

Our Ref: NG/RM/26094
Date: 23rd April 2026

Nicola Griffiths
Deputy Director of Governance
North Staffordshire Combined Healthcare NHS Trust
Lawton House
Bellringer Road
Trentham
ST4 8HH

Reception: 0300 123 1535

Dear

Freedom of Information Act Request

I am writing in response to your e-mail of the 25th March 2026. Your request has been processed using the Trust's procedures for the disclosure of information under the Freedom of Information Act (2000).

Requested information:

I would like to request the following information:

1. Your organisation's internal business case template (blank), and any current internal guides or best practice documents for staff on how to prepare or write a business case. Please include criteria, requirements, or assessment checklists if available.

Please see Appendices 1 and 2 attached.

2. Any internal guides or standing instructions for your budgetary committee(s) on how business cases are to be assessed or reviewed, including any scoring methodologies, criteria, or objective assessment processes.

Please see Appendix 3 attached.

The Trust Standing Financial Instructions policy can be found here
<https://www.combined.nhs.uk/about/publications/trust-publications/>

3. Your current procurement strategy template (blank), or any process documentation relating to the waiver process that may run alongside the business case.

Please see Appendix 4 attached.

4. Your organisation's Standing Financial Instructions (SFIs), or equivalent document governing procurement thresholds and authorisation limits.

The Trust Standing Financial Instructions policy can be found here
<https://www.combined.nhs.uk/about/publications/trust-publications/>

5. Your Data Protection Impact Assessment (DPIA) template (blank), and any supporting internal guides for staff on how to complete a DPIA.

Please see Appendices 5 and 6 attached.

6. A single example of a business case for a project or solution involving digital technology or a digital supplier, approved by your organisation in the last 18 months. Please redact or remove any information that is commercially sensitive or personal data as required by law. If your organisation has not approved any such business case in this period, please provide an example from the last 18 months for a project or solution involving an external supplier (not involving digital technology). If neither are available, please confirm this.

Please see Appendix 7 attached.

If any of the above information is not held, or only held for certain departments or areas, please provide what is available and indicate the applicable directorate/area.

If you are dissatisfied with the handling of your request, you have the right to ask for an internal review of the management of your request. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Dr Buki Adeyemo, Chief Executive, North Staffordshire Combined Healthcare Trust, Trust Headquarters, Lawton House, Bellringer Road, Trentham, ST4 8HH. If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely



Nicola Griffiths
Deputy Director of Governance

BUSINESS CASE TEMPLATE

Approval for Revenue & Capital Cases

Scheme Title	
Directorate	
Author	
Date	
Links to Trust Strategy	

Please see guidance notes contained within each section shown in grey font. These notes should be deleted as you begin to populate your business case.

Please note that the level and complexity of information provided should reflect the value of your business case. If sufficient information is not provided this may result in a delay in submission to the Executive Group or Capital Investment Group (CIG) and/or further information being requested upon submission.

Governance information – Following approval by the Executive Group or CIG - business cases with a value of over £100k require submission to Senior Leadership Team (SLT). Those with a value of over £250k will then require submission to Finance & Resource (F&R) Committee. Those with a value over £500k require submission to Board following submission to F&R.

1.Executive Summary

Please provide a short summary of the most important elements of your business case. This should:

- State the purpose of the report.
- Highlight major points.
- Describe any results, conclusions or recommendations.

2.Summary of Proposal

Suggested sub headings:

2.1 Introduction.

2.2. Background

National and local strategy and drivers, current position of the Trust, commissioner requirements.

2.3 Rationale for Business Case

Explain why the business case has been developed/case for change/investment, concerns with existing service or situation, evidence base.

2.4 Options appraisal

Please ensure you provide details of all options that have been considered. If only one option please explain why.

Three suggested main themes are –

- Desirability - the degree to which each option meets the strategic objectives and priorities of stakeholders.
- Viability - the degree to which each option is financially viable and sustainable.

- Feasibility - the degree to which each option can be implemented.

2.5 Measures and monitoring

Consider any baseline information to support the business case. Also state the ongoing metrics and the system for measuring, monitoring and reporting.

3.Recommendation

Please state the preferred option and recommendation you are seeking approval of – what decision is required?

4.Benefits Realisation

Benefits should be SMART and categorised into one or more of the following domains – Quality, Activity, Financial, Other. Please ensure you have a process in place to review and evaluate impact and the achievement of benefits at a set interval following business case implementation. Benefits realisation should be reported to your Directorate and the approving group (e.g. Senior Leadership Team, Finance and Resource Committee, Capital Investment Group) 12 months post approval.

Specific – target a specific area for improvement.

Measurable – quantify or at least suggest an indicator of progress.

Assignable – specify who will do it.

Realistic – state what results can realistically be achieved, given available resources.

Time-related – specify when the result(s) can be achieved.

Benefit Area	Benefit Description	Metrics			Target Achieved
		Measure	Baseline	Target	
Quality	Example – All six clinical pathways implemented.	Number of pathways operational		6 = 100%	
Activity	Example – An increase in the number of physical health checks completed by the Trust during 2024/25.	Number of health checks complete	YTD = 475, 33.9% compliance	60% (840)	
Finance	Example – Recurrent savings from invest to save scheme, resulting in a recurrent CIP in 2025/26.	Actual savings post implementation	Costs pre implementation	CIP of £20k recurrent	
Other					

5.Planned implementation date

Provide details of phases if applicable.

6. Financial Assessment

This section explains financial impact and should be completed by a member of the finance team.
Detailed workings/analysis to be provided as part of appendix.

6.1 Summary

6.2 Capital Cost (if applicable)

6.3 Revenue Costs (if applicable)

6.4 Funding Source

Funding Proposal

Business case lead to provide narrative on how proposed development will be funded
i.e. budget impact etc

6.5 Current Service Line Reporting Position

7. Workforce Impact

Any additional staff required including recruitment plans? Changes to shift or work patterns? If staff displaced or at risk of redundancy please provide details.

8. Activity Impact

Impact on commissioner activity (increase or decrease) and over what period. Impact on targets or ability to achieve them.

9. Procurement Impact

Note whether a competitive process was required? If 3 quotes received and lowest accepted? Which national framework was used? If waiver required and why? Please review Standing Financial Instructions and Scheme of Delegation via Policies on CAT to determine procurement route required to follow:
<https://cat.combined.nhs.uk/policies-procedures-and-resources/>

10. Informatics Impact

Describe any implications to the trust informatics systems or structures e.g. bespoke systems, SSHIS, impact on trust networks, hardware, software or licensing requirements.

