) standards from December.
8. On diagnostic waiting times the focus is on ensuring the trusts with the poorest performance recover performance. The NHS Trust Development Authority (TDA) is actively performance managing challenged organisations and Monitor continues to engage with the most challenged Foundation Trusts (FTs).
9. For Cancer, maximum two month wait from urgent GP referral to first definitive treatment, remedial action has focused on the 30 Trusts with the highest number of breaches. Progress is on-going with the set-up of a Cancer Task Force, to be jointly chaired by NHE England's National Clinical Director for Cancer and TDAs Medical Director, to ensure sustainability of the standards.
10. **A&E.** The A&E standard that was just missed in Q2 was 95%, (94.98%). A total of £350m has been allocated to System Resilience Groups (SRGs) through Clinical Commissioning Groups (CCGs) on the basis of their plans to support operational

resilience through the winter. Almost all are now assured and attention is now on delivery of local schemes to improve resilience and performance against the A&E standard over the winter months.

- 11. Ambulance Performance.** All three Ambulance Indicators remain below operational standard. £18m of the operational resilience funding has been allocated to CCGs who commission ambulance services, to support their ambulance services plans to address system pressures, and a further almost £10m has been allocated to ambulance trusts as part of local system resilience planning. TDA and Monitor are actively addressing performance issues in key Ambulance Trusts
- 12. Improving Access to Psychological Therapies (IAPT).** . Q1 IAPT data was published on 15<sup>th</sup> October and shows an annualised access figure of 12.4%, and below the 13.5% aggregate plan agreed by CCGs for Q1. An action plan has been implemented to address this and work is ongoing with the Intensive Support Team supporting those CCGs identified as highest delivery risk. The number of people moving to recovery has increased significantly from 40,609 in Q4 to 44,379 in Q1 a 9.3% increase. The recovery rate has increased to 45.0% from 44.9%. While encouraging, there is still considerable distance left to travel in order to meet the national ambition of 50% by the end of March 2015. Performance will need to increase by an average of 1.3 percentage points per quarter.
- 13. Dementia.** The Health and Social Care Information Centre (HSCIC) are now providing monthly dementia diagnosis rate data which is supporting a stronger handle on delivery and assurance. Timely data is enabling early identification of the CCGs failing to deliver against planned ambition in support of early deployment of appropriate targeted support. September 2014 dementia diagnosis data indicates that the current national diagnosis rate is 53.7%. This highlights the considerable challenge still facing us to ensure delivery of the national ambition that two thirds of the estimated number of people with dementia will have a diagnosis and access to post diagnostic support by March 2015. A number of actions are taking place including monthly communication to CCGs, as new enhanced services to provide GPs with funding for additional costs associated with improving the diagnosis rate
- 14. Mandate Commitment - Transforming Care (Winterbourne View).** Additional work is now being launched to track the progress of the 1 April 2014 total in-patient cohort (2615) and those without clinical reasons or Ministry of Justice court orders preventing transfer (652). The latest official statistics (June '14) demonstrate that in Q1 a total of 261 patients were transferred from in-patient settings to community settings or other more suitable in-patient settings. This is 69 patients (36%) higher than the 192 patients commissioners had reported they would transfer in this period as at 31st March.

## 15. Finance.

- a) Expenditure is £23m (0.0%) and £184m (0.2%) above plan in the year to date and full year forecast outturn position respectively.

2014/15 Month 6 £m or %	Net expenditure							
	Plan	YTD	Under/(over) spend		Plan	FOT	Under/(over) spend	
CCGs	32,811	32,846	(35)	-0.1%	66,297	66,318	(21)	0.0%
Social care	427	427	0	0.0%	1,100	1,100	0	0.0%
Direct Commissioning	13,869	13,911	(41)	-0.3%	28,282	28,402	(120)	-0.4%
Running, programme costs and other	666	613	53	7.9%	2,013	2,056	(43)	-2.1%
<b>Total NHS England</b>	<b>47,773</b>	<b>47,796</b>	<b>(23)</b>	<b>0.0%</b>	<b>97,692</b>	<b>97,876</b>	<b>(184)</b>	<b>-0.2%</b>

This results in a cumulative surplus of £283m against a plan of £467m, representing a £584m reduction in the cumulative surplus of £867m brought forward from 2013/14. Further detail can be found in the finance tables within Annex C.

