

**BOARD PAPER - NHS ENGLAND**

**Title:** NHS England Performance Report

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

**Purpose of paper:**

- To provide the board with:
  - An overview of status against each of the Business delivery areas in the 2014/15 Business Plan
  - Assurance status of our and 25 major programmes covering NHS Informatics and NHS England
  - A summary of our corporate risks

**The Board is invited to:**

- Review NHS England's delivery of its priorities and objectives for 2014/15

## NHS England Performance Report

### Introduction

1. This report provides an update to the NHS England Board on indicators covering:
  - Delivery of the NHS England 2014/15 Business Plan.
  - Delivery of Major Programmes.
  - Summary of Corporate Risks.
2. As it is year end, we have provided a more comprehensive report against all 2014/15 Business Plan areas and major programmes.

### NHS England Performance

3. **Business Plan.** The report attached at Annex A sets out a summary position against the 31 business areas of NHS England's 2014/15 Business Plan. It summarises some of the key achievements and indicates where work will be taken forward into the 2015/16 Business Plan. More detail is available if required about the original commitments and status of all deliverables, as these are tracked and reported on a monthly basis.
4. Significant progress was achieved in all areas, and most are on track to have delivered their goals. A few of the major successes are the establishment of the genomics medical centres to support delivery of the 100,000 genomes programme, progression of co-commissioning services with GP-led CCGs, publishing of ward level staffing data and launch of the commissioning support Lead Provider Framework.
5. Four of the thirty one areas are rated as higher risk based on end of February reports. The following summary indicates status of these. The first four of the following have all been subject to Board discussions in recent months, as part of normal business and performance reporting.
  - Access to Urgent and Emergency Care, which has seen NHS provider targets missed due to high pressure on A&E over winter. This will continue as a priority in 2015/16.
  - People with Learning Disabilities, the programme has scaled up to ensure delivery in a longer timescale and is a priority for 2015/16.
  - Specialised Services Commissioning, the rating reflects continuing overspend. The programme has restructured the function, reshaped the Cancer Drug Fund and taken other actions to control spending growth.
  - Access to Elective Care, the rating reflects missed targets by NHS providers for RTT, Cancer waiting time and diagnostics.
6. **Major Programmes.** Of our major programmes listed in Annex B, four are reported as higher risk for delivery confidence.
  - Transforming Care for people with Learning disabilities is covered above.
  - NHS E-Referrals and Telephone Appointment Line, and Maternity dataset ratings reflects delays due to technical issues.
  - Care.data continues to be high risk and under intense scrutiny.

7. All major programmes are subject to assurance reviews agreed through NHS England's Major Programmes Assurance Group.
8. **Summary of Corporate Risks.** A few of the corporate risks at Annex C have been covered above. Three key risks to highlight for the Board are:
  - a. Strategy and service transformation – the need to mobilise quickly enough to deliver on the new work needed to take forward the Five Year Forward View.
  - b. Financial risk, particularly relates to the longer term funding and financial sustainability of the NHS.
  - c. Organisational capacity to deliver all current and new commitments effectively.
9. We recently discussed the first two of these, at the Audit and Risk committee. All three are receiving considerable management attention, and to some extent reflect that we are at the start of planning and mobilising for the Five Year Forward View work. Considerable work is under way on all planning for Five Year Forward View, and will continue as part of next year's business plan priorities.