11. Estates and Facilities Impact

Please describe changes to estate including any impact on leases.

12. Communications

A detailed communication plan will be required at project mobilisation however please provide details of key stakeholders.

13. Risks and Mitigations

Please capture the risks associated with each option and how they will be mitigated. Is there a link to the Trust risk register? (Consider link to Board Assurance Framework (BAF) for business cases of £500k or above) Will the preferred option within this business case contribute to mitigating an existing risk? If yes please describe.

Note – this is an initial risk assessment and should your business case be approved, any agreed risks should be recorded on Ulysses.

Risk No.	Risk Title	Likelihood (1-5)	Impact (1-5)	Residual Risk Rating	Mitigation	Risk Lead
1						
2						
3						

Risk Matrix

		IMPACT				
		How severe could the outcomes be if the risk event occurred?				
		Negligible/Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
LIKELIHOOD What is the chance of the risk occurring?	Almost Certain - 5	5 Moderate	10 Significant	15 High	20 High	25 High
	Likely - 4	4 Moderate	8 Significant	12 Significant	16 High	20 High
	Possible - 3	3 Low	6 Moderate	9 Significant	12 Significant	15 High
	Unlikely - 2	2 Low	4 Moderate	6 Moderate	8 Significant	10 Significant
	Rare - 1	1 Low	2 Low	3 Low	4 Moderate	5 Moderate

14. CQC Registration Assessment

Is this a CQC regulated activity in line with the statement of purpose? Could this change impact on the Trusts CQC registration requirements?

Please consider if the following impact assessments are required. You must provide a summary of considerations and an explanation if a full impact assessment has not been completed:

15. Quality Impact Assessment (QIA)

Please complete a QIA and save as appendix 1. The QIA template can be accessed via the Trust templates page on CAT [Templates - CAT \(combined.nhs.uk\)](https://cat.combined.nhs.uk)

Provide a summary of the quality impact considerations here (safety, effectiveness and experience). If a QIA is not applicable, please state the reason why.

16.Equality Impact Assessment (EIA) Please complete a EIA via this link https://cat.combined.nhs.uk/people-and-support/diversity-and-inclusion/equality-impact-assessment/ and save as appendix 2. Provide a summary of the EIA outcome here. If a EIA is not applicable, please state the reason why.
17.Data Protection Impact Assessment (DPIA) Please complete a DPIA via this link Information governance guidance - CAT (combined.nhs.uk) and save as appendix 3. Provide a summary of the DPIA outcome here. If a DPIA is not applicable please state the reason why.
18.Sustainability Impact Assessment (SIA) A SIA must be completed and saved as appendix 4. The SIA template can be accessed via the Trust templates page on CAT Templates - CAT (combined.nhs.uk) Provide a summary of the outcome here.
19.Interdependencies Please state if this business case has interdependencies with other business cases, CIP schemes, programmes or projects in the Trust.

Appendix 1 - Quality Impact Assessment

Appendix 2 - Equality Impact Assessment

Appendix 3 – Data Protection Impact Assessment

Appendix 4 – Sustainability Impact Assessment

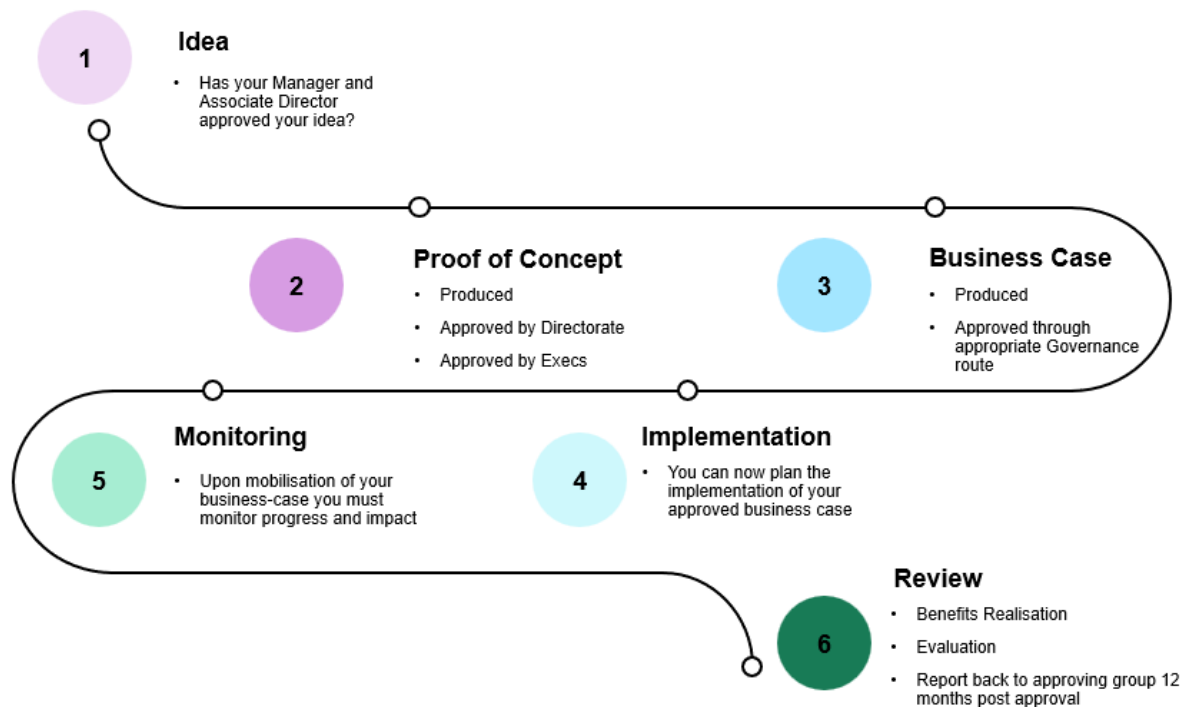
Approvals	
Group (as relevant)	Date
Execs (Proof of Concept)	
Directorate Management Team	



Senior Leadership Team	
Relevant Committee	
Trust Board	
Please consider any internal approvals that are required before submission to SLT	
Workforce	Deputy Chief People Officer
Infection Prevention and Control	Head of Infection Prevention & Control
Estates & Facilities	Associate Director of Estates
Informatics / Digital	Chief Information Officer
Finance	Assistant Chief Finance Officer
Procurement	Deputy Chief Finance Officer

Business Case Development Roadmap

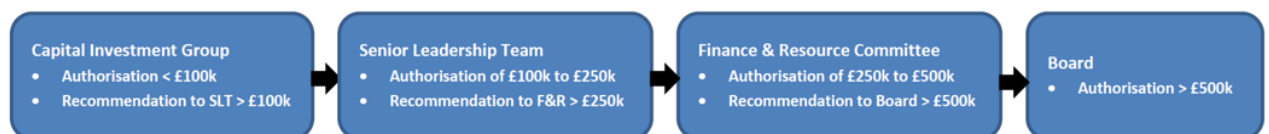
Before producing a Business Case you must complete a Proof of Concept and have this approved – below is an overview of the process.