- b) Across all 211 CCGs there is a small forecast overspend of £21m. Whilst 179 CCGs are forecasting in line with plan and 11 will slightly exceed their plans, 21 CCGs are forecasting overspends against plan. The number of cumulative deficits has improved since September, with a net reduction from 20 to 19. Financial Recovery Plans are being prepared by these CCGs and assured by the relevant Area Team. Key challenges include activity over-performance and QIPP under-delivery.
- c) Direct Commissioning is currently overspent in the forecast due to pressures within Specialised Commissioning which continue to be monitored and acted upon. Now that we have access to four months of firm acute data and a detailed evaluation of delivery against QIPP initiatives, organisations are able to identify trends for forecasting the balance of year more accurately. Total cost growth is currently projected to be 5.2%, 1.2% higher than planned; however more than half of that overspend relates to the Cancer Drugs Fund.
- d) £2,075m of savings through commissioner-driven QIPP were planned for 2014/15, with current projected delivery of £1,828m, 12% below plan but 6% ahead of 2013/14 final delivery. Whilst transactional schemes, which make up over half of the plan, are delivering well (98%), the more transformational programmes continue to be more challenging to achieve, which underlines the importance of the new approaches set out in the recently published Forward View paper.
- e) During the recently completed Month 6 stocktake, additional risks and mitigations for the remainder of the year were reviewed in detail by Area, Regional and National finance teams. The risks mainly relate to acute activity – both CCG-commissioned and specialised. Available mitigations slightly exceed these risks, however, resulting in a risk-adjusted projection for the year of £122m overspend. This is less adverse than the assessment in September, mainly because the risk of overspending on legacy continuing healthcare provisions has receded. We continue to look for additional measures to close the remaining £122m gap, and these focus on further reductions in NHS England's administration and central programme expenditure, reflecting favourable trends in the first half year, and

other potential upsides identified in the stocktake but requiring further evaluation with the relevant commissioning organisations.

## **NHS England Performance**

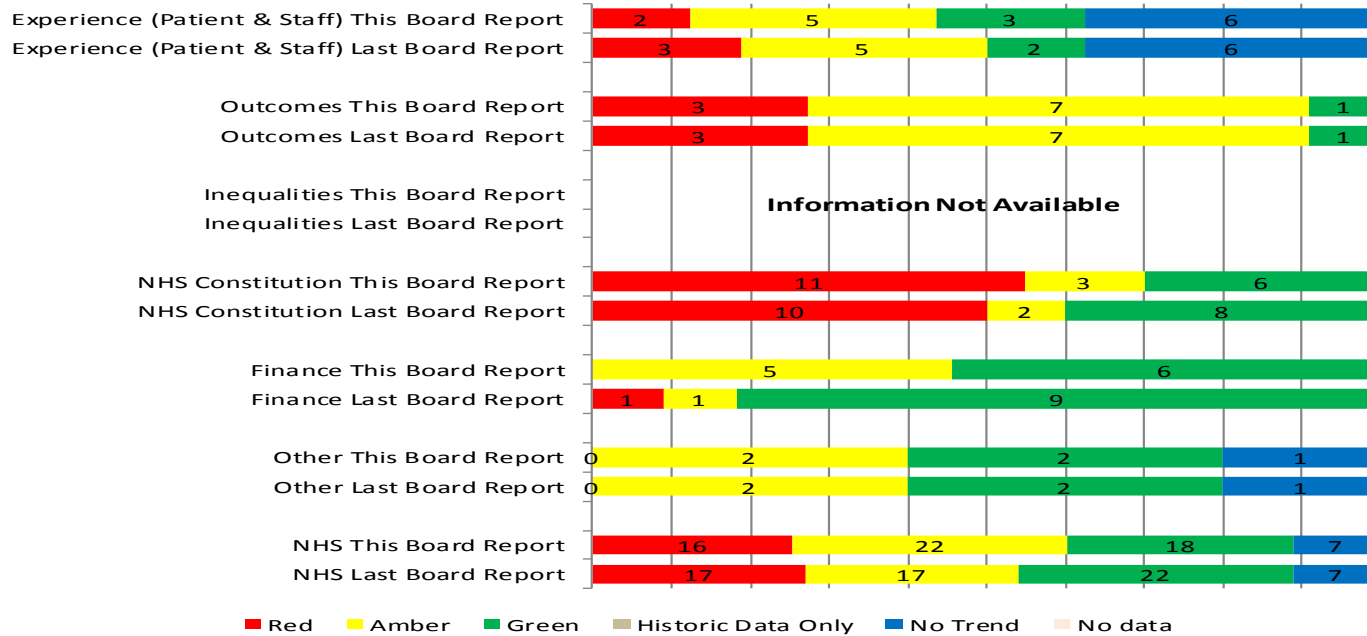
- 16. Business Plan.** The majority of the business plan areas are on track to deliver. Five of the thirty one areas are rated as either RED or AMBER/RED. These are: Parity of Esteem; Access to Urgent and Emergency Care; People with Learning Disabilities and Access to Elective Care (all amber/red) and Specialised Services Commissioning (red). The Specialised Services Commissioning red rating reflects the ongoing risk of budget overrun, and this is being managed through the Organisational Alignment and Capability Programme, to mitigate this risk. The amber red ratings for Access to Elective Care, Urgent and Emergency Care, People with Learning Disabilities and Parity of Esteem reflect the performance issues already described in the NHS performance element of this paper. Also, Parity of Esteem and Learning Disabilities (Transforming Care) are major organisational programmes, and are referred to below.
- 17. Major Programmes.** Of our major programmes, five are reported as AMBER/RED for delivery confidence. These are: Transforming Care; Parity of Esteem; Child Protection Information Sharing; Care.data and Data Services for Commissioners. Significant resource and management focus is being channelled into these programmes to address where there are delivery risks and to improve programme delivery. More work is also underway to improve our assurance over delivery of our portfolio of major programmes, and we will report progress on that work to the audit committee..
- 18. Summary of Corporate Risks.** This summary of corporate risks largely reflects the major risks associated with the performance issues and major programmes already described above.