# NHS England Performance Report

March 2015



# Annex A: Business Area Delivery (1)

Performance against NHS England Business Plan Business Areas				
Bus Area	Business Area Title	Current Status	Trend	Comment
<b>High quality care for all, now</b>				
1	Prevention and early diagnosis	G	—	In 2014/15, a number of cancer and other symptom national awareness campaigns have been launched, including those for oesophago-gastric cancer, breathlessness, osteoarthritis and the 'blood in pee' campaign. In addition, work to scope a programme to address alcohol misuse has been undertaken with Public Health England, who will now take the lead. Work on a number of areas will continue into 2015/16 including sepsis, prevention of diabetes, and cancer services.
2	Parity of Esteem	A	▲	Significant progress has been made, with the majority of work within this business area either complete or on target to be delivered. Achievements include launching the National Mental Health Intelligence Network with Public Health England and extending the Friends & Family Test to cover mental health services. The national ambition for dementia diagnosis remains challenging. The latest data show a national diagnosis rate of 59%, up from 53.3% in August 2014. Good progress has been made towards the IAPT access and recovery rates. Further enhancements have been made towards assuring CCG delivery and recovery plans for those most at risk. NHS England has worked closely with government to secure significant targeted investment in mental health services for 2015/16 and beyond.
3	Access to Urgent & Emergency Care	A/R	—	A&E performance measures are below the national standard for the year to date, as well as three ambulance standards being missed in the last reporting period. Collaborative work is being undertaken between tripartite partners to address performance on a number of fronts, including support for those trusts with high numbers of delays. Delivery against NHS Constitution standards remain a key priority into 2015/16, supported by successful delivery of system resilience planning this year. NHS 111 enhanced service pilots and EPRR assurance reviews are on track for successful completion by the end of the business year.
4	Patient Experience	A/G	—	Achievements include the publication of a commitment to carers and a programme designed to promote and support patient leaders to take a prominent role in improving patient experience. The Friends and Family Test Programme is on track to be implemented for all services in scope and have already passed significant milestones, such as 5 million instances of feedback received since April 2013. It is anticipated that the Insight Strategy will now be delivered in early 2015/16. Work around patient experience will continue in 2015/16, including establishing a learning and improvement programme from staff experience feedback, improving the handling and reporting of complaints and implementing the recommendations from Francis around external whistleblowing.

# Business Area Delivery (2)

Bus Area	Business Area Title	Current Status	Trend	Comment
5	Patient Safety	G	—	All the areas of work of this business area are either completed or on target to be completed by end of March 2015. Achievements include the publication of patient safety data on a patient safety website, the establishment of 15 safety collaboratives and 30 national clinical audits have been completed to support clinical priorities. The focus for 2015/16 will be improving the measurement of patient safety on avoidable deaths, the delivery of a new patient safety incident management system and to continue to develop the Patient Safety Thermometer initiative to deliver increases in data reporting.
6	Medical Revalidation	A	—	On trajectory to achieve 40% of doctors receiving a recommendation by 31 March with a framework for quality assurance to enable responsible officers to monitor progress and reporting of metrics to ministers. Medical revalidation work continues into 2015/16.
7	Compassion in Practice	A/G	—	Ward staffing numbers for all trusts are now published and a cohort of 1000 active caremakers in place with a programme in place to ensure this work continues to expand at local and direct care level.
8	Equality and Health Inequalities	A/G	—	Key progress in 2014/15 includes work to ensure that issues of equality and tackling health inequalities are embedded within the NHS England/CCG assurance regime. The assurance frameworks for 2014/15 include an assessment for equalities and health inequalities. A full consultation was also undertaken on the development of a selection of equality and health inequalities indicators for inclusion in the NHS Outcomes Framework to support the assurance process. Other deliverables remain on track and work to address health inequalities are embedded across a number of areas in the 2015/16 business planning.
9	Maternity, Children and Young People	A	—	New clinical maternity commissioning guidance for CCGs has been published including the NICE definition of a named midwife and also guidance to support CCGs offering choice where appropriate. Substantial progress has been made towards the delivery of an additional 4,200 health visitors. All regions have strengthened performance management and are following up with providers below trajectory.
10	Long Term Conditions, Older People & End of Life Care	G	—	Achievements include development of a number of tools and guidance including the Healthy Aging guide co-produced with Age UK and 'Actions for End of Life Care' strategy, to support the delivery of the Mandate commitment for everyone with a long term condition being offered a personalised care plan.
11	People with Learning Disabilities	A/R	—	The initial Transforming Care and Concordat commitment to discharge patients was missed and work continues towards discharging as close as possible to 50% of patients who were in hospital (as at 1 April). Care and treatment reviews are being undertaken to facilitate patient discharge and it is expected that these will continue to speed up discharges in the coming months. In addition, NHS England has (with system partners) published its response to Sir Stephen Bubb's report in which commitments are made to deliver work supporting the reduction of inpatient admissions, designing and embedding a new service model, and establishing a regional task force to help deliver change.