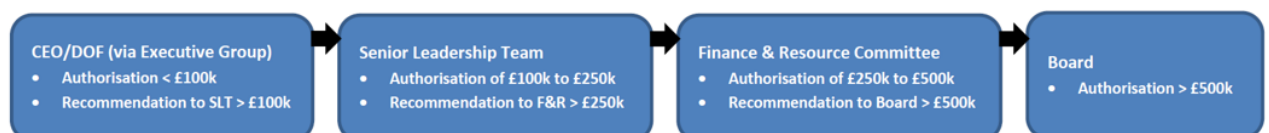
Business Case Governance

The governance route that your business case will take is determined by its financial value and whether it relates to capital and/or revenue.

Capital Business Case / Capital & Revenue Business Case



Revenue Business Case



Business Case Checklist

Please consider each of the following key points before, during and after producing a business case.

Before developing -

Is the directorate supportive of the idea? Has your Manager and Associate Director approved for the Proof of Concept and then Business Case to be developed? This needs to be done before starting.
Have you determined whether your idea is a Quality Improvement initiative, a Project, an Audit or Research and Development? GET STARTED: DEFINING MY PROJECT (sharepoint.com)
Is the most up to date Business Case template being used? See link below for latest template: https://cat.combined.nhs.uk/policies-procedures-and-resources/templates/
Has a Proof of Concept been completed? See link below for latest template: https://cat.combined.nhs.uk/policies-procedures-and-resources/templates/ A Proof of Concept must be produced and approved <u>before</u> a business case is started.
Once approved by the Directorate, the Proof of Concept needs to be submitted and approved at Execs.

During development -

Pay attention to all of the guidance notes in the business case template being clear from the start why the business case is needed.
Ensure you are in contact with other teams who will need to input into the business case (such as digital, estates and workforce)? Finance must be involved in the early stages.
Does the business case involve purchasing of goods or services? Procurement will need to advice on the procurement route and estimated timescales, (this could impact on your timescales and estimated delivery/start date). If a tender is required, this can take weeks/months so will need to be factored into estimated timescales. The generic email address for Procurement is nscht.proc@uhnm.nhs.uk
Be concise however remember that not everyone reading the business case will understand the nuances of your service area/the proposal. Try to ensure the information is accessible to a wide audience.
Have all options been considered and outlined? This should include a do nothing or continue as is option.
Have the benefits been outlined? Benefits may be related to quality, activity or finance etc. Have you got an evaluation plan in place?
Ensure you have considered all Impact Assessments and where required that they have been completed, approved and are attached as an appendix to your business case with a summary provided in the relevant section. If an Impact Assessment is not required, you must provide the reason why.

After completing -

You must ensure that the business case is signed off by all appropriate persons and that it follows the appropriate governance route for approval.
Have you considered sharing your proof of concept or business case with groups for feedback prior to submission, such as the Senior Corporate and Operational Team (SCOT) (recommended however not mandatory).
You must review the benefits realisation element of the business case at a set interval post approval. You will be required to report back into the approving group 12 months post approval.
If your business case is approved but is then no longer viable for implementation you must inform the approving forum.

FINANCE AND RESOURCE COMMITTEE

TERMS OF REFERENCE

Membership	▪ Three Non-Executive Directors ▪ Chief Finance Officer ▪ Chief Operating Officer ▪ Chief Strategy Officer
Quorum	▪ Four members of the Committee membership to include two Non-Executive Directors (one of whom must be the Chair or Vice-Chair and the Chief Finance Officer or designated deputy)
In Attendance	▪ Associate Non-Executive Director ▪ Deputy Chief Finance Officer ▪ Deputy Director of Governance ▪ Assistant Chief Finance Officer (by invite only) ▪ Associate Director of Estates ▪ Associate Director of Performance ▪ Chief Information Officer ▪ Executive PA ▪ Lived Experience Representative
Frequency of Meetings	▪ Monthly
Accountability and Reporting	▪ Accountable to the Trust Board ▪ Written Summary Report to the Trust Board following each meeting ▪ Minutes of meetings available to all Trust Board and Committee members
Date of Approval by Trust Board	5 th February 2026
Review Date	January 2027

FINANCE AND RESOURCE COMMITTEE TERMS OF REFERENCE

1. Constitution

The Finance & Resource Committee, (the Committee) is constituted a standing Committee of the Trust Board. Its Terms of Reference are set out below and will be subject to amendment by the Trust Board as considered appropriate.

The Committee has no executive powers, other than those specifically delegated in the Trusts Scheme of Reservation and Delegation (SoRD) and specified in these terms of reference (ToR).

2. Membership

The Chair and Non-Executive members of the Committee shall be appointed by the Trust Chair and the Chief Officers by the Chief Executive Officer. The Trust Board should satisfy itself that the Non-Executive Directors sitting on the Committee have relevant financial and business expertise within their grouping.

In the absence of the Chair appointed by the Trust Chair, the Vice-Chair will Chair the meeting.

Members of the Committee will be:

- Three Non-Executive Directors
- Chief Finance Officer
- Chief Operating Officer
- Chief Strategy Officer

No business shall be transacted unless four members of the Committee are present (one of whom must be the Chair or Vice-Chair), one Non-Executive Director and the Chief Finance Officer or designated deputy.

Any Lived Experience Representative from the Service User and Carer Council invited by the Committee will be allocated a 'buddy' from the membership of the Committee by the Chair, to offer support before, during and after the Committee meeting, should this be required.

