The Newcastle upon Tyne Hospitals NHS Foundation Trust

IT Change Management Policy and Process

<table>
<thead>
<tr>
<th>Version No.:</th>
<th>2.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective From:</td>
<td>16 July 2015</td>
</tr>
<tr>
<td>Expiry Date:</td>
<td>16 July 2018</td>
</tr>
<tr>
<td>Date Ratified:</td>
<td>5 June 2015</td>
</tr>
<tr>
<td>Ratified By:</td>
<td>Director of IT</td>
</tr>
</tbody>
</table>

1 Introduction

The Process responsible for controlling the Lifecycle of all Changes. The primary objective of Change Management is to enable beneficial changes to be made, with minimum disruption to IT Services.

This document defines the Change Management (CM) process, principles and roles, used across the Newcastle upon Tyne Hospitals (NUTH). The Change Management Process will work in conjunction with other NUTH processes related to ITIL and IT Service Management (ITSM) processes such as Incident and Problem management in order to provide quality IT services and increase value to the organisation.

2 Scope

This policy applies to all NUTH staff, contractors and 3rd parties that install, modify, remove, maintain or will in any way affect delivery of live NUTH services in the environments.

This scope shall include architectures, services, documentation, scripts, tools, standard operating procedures, maintenance operation, security patches and configuration changes (including structural database changes).

3 Aims

The purpose and objective of the Change Management process is to control the lifecycle of all changes, enabling beneficial changes to be made with minimum disruption to NUTH Services.

The objectives of Change Management are to:

- Protect the live IT environment from disruption associated with unplanned or failed changes
- Respond to changing business requirements while maximising value and reducing incidents, disruption and re-work
- Ensure that changes to the IT resources are documented in a central system and in a consistent way
- Respond to the customer, business and IT requests for change that will align services with business needs
- Ensure change is assessed and approved by the appropriate change authority
• Ensure that changes are recorded and evaluated and that authorised changes are prioritised, planned, tested, implemented, documented and reviewed in a controlled manner
• To provide a Change Management process that is in proportion to the scale of the change and which strikes a balance between pragmatism and bureaucracy
• Integrate into other service management processes to allow authorised changes to be tracked, unauthorised changes to be identified and the true impact of the change understood
• Ensure that all changes to configuration items are recorded in the configuration management system
• Optimise overall NUTH hospital risk

4 Duties (Roles and Responsibilities)

Roles and responsibilities of the following

• The Head of IT Service Management owns this document and is responsible for the approval of this document and all related feedback should be addressed to them.
• The IT Change Manager is accountable for the quality of the process and for procedural audit
• The Executive Team is accountable to the Trust Board for ensuring Trust-wide compliance with policy.
• Directorate managers and heads of service are responsible to the Executive Team for ensuring policy implementation.
• Managers are responsible for ensuring policy implementation and compliance in their area(s).
• Staff are responsible for complying with policy.

5 Definitions

<table>
<thead>
<tr>
<th>Change</th>
<th>The addition, modification or removal (deletion) of anything that could have an effect on NUTH IT services.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Request for change (RFC)</td>
<td>A request for change is a formal proposal for a change to be made. Can be raised by a user, staff or 3rd party. A RFC will be logged as a change within the Service Management toolset.</td>
</tr>
<tr>
<td>Change schedule (CS)</td>
<td>A document that lists all authorised changes and their planned implementation dates, as well as the estimated dates of longer-term changes. A change schedule is sometimes called a forward schedule of change, even though it also contains information about changes that have already been implemented in the past.</td>
</tr>
<tr>
<td>Critical Success Factors (CSF)</td>
<td>A statement of what is to be achieved in order to align the process with the organisational objectives</td>
</tr>
<tr>
<td>Key Performance Indicators (KPI)</td>
<td>A breakdown of how we aim to achieve each CSF</td>
</tr>
</tbody>
</table>
6 Change Management

