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| 1             | Request for inclusion by EMT at board meeting on 12/12/2016 | Addition of new performance indicator | New indicator - No previous reference number | FTP - Casework | Case Repatriation | Jonathan Green (Director of FTP) | * Title - Case Repatriation  
  * Definition – The volume of cases transferred to the NHS for handling in line with the recognised annual target for case repatriation  
  * Target – 200 cases per year (as defined in the NHS Raising Concerns Business case)  
  * Green when – 17 per month  
  * Amber when – 13 to 16 per month  
  * Red when – 0 to 12 per month  
  * Ref number - PI/FTP/027 | EMT board meeting - 06/02/2017 | Q1 2017 scorecard |
| 2             | Request for inclusion by EMT at board meeting on 12/12/2016 | Addition of new performance indicator | New indicator - No previous reference number | FTP - Information | Non-Serious Data Breaches | Jonathan Green (Director of FTP) | * Title - Non-Serious Data Breaches  
  * Definition – The volume of non-serious data breaches (recognised to amount to an ‘amber’ incident classification) recorded across the GDC.  
  * Target – Less than 2 non-serious data breaches per month  
  * Green when – 0 to 2 per month  
  * Amber when – 3 to 4 per month  
  * Red when – 5+ per month  
  * Ref number - PI/FTP/026 | EMT board meeting - 06/02/2017 | Q1 2017 scorecard |
| 3             | Request for inclusion by EMT at board meeting on 12/12/2016 | Addition of new performance indicator | New indicator - No previous reference number | Finance | Organisational Efficiencies | Graham Masters (Director of Finance & Corporate Services) | * Title - Organisational Efficiencies  
  * Definition – The actual realisation of planned organisational efficiencies in comparison to budgeted levels  
  * Target – For efficiency savings to be equal to or greater than the budgeted level  
  * Green when – Forecast yearly efficiency savings at 100% or greater of budgeted level  
  * Amber when – Forecast yearly efficiency savings at 95% to 99% of budgeted level  
  * Red when – Forecast yearly efficiency savings at less than 95% of budgeted level  
  * Ref number - PI/FCS/019 | EMT board meeting - 06/02/2017 | Q1 2017 scorecard |
| 4             | Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting | Full development of placeholder performance indicator | PI/STR/009 | QA | Education providers - Proportion meeting 'Patient Protection' standards for education | Ross Scales (Interim Head of QA & Education) | * Definition - Proportion of education providers recognised to be either meeting or 'partially meeting' the Protecting Patients standards  
  * Target level - 70% met and less than 10% not met  
  * Green when - 70% met an less than 10% not met  
  * Amber when - One of the target criteria not met  
  * Red when - Both of the target criteria not met | EMT board meeting - 03/05/2017 | Q1 2017 scorecard |
| 5             | Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting | Full development of placeholder performance indicator | PI/STR/010 | QA | Education providers - Proportion meeting 'Governance' standards for education | Ross Scales (Interim Head of QA & Education) | * Definition - Proportion of education providers recognised to be either meeting or 'partially meeting' the Governance standards  
  * Target level - 50% met and less than 20% not met  
  * Green when - 50% met an less than 20% not met  
  * Amber when - One of the target criteria not met  
  * Red when - Both of the target criteria not met | EMT board meeting - 03/05/2017 | Q1 2017 scorecard |
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<td>Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting</td>
<td>Full development of placeholder performance indicator</td>
<td>PI/STR/011</td>
<td>QA</td>
<td>Education providers - Proportion meeting 'Student Assessment standards for education'</td>
<td>Ross Scales (Interim Head of QA &amp; Education)</td>
<td>* Definition - Proportion of education providers recognised to be either 'meeting' or 'partially meeting' the Student Assessment standards Target level - 50% met and less than 10% not met * Amber when - One of the target criteria not met * Red when - Both of the target criteria not met</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting</td>
<td>Full development of placeholder performance indicator</td>
<td>PI/STR/012</td>
<td>QA</td>
<td>Proportion of inspections that require re-inspection</td>
<td>Ross Scales (Interim Head of QA &amp; Education)</td>
<td>* Definition - Proportion of inspections that require re-inspection Target level - ≤15% re-inspection * Green when - ≤15% re-inspection * Amber when - 15% to 25% re-inspection * Red when - &gt;30% require re-inspection</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting</td>
<td>Full development of placeholder performance indicator</td>
<td>PI/STR/004</td>
<td>Communications</td>
<td>External Mass Engagement</td>
<td>Lisa Cunningham (Head of Communications)</td>
<td>* Definition - The number of items of media coverage generated by proactive efforts from the GDC, versus the number that are generated due to reactive work Target level - ≥20 (proactive) * Green when - ≥1 (proactive) * Amber when - 1-14 (proactive) * Red when - ≤11 or fewer (proactive)</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting</td>
<td>Full development of placeholder performance indicator</td>
<td>PI/STR/005</td>
<td>Communications</td>
<td>External Face-to-Face Engagement</td>
<td>Lisa Cunningham (Head of Communications)</td>
<td>* Definition - The number of face to face engagement events with they GDC's key stakeholders Target level - ≥15 engagements * Green when - ≥10 engagements * Amber when - 7-14 engagements * Red when - ≤6 or fewer engagements</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>Inclusion within original definitions list as a placeholder following engagement with the Strategy directorate in advance of the 12/12/2016 EMT board meeting</td>
<td>Full development of placeholder performance indicator</td>
<td>PI/STR/006</td>
<td>Communications</td>
<td>Internal Communications - Awareness of Organisational Priorities</td>
<td>Lisa Cunningham (Head of Communications)</td>