3. Attendance at Meetings

In addition, the following post holders will be in attendance at the meeting:

- Associate Non-Executive Director
- Deputy Chief Finance Officer
- Deputy Director of Governance
- Assistant Chief Finance Officer (invite only)
- Associate Director of Estates
- Associate Director of Performance
- Chief Information Officer
- Executive PA
- Lived Experience Representative

4. Frequency of meetings

The Committee will meet monthly. Members of the committee are expected to attend a minimum of 80% of the meetings held each financial year and not be absent for two consecutive meetings. Where attendance falls below 80% the Chair will discuss the matter with the individual concerned.

5. Authority

The Committee is authorised by the Trust Board to investigate any activity within its terms of reference.

The Committee is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Trust Board to request the Chief Executive Officer or Chief Finance Officer to obtain reasonable outside legal or other independent professional advice, but it has no delegated financial authority.

The Committee is authorised by the Trust Board in accordance with its Standing Orders to establish sub-groups as it deems necessary to enable it to fulfil its Terms of Reference. The Committee may not delegate executive powers and will have oversight of the functioning and output of such groups. The Terms of Reference of such sub-groups will be approved by the Committee and reviewed periodically, and those sub-groups will report directly to the Committee.

6. Responsibilities **Finance**

To monitor the Trust's performance and the achievement of its financial plans (including the Cost Improvement Programme) and ensure that the Trust's financial plan is aligned with the Operational Plan and in line with changing NHS systems and financial performance requirements.

To review and recommend to the Trust Board the annual financial plan / budget, including workforce, and the associated financial budget with targets set in terms of key performance indicators including Cost Improvement.

To recommend to the Trust Board the Long Term Financial Plan included in the Five-year Integrated Business Plan.

To ensure the Trust Board is provided with regular reports on the financial performance of the Trust including forecast performance and associated risks and make recommendations to the Trust Board on remedial actions aimed at ensuring that the Trust's financial budget and plans are achieved.

To receive and consider the annual medium term capital plan prior to submission for approval to the Trust Board and to receive progress reports on the management of the capital programme from the Capital Investment Group (CIG) as reported within the monthly finance reporting suite along with copies of minutes of the CIG meetings.

To keep under review issues such as reference costs and to benchmark activity and performance and to act on any learning or remedial action required.

To monitor the development and implementation of Service Line Management and Reporting and the move towards patient level costing.

To monitor the financial performance of the Integrated Care System, taking into account the Trust's role and contribution. This includes reviewing system financial risks and monitoring CIP achievement and the overall system financial forecast.

Performance

To review the integrated performance of the Trust.

To ensure that the Trust remains compliant with regulatory and mandatory requirements, NHSE Long Term Plan objectives, NHSE Oversight Framework and ICB contractual requirements. The Committee will monitor the KPIs that are under its remit along with Trust performance.

To receive a summary of Performance Improvement Plans (PIPs) that provide a detailed recovery plan, including an analysis of performance, recovery actions, and an improvement trajectory.

Estates

Oversight of the development and implementation of the estate's plan.

To keep under review the financial and operational aspects of the Trust's Estates Plan.

Sustainability

Oversight of the development of sustainability requirements in line with national NHS guidance.

Digital

Oversight of the implementation of the Trust Digital Plan.

To keep under review the investment into digital technology, data security standards and cyber security.

Compliance with Digital Maturity Assessment.

Partnerships

To overview the operational and performance aspects of established partnerships.

To scrutinize the effectiveness of strategic and operational relationships with partners through the Strategic Partnership Plan, demonstrating the impact this will have on our service users, staff and services.

Business Cases for Service Development and/or Capital Approval

To consider and approve / recommend to Trust Board, Business Cases, both clinical and commercial, in line with the delegated limits of authorisation as stipulated in the Trust's Financial Standing Orders and Scheme of Delegation.

To consider and as appropriate, approve / recommend to Trust Board all applications for capital expenditure in line with the delegated limits of authorisation as stipulated in the Trust's Financial Standing Orders and Scheme of Delegation.

To make recommendations to the Trust Board on schemes that do not meet the required rate of return on assets and/or result in a dilution of EBITDA (Earnings before interest, taxes, depreciation, and amortisation).

To approve the Trust's business case process and associated investment, appraisal, methodology.

To monitor as appropriate delivery of approved investments against time, cost and quality parameters and where necessary scrutinise recovery plans.

To monitor operational performance of capital schemes within the 5-year programme.

To ensure that all 'high risk' investments (as defined by NHSE) are subjected to appropriate procedures and that appropriate recommendations are made to the Trust Board.

The Committee will be responsible for approving all relevant policies outlined in the Trust policy on policies.

Risk Management

To review the Trust's exposure to financial risk of all natures which might affect resources and the achievement of strategic objectives.

Have oversight of the risk management and mitigation of risks within the Committee's area of activity.

7. Behaviours and Conduct

Trust values

Members will be expected to conduct business in line with the trust values and objectives.

Members of, and those attending, the committee shall behave in accordance with the Trust's standing orders, and standards of business conduct policy.

Equality and diversity

Members must demonstrably consider the equality and diversity implications of decisions they make.

8. Accountability and Reporting Arrangements

The Committee shall report to the Board on how it discharges its responsibilities.

The minutes of the Committee meetings shall be formally recorded by an Executive PA, signed off by the Committee Chair and circulated within 7 days.

The Deputy Chief Finance Officer (or nominated person in their absence) shall prepare a Summary Report, to be presented by the Chair of the Committee, to the Trust Board after each meeting of the Committee.

Copies of the minutes of Committee meetings shall be available to all Trust Board and Committee members on request.

The Chair of the Committee shall draw to the attention of the Trust Board any issues that are a concern to the committee with recommendations on what remedial action should be taken.

The Committee must produce an Annual Report to the Trust Board. The Annual Report will include information about compliance with the requirement that members should attend regularly and should not be absent for more than two consecutive meetings. This Annual Report should also describe how the Committee has fulfilled its terms of reference and objectives and give details of any significant issues that the Committee considered during the year and how they were addressed.

An Annual Committee Effectiveness evaluation will be undertaken and reported to the Committee and the Board. The report will include information about compliance with the requirement that members should attend regularly and should not be absent for more than two consecutive meetings.

Cost Improvement Plan (CIP) minutes will be received by Committee following each

meeting for information.