# Integrated Performance Report

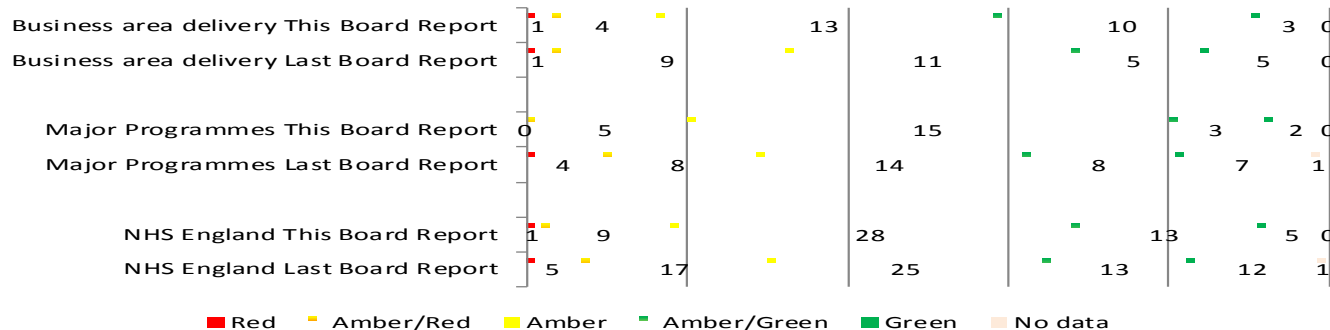
November 2014

# Annex A NHS England Performance Report – November 2014

## Performance Summary for NHS - November 2014



## Performance Summary for NHS England - November 2014





**Annex B**  
**Indicators of**  
**NHS**  
**Performance**



# NHS - NHS Constitution (1)

Summary of measures relating to NHS Constitution as reported in the NHS		Latest Performance	Change on previous performance
Aspects of NHS Constitution			
The percentage of patients on Care Programme Approach (CPA) who were followed up within 7 days after discharge from psychiatric inpatient care	2014-15 Q1	97.0%	↓
Maximum one month (31-day) wait from diagnosis to first definitive treatment for all cancers	2014-15 Q1	97.7%	↓
Maximum 31-day wait for subsequent treatment where that treatment is surgery	2014-15 Q1	96.3%	↓
Maximum 31-day wait for subsequent treatment where that treatment is an anti-cancer drug regimen	2014-15 Q1	99.7%	↑
Maximum 31-day wait for subsequent treatment where the treatment is a course of radiotherapy	2014-15 Q1	97.0%	↓
Maximum 62-day wait from referral from an NHS screening service to first definitive treatment for all cancers	2014-15 Q1	93.8%	↓
Non-admitted patients to start treatment within a maximum of 18 weeks from referral	Aug-14	95.5%	↓
Patients on incomplete non-emergency pathways (yet to start treatment) should have been waiting no more than 18 weeks from referral	Aug-14	92.9%	↓
Maximum two-week wait for first outpatient appointment for patients referred urgently with suspected cancer by a GP	2014-15 Q1	93.5%	↓
Admitted patients to start treatment within a maximum of 18 weeks from referral	Aug-14	87.9%	↓
Number of patients waiting more than 52 weeks	Aug-14	510	↑
Patients waiting for a diagnostic test should have been waiting less than 6 weeks from referral	Aug-14	98.1%	↓
Patients should be admitted, transferred or discharged within 4 hours of their arrival at an A&E department	2014-15 Q2	95.0%	↓
Maximum two-week wait for first outpatient appointment for patients referred urgently with breast symptoms (where cancer was not initially suspected)	2014-15 Q1	90.3%	↓

