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| **Agenda item:** | **8** |
| **Attachment:** | **D** |

**HRA BOARD COVER SHEET**

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| **Date of Meeting:** | 21st September 2016 |
| **Title of Paper:** | KPI Q1 Report  |
| **Purpose of Paper:** | To update the board on performance data for Q1 (as it was available it also includes data for July) |
| **Reason for Submission:** | The HRA is committed to improving performance and has developed a comprehensive suite of indicators that enable it to both make necessary interventions when data suggests performance is dipping, and to highlight and celebrate areas of high performance |
| **Lead reviewer:** | All Directors |
| **Details:** | This represents the first report using the reduced number of indicators as agreed at the Board in March 2016. The information consist of the usual month by month spreadsheet format along with graphs indicating performance against target and 15/16 results. Attached to this cover sheet is a brief review of ‘red’ scores.The Board are also asked to note the following information related to those areas where data is currently not presented. ***A13 Reduction in the number of Queries raised as a result of REC Review.******A14 Reduction in the number of Amendments being processed before a study recruits its first participant.***There are some challenges in pulling together this data and further update on progress will be circulated prior to the October Board***I1 Increase in the number of Applications which have clearly involved patients, service users and the public in their development from a 2010 baseline.***The monitoring is based on the work to analyse answers to the public involvement question in IRAS (A14-1)Data has been produced for 2010 and 2012 in the form of an annual report. Work is being finalised on 2014 data and it’s planned to produce a further full report on 2016 data early in 2017. The ambition to produce more regular reports requires work on the HARP system, which due to other greater priorities has yet to start. We are looking at alternatives to capture the data (through manual intervention) in order to offer the board a more regular report. **In relation to A15-18**. The Board are also asked to note that it will receive a full programme board report on **HRA Approval data** and progress on recovery plans for amendments at this meeting. When board agrees that HRA Approval process has reached steady state these indicators will be reported on a monthly basis |
| **Suitable for wider circulation?**  |  Yes. |
| **Time required for item:**  | 10 mins |
| **Recommendation / Proposed Actions:** | **To Approve** | **Yes** |
| **To Note** |  |
| **For Discussion** | **Yes** |
| **Comments** |  |
| **Name:** | Ian Cook |
| **Job Title:**  | Director Corporate Services |
| **Date:** | 14th September 2016 |

**KPI ‘Red’ Summary**

What follows is a brief summary of those KPI’s that have returned a ‘Red’ score and describes the cause/s of those results and any organisational response that has or will be taken.

**Areas returning ‘Red’ scores**

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| A2 | 95% of applications to full research ethics committee meetings to receive final decision within 40 calendar days (stretch target) |

**Cause**: Amendment work commenced in June and staff diverted to assist

**Response**: These pressures will reduce as amendment work is completed

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| A3 | 95% of applications to research ethics proportionate review service to receive decision within 14 calendar days |

**Cause**: Problems with booking applications a long way ahead of closing dates due to volume/bank holidays in April and May.

**Response:** Work ongoing with UK colleagues to increase proportionate review workload

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| A8 | CAG/CAT 75% of Precedent Set review applications to be completed in 30 days FIG 7 |

**Cause:** Small number of PS applications reached final approval in July-16; one application considered in 39 days which led to drop in KPI.

**Response:** To be raised with CAG to identify improved efficiencies in member responses to follow-up

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| A9 | CAG/CAT 75% of amendments to be completed in 30 days |

**Cause:** Figures are due to data quality issues which require significant work to improve mechanisms of data collection.

**Response:** Staffing resource not available until appointment to vacant posts (October).