9. Secretariat and Administration

The Committee shall be supported administratively by an Executive PA. Their duties in this respect will include:

- Development / agreement of agendas with the Chair and attendees
- Preparation, collation and circulation of papers 7 days ahead of the meeting
- Ensuring that those invited to each meeting attend
- Taking the minutes, ensuring sign off by Committee Chair and circulate within 7 days.
- Keeping a record of matters arising and issues to be carried forward
- Arranging meetings for the Chair: for example, with the internal/ external auditors or local counter fraud specialists
- Ensuring that action points are taken forward between meetings

10. Requirement for Review

The Committee will review its effectiveness at least annually.

The Terms of Reference will be reviewed at least annually by the Committee for Trust Board approval.

Date of approval: 5th February 2026

Date of review: January 2027

Application Form – Single Tender Waiver

Section 1: Notes

- 1.1 This form is to be completed in all circumstances where the requisition, or the total aggregated purchase order value if the requisition is an amendment exceeds the value of **£15,000 inc VAT**. **Your authorised requisition and all relevant paper work should be attached to this form.**
- 1.2 **The current European Threshold is £135,018 including VAT.** Contracts which exceed this value legally require a full tender in line with EU procurement laws and cannot be waived.
- 1.3 Sections 2, 3, 4 & 5 of the form must be completed in full by the requisitioning officer and signed by the budget holder.
- 1.4 Section 7 must be authorised depending on value by the following:-
- | | |
|--|---|
| £5,000 - £14,999
>£15,000 | Waiver not permitted (3 quotes required)
Director of Finance, Performance & Estates |
|--|---|
- 1.5 The authorised form must be returned to our Supplies and Procurement Department prior to the order being raised.
- 1.6 Please refer to the Trusts Standing Financial Instructions (s.9.5.1) In support of your application (Appendix 1)

Section 2 – Details of Request

Please note the Trust will not support payment without a Purchase Order in accordance with the Ordering Policy.

Is a PO required?	Yes / No	If yes, requisition Number:
If no, please provide information of why this is not applicable in accordance with the Ordering Policy		
Date Requisition Raised:	Department:	
Budget/financial code:	Is the supplier set up on Integra? Yes / No	
Requisitioning Officer:	Supplier Contact Name:	
Supplier Name:	Supplier Contact Email:	
Contract Period:	Supplier Contact Phone:	
Cost £		
VAT (if applicable) £		
Total Cost £		
Recurrent /Non Recurrent:		
Date of Request:		

Description of goods or Service requested:

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Section 2 continued:

Please tick as appropriate:

- ☐ Retrospective order
- ☐ A requisition for goods/service will be required monthly/quarterly/annually
- ☐ Business case has been completed in support of requisition (please attach if applicable)

Section 3 – Please tick appropriate box

Section 3 is Mandatory, the form will be returned if not completed:

I request approval for waving the need to obtain written competitive quotations for the following reasons: Why is there a need to request a Wavier an explanation is needed in each case (see appendix 1)

- ☐ Specialist good/services only available from one source (please attach supporting evidence).
- ☐ Where the requirement is covered by an existing contract.
- ☐ Where the timescale genuinely precludes competitive tendering (failure to plan the work is not a justification for a waiver).
- ☐ Where specialist expertise is required and is available from only one source.
- ☐ Where there is clear benefit to be gained from maintaining continuity with an earlier project.
- ☐ When the task is essential to complete the project and arises as a consequence of a recently complete assignment and engaging new consultants to complete the project would be inappropriate.
- ☐ For the provision of legal advice and services providing that any legal firm or partnership commissioned by the Trust is regulated by the Law Society for England and Wales for the conduct of their business (or by the Bar Council for England and Wales in relation to the obtaining of Counsel's opinion) and are generally recognised as having sufficient expertise in the area of work for which they are commissioned.

The Director of Finance will ensure that any fees paid are reasonable and within commonly accepted rates for the costing of such work.

The waiving of competitive tendering procedures should not be used to avoid competition or for administrative convenience or to award further work to a consultant originally appointed through a competitive procedure.

Where it is decided that competitive tendering is not applicable and should be waived, the fact of the waiver and the reasons should be documented and recorded in an appropriate Trust record and reported to the Audit Committee at each meeting.

Section 3 continued

Please advise in more detail the reason for the waiver of competitive quotations / tendering, (identified above) in relation to the specific supply / service.

Section 4 – Reason for retrospective order (to be completed by General Manager /Budget Holder)

Section 5 – Budget Holder Approval (to be authorised by General Manger/Relevant Budget Holder)

Print Name

Signature

Date

There is sufficient Budget to fund the purchase of this supply of goods/service

☐ Yes

☐ No

Are there any conflicts of interest with the purchase of this supply of goods/service?

☐ Yes – Please advise – (Form attached below for information)

☐ No



Evaluation Conflict of
Interest - NMBC 27.02

Section 6 – Finance Approval (to be authorised by Financial Management)

Print Name

Signature

Date

There is sufficient Budget to fund the purchase of this supply of goods/service



North Staffordshire
Combined Healthcare
NHS Trust

☐ Yes

☐ No

Section 7- Procurement Information for Submission of Wavier Request

Waiver Number

Due Process – Has appropriate procurement process been followed (e.g. has the Supplies and Procurement Department had opportunity to conduct any of the following: full EU tender, Local tender or utilised a national frame work/tender), assessing level of risk in terms of understanding what T&Cs / contract are going to be used to facilitate the relationship.

--

Print Name

Signature

Date

Section 8: Waiver Request Rejected/Approved: Please note the Director of Finance will not approve without Budget Holder or Procurement/Supplies authorisation

Request rejected for the following reason and therefore purchase may not be completed as requested:

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Print Name

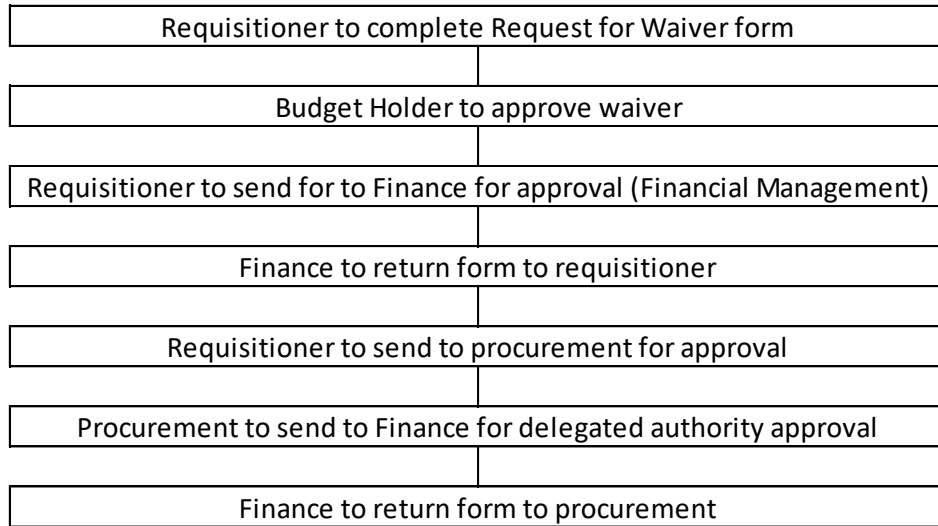
Signature

Date

Waiver request authorised by Director of Finance, Performance and Estates

Appendix 1

Flow Chart for Request for a Single Tender Waiver





Data Protection Impact Assessment (DPIA)