# NHS - NHS Constitution (2)

Summary of measures relating to NHS Constitution as reported in the NHS			
Aspects of NHS Constitution		Latest Performance	Change on previous performance
Maximum two month (62-day) wait from urgent GP referral to first definitive treatment for cancer	2014-15 Q1	83.9%	↓
Category A calls resulting in an emergency response arriving within 8 minutes (Red 1)	Aug-14	73.2%	↑
Category A calls resulting in an emergency response arriving within 8 minutes (Red 2)	Aug-14	70.9%	↑
Category A calls resulting in an ambulance arriving at the scene within 19 minutes	Aug-14	94.9%	↑
Mixed Sex Accommodation Breaches	Aug-14	122	↑
All patients who have operations cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days, or the patient's treatment to be funded at the time and hospital of the patient's choice.	2014-15 Q1	5.1%	↓
Maximum 62-day wait for first definitive treatment following a consultant's decision to upgrade the priority of the patient (all cancers)	2014-15 Q1	90.0%	↓

# NHS - Experience (1)

Summary of measures relating to Patient Experience as reported in the NHS			
Aspect of Experience		Latest Performance	Change on previous performance
Inpatient Friends and Family test	Aug-14	74.0	↑
A&E Friends and Family test	Aug-14	57.0	↑
Staff friends and family test (Currently using "Staff recommendation of the trust as a place to work or receive treatment" average score from NHS Staff Survey as a proxy for Staff FFT)	2013	3.67	↑
Proportion of people feeling supported to manage their condition	2013-14	65.1%	↓
Patient experience of primary care - GP Services	2013-14	85.7%	↓
Patient experience of primary care - NHS Dental Services	2013-14	84.2%	↑
Responsiveness to in-patients' personal needs	2013-14	68.7	↑
Patient experience of community mental health services	2013	85.8	↓
Patient experience of primary care - GP Out of Hours Services	2013-14	66.2%	↓
Bereaved carers' views on the quality of care in the last 3 months of life	2014	75.9%	↓

# NHS - Experience (2)

Summary of measures relating to Patient Experience as reported in the NHS			
Aspect of Experience		Latest Performance	Change on previous performance
Patient experience of hospital care	2013-14	76.9	
Maternity Friends and Family test - Antenatal Care (Question 1)	Aug-14	66.0	
Maternity Friends and Family test - Birth (Question 2)	Aug-14	77.0	
Maternity Friends and Family test - Postnatal Ward (Question 3)	Aug-14	65.0	
Maternity Friends and Family test - Postnatal Community Provision (Question 4)	Aug-14	76.0	
Women's experience of maternity services	2013	78.9	

# NHS - Outcomes

## Summary of measures relating to Outcomes as reported in the NHS

Aspect of Outcomes	Latest Performance		Change on previous performance
Employment of people with mental illness	2013-14 Q4	36.6%	↑
Health related quality of life for people with long-term conditions	2013-14	0.74	↓
Health-related quality of life for carers	2013-14	80.4%	↓
Total health gain as assessed by patients for elective procedures: Hip replacement	2013-14	0.436	↓
Total health gain as assessed by patients for elective procedures: Knee replacement	2013-14	0.324	↑
Total health gain as assessed by patients for elective procedures: Groin hernia	2013-14	0.085	↕
Total health gain as assessed by patients for elective procedures: Varicose veins	2013-14	0.093	↕
Proportion of Older People (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	2013-14	81.9%	↑
Employment of people with long-term conditions	2013-14 Q4	13.9%	↓
Incidence of MRSA	Aug-14	53	↑
Incidence of C difficile	Aug-14	1,326	↓

# NHS - Inequalities

Summary of measures relating to Inequalities as reported in the NHS			
Aspect of Inequalities	Latest Performance		Change on previous performance
Patient experience of primary care - GP Services - Gender comparison	2013-14	0.9%	
Patient experience of primary care - GP Services - Deprivation analysis	2013-14	-7.4%	
Patient experience of primary care - GP Services - White British compared to Asian or Asian British	2013-14	-9.9%	
Patient experience of primary care - GP Services - White British compared to Black or Black British	2013-14	0.3%	
Patient experience of primary care - GP Services - White British compared to Other Ethnic Group	2013-14	-4.1%	
Patient experience of primary care - GP Services - White British compared to Mixed	2013-14	-5.0%	
Patient experience of primary care - GP Services - White British compared to Other White ethnicity	2013-14	-5.2%	

# NHS - Others

Summary of measures relating to Other measures as reported in the NHS			
		Latest Performance	Change on previous performance
Patient safety incident reporting	2013-14 Q3	738	↓
Access to GP services	2013-14	74.6%	↓
Proportion offered rehabilitation following discharge from acute or community hospital	2013-14	3.3%	↑
Access to NHS Dental services	2013-14	93.0%	↑
Safety incidents resulting in severe harm or death	2013-14 Q2	4.4	

# Finance

## Summary of measures relating to high quality financial management as reported in the NHS

There are no measures rating as RED. In previous months, the deficit reporting metric has been RED however the actual number of CCGs forecasting a deficit reduced by 2 to 18.

