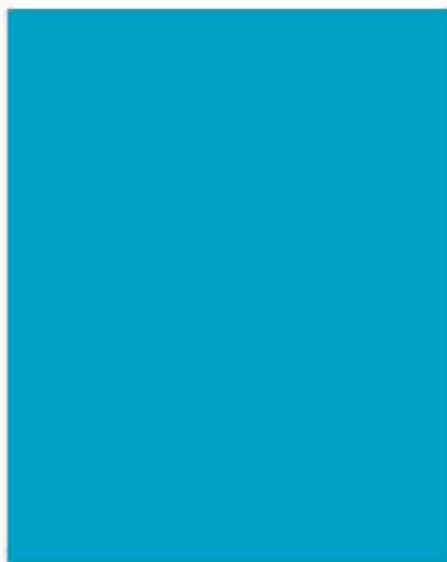
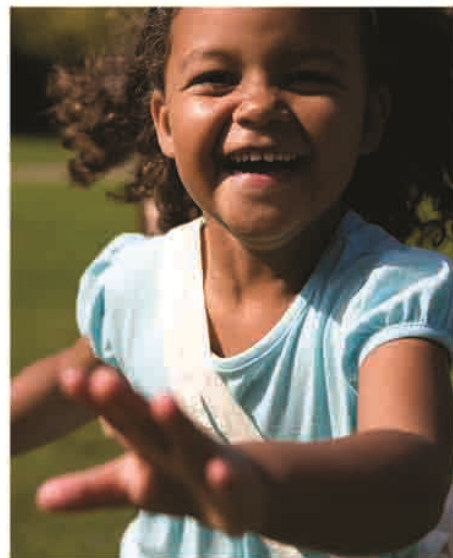


Development & Approval of Policy
& Procedure Documents: Policy &
Corporate Procedures



Development & Approval of Policy & Procedure Documents

Policy & Corporate Procedures

Issue Date: 5 April 2013

Document Number: POL_1001

Prepared by: Head of Assurance & Procurement

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 2 of 23

Information Reader Box

Directorate	Purpose
Medical	Tools
Nursing	Guidance
Patients & Information	Resources
Finance	Consultations
Operations	
Commissioning Development	
Policy	
Human Resources	

Publications Gateway Reference	xx
Document Purpose	Policy and High Level Procedures
Document Name	Development & Approval of Policy & Procedure Documents: Policy & Corporate Procedures
Publication Date	5 April 2013
Target Audience	All NHS Commissioning Board Officers
Additional Circulation List	n/a
Description	Policy and high level procedures for the development and approval of policy and procedures documents
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Superseded Document	n/a
Action Required	For Board Approval
Timing/Deadlines	12 April 2013
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Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 3 of 23

Document Status

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DRAFT

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 4 of 23

Contents

Information Reader Box	3
Document Status.....	4
Contents.....	5
1 Introduction.....	6
2 Policy Statement.....	7
3 Scope	9
3.1 Officers Within the Scope of this Document	9
3.2 Officers Not Covered by this Document	9
4 Definitions.....	10
5 Roles & Responsibilities	12
5.1 National Director: Policy	12
5.2 Corporate Governance Senior Manager.....	12
5.3 Responsible Officer	12
5.4 Approving Committee/Meeting	13
5.5 Officers.....	13
6 Corporate Level Procedures.....	14
6.1 New Document Development.....	14
6.2 Document Review	14
6.3 Gateway Clearance.....	15
6.4 Committee/meeting Approval	15
7 Distribution & Implementation	16
7.1 Distribution Plan	16
7.2 Training Plan	16
8 Monitoring.....	17
8.1 Compliance	17
8.2 Equality Impact Assessment	17
9 Associated Documentation	18
10 References	19
Appendix 1 Version Control Tracker.....	20
Appendix 2 Sponsor Designation for Controlled Documents.....	21

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 5 of 23

1 Introduction

- 1.1 Organisations need formal written documents to communicate standard organisational ways of working. These help clarify strategic and operational requirements and bring consistency to day to day practice. In addition they can improve the quality of work and increase the successful achievement of objectives.
- 1.2 A common format and approval structure for such documents helps to reinforce corporate identity and, more importantly, helps to ensure that policies and procedures in use are current and reflect an organisational approach.
- 1.3 It also helps to avoid confusion and to assist Officers in identifying key issues within such a document.