A DPIA is a legal requirement and should be completed when sharing personal information, for example when commissioning a new service, working on a specific project/process/scheme or implementing a new system; **or** when making changes to any existing service/project/process/scheme. The DPIA must be completed at the start of the project to provide the Trust with the key assurances on data protection requirements and enable the Trust to evidence accountability in all activities.

Project name:

Name of Project Lead and Job Title

Date of Completion of DPIA

Section 1 – Initiation Phase

1.1 Project outline – what and why

Note: Explain broadly what project aims to achieve and what type of processing it involves. You may find it helpful to refer or link to other documents, such as a project proposal. Summarise why you identified the need for a DPIA.



1.2 Use of personal data

Note: Will the project necessitate the collection/use/processing or sharing of personal or pseudonymised data? Personal data - Any information relating to an identified living person ('data subject') by way of an identifier such as a name, address, date of birth, NHS Number etc. Pseudonymised data - Personal data which has undergone pseudonymisation, which could be attributed to a natural person by the use of additional information, i.e. local identifier which would then be re-identified if needed.

1.3 Describe the nature of the processing

Note: how will you collect, use, store and delete data? What is the source of the data? Will you be sharing data with anyone? You might find it useful to refer to a flow diagram or other way of describing data flows. What types of processing identified as likely high risk are involved?

1.3.1 Data Flow Diagram



1.4 Data Controller/Processor Responsibilities

Note: What are the responsibilities linked to the processing? Who is the Data Controller, are there any Data Processors, Sub-Processors or any Joint Data Controllers?



Section 2 - Compliance with privacy laws

Note: Data Protection legislation is relevant to any DPIA, and a DP compliance check should always be carried out. The Data Protection Officer will be able to advise you on the relevance of other privacy laws.

2.1 UK General Data Protection Regulation (UK GDPR) and Data Protection Act 2018 (DPA)

Note: The template you have to fill in for the data protection compliance check can be found in Appendix A of this document. The Trust Information Governance Team will be able to assist with the completion, prior to approval granted by the Trust Data Protection Officer, SIRO and Caldicott Guardian.

A Data Protection compliance check has been carried out as part of this DPIA, the details of which are in appendix A. From this we have concluded:

2.2 Human Rights Act (HRA) (Article 8)

Note: In most cases HRA considerations will be covered by the other work on this DPIA, including the Data Protection compliance check. If that is the case, you can simply record here that there are no special considerations that are not covered by other aspects of the DPIA. If there are any outstanding issues, describe them here.

2.3 Privacy and Electronic Communications Regulations 2003 (amended 2011) (PECRs)

Note: If the project involves electronic marketing messages (by phone, email or text), cookies, or providing electronic communication services to the public, you also need to make sure you comply with the PECRs.

The following guidance will help: [Information Commissioner's Office PECR guidance](#).

Describe any issues here, or confirm if not applicable.

2.4 Common Law Duty of Confidentiality



2.5 Other legislative requirements

Section 3 – Technological requirements

3.1 Technology

3.1.1 What systems/assets will be used to support the project?

Note: Please list all software, hardware and information assets associated with this project

3.2 Data collection

3.2.1 Will the project involve the collection of new information about individuals?

Yes: ☐

No: ☐

3.2.2 Will the project compel individuals to provide information about themselves during the course of the project?

Yes: ☐

No: ☐

3.3 Identification methods

3.3.1 Will there be new or different identity authentication requirements?

Yes: ☐

No: ☐

3.4 Involvement of external organisations

3.4.1 Will the initiative involve external organisations that will have access to the personal data?

Yes: ☐

No: ☐

3.5 Changes to the way data is handled – considering the actual processing

3.5.1 Will there be new or significant changes to the handling of special categories of personal data or data that would be considered sensitive by the data subjects? *(For example, data about racial/ethnic origin, political opinions, health information, sexuality, offences and court proceedings, finances etc.)*

Yes: ☐

No: ☐

3.5.2 Will the personal details about each individual in an existing database be processed in a new or different way?

Yes: ☐

No: ☐

3.5.3 If yes to the above, will this involve a large number of individuals?

Yes: ☐

No: ☐



3.5.4 Will the project use an automated-decision-making tool? *(Note automated-decision making is a computer generated decision making tool based on algorithms that make decisions without a human being)*

Yes: ☐

No: ☐

Section 4 – Pre-implementation

Note: Explain below what checks will be carried out before the service/project/scheme/system is implemented to ensure that the privacy solutions approved as part of this DPIA have been applied, and that the system or process is still legally compliant. Also include whether data subjects have been appropriately informed.

Section 5 – Review

Note: Indicate below how and when the post-implementation review will be carried out:

To be undertaken by:

Date review required:

4.1 Formal Approvals

Note: All DPIAs must go through rigorous checks before receiving formal approval. Approval is received from the Trusts Data Protection Officer, Senior Information Risk Owner and Caldicott Guardian (where applicable).