<td>* Definition - Measuring percentage of staff who opened staff newsletter as indicator of awareness of organisational priorities Short-term definition to be amended when survey becomes available during Q2 * Target level - ≤60% * Green when - ≤50% * Amber when - 40% to 49% * Red when - ≥30% or under</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>Email query from Principal Legal Advisor on 22/02/2017 to raise a question over a disparity in BSC reporting V local reporting. Subsequent contact has led to Lisa-Marie endorsing a change to the BSC version of this indicator</td>
<td>Post-go-live amendment to performance indicator</td>
<td>PI/FTP/007</td>
<td>FTP/Legal</td>
<td>ILPS Staff Productivity</td>
<td>Lisa-Marie Roca (Principal Legal Advisor), Mark Caprio (Legal Operations Manager), Peter Day (Head of FTP QA &amp; Monitoring)</td>
<td>*All target and RAG levels to remain unchanged. *Amendment to be made to definition and therefore also the method of measuring actual performance *Previous definition - The proportion of ILPS staff to reach annual time targeting standards by team role *New definition - Actual amount of overall billable team time recorded as a proportion of the overall target time *Rationale of change - FTP legal team view that the revised indicator is a more pertinent measure on the basis that staff holidays will generally skew the % of staff target and what's more important is that regardless of the number of people, what matters is that we have met the number of hours of work that the team need to complete each month</td>
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<td>Post-go-live amendment to performance indicator</td>
<td>PI/FTP/007</td>
<td>FTP/Legal</td>
<td>Prosecution Timeliness - Disclosure Time Taken</td>
<td>Lisa-Marie Roca (Principal Legal Advisor) &amp; Mark Caprio (Legal Operations Manager)</td>
<td>• Measure to be split in two to give better visibility of the ILPS team and ELPS team in performing to this target. • Target levels and RAG levels for both measures to match originally defined indicators. • Rationale of change - Need to give greater visibility of whether adverse/positive performance in this area is driven by ILPS or ELPS as they are managed by the business as distinct entities</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>13</td>
<td>A) Finance &amp; Performance Committee discussion at February 2017 board meeting which queried the suitability of RAG levels in the HR sickness and turnover measures B) Additionally, annual HR consideration of target level suitability to take into account latest benchmarking data</td>
<td>Post-go-live amendment to performance indicator</td>
<td>PI/HRG/004</td>
<td>HR</td>
<td>Staff Sickness</td>
<td>Sue Steen (Interim Director of Organisational Development), Kim Chudley (Head of HR), Sara Cairns (HR Manager)</td>
<td>• Target level to remain unchanged at 2 days • Green band to remain unchanged at 2 days or lower • Amber band to be amended from 2.1-6 days to 2.1-3.0 days • Red band to be amended from 6.1 days+ to 3.1 days+ • Rationale of change: 1) Consideration of update to annual sector benchmarking data 2) Departmental agreement with FPC feedback that the initially drafted amber band was too broad and risked failing to provide adequate visibility of changes to organisational sickness levels.</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>A) Finance &amp; Performance Committee discussion at February 2017 board meeting which queried the suitability of RAG levels in the HR sickness and turnover measures B) Additionally, annual HR consideration of target level suitability to take into account latest benchmarking data</td>
<td>Post-go-live amendment to performance indicator</td>
<td>PI/HRG/005</td>
<td>HR</td>
<td>Natural Turnover</td>
<td>Sue Steen (Interim Director of Organisational Development), Kim Chudley (Head of HR), Sara Cairns (HR Manager)</td>
<td>• Target level to be changed from 1.05% turnover to 2.6% turnover • Green band to change from 0%-1.05 to 0%-2.6% • Amber band to be amended from 1.06%-4.5% to 2.7%-5% • Red band to be amended from 4.6 days to 5.1+ • Rationale of change: 1) Consideration of update to annual sector benchmarking data 2) Departmental agreement with FPC feedback that the initially drafted amber band was too broad and risked failing to provide adequate visibility of changes to organisational turnover levels.</td>
<td>EMT board meeting - 03/05/2017</td>
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<td>A) Finance &amp; Performance Committee discussion at February 2017 board meeting which queried the suitability of RAG levels in the HR sickness and turnover measures B) Additionally, annual HR consideration of target level suitability to take into account latest benchmarking data</td>
<td>Post-go-live amendment to performance indicator</td>
<td>PI/HRG/006</td>
<td>HR</td>
<td>Overall Turnover</td>
<td>Sue Steen (Interim Director of Organisational Development), Kim Chudley (Head of HR), Sara Cairns (HR Manager)</td>
<td>• Target level to be changed from 3% turnover to 3.7% turnover • Green band to change from 0%-3% to 0% to 3.7% • Amber band to be amended from 3.1%-5% to 3.8% to 5.9% • Red band to be amended from 5.1% to 6.0%+ • Rationale of change: 1) Consideration of update to annual sector benchmarking data 2) Departmental agreement with FPC feedback that the initially drafted amber band was too broad and risked failing to provide adequate visibility of changes to organisational turnover levels.</td>
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| 16            | Request from Head of Finance to amend method of measurement | Full development of placeholder performance indicator | PI/FCS/005 | Finance | Invoices and Refunds Timeliness | Melanie Stewart (Head of Finance) Sally Crispe (Financial Operations Manager) | * Target level and all RAG thresholds remain unchanged  
  * An amendment has been made to the way in which the invoice indicator is intended to be measured. Previously, time to process individual invoices was proposed to be measured, but the new measure evaluates the success rate of paying our suppliers within our payment terms of 30 days which is a more suitable measurement of performance.  