# Business Area Delivery (3)




Bus Area	Business Area Title	Current Status	Trend	Comment
12	Primary Care Commissioning	A	—	The 2014/15 GMS contract has been implemented and Local Professional Networks have been introduced, to build clinical leadership within primary care. Also the launch of the first proactive primary care initiatives, for avoiding unplanned admissions for vulnerable people, are on track for delivery by the end of the year. The foundations of the work begun in 2014/15, into transforming commissioning primary care services, will continue as part of the 2015/16 business plan.
13	Public Health, Health & Justice and Armed Forces	A/G	▲	Health needs assessments for individuals in detained care have been completed, with the implementation of Public Health screening and immunisation priorities on track for delivery by the end of the business year. Programmes of work, including the transfer of 0-5 commissioning to local authorities and the implementation of liaison and diversity services into custodial settings, have been incorporated into 2015/16 business planning.
14	Specialised Services Commissioning	A/R	▲	Specialised services, including the Cancer Drugs Fund, have been overspending. Taskforce arrangements for 2014/15 move to business as usual in 2015/16. Collaborative commissioning guidance, a systematic market review and a procurement work plan for specialised services, are on track for delivery by the end of the business year.
15	Challenged Geographies	G	—	This area of work concluded in October 2014 after the final intensive support programme board took place.
16	Access to elective care	A/R	—	NHS providers missed key constitutional standards for Referral to Treatment (RTT), diagnostics and the 62 day cancer waiting time for urgent referrals, in Q3. Action is in hand with both NHS providers and the Independent Sector to review and re-profile additional RTT activity, to ensure the standards can be met, while the Cancer Waiting Times Taskforce has set out actions to improve delivery against the cancer standards and future planning capacity for diagnostic services. Continued monitoring and improvement activity to ensure access to high quality, accessible elective care services is a key priority in the 2015/16 Business Plan.
17	Data, Digital Services & Customer Service	A	▼	Consultant level outcomes across 12 specialties have been published and a third of all A&E departments, NHS 111 providers and ambulance trusts now have access to the Summary Care Record (SCR). Online e-prescription ordering, online appointment booking and online access to patient GP records are all on track for April 2015. Despite recent progress made, the care.data programme continues to be under intense scrutiny and is managing significant risks.
18	Planning, Resources and Incentives	A	—	Guidance for the refresh of 2014/15 CCG plans has been published, with next steps for strategic approaches to unmet need, rurality and allocations set. First draft of CCG planning submissions for 2015/16 have been received with work to address implementation of the 5YFV strategy ongoing. A joint document with Monitor has been published setting out reform of the NHS payment system and jointly delivered a programme of practical workshops on good procurement practice for commissioners. Work continues to develop choice, particularly in mental health and maternity services which will be taken forward in 2015/16.

# Business Area Delivery (4)

Bus Area	Business Area Title	Current Status	Trend	Comment
<b>High quality care for all, for the future</b>				
19	Citizen Participation and Empowerment	A/G	—	We successfully tested the prototype for the NHS Citizen system, which will empower citizens to be fully engaged in making positive choices about their own health and care. There remain some risks to the timely delivery of all CCGs being able to offer (by April 2015) personal health budgets to adults, young people and children who would benefit from having one, and also personalised care plans being available to patients with long term conditions. It is forecast that the target of 150,000 citizens trained in digital literacy will not be achieved by the end March 2015 due to reductions in the programme's 14/15 budget.
20	Wider Primary Care, Provided at Scale	A/G	▲	Development of the contractual frameworks for dental, ophthalmic and pharmacy services as well as the publication of the outcomes based specification for wheelchair services, are on track for delivery by the end of the year. Ongoing activity such as wave two of the Prime Minister Challenge Fund pilots and building on the national enablers completed for areas such as co-commissioning and workforce development, in support of the 5YFV, are incorporated into the 2015/16 business plan.
21	A Modern Model of Integrated Care	A	—	97% of better care fund (BCF) plans are approved with the remaining to be fully approved by March with targeted support to ensure CCGs are prepared for implementation of plans to be in place.
22	Highest Quality Urgent and Emergency Care	A/G	—	Key achievements for the end of March 2015 include guidance and standards for commissioners regarding urgent care networks, urgent care centres, emergency centres and major emergency centres as well as a peer review for regional trauma networks. Transforming urgent and emergency care services across a range of care settings is a corporate priority for 2015/16.
23	Productivity of Elective Care	G	▲	Focus of this business area was to scope the programme of work and develop a set of initiatives to take forward through 2015/16 by ensuring access to high quality, accessible elective care services. This report was completed and implementation will be taken forward in the 2015/16 business plan.
24	Specialised Services concentrated in Centres of Excellence	G	—	The work on the congenital heart review, which continues into 2015/16, and work to launch two new proton beam therapy centres is progressing. Other planned work on this business area was put on hold in 2014/15 in response to the review of specialised services. In 2015/16 a key priority will be creating sustainable, clinically effective and affordable specialised care services.
25	Seven Day Services	A	▼	Progress is being made operationalising seven day services from March 2017 onwards with implementation of seven day clinical standards for urgent and emergency care services in acute settings as the initial focus. Work is ongoing to build on the self-assessment tool which is being used by providers to measure their current distance from delivery of the standards.