Data Protection Officer Approval:

Print Name

Date of Approval

Senior Information Risk Owner Approval:

Print Name

Date of Approval

Caldicott Guardian Approval:

Print Name

Date of Approval



Appendix A

Data Protection Compliance Schedule

Completion of this schedule requires knowledge of Data Protection Legislation, including adherence to the Data Protection Act 2018/ UKGDPR. Assistance can be obtained from the Trust's Information Governance Team NSCHT.informationgovernance@combined.nhs.uk

	Question	Answer
1.	What type of personal data will be processed? (Please list every data requirement)	
2.	What is the legal basis for processing the personal information for the given purpose? (Please provide the relevant legal basis from Article 6 of the UK GDPR as shown via the link – https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/lawful-basis-for-processing/#what)	
3.	When processing special category data (i.e. health, sexuality, biometric data, religion etc.) enhanced privacy measures are applied, as the processing of such data is prohibited in principle. To enable this data to be shared, Article 9 of the UK GDPR lists lawful grounds for processing this type of data. Which article 9 exemption applies to this scheme/project/process/system?	
4.	Are there any special considerations relating to Article 8 of the Human Rights Act that will not be covered by the DPIA? <i>Note – This Article provides that everyone has the right to respect their private and family life, their home and correspondence. It is subject to qualifications relating to national security, crime etc.</i>	
5.	If consent is the lawful basis for processing the data, how will consent be	



	obtained and how will you ensure it meets the definition of consent as detailed in the DPA18? <i>(Note: consent must be specific, explicit, an unambiguous indication of the data subjects wishes, validated by clear affirmative action or written statement)</i>	
6.	Will any of the personal data be processed under Common Law Duty of Confidentiality? If yes, how is that confidentiality being maintained?	
7.	How are individuals informed of how their personal data will be used?	
8.	Does the project involve the use of personal data for purposes other than those listed in this DPIA?	
9.	How can data subjects exercise rights in relation to access to their own records?	
10.	How can the rights of data portability be met safely and effectively?	
11.	How can data subjects exercise their rights to rectification and/or erasure?	
12.	How can data subjects exercise their right to restrict data flows or object to the processing of their data?	
13.	What procedures will be in place to ensure that the data requirements are adequate, relevant and limited to what is necessary in relation to the purpose for which the data will be processed? (data minimisation)	
14.	How will the data be kept accurate and up-to-date at all times?	



15.	Is there concern that sharing the personal data to inform this project/process/scheme/system could cause upset/distress to the data subjects? If so please add how this will be addressed.	
16.	What is the retention period in relation to the storage of the personal data?	
17.	What technical and organisational security measures will be in place to prevent any unauthorised or unlawful processing of the personal data?	
18.	If there is a Data Processor/Sub-Processor involved, are the obligations of the Processor clearly defined in a contract?	
19.	Does data get transferred outside of the United Kingdom and if so where? Also what provisions will be in place for data transfers outside of the UK?	



Appendix B - Data Protection Impact Assessment Risks

Risk description	Inherent Privacy Risk			*Options for avoiding or mitigating this risk	Risk Owner	Residual Privacy Risk		
	Impact	Likelihood	Exposure			Impact	Likelihood	Exposure



DATA PROTECTION IMPACT ASSESSMENT GUIDE FOR STAFF

WHAT IS A DATA PROTECTION IMPACT ASSESSMENT? (DPIA)

A DPIA is a process designed to help an organisation systematically analyse, identify and mitigate the data protection risks of a service/project/process/system etc., along with demonstrating how the rights and freedoms of individuals can be clearly met when processing personal information. Having an effective DPIA process in place is a fundamental way of evidencing accountability in an organisation's day-to-day activities relating to the handling, processing and sharing of personal data, as stipulated in the Data Protection Act 2018 (DPA18)/UK General Data Protection Regulations (UKGDPR).

A DPIA may not eradicate all risks associated with the sharing of personal data, but should highlight whether or not the level of risk is acceptable when considering the purpose and necessity of sharing data.

The content of a DPIA will help to inform the necessary agreements that will be required, for example Data Sharing Agreements, Data Processing Agreements etc.

IS A DPIA A LEGAL REQUIREMENT?

Yes, whenever personal information is processed, handled or shared as part of the service/project/process/system etc., a DPIA becomes a legal requirement as detailed in the Data Protection Act 2018. **This applies to new services/projects/processes/systems and if there are changes being made to existing services/projects/processes/systems.** The need to complete a DPIA also extends to pseudonymised data. The legal responsibility for completing a DPIA sits with the Data Controller, and failure to complete a DPIA when required may leave the data controller open to enforcement action, including significant fines. It is important as an organisation that we realise the need to evidence all of the steps we take to ensure confidentiality and data protection is embedded into our operations. This will help us to demonstrate we are meeting key Data Protection principles and obligations under the legislation. Consistent use of DPIAs increases the awareness of privacy and data protection issues within the organisation. It also ensures that all relevant staff involved in designing projects think about privacy at the early stages and adopt a 'data protection by design' approach.

However, DPIAs are not just a compliance exercise. An effective DPIA allows Project Leads to identify and address issues at an early stage, bringing broader benefits for both individuals and the organisation.

WHO COMPLETES THE DPIA?

The Project Lead will take the lead on completion of the DPIA Template (which can be located in the IG Policies section on the CAT or available from the IG Team) and liaise with the Information Governance (IG) Team for any support requirements. The DPIA needs to be reviewed by staff

members, including the Data Protection Officer, Senior Information Risk Owner (SIRO) and Caldicott Guardian (CG) so it is important that the DPIA is written in a clear, easy-to-understand manner, avoiding the use of acronyms and jargon. DPIAs are releasable to the public under the Freedom of Information Act (a list of completed DPIAs should be included on each data controllers website) and so needs to be written in such a way that anybody reading it would understand the process detailed.

Once you have completed the template it should be emailed to the Information Governance Team, who will undertake a review. If any further information or clarification is required a member of the team will liaise with you to ensure all information has been appropriately captured in the template. The IG Team will ensure the key governance requirements are addressed in the template. Once finalised, this document will be sent for the required approvals. It will firstly be approved by the Trust's Data Protection Officer, who will make any recommendations, prior to the document being sent to the SIRO and CG respectively.

HOW LONG WILL A DPIA TAKE?

The complexity of the service/project/process/system etc. and the need for additional information/clarity can increase the timescales for completing a DPIA and make it difficult to provide an exact timeframe. A DPIA cannot be rushed and needs to cover all required elements – if all answers cannot be recorded then the DPIA should be used to inform what those answers should be as part of project design.

The IG Team will aim, upon receipt of a DPIA, that a review is undertaken within 5 working days of receipt. Dependent upon the need for additional information/clarity will determine how long it will take for the document to be subject to formal approval, but as a team we will endeavour to get the documents reviewed and through to final approval stage as quickly as possible.

USEFUL INFORMATION

What is personal data? - any information which can identify an individual, for example, name, address, DOB). It also includes pseudonymised information that upon first inspection may not be identifiable, but there are means to identify the individual based on the information, for example, NHS number.

Are you planning to process personal or pseudonymised data or make changes to how you process it? – A DPIA will need to be completed.