  * Invoice payments and refunds will be reported on within this PI as a composite measure, with the RAG rating being driven by the weaker performing out of the two factors. | EMT board meeting - 03/05/2017 | Q1 2017 scorecard |
| 17            | Request from Executive Director, Organisational Development for a measurement of Facilities customer satisfaction and it being recognised that it is possible to measure the effectiveness of external contractors. | Addition of new performance indicator | PI/FCS/018 | Facilities | External Contractors Performance | Bobby Davis (Executive Director, Organisational Development), Stephen Lillywhite (Head of Facilities Management) | * Title - External Contractors Performance  
  * Definition – Number of jobs completed by external contractors within their given priority SLA  
  * Target – 95% within SLA  
  * Green when – 95% +  
  * Amber when – 70% and 94%  
  * Red when – 69% or less  
  * Ref number - PI/FCS/018 | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |
| 18            | Request from Executive Director, Organisational Development for changes to HR performance indicators. | Addition of new performance indicator | New indicator - No previous reference number | HR | Staff Satisfaction | Bobby Davis (Executive Director, Organisational Development) | * Title - Staff Satisfaction  
  * Definition – Average satisfaction scores from staff taken from a six monthly staff survey  
  Target – 70% or above  
  * Green when – 70% +  
  * Amber when – 50% and 69%  
  * Red when – 49% or less  
  * Ref number - PI/HRG/014 | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |
| 19            | Request from Executive Director, Organisational Development for changes to HR performance indicators. | Addition of new performance indicator | New indicator - No previous reference number | HR | Internal Opportunities | Bobby Davis (Executive Director, Organisational Development) | * Title - Internal Opportunities  
  * Definition – Quarterly percentage of roles filled by internal staff compared against external recruitment  
  Target – 50% or above  
  * Green when – 50% +  
  * Amber when – 30% and 49%  
  * Red when – 29% or less  
  * Ref number - PI/HRG/015 | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |
| 20            | Request from Executive Director, Organisational Development for changes to HR performance indicators. | Addition of new performance indicator | New indicator - No previous reference number | HR | Key Roles with Identified Successor | Bobby Davis (Executive Director, Organisational Development) | * Title - Key Roles with Identified Successor  
  * Definition – Percentage of key roles in the organisation that have an identified successor in place  
  * Green when – 95% +  
  * Amber when – 75% and 94%  
  * Red when – 74% or less  
  * Ref number - PI/FCS/016 | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |
| 21            | Request from Executive Director, Organisational Development for changes to HR performance indicators. | Removal of performance indicator | PI/HRG/007 | HR | Staff Behaviour 360 Feedback | Bobby Davis (Executive Director, Organisational Development) | Performance indicator to be removed from report due to changing priorities meaning that these indicators are no longer relevant. | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |
| 22            | Request from Executive Director, Organisational Development for changes to HR performance indicators. | Removal of performance indicator | PI/HRG/008 | HR | Leadership Behaviour 360 Feedback | Bobby Davis (Executive Director, Organisational Development) | Performance indicator to be removed from report due to changing priorities meaning that these indicators are no longer relevant. | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |
| 23            | Request from Executive Director, Organisational Development for changes to HR performance indicators. | Removal of performance indicator | PI/HRG/009 | HR | Leadership Behaviour Survey Results | Bobby Davis (Executive Director, Organisational Development) | Performance indicator to be removed from report due to changing priorities meaning that these indicators are no longer relevant. | EMT board meeting - 22/08/2017 | Q2 2017 scorecard |