The Clinical Commissioning Groups - management costs measure is rated as GREEN overall; however within this position 2 CCGs are forecasting to breach their target by up to 15%.

Cumulative Surplus	Planned	Actual/FOT	Variance	Variance %	RAG	Change on previous performance
	£m	£m	£m	allocation		M5
1 Clinical Commissioning Groups - year to date	301.0	266.3	(34.7)	(0.1%)	Green	↕
2 Clinical Commissioning Groups - full year forecast outturn	693.6	672.8	(20.8)	(0.0%)	Green	↕
3 Direct Commissioning - year to date	112.9	71.8	(41.1)	(0.1%)	Amber	↓
4 Direct Commissioning - full year forecast outturn	218.9	99.2	(119.8)	(0.4%)	Amber	↕
5 NHS England (total) - full year forecast outturn	466.9	283.2	(183.8)	(0.2%)	Amber	↓

QIPP (excluding implied provider efficiencies)	Planned	FOT	Variance	Variance %	RAG	Change on previous performance
	£m	£m	£m	allocation		M5
6 Clinical Commissioning Groups - full year forecast outturn delivery	1,609.4	1,407.5	(201.9)	(0.3%)	Amber	↕
7 Direct Commissioning - full year forecast outturn delivery	465.2	420.6	(44.6)	(0.2%)	Amber	↕

Costs management*	Planned within allocation	Forecast within allocation	Variance	Variance %	RAG	Change on previous performance
			£m	allocation		M5
8 Central - management costs	Y	Y	1.7	0.3%	Green	↕
9 Central - programme costs	Y	Y	18.9	2.0%	Green	↕
10 Clinical Commissioning Groups - management costs	Y	Y	43.4	2.7%	Green	↕

\*Full year forecast outturn

Deficit reporting	Planned number	Forecast number	Variance	RAG	Change on previous performance
					M5
11 Number of CCGs forecasting a deficit position	18	18	0	Green	↑



# Annex C: Supplementary Finance Tables (1)

## Summary of year to date and forecast surpluses by area of commissioning

Summary of year to date and forecast surpluses by area of commissioning

2014/15 - Month 6 Surplus	Year to Date Surplus				Forecast Surplus			
	Plan £m	Actual £m	Var £m	Var % of allocation	Plan £m	Forecast £m	Var £m	Var % of allocation
<b>Local Surplus</b>								
North	158.7	153.1	(5.6)	(0.1%)	310.2	306.4	(3.8)	(0.0%)
Midlands & East	45.6	15.4	(30.2)	(0.3%)	96.5	79.3	(17.3)	(0.1%)
London	59.9	70.8	10.9	0.2 %	153.5	174.2	20.7	0.2 %
South	36.8	26.9	(9.9)	(0.1%)	85.4	65.0	(20.4)	(0.1%)
Quality Premium	0.0	0.0	0.0	0.0 %	48.0	48.0	0.0	0.0 %
<b>Total Local Surplus</b>	<b>301.0</b>	<b>266.3</b>	<b>(34.7)</b>	<b>(0.1%)</b>	<b>693.6</b>	<b>672.8</b>	<b>(20.8)</b>	<b>(0.0%)</b>
<b>Direct Commissioning</b>								
Specialised Commissioning	(2.0)	(67.9)	(65.9)	(1.0%)	0.0	(167.4)	(167.4)	(1.2%)
Armed Forces	0.2	0.2	0.0	0.1 %	0.4	0.4	0.0	0.0 %
Health & Justice	4.4	6.2	1.8	0.8 %	8.4	9.3	0.8	0.2 %
Primary Care & Secondary Dental	110.8	132.0	21.1	0.3 %	212.2	258.7	46.5	0.4 %
Public Health	(0.6)	1.3	1.9	0.3 %	(2.1)	(1.9)	0.3	0.0 %
Social Care	0.0	0.0	0.0	0.0 %	0.0	0.0	0.0	0.0 %
<b>Total Direct Commissioning Surplus</b>	<b>112.9</b>	<b>71.8</b>	<b>(41.1)</b>	<b>(0.1%)</b>	<b>218.9</b>	<b>99.2</b>	<b>(119.8)</b>	<b>(0.4%)</b>
<b>Other (excluding Technical)</b>								
NHS England Running Costs	0.0	14.6	14.6	6.1 %	(75.0)	(73.3)	1.7	0.3 %
CSUs	0.0	8.8	8.8	0.0 %	0.0	0.0	0.0	0.0 %
Other (including Central Programme)	0.0	29.5	29.5	6.4 %	0.0	(5.0)	(5.0)	(0.3%)
Legacy RDEL	0.0	0.0	0.0	N/A	0.0	(40.0)	(40.0)	N/A
Use of Draw down	(154.5)	(154.5)	0.0	0.0 %	(370.6)	(370.6)	0.0	0.0 %
<b>Total Other (excluding Technical)</b>	<b>(154.5)</b>	<b>(101.6)</b>	<b>52.9</b>	<b>2.8 %</b>	<b>(445.6)</b>	<b>(488.8)</b>	<b>(43.2)</b>	<b>(2.3%)</b>
<b>Grand Total before Technical Budgets</b>	<b>259.4</b>	<b>236.4</b>	<b>(23.0)</b>	<b>(0.0%)</b>	<b>466.9</b>	<b>283.2</b>	<b>(183.8)</b>	<b>(0.2%)</b>