DRAFT

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 6 of 23

2 Policy Statement

- 2.1 It is the policy of the NHS Commissioning Board that:
- 2.1.1 All policy documents, Corporate Level Procedure documents and Committee terms of reference will use a standard format and content.
- 2.1.2 All corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms will have a National Director or business unit Managing Director as sponsor.
- 2.1.3 All corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms will have a designated responsible Officer.
- 2.1.4 All corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms will be allocated a unique number in the format aaa_9999, where:
- 2.1.4.1 aaa denotes the sponsor as detailed at Appendix 2; and,
- 2.1.4.2 9999 is a sequential number within the sponsoring area commencing:
- 2.1.4.2.1 00 for corporate governance framework documents;
- 2.1.4.2.2 01 for Board Committee terms of reference;
- 2.1.4.2.3 02 for Board Sub-committee terms of reference;
- 2.1.4.2.4 05, 06, 07, 08, 09 for other committees and groups;
- 2.1.4.2.5 1 for policy documents;
- 2.1.4.2.6 2, 3, and 4 for procedure documents;
- 2.1.4.2.7 5,6, 7 and 8 for forms; and,
- 2.1.4.2.8 9 for all items relating Funds Held on Trust and Charitable Funds
- 2.1.5 All corporate governance framework documents, policy documents and Committee terms of reference will be subject to gateway review and clearance.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 7 of 23

- 2.1.6 All corporate governance framework documents will be subject to approval by the NHS CB Board.
- 2.1.7 All policy documents, Corporate Level Procedure documents, Committee terms of reference and forms will be subject to approval as follows, unless approval at a Board Committee or Sub-committee is more appropriate:
- 2.1.7.1 For individual Commissioning Support Units, by a meeting of their senior management team;
- 2.1.7.2 For the NHS Leadership Academy, by a meeting of its senior management team;
- 2.1.7.3 For NHS Improving Quality, by a meeting of its senior management team;
- 2.1.7.4 For the NHS Sustainable Development Unit, by a meeting of its senior management team;
- 2.1.7.5 For all other areas, by a meeting of the NHS CB Executive Team.
- 2.1.8 A register of all corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms produced in accordance with this Policy will be maintained.
- 2.1.9 All corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms will be subject to review, at not more than 24 monthly intervals.
- 2.1.10 All corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms will be made available to all Officers via the internet and intranet.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 8 of 23

3 Scope

3.1 Officers Within the Scope of this Document

3.1.1 Officers of the following NHS CB areas are within the scope of this document:

3.1.1.1 NHS England:

- National Teams;
- Regional Teams; and,
- Area Teams.

3.1.1.2 All Commissioning Support Units;

3.1.1.3 NHS Leadership Academy;

3.1.1.4 NHS Improving Quality;

3.1.1.5 NHS Sustainable Development Unit;

3.1.1.6 Strategic Clinical Networks; and,

3.1.1.7 Clinical Senates.

3.2 Officers Not Covered by this Document

3.2.1 There are no Officers of the NHS CB not covered by this document.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 9 of 23

4 Definitions

4.1 Unless a contrary intention is evident or the context requires otherwise, words or expressions contained in this document shall have the same meaning as set out in the National Health Service Act 2006 and the Health & Social Care Act 2012 or in any secondary legislation made under the National Health Service Act 2006 and the Health & Social Care Act 2012 and the following defined terms shall have the specific meanings given to them below:

Board	means the Chair, Executive Members and Non-executive Members of the NHS CB collectively as a body.
Chair	means the person appointed by the Secretary of State for Health under paragraph 2(1) of Schedule A1 of the NHS Act 2006, to lead the Board and to ensure that it successfully discharges its overall responsibility for the NHS CB as a whole. The expression “the Chair” shall be deemed to include the Vice-chair if the Chair is absent from the meeting or is otherwise unavailable.
Committee	means a committee appointed by the Board, which reports to the Board.
Corporate Level Procedure	means a procedure that has application wider than one team. Procedures that apply only within one team are local procedures.
Employee	means a person paid via the payroll of the NHS CB, or for whom the NHS CB has responsibility for making payroll arrangements, but excluding Non-executive Members.
Executive Member	means a Member of the Board who is appointed under paragraph 3 of Schedule A1 of the NHS Act 2006.
Funds Held on Trust	means those funds which the Board holds on the date of incorporation, receives on distribution by statutory instrument or chooses subsequently to accept under powers derived under section 13Y and paragraph 11, Schedule A1 of the NHS Act 2006. Such funds may or may not be charitable.
Member	means a Non-Executive Member or Executive Member of the Board as the context permits. Member in relation to the Board does not include its Chair.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 10 of 23