6.1 Change Management Policy

- Consultation with key stakeholders shall take place before a change is submitted to Change Management.
- All changes or service requests shall be recorded (as soon as possible) and submitted for approval using the Service Management Tool, ServiceNow or via the Service Desk.
- All change shall meet an agreed business need or objective.
- All change shall be submitted with any supporting documentation necessary to fully assess the change (including end user and service support documentation).
- All Normal changes will be logged at least ten working days prior to the planned start date.
- All change shall have a clearly defined and documented scope.
- All change shall be classified and prioritised in line with business need.
- All change shall be assessed, approved, implemented and reviewed in a controlled manner.
- All change shall adhere to agreed acceptance criteria before implementation.
- All change shall be assessed for risk, impact and business benefit. This includes an assessment of the readiness of the business to accept a change (based on the implementation, test, remediation, training and communication plan).
- All change shall be tested in advance of deployment, in accordance with the agreed criteria.
- All change shall have an implementation (deployment) and remediation plan (in proportion to the scale of the change).
- All change shall consider how change shall be reversed or remedied if it is unsuccessful.
- Approved changes shall be checked and shall be implemented in a controlled manner.
- All change shall be reviewed for success (including success against business objectives and benefits).
- The authorisation and implementation of emergency changes and out of hours changes shall be controlled.
- All change shall be recorded in advance of deployment. Only in exceptional circumstances, where the NUTH Hospital would be at risk, can emergency changes be made, and these must be fully recorded retrospectively.
- Scheduled implementation dates shall be used for change and release scheduling and published in a Change Schedule (CS).
- Non-adherence to the change policy and process shall result in formal investigation which may result in disciplinary action.
- Change records shall be analysed regularly to detect:
  - Unauthorised changes
  - Increasing levels of changes
  - Frequently recurring types of changes.
• Emerging trends
• Conclusions drawn from trend analysis shall be recorded and reported
• Any improvement actions identified shall be integrated into a plan for improving the service
• All changes shall have clearly defined critical success factors (CSF), key performance indicator (KPI)’s and measurable metrics to monitor and management the process for improvements

6.2 Change Types and Approval

<table>
<thead>
<tr>
<th>Change Type</th>
<th>Change Categorisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Change</td>
<td>• Emergency change (within core business hours)</td>
</tr>
<tr>
<td></td>
<td>• Out of hours emergency change (17:00 Friday until 08:30 Monday)</td>
</tr>
<tr>
<td>Normal Change</td>
<td>• Major Change (Project)</td>
</tr>
<tr>
<td></td>
<td>• Significant Change</td>
</tr>
<tr>
<td></td>
<td>• Minor Change</td>
</tr>
<tr>
<td>Standard Change</td>
<td>• Standard Change</td>
</tr>
<tr>
<td></td>
<td>• Service Request</td>
</tr>
</tbody>
</table>

Within the Change Management process, each change requested will follow a pre-defined workflow, reflecting the various stages of assessment, approval and implementation of the change within the NUTH Trust. This workflow and the change authorisation matrix required to approve the change, will differ for different types and classifications of change.

Change type shall depend on the nature of the change and change categorisation associated on the associated impact and risk.

6.2.1 Emergency Changes

Category – Emergency Change
Definition - Change that must be implemented urgently as it is associated with a major interruption, outage or degradation to a live NUTH IT service.
Approval – ECAB

Category – Out of hours Emergency Change
Definition - Change that must be implemented urgently as it is associated with a major interruption, outage or degradation to a live
service. Out of hours emergency change will operate from 17:00 pm Friday evening until 08:30 am Monday morning

Approval – On Call Senior Manager

6.2.2 Normal Changes

Category – Major/Significant Change
Definition - Change to a service which may have major impact and risk on the business, possibly requires a large amount of resource and funding and may be run as a project. A change to a service which has not yet been built or tested. May generate a number of smaller changes which will be submitted through Change Management Approval – CAB

Category – Minor Change
Definition - Change which has not been built or tested before, low impact and low risk. Not preapproved. Change is small and well understood, no impact on any upstream or downstream services. Approval – Change Manager