## Annex C: Supplementary Finance Tables (2)

### QIPP Summary

	Year To Date QIPP				Forecast QIPP				
	Plan £m	Actual £m	Var £m	Achieved %	Plan £m	As % of Allocation	Forecast £m	Var £m	Achieved %
Local QIPP									
North	139.5	141.4	2.0	101.4 %	338.1	1.6%	317.6	(20.5)	93.9 %
Midlands and East	206.0	175.1	(31.0)	85.0 %	519.7	2.7%	429.5	(90.2)	82.6 %
London	140.3	135.3	(5.1)	96.4 %	314.7	3.0%	298.1	(16.6)	94.7 %
South	179.0	159.2	(19.8)	89.0 %	436.9	2.7%	362.3	(74.5)	82.9 %
<b>Total Local QIPP</b>	<b>664.8</b>	<b>611.0</b>	<b>(53.8)</b>	<b>91.9 %</b>	<b>1,609.4</b>	<b>2.4%</b>	<b>1,407.5</b>	<b>(201.9)</b>	<b>87.5 %</b>
Direct Commissioning QIPP									
Specialised	142.4	126.1	(16.2)	88.6 %	308.5	2.2%	278.4	(30.1)	90.2 %
Health & Justice	2.3	2.3	0.0	98.0 %	5.1	1.1%	5.0	(0.1)	97.4 %
Armed Forces	0.0	0.0	0.0	N/A	0.0	0.0%	0.0	0.0	N/A
Primary Care and Secondary Dental	53.9	51.1	(2.8)	94.8 %	133.3	1.1%	119.6	(13.7)	89.7 %
Public Health	9.1	9.2	0.1	100.9 %	18.3	0.0%	17.6	(0.7)	96.1 %
<b>Total DC QIPP</b>	<b>207.6</b>	<b>188.6</b>	<b>(19.0)</b>	<b>90.9 %</b>	<b>465.2</b>	<b>1.2%</b>	<b>420.6</b>	<b>(44.6)</b>	<b>90.4 %</b>
<b>TOTAL QIPP</b>	<b>872.5</b>	<b>799.7</b>	<b>(72.8)</b>	<b>91.7 %</b>	<b>2,074.7</b>	<b>2.2%</b>	<b>1,828.1</b>	<b>(246.6)</b>	<b>88.1 %</b>

## Annex C: Supplementary Finance Tables (3)

NHS England Running Costs 2014/15

	Year to Date Net Expenditure				Forecast Net Expenditure			
	Plan £m	Actual £m	Var £m	Var %	Plan £m	Forecast £m	Var £m	Var %
Medical	8.1	6.7	1.4	17.0%	15.9	15.1	0.8	5.0%
NHS IQ	6.1	4.6	1.5	24.6%	12.2	12.2	0.1	0.6%
Nursing	6.2	5.8	0.4	6.1%	12.5	12.5	0.0	0.0%
Commissioning Operations	113.3	108.8	4.4	3.9%	232.3	229.5	2.8	1.2%
Commissioning Development	2.7	1.9	0.8	30.3%	8.2	8.2	0.0	0.0%
Patients & Information	9.0	7.8	1.2	13.4%	18.5	16.3	2.2	12.1%
Finance	19.2	18.6	0.6	3.0%	50.8	50.8	0.0	0.0%
Commissioning Strategy	9.4	7.1	2.3	24.0%	19.4	17.8	1.6	8.1%
Transformation & Corp Office	29.6	29.2	0.4	1.5%	60.8	60.8	0.0	0.0%
Chair & Chief Executive Office	0.7	0.7	0.0	6.6%	1.4	1.4	0.0	0.0%
Reserves / transition costs	0.0	0.0	0.0	0.0%	21.0	41.0	(20.0)	(95.0%)
Depreciation/Other	6.5	2.6	3.9	60.4%	13.0	13.5	(0.5)	(4.2%)
<b>TOTAL excl PCS</b>	<b>210.8</b>	<b>193.8</b>	<b>17.0</b>	<b>8.1%</b>	<b>465.9</b>	<b>479.0</b>	<b>(13.0)</b>	<b>(2.8%)</b>
PCS	45.3	47.7	(2.4)	(5.4%)	135.2	120.4	14.8	10.9%
<b>TOTAL Running Costs</b>	<b>256.1</b>	<b>241.5</b>	<b>14.6</b>	<b>5.7%</b>	<b>601.1</b>	<b>599.4</b>	<b>1.7</b>	<b>0.3%</b>