# Business Area Delivery (5)

Bus Area	Business Area Title	Current Status	Trend	Comment
26	Economic Contribution of the NHS	A/G	—	A key achievement is the appointment of the genomics medicines centres to support delivery of the 100,000 genomes programme. The work around increasing uptake and value of innovation including NHS challenge prizes, setting up national innovation accelerator sites and publish 40 MedTech Innovation briefings, is on target for end of March.
<b>Developing our organisation</b>				
27	Excellent Organisation Programme	A/G	▲	We continued delivery of organisational development and team working particularly to support the new structure and operating model.
28	Customer Contact & Complaints	A	—	There have been improvements in performance on abandoned calls meaning we are now meeting our key performance indicators in this regard. A new Customer Relationship Management (CRM) system has been planned to improve customer service and improve performance. A programme of enhancements for this new corporate system is key activity for 2015/16.
29	Primary Care Support Services	A	▲	The procurement is on schedule, with approval of full business case and award of contract planned by end of June.
30	Corporate Services	A	—	Corporate IT service performance has continued to improve. Significant estates rationalisation is underway to deliver cost reductions and reduced footprint. The strategy and operating model of People and Organisational Development is delayed and will be part of the 2015/16 business plan. A procurement improvement project is underway.
31	Commissioning Support	A	—	Two of the nine CSUs failed to achieve entry to the Lead Provider Framework (LPF), which was successfully launched on schedule, following an evaluation process. The CSU Transition Team are now working closely with those CSUs that did not secure a place to ensure CCG customers continue to have access to commissioning support services. Publication of final guidance for CSU autonomy will be taken forward into 2015/16 but all planned work is on track for delivery by the end of the year.
<b>Key</b>  No change in RAG status against last report  RAG status deteriorating against last report  RAG status improved against last report				

# Annex B: Major Programmes (1)

Performance of Major Programmes				
Prog No.	Major Organisational Change Programme	Current status	Trend	Comments
<b>General - NHS wide</b>				
1	Genomics (including data / technology)	A	—	Site visits to assess the operational readiness of NHS Genomic Medical Centres (GMCs) have taken place as each site has been categorised as either operationally ready, not operationally ready or not able to sign contract due to reconsideration of their business model. Support is being given to the individual NHS GMCs and it is anticipated that the NHS GMCs will go live by the end of March.
2	Transforming Care	A/R	—	The initial Transforming Care and Concordat commitment to discharge patients was missed. Work continues towards discharging as close to 50% of patients who were in hospital as at 1 April as possible. Care and Treatment Reviews are being undertaken to facilitate patient discharge and it is expected that these will continue to speed up discharges in the coming months. In addition NHS England has, with system partners, published its response to Sir Stephen Bubb's report in which commitments are made to deliver work supporting the reduction of inpatient admissions, designing and embedding a new service model and establishing a regional task force to help deliver change.
3	Better Care Fund	A	—	97% of Better Care Fund (BCF) plans have been approved with the remaining to be fully approved by the end of March. Implementation support is being developed and published on an on-going basis through March to ensure CCGs are prepared for delivery of plans.
4	0-5 Transfer	A	—	Risk remains for the programme around agreeing the transfer process for some contracts and ensuring agreements are in place with Local Authorities to planned timescales. Financial allocations were made to the majority of Local Authorities on 13 February by the Department of Health. Local resolution of outstanding issues will be through Regional Oversight Groups and other local mechanisms ahead of remaining allocations mid-March. The transfer options for the majority of service contracts have been agreed with options for a small number of complex contracts being identified.
5	Parity of Esteem (including Dementia & IAPT)	A	▲	Whilst the delivery confidence status has improved the national ambition for dementia diagnosis remains challenging. A dementia recovery plan is in place. The latest diagnosis rates show a national diagnosis rate of 59%, up from 53.3% in August 2014. Good progress has been made towards the IAPT access and recovery targets although we remain to be assured that these will be completed.
6	NHS 111 (including NHS 111 Futures)	A/G	—	NHS 111 procurement guidance, including Out of Hours service provision, has been drafted and is subject to approval by the NHSE Chief Executive. The new NHS 111 telephony infrastructure is on track for March go-live. British Sign Language (BSL) relay service will be piloted within this new contract. Development of NHS 111 Digital is progressing on plan with alpha site launch due in March.