6.2.3 Standard Changes

Category – Standard Change
Definition - Low risk and low impact change that is preapproved by change management which has documented predefined procedures (Standard Operating Procedures (SOP)). It is envisaged that the bulk of the work is (BAU) “business as usual” undertaken by IT Teams. Approval – Change Manager

Category – Service Request
Definition - Change which has been approved and can be requested via Service Desk and shall follow predefined procedures, low risk, low impact. Service Desk to manage and approved as per Service Request Process and models. Approval – Preapproval granted to the Service Desk

6.2.4 Normal Change

The following table shows how impact and risk can be used for Normal Change Type.

<table>
<thead>
<tr>
<th>Impact</th>
<th>Trust Wide</th>
<th>Significant</th>
<th>Partial</th>
<th>Individual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk</td>
<td>Very high</td>
<td>High</td>
<td>Medium</td>
<td>Low</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Impact</th>
<th>Trust Wide</th>
<th>Significant</th>
<th>Partial</th>
<th>Individual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk</td>
<td>Major</td>
<td>Significant/Major</td>
<td>Significant</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Significant/Major</td>
<td>Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>Partial</td>
<td>Significant</td>
<td>Significant</td>
<td>Minor</td>
<td>Minor</td>
</tr>
<tr>
<td>Individual</td>
<td>Minor</td>
<td>Minor</td>
<td>Minor</td>
<td>Minor</td>
</tr>
</tbody>
</table>

Impact:
The impact of the planned change on the business (including services, architecture and people).
Note: that this is not a measure of the impact of failure of change

<table>
<thead>
<tr>
<th>Value</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>The impact of the planned change is hospital wide or involves significant disruption to a business critical user(s), service(s) or event(s)</td>
</tr>
<tr>
<td>Wide</td>
<td>Affecting a large proportion of staff, a full department, multiple buildings or services</td>
</tr>
<tr>
<td>Significant</td>
<td>Partial building, partial system (service) or a group of users is affected</td>
</tr>
<tr>
<td>Partial</td>
<td>Handful of people or one person affected</td>
</tr>
</tbody>
</table>

### 6.2.5 Risk

A risk is an uncertainty of an event or set of events, that should it occur will have an effect on the achievement of the objectives. Risk is measured using a combination of the probability of the perceived threat or opportunity occurring and the magnitude of objectives if it does.

<table>
<thead>
<tr>
<th>Value</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very high</td>
<td>Very high probability that this change will cause unplanned disruption or fail to deliver its objectives within the planned timescales, resources, skill set and budget.</td>
</tr>
<tr>
<td></td>
<td>A significant number of critical services, systems or users would be affected in the event of a failure</td>
</tr>
<tr>
<td>High</td>
<td>High probability that this change will cause unplanned disruption or fail to deliver its objectives within the planned timescales, resources, skill set and budget.</td>
</tr>
<tr>
<td></td>
<td>Multiple services, systems or users would be affected in the event of failure.</td>
</tr>
<tr>
<td>Medium</td>
<td>Medium probability that this change will cause unplanned disruption or fail to deliver its objectives within the planned timescales, resources, skill set and budget.</td>
</tr>
<tr>
<td></td>
<td>Few services, systems or users would be affected in the event of failure.</td>
</tr>
<tr>
<td>Low</td>
<td>Low probability that this change will cause unplanned disruption or fail to deliver its objectives within the planned timescales, resources, skill set and budget.</td>
</tr>
<tr>
<td></td>
<td>No business critical services, systems or users would be affected in the event of failure.</td>
</tr>
</tbody>
</table>

### 6.2.6 Lead Times

All Normal changes under any of the three categories must be submitted with ten working days’ notice prior to the planned start date.
6.2.7 Change Priority

This will be automatically assigned within the Service Management toolset based on the following impact and urgency and will be used to prioritise assessment and approval. The calculation follows the following rules:

<table>
<thead>
<tr>
<th>Change Priority</th>
<th>Urgency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust Wide</td>
<td>Critical</td>
</tr>
<tr>
<td>Significant</td>
<td>High</td>
</tr>
<tr>
<td>Partial</td>
<td>Moderate</td>
</tr>
<tr>
<td>Individual</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td>Low</td>
</tr>
</tbody>
</table>

6.3 Evaluation of Change

All changes must include acceptance test plans and remediation (back out) plans. The request will be evaluated against this documentation. Technical requests will require requirements specification and design specification too. Evaluation will be carried out by the Change Manager and the appropriate teams to assess whether all documentation has been provided and the completed work fulfils the requirements. Moving from one environment to the next will only be possible after the evaluation has proved all requirements have been met.

6.4 Emergency/Change Advisory Board Responsibilities

6.4.1 CAB/ECAB Responsibility

The purpose of the CAB is to:

Review all major and significant changes to ensure that all foreseeable risks have been identified and mitigated appropriately and that all compensatory actions to ensure the success of the change are in place.

Assess impact of the change on the area of business or technical platform that they are responsible for:

- Approve or reject change in policy and provide feedback
- Prioritise change and identify potential conflicts and scheduling issues
- Share information about change
- Review the output of post implementation reviews
- Identify improvements to the Change Management process

NOTE: The CAB is not responsible for determining if the change is appropriate, that decision should have been already been made. The CAB is not responsible for determining if the change is cost effective.
Major Change will be discussed at CAB and although the change itself may be pre-approved by the business, decisions about scheduling and deployment of change shall still be required.

In policy the CAB is an advisory body only, but the model assumes that if all members agree, the CAB is the change authority. If there is disagreement, then the decision will be escalated through Service Management for a decision. If a significant change is raised with no approvers identified then Change Management approval will represent and take the place of CAB approval.

NOTE: this means that it is possible for a change to be deployed without full consensus, but Change Management will ensure concerns are documented and followed up.

If the decision is to reject the change, responsibility for marking amendments and resubmitting the change will be with the change requestor.

ECAB: the Emergency Change Advisory Board (ECAB) is a subset of the CAB members and will provide authorisation for an emergency change where required. An ECAB will be made up of the appropriate technical team leaders, a representative of the Business (PSC), the Change Manager and the Head of Service Management or a deputy.

6.4.2 CAB Membership
The CAB should include an appropriate representative from all services/teams that could be directly involved or impacted by any significant IT change. The team responsible for implementing the change will present the change.

Change should be assessed for risk and impact from a business and technical viewpoint. Membership may include representatives from Service Management, technical teams, operational teams, business (non-IT) and Service Desk.

Initially a single CAB will be defined with key representatives from all teams nominating a person to fill this role. The nominated person must have authority to make decisions about the change. Over time additional CABs may be put into place.

6.4.3 CAB Format
The CAB will meet at regular intervals and invitations for each session will be based on the changes that need to be discussed. Appropriate CAB approvers shall be identified during the assessment phase of the change lifecycle. Not all CAB members will be expected to attend every meeting.
Appropriate documentation will be sent out in advance, to allow CAB members time to evaluate changes and prepare for meetings. During each meeting, changes will be discussed in decreasing priority order.

Approval or rejection may be given for some changes electronically, provided appropriate assessment of risk and impact has been carried out and confirmation of the outcome of this assessment (including that there is no impact or risk) has been communicated to Change Management.

### 6.5 Roles and Responsibilities

The roles and responsibilities within the CM process are.