NHS CB	means NHS Commissioning Board.
Non-executive Member	means a Member of the Board who is appointed under paragraph 2(1)(a) and 2(1)(b) of Schedule A1 of the NHS Act 2006.
Officer	means an Employee of the NHS CB or any other person holding a paid appointment or office with the NHS CB.
Secretary	means a person appointed to provide advice on corporate governance issues to the Board and the Chair, and to monitor the Board's compliance with the law, SOs and SFIs, and guidance issued by the Secretary of State for Health.
Secretary of State for Health	means the UK Cabinet Minister responsible for the Department of Health.
SFI	means Standing Financial Instruction.
SO	means Standing Order.
Vice-chair	means the Non-executive Member appointed by the Board to take on the Chair's duties if the Chair is absent for any reason.

DRAFT

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 11 of 23

5 Roles & Responsibilities

5.1 National Director: Policy

5.1.1 The National Director: Policy has overall responsibility for maintaining the corporate governance framework, including this document and proforma documents.

5.2 Corporate Governance Senior Manager

5.2.1 The Corporate Governance Senior Manager has responsibility for:

5.2.1.1 Publicising the existence of the corporate governance framework and all associated controlled documents and proformas;

5.2.1.2 Ensuring all corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms are published on the internet and intranet;

5.2.1.3 Maintaining a register of all corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms;

5.2.1.4 Ensuring all corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms are reviewed no later than their agreed review date; and,

5.2.1.5 Ensuring new or reviewed corporate governance framework documents, policy documents, Corporate Level Procedure documents and Committee terms of reference have been prepared, reviewed and approved in accordance with this Policy and the relevant proforma document.

5.3 Responsible Officer

5.3.1 The designated responsible Officer will be responsible for:

5.3.1.1 Checking with the Corporate Governance Senior Manager before commencing work on a new corporate governance framework document, policy document, Corporate Level Procedure document, set of Committee terms of reference or

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 12 of 23

form to ensure an equivalent doesn't already exist, or that duplication with part of an existing document isn't going to occur;

5.3.1.2 Ensure existing documents are reviewed in line with their set review date;

5.3.1.3 Ensure new and revised documents comply with this policy and the relevant proforma;

5.3.1.4 Ensure new and revised documents are gateway cleared if required;

5.3.1.5 Ensure new and revised documents are approved by the appropriate approving Committee/meeting;

5.3.1.6 Ensure approved new and revised documents are uploaded to the internet and intranet, and advertised to all Officers; and,

5.3.1.7 Liaise with the Corporate Governance Senior Manager to ensure the register of corporate governance framework documents, policy documents, Corporate Level Procedure documents, Committee terms of reference and forms is updated.

5.4 **Approving Committee/Meeting**

5.4.1 The approving Committee/meeting has responsibility for quality assuring each document it considers and approving it on behalf of the NHS CB Board.

5.5 **Officers**

5.5.1 All Officers have a responsibility to familiarise themselves with all corporate governance framework documents, all policy documents, relevant Corporate Level Procedure documents, relevant Committee terms of reference and relevant forms and adhering to/using them.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 13 of 23

6 Corporate Level Procedures

6.1 New Document Development

6.1.1 Where a need for a new document is identified:

6.1.1.1 An appropriate sponsor should be identified; and,

6.1.1.2 A responsible Officer should be designated.

6.1.2 The responsible Officer will:

6.1.2.1 Ensure the identified need is not already covered/part covered by an existing document;

6.1.2.2 Draft a document, using an appropriate template, in consultation with relevant Officers;

6.1.2.3 Distribute the draft document for comment and feedback;

6.1.2.4 Ensure the sign off section is fully completed, based on the final draft;

6.1.2.5 Agree the appropriate Committee/meeting to approve the document;

6.1.2.6 Ensure gateway clearance is obtained;

6.1.2.7 Present the draft document to the approving Committee/meeting;

6.1.2.8 Ensure the approved and gateway cleared document is made available via the internet and intranet and advertised to all Officers.