# Major Programmes (2)

Prog No.	Major Organisational Change Programme	Current status	Trend	Comments
7	Primary Care Support Services	A	▲	The procurement is on schedule, with approval of full business case and award of contract planned by end of June.
9	Congenital Heart Review	A	—	The response to the consultation on the standards and service specification have been published through John Holden's blog on the review and a joint engagement and advisory group is planned for March.
10	Proton Beam Therapy	A	—	The commitment is on track however any delay will impact on service delivery target date and increased costs due to build inflation. Confident that the target will be achieved providing there is no delay due Ministerial approval or a procurement challenge.
21	Data Services for Commissioners	A	▲	This is a two year programme commissioned by NHS England and delivered in conjunction with the Health and Social Care Information Centre. Clarity on governance, resourcing and objectives has been gained. Programme activities have commenced and programme funding for 2015/16 has been allocated within NHS England against the programme.
28	Primary Care Co-Commissioning	G	▲	CCGs have now submitted proposals for both delegated and joint arrangements for primary care co-commissioning in 2015/16. A national moderation and review has taken place for both sets of submissions with 64 CCGs approved for delegated arrangements, with more approvals likely in due course. In March the number of CCGs approved for joint arrangements will be announced following national moderation.
29	Specialised Services Collaborative	A/G	—	Collaborative commissioning guidance document was published in March and a list of services is being developed with clinical engagement. Phase 2 of the programme will build on that clinical engagement.
30	Urgent & Emergency Care	A/G	—	Good progress continues to be made against the delivery of the programme. Two geographical locations have been identified to take forward acute stroke service reconfigurations they are West Midlands and Manchester.
<b>General - NHS England</b>				
11	Organisational Alignment and Capabilities	A	▲	NHS England is on target to deliver the required efficiency savings. With work including focus on implementing sustainable improvements in procurement and financial controls, underpinned by effective assurance processes and reviews of the improvement architecture continuing. Delays in finalising redundancy arrangements caused by the national pay proposal have the potential to impact on morale but are being mitigated through engagement with Trade Unions, managers and staff.

# Major Programmes (3)

Prog No.	Major Organisational Change Programme	Current status	Trend	Comments
12	Operational Information for Commissioning	A	▲	Interim management arrangements are coming to a close with permanent arrangements to be put in place to take the forward the programme in the future. Shadow arrangements for the Operational Information for the commissioning team are in place as part of organisational alignment and capabilities review. Progress continues to be made on defining the strategic objectives for the programme and the project plans to deliver this.
<b>Informatics - Business systems</b>				
13	Health & Justice Information Services	A	▼	The Strategic Outline Case for Phase1 was approved by HM Treasury in October 2014. Steps are being taken to finalise the procurement documentation which is currently delayed due to technical issues.
14	Child Health Information Systems	A	▲	Ahead of commissioning responsibility for 0-5 healthcare transferring to local authorities from 1 October 2015 NHS England is working with partners to secure a sustainable model for child health information and manage the transition to local authorities.
15	Child Protection Information Sharing	A	—	The Child Protection Information Sharing (CP-IS) programme has engaged with Local Authority and NHS sites with 265 NHS sites and 88 Local Authorities signed up to the CP-IS service which is now live with three Local authorities and three NHS sites sharing child protection information.
16	GP IT	A/G	▼	The programme is on track for successful delivery.
<b>Informatics - Patient/clinical services</b>				
17	NHS Choices	A	—	While successful live service delivery continues, there are a number of outstanding issues including agreement of the final transformation plan and the lack of funding approval for 2015/16 that are in the process of being resolved. The NHS England programme team has met with Major Projects Authority and have scheduled a formal review for Spring 2015.
18	Patient Online	A	—	Current data confirms that the increasingly encouraging pattern of service development over the past year continues. GP practices with which 92% of patients in England are registered have now enabled electronic booking of appointments for their patients. GP practices with which 89% of patients are registered have enabled electronic repeat prescriptions ordering. It is expected that patients in 95% of GP practices will have access to their records online by the end of March 2015.
19	NHS E-Referrals and Telephone Appointment Line	A/R	—	Technical issues being experienced with the new system during testing has resulted in delays to the go live date which is now expected to be between May 2015 and June 2015.