<table>
<thead>
<tr>
<th>Roles</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change Requestor</td>
<td>Anyone who wants to raise a change</td>
</tr>
<tr>
<td>Change Owner/Project Manager</td>
<td>Person who is accountable for the successful delivery and communication of the change</td>
</tr>
<tr>
<td>Change Implementer/Change Builder</td>
<td>Person who is responsible for creating, building, testing and deploying the change</td>
</tr>
<tr>
<td>Change Management Process Owner</td>
<td>Person accountable for governance to ensure adherence to the Change Management policy and process</td>
</tr>
<tr>
<td>Change Management Process Manager</td>
<td>Responsible for managing the change process, ensuring all necessary process steps are completed and improvements are raised when necessary</td>
</tr>
<tr>
<td>Change Approver/Change Manager</td>
<td>The person/group who has accountability for approving change</td>
</tr>
<tr>
<td>CAB (Change Advisory Board)</td>
<td>The group/body who exist to support the authorisation of change and to assist Change Management in the assessment, prioritisation and scheduling of change</td>
</tr>
<tr>
<td>ECAB (Emergency Change Advisory Board)</td>
<td>The group/body who exist to support the authorisation or rejection of change and to assist Change Management in the assessment, prioritisation and scheduling of an emergency change</td>
</tr>
<tr>
<td>On Call Duty Manager</td>
<td>The group/body who exist to support the authorisation or rejection of change and to assist Change Management in the assessment, prioritisation and scheduling of an out of hours emergency change</td>
</tr>
</tbody>
</table>

### 6.6 Reporting Metrics

Critical Success Factors (CSF) with linked Key Performance Indicators (KPI)
All changes to be logged and approved in line with business needs
- % reduction in backlog of changes
- % increase in the number of changes implemented to services which met the customer’s agreed requirements
- % reduction in number of changes where remediation plan is invoked

Repeatability and adopted change process
- % decrease in fewer rejected RFCs
- % increase of Change requests (business driven need) implemented on time
- % increase in Post Implementation Reviews

Show efficiency and effectiveness in the change management process
- % increase in the accuracy of Change estimated times
- % efficiency improvement based on number of RFCs processed

Service management process interfacing
- % increase of problems linked to change
- % decrease in incorrectly assigned change type

Quick and accurate Changes
- % reduction of urgent Changes deferred requiring further information

Protect service
- % reduction in Changes backed out

6.6.1 Metrics
Changes logged in the month by type
Changes logged in the last 12 months by type
Changes logged in the month by state
Changes logged in the last 12 months by state
Total number of changes logged in the last 12 months by assignment group
Total number of changes logged in the last month by assignment group
Total number of changes implemented on time during the last 12 months
Total number of changes closed on time during the last 12 months
Outstanding change requests
Changes closed as unsuccessful
Total number of deferred changes
Total number of changes linked to problem records

7 Training

There are no training requirements for staff to follow this policy, however Service Management are able to provide awareness sessions for teams or individuals on how to follow the Change Management process. These sessions can be arranged by contacting Service Desk on 21000 or itservicedesk@nuth.nhs.uk.
8  Equality and diversity

The Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds. This document has been appropriately assessed.

9  Monitoring compliance

<table>
<thead>
<tr>
<th>Standard / process / issue</th>
<th>Monitoring and audit</th>
<th>Method</th>
<th>By</th>
<th>Committee</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual review of the percentage of change requests that do not adhere to the policy</td>
<td>The document will be audited against the change requests logged in the ITSM. These are all recorded with the type of change, the actual lead times and why they have been approved or rejected. This will demonstrate how many RFC’s are logged in line with the policy</td>
<td></td>
<td>Change Manager</td>
<td></td>
<td>Annually</td>
</tr>
</tbody>
</table>

10  Consultation and review

This Change Process is in line with the ITIL framework that the Trust IT Department follow.

The Change Manager produced this policy which was reviewed and agreed by the Head of Service Management.

11  Implementation (including raising awareness)

A summary of the key changes will be notified to IT team managers following implementation. Further advice and guidance will be available from the Service Management Office.