6.2 Document Review

6.2.1 Prior to the designated review date the responsible Officer should:

6.2.1.1 Distribute the document seeking comment and feedback and suggestions for amendments;

6.2.1.2 Distribute any redrafted document for comment and feedback;

6.2.1.3 Ensure the sign off section is fully completed, based on the final draft;

6.2.1.4 Agree the appropriate Committee/meeting to review and approve the document;

6.2.1.5 Ensure gateway clearance is obtained;

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 14 of 23

- 6.2.1.6 Present the reviewed draft document to the approving Committee/meeting;
- 6.2.1.7 Ensure the approved and gateway cleared document is made available via the internet and intranet and advertised to all Officers.
- 6.3 **Gateway Clearance**
 - 6.3.1 The gateway clearance checklist should be completed by the designated responsible Officer before presenting to Committee/meeting for approval.
 - 6.3.2 Once approved the completed form should be submitted to the gateway team, together with the approved draft document, for the issue of a gateway reference number.
- 6.4 **Committee/meeting Approval**
 - 6.4.1 The responsible Officer will present the new/revised document highlighting:
 - 6.4.1.1 The reasons why a new document is required; or,
 - 6.4.1.2 The changes since the previous approved version.
 - 6.4.2 The Committee will:
 - 6.4.2.1 Consider and confirm (or not) the need for a new document;
 - 6.4.2.2 Ensure the document is fit for purpose and meets the identified need;
 - 6.4.2.3 Complies with this policy and the appropriate template;
 - 6.4.2.4 Has completed all the steps necessary to obtain a gateway reference;
 - 6.4.2.5 Approve, approve subject to specified corrections, request resubmission after correction for reconsideration or reject (giving reasons if not) the document presented.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 15 of 23

7 Distribution & Implementation

7.1 Distribution Plan

- 7.1.1 This document will be made available to all Officers via the NHS CB internet site.
- 7.1.2 A global notice will be sent to all Officers notifying them of the release of this document.
- 7.1.3 A link to this document will be provided from the Policy Directorate intranet site.

7.2 Training Plan

- 7.2.1 A training needs analysis will be undertaken with Officers affected by this document.
- 7.2.2 Based on the findings of that analysis appropriate training will be provided to Officers as necessary.
- 7.2.3 Guidance will be provided on the Policy Directorate intranet site.

DRAFT

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 16 of 23

8 Monitoring

8.1 Compliance

8.1.1 Compliance with the policies and procedures laid down in this document will be monitored via a review of policy and procedure documents requesting gateway approval.

8.1.2 The National Director: Policy, in conjunction with the Board Secretary, is responsible for the monitoring, revision and updating of this document.

8.2 Equality Impact Assessment

8.2.1 This document forms part of NHS CB's commitment to create a positive culture of respect for all staff and service users. The intention is to identify, remove or minimise discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice and value the diversity of all individuals and communities.

8.2.2 As part of its development this document and its impact on equality has been analysed and no detriment identified.

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 17 of 23

9 Associated Documentation

- 9.1 Template Policy & Corporate Procedures document
- 9.2 Template Committee/Sub-committee: Terms of Reference

DRAFT

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 18 of 23

10 **References**

10.1 None.

DRAFT

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 19 of 23

Appendix 1 Version Control Tracker

Version Number	Date	Author Title	Status	Comment/Reason for Issue/Approving Body
V00.01	12-03-2013	Head of Assurance & Procurement	Draft	First draft for comment
V00.02	05-04-2013	Head of Assurance & Procurement	Draft	Draft for comment

DRAFT

Appendix 2 Sponsor Designation for Controlled Documents

Reference	Sponsor
MED	National Medical Director
NUR	Chief Nursing Officer
PAT	National Director for Patients & Information
FIN	Chief Financial Officer
OPS	Chief Operating Officer
COM	National Director: Commissioning Development
POL	National Director: Policy
HRD	National Director: Human Resources
LAC	MD Leadership Academy
NIB	MD National Improvement Body
SDU	MD Sustainable Development Unit
C01	MD Arden CSU
C02	MD Best West CSU
C03	MD Birmingham, Black Country & Solihull CSU
C04	MD Central Southern CSU
C05	MD Cheshire & Mersey CSU
C06	MD Essex CSU
C07	MD Greater East Midlands CSU
C08	MD Greater Manchester CSU
C09	MD Hertfordshire Integrated CSU
C10	MD Kent & Medway CSU
C11	MD Lancashire CSU
C12	MD Norfolk & Waveney CSU
C13	ND North & East London CSU
C14	MD North of England CSU

Document Number: POL_1001	Issue Date: 05-04-2013	Version Number: 00.02
Status: Draft	Next Review Date: March 2013	Page 21 of 23

Reference	Sponsor
C15	MD North West London CSU
C16	MD North Yorkshire & Humber CSU
C17	MD South CSU
C18	MD South London CSU
C19	MD South Yorkshire & Bassetlaw CSU
C20	MD Staffordshire CSU
C21	MD Surrey & Sussex CSU
C22	MD West Yorkshire CSU

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