# Major Programmes (4)

Prog No.	Major Organisational Change Programme	Current status	Trend	Comments
26	Personal Health Budgets	A/G	—	As of October 2014, people with Continuing Health Care (CHC), including children and young people, have had the right to have a Personal Health Budgets (PHB) . The 2015/16 planning guidance has also set out clear expectations that CCGs should be planning their local expansion of PHBs.
<b>Informatics - Data and information services</b>				
20	Care.data	A/R	—	Despite recent progress made, the programme continues to be under intense scrutiny and managing significant risks. Following the publication of the Independent Information Governance Oversight Panel (IIGOP) report, a review has taken place with the programme and pathfinder CCGs to understand the impact of the conditions set, and a joint response has been developed and sent to IIGOP.
22	Maternity Children's Dataset	A/R	—	The successful delivery of the Maternity Children's Dataset is currently delayed due to the requirement to implement a fully secure infrastructure that meets security requirements.
23	NHS Number Adoption	G	—	The NHS Number Survey Report published in Nov 2014 confirmed that use of the NHS Number by NHS Trusts in England as the primary identifier in clinical correspondence shared across organisations was 97.6% (239 of the 245 Trusts surveyed). This exceeds the Secretary of State's public commitment of 95%.
24	Integrated Digital Care Record Open Source	A/G	—	The programme has successfully established multiple Community of Interest Companies (CICs), focused on maximising the benefit of Open Source Software in specific clinical or operational areas.
25	Safer Hospitals Safer Wards Technology Fund	G	▲	As of 9 Jan 2015, NHS Trusts have received £112m of the £150m Technology Fund allocated in 2014/15.
<b>Key</b>				
 No change in RAG status against last report  RAG status deteriorating against last report  RAG status improved against last report				

# Annex C: Summary of Corporate Risks

NHS England Corporate Risk Register Summary - Part One (Board presentation) as at 5 March 2015											
Risk Ref	Risk <i>High-level potential risks that are unlikely to be fully resolved and require ongoing control</i>	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 Ref	Risk <i>High-level potential risks that are unlikely to be fully resolved and require ongoing control</i>	Change in Current RAG Status Since Last Report	Current Gross RAG Status	When Mitigated RAG Status	Date By Which Mitigated RAG To Be Achieved
<b>NHS-wide (risk to NHS England)</b>						<b>NHS England</b>					
1	Major quality problems - risk the NHS cannot prevent or minimise impact on patients of a quality issue	↔	A	A	31/03/2015	3	Finances - risk of inadequate funding to meet commitments in short and long term	↔	R	AR	Ongoing
4	Strategy and service transformation - risk we are unable to achieve the required pace to deliver the five year view.	↔	AR	A	30/06/2015	11	Commissioning support services - risk unviable support services impacts on quality improvement, service transformation and public confidence.	↓	AR	A	31/05/2015
5	Relationship with patients and the public - risk we do not meet commitments to adequately involve patients in decision making	↔	AR	A	30/09/2015	14	Organisational capability and capacity - risk the changes impact capability to deliver commitments effectively	↓	AR	A	30/04/2015
7	Urgent care - risk the NHS fails to meet A&E standards	↔	R	AR	30/09/2015	16	Operational Information for managing performance - risk we have inadequate information to manage performance effectively	↔	A	A	31/03/2017
12	Data sharing - risk that commissioners, clinicians and the public have inadequate access to information	↔	A	AG	30/11/2015						
15	Major emergency - risk the NHS is not able to avoid or minimise impact of Ebola affecting the UK	↑	A	A	31/03/2015						
20	Child Health Information Systems (CHIS) - risk inadequate data means some children are not supported with key health services	↔	R	AR	01/12/2015	Key	↔	No change in RAG status compared to last report	↓	RAG status deteriorated compared to last report	
21	Transforming Care - risk that March 2016 target for completion of establishing Transforming Care will not be met	↔	AR	A	31/03/2015		↑	Risks recommended for removal	↑	RAG status improved compared to last report	