12  Associated documentation

- Change Evaluation - SOP
- Management and Reporting of Accidents and Incidents Policy
- Logging a Change – SOP
- Problem Management Policy and Process
- Service Asset and Configuration Policy and Process
Appendix 7

Standard Change: Service Request

<table>
<thead>
<tr>
<th>Change requestor</th>
<th>Change Manager</th>
<th>Change Implementor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raise the Service Request/Change in ServiceNow</td>
<td>Does change meet acceptance criteria?</td>
<td>Close Change and update Requestor</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>Close Change and update Requestor</td>
<td></td>
</tr>
</tbody>
</table>

Build, deploy and test change in accordance with SOP → Update Service Request/Change with SOP reference → Update CMS and Service Desk
PART 1

1. **Assessment Date:** 27/05/15

2. **Name of policy / strategy / service:**
   IT Change Management Policy

3. **Name and designation of Author:**
   Clare Schaeffer IT Change Manager

4. **Names & designations of those involved in the impact analysis screening process:**

5. **Is this a:**
   - Policy [ ]
   - Strategy [ ]
   - Service [X]

   **Is this:**
   - New [ ]
   - Revised [X]

   **Who is affected**
   - Employees [X]
   - Service Users [X]
   - Wider Community [ ]

6. **What are the main aims, objectives of the policy, strategy, or service and the intended outcomes?** (These can be cut and pasted from your policy)

   The purpose and objective of the Change Management process is to control the lifecycle of all changes, enabling beneficial changes to be made with minimum disruption to NUTH Services.

   The objectives of Change Management are to:
   - Protect the live IT environment from disruption associated with unplanned or failed changes
   - Respond to changing business requirements while maximising value and reducing incidents, disruption and re-work
   - Ensure that changes to the IT resources are documented in a central system and in a consistent way
   - Respond to the customer, business and IT requests for change that will align services with business needs
   - Ensure change is assessed and approved by the appropriate change authority
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- Integrate into other Service Management processes to allow authorised changes to be tracked, unauthorised changes to be identified and the true impact of the change understood
- Ensure that all changes to configuration items are recorded in the configuration management system
- Optimise overall NUTH hospital risk

7. Does this policy, strategy, or service have any equality implications?  
   Yes [X]  No

If No, state reasons and the information used to make this decision, please refer to paragraph 2.3 of the Equality Analysis Guidance before providing reasons:
This relates to changes being made on the live IT environment. Equality implications have been considered and incorporated into the process documents.

8. Summary of evidence related to protected characteristics

<table>
<thead>
<tr>
<th>Protected Characteristic</th>
<th>Evidence, i.e. What evidence do you have that the Trust is meeting the needs of people in various protected Groups</th>
<th>Does evidence/engagement highlight areas of direct or indirect discrimination? If yes describe steps to be taken to address (by whom, completion date and review date)</th>
<th>Does the evidence highlight any areas to advance opportunities or foster good relations. If yes what steps will be taken? (by whom, completion date and review date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race / Ethnic origin (including gypsies and travellers)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex (male/ female)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Religion and Belief</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual orientation including lesbian, gay and bisexual people</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability – learning difficulties, physical disability, sensory impairment and mental health. Consider the needs of disabled people to access information and to undertake their roles by utilising various</td>
<td>Trust IT systems support disabled people to access information and to undertake their roles by utilising various</td>
<td>Changes to IT systems need to ensure they are compatible with meeting the needs of disabled people. The Change process highlights the need to undertake assessment of suitability for those</td>
<td>Changes to IT systems need to ensure they are compatible with meeting the needs of disabled people. The Change process highlights the need to undertake assessment of suitability for those</td>
</tr>
</tbody>
</table>
9. Are there any gaps in the evidence outlined above? If ‘yes’ how will these be rectified?

No

10. Engagement has taken place with people who have protected characteristics and will continue through the Equality Delivery System and the Equality Diversity and Human Rights Group. Please note you may require further engagement in respect of any significant changes to policies, new developments and or changes to service delivery. In such circumstances please contact the Equality and Diversity Lead or the Involvement and Equalities Officer.

Do you require further engagement? Yes [ ] No [X]

11. Could the policy, strategy or service have a negative impact on human rights? (E.g. the right to respect for private and family life, the right to a fair hearing and the right to education?)

No

PART 2

Name: Clare Schaeffer

Date of completion: 03/06/15

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified, please refer to the Policy Author identified above, together with any suggestions for action required to avoid/reduce the impact.)