## Annex C: Supplementary Finance Tables (4)

NHS England Programme Costs 2014/15




	Year to Date Net Expenditure				Forecast Net Expenditure			
	Plan £m	Actual £m	Var £m	Var %	Plan £m	Forecast £m	Var £m	Var %
Medical	39.7	38.6	1.1	2.8%	104.5	103.0	1.5	1.4%
Innovation Health & Wealth	10.5	10.4	0.1	0.5%	25.6	25.9	(0.3)	(1.0%)
Improvement Body	12.6	6.3	6.3	50.0%	34.2	32.4	1.9	5.4%
Nursing	3.4	2.4	1.0	30.0%	17.1	17.1	0.0	0.0%
Commissioning Operations	45.2	39.2	6.0	13.3%	93.1	89.9	3.1	3.4%
Commissioning Development	2.6	2.4	0.2	9.3%	7.6	7.6	0.0	0.0%
Patients & Information	26.8	21.8	5.0	18.6%	60.0	60.9	(0.9)	(1.5%)
NHS Direct/111	16.2	15.4	0.7	4.6%	46.1	46.1	0.0	0.0%
Finance	0.2	0.2	0.0	(0.9%)	2.0	1.4	0.6	30.0%
Commissioning Strategy	1.1	0.3	0.8	73.8%	2.4	2.4	0.0	0.0%
Transformation & Corp Office	5.2	5.2	0.0	(0.3%)	8.6	8.6	0.0	0.0%
Leadership Academy	33.4	33.4	0.0	0.0%	67.7	67.7	0.0	0.0%
Clinical Excellence Awards	20.1	20.1	0.0	0.0%	174.0	174.0	0.0	0.0%
Provider Support	144.1	144.1	0.0	0.0%	206.0	214.5	(8.5)	(4.1%)
Other Programmes	25.6	15.9	9.7	37.8%	51.1	29.6	21.5	42.0%
Other Reserves	0.0	0.0	0.0	0.0%	(1.5)	(1.5)	0.0	0.0%
Contingency	16.8	16.8	0.0	0.0%	34.0	34.0	0.0	0.0%
<b>TOTAL NHSE PROGRAMME COSTS</b>	<b>403.3</b>	<b>372.4</b>	<b>30.9</b>	<b>7.7%</b>	<b>932.5</b>	<b>913.6</b>	<b>18.9</b>	<b>2.0%</b>

A black and white portrait of a woman with dark, curly hair, smiling slightly. She is wearing a dark top. The background is a soft, out-of-focus light color.

**Supplementary  
Information:  
Integrated Board  
Report**  
Indicators of NHS  
England Performance

November 2014




# Business Area Delivery

Performance against NHS England Business Plan Business Areas and Customer Contact				
For the <b>31 business plan areas</b> , the majority are on track or making good progress. Those rated as at Red or Amber/Red are as follows:				
Bus Area	Title	Current status	Trend	Comment
<b>High quality care for all, now</b>				
2	Parity of Esteem	A/R	—	This Amber/Red rating reflects risks to dementia diagnosis. Urgent work is underway to address the targets.
3	Access to Urgent & Emergency Care	A/R	—	This Amber/Red rating is due to decrease in ambulance and A&E performance standards. Analysis and actions are covered in NHS performance slides
11	People with Learning Disabilities	A/R	▼	This Amber/Red rating reflects current issues with delivery and performance. Urgent action is being taken to address these.
14	Specialised Services Commissioning	R	—	This Red rating reflects risks to budget overruns.
16	Access to elective care	A/R	—	This is rated at Amber/Red due to breaches in cancer wait target and RTT targets. These are covered in the NHS performance slides.
<b>Performance on Customer Contact</b>				
n/a	Customer Contact	A	—	Amber RAG rating reflects the Customer Contact Centre meeting two key targets on FOIs and enquiry response, but not yet the required standard in two of its complaint response targets. Work is progressing to improve its response times, including implementation of a CRM system which will improve its overall management of complaints.
<b>Key</b>				
 No change in RAG status against last report  RAG status deteriorating against last report  RAG status improved against last report				

# 31 Business Areas

High quality care for all, now		High quality care for all, for the future		Developing our organisation	
1	Prevention and early diagnosis	19	Citizen Participation and Empowerment	27	Excellent Organisation Programme
2	Parity of Esteem	20	Wider Primary Care, Provided at Scale	28	Customer Contact & Complaints
3	Access to Urgent & Emergency Care	21	A Modern Model of Integrated Care	29	Primary Care Support Services
4	Patient Experience	22	Highest Quality Urgent and Emergency Care	30	Corporate Services
5	Patient Safety	23	Productivity of Elective Care	31	Commissioning Support
6	Medical Revalidation	24	Specialised Services concentrated in Centres of Excellence		
7	Compassion in Practice	25	Seven Day Services		
8	Equality and Health Inequalities	26	Economic Contribution of the NHS		
9	Maternity, Children and Young People				
10	Long Term Conditions, Older People & End of Life Care				
11	People with Learning Disabilities				
12	Primary Care Commissioning				
13	Public Health, Health & Justice and Armed Forces				
14	Specialised Services Commissioning				
15	Challenged Geographies				
16	Access to elective care				
17	Data, Digital Services & Customer Service				
18	Planning, Resources and Incentives				

# Major Programmes

Performance of Major Programmes				
For the 25 major programmes currently within the portfolio, five are rated Amber/Red, and the remainder either Amber, Amber/Green or Green. A major programme assurance group is being established to formalise assurance and ensure all major programmes are being managed effectively, and using good practice.				
Programme No.	Major Organisational Change Programme	Current status	Trend	Comments
<b>General - NHS wide</b>				
2	Transforming Care (Winterbourne View)	A/R	—	Urgent action is being taken across NHS England to take remedial action to progress delivery of this programme. Risks remain very high.
5	Parity of Esteem (including Dementia & IAPT)	A/R	—	This Amber/Red rating reflects risks to dementia diagnosis. Urgent work is underway to address the targets.
<b>Informatics - Business systems</b>				
16	Child Protection Information Sharing	A/R	—	First wave sites to commence deployment of the Child Protection Information Sharing (CP-IS) core functionality from late September. Ministerial communications are planned for the beginning of October.
<b>Informatics - Data and information services</b>				
19	Care.data	A/R	—	The programme is operating at risk, however specialist resource has been secured and work is now progressing.
20	Data Services for Commissioners	A/R	▲	A number of issues need to be resolved relating to long term vision and funding allocation.
<b>Key</b>				
 No change in RAG status against last report  RAG status deteriorating against last report  RAG status improved against last report				



# Summary of Corporate Risks

## NHS England's Corporate Risk Register Summary as at 24 October 2014

Risk		Change in Current RAG Status Since Last Report	Current Gross RAG Status	When Mitigated RAG Status	Date By Which Mitigated RAG To Be Achieved	Risk		Change in Current RAG Status Since Last Report	Current Gross RAG Status	When Mitigated RAG Status	Date By Which Mitigated RAG To Be Achieved
High-level potential risks that are unlikely to be fully resolved and require ongoing control						High-level potential risks that are unlikely to be fully resolved and require ongoing control					
<b>NHS Wide</b>						<b>NHS England</b>					
<b>Strategic</b>	Strategy and service transformation - risk we provide inadequate support to enable excellent commissioning in system	↔	AR	A	31/03/2015	Finances - risk of inadequate funding to meet commitments in short and long term	↔	R	R		31/03/2015
	Relationship with patients and the public - risk we do not meet commitments to adequately involve patients in decision making	↔	AR	A	30/04/2015	Organisational alignment and capability - risk the changes impact capability to deliver effectively	↑	A	A		31/03/2015
	Transforming care - risk we miss commitments made post Winterbourne View	NEW	R	A	30/06/2015						
<b>Operational</b>	Urgent care - risk the NHS fails to meet A&E standards	↔	R	A	31/03/2015	Operational Information for managing performance - risk we have inadequate information to manage performance effectively	↑	A	A		31/03/2015
	Major quality problems - risk the NHS cannot prevent or minimise impact on patients of a quality issue	↑	A	A	31/03/2015						
	Major emergency - risk the NHS is not able to avoid or minimise impact of Ebola affecting UK	↔	AR	A	31/12/2014						
	Data sharing - risk regarding IG requirements, and/or commissioners can't access necessary data for commissioning	↔	A	A	31/03/2015						
	Genomics - risk we do not mobilise clinical changes needed to deliver benefits of 100k Genomes programme	↑	A	AG	31/12/2014						
	Child health information systems (CHIS) - risk inadequate data means some children are not supported with key health services	↔	R	AR	30/11/2014						

**Key**

- ↔ No change in RAG status compared to last report
- ↑ RAG status improved compared to last report
- ↓ RAG status deteriorated compared to last report