Is your project description easy to understand? Does it meet the 'family test' – could a member of your family understand the project description?

I cannot answer all the questions in the template – what shall I do? A DPIA will help to identify where further information is needed and may be approved subject to things being implemented in a certain way therefore helping you to design with privacy central to the plans. Get in touch with the IG Team who will be offer to support and guidance.

Are you carrying out any of the following activities? If the answer is yes to one or more, you need to complete a DPIA:

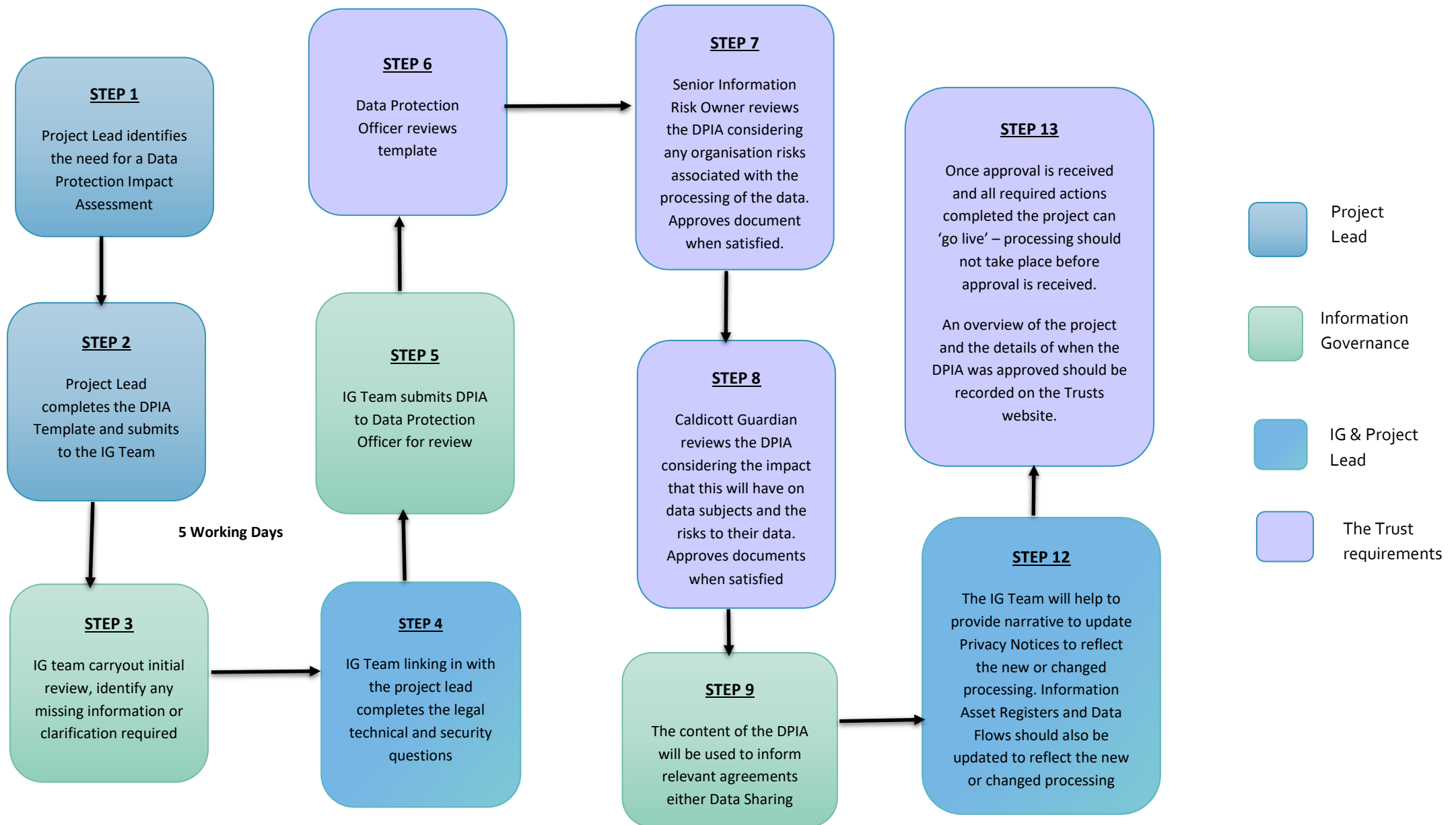
- Evaluation or scoring
- Automated decision-making with significant effects
- Systematic monitoring of public areas

- Processing of special categories of data (i.e. health data, sexuality, religion etc.) or data of a highly personal nature
- Processing personal information on a large scale
- Processing of personal data concerning vulnerable data subjects
- Implementing new systems/technological applications
- Processing that involves preventing data subjects from exercising a right or using a service contract

THE PROCESS

The process gives you a visual to understand the steps within the DPIA process.

STEP-BY-STEP DPIA PROCESS



Business Case

BUSINESS CASE TEMPLATE Approval for Revenue & Capital Cases	
Scheme Title	Digital Device Replacement Programme
Directorate	Trust wide
Author	REDACTED- Chief Information Officer
Date	October 2025
Links to Trust Strategy	Prevention - We will commit to investing in providing high-quality preventative services that reduce the need for secondary care. Access - We will ensure that our services are flexible and are delivered in a timely and appropriate place that meet the needs of our service users. Growth - We will continue to grow outstanding, integrated services delivered by an innovative, highly skilled and sustainable workforce.
Please see guidance notes contained within each section shown in grey font. These notes should be deleted as you begin to populate your business case. Please note that the level and complexity of information provided should reflect the value of your business case. If sufficient information is not provided this may result in delay in submission to the Senior Leadership Team (SLT) and/or further information being requested upon submission. Governance information – Following approval by Executives and SLT, business cases with a value of over £250k require submission to Finance & Resource (F&R) Committee. Those with a value over £500k require submission to Board following submission to F&R.	
1.Executive Summary The Trust's implementation of its Electronic Patient Record (EPR) in 2017 system required all end-user devices to meet a minimum technical specification, known as the Warranted Environment Specification, to ensure reliable connectivity and performance. To support ongoing digital transformation and maintain infrastructure standards, the Trust established a device replacement programme based on asset age. This initiative aims to ensure that devices remain fit for purpose, enabling agile and flexible working, and supporting the deployment of emerging technologies. In line with the agreed five-year rolling replacement strategy, approximately 1,043 devices are scheduled for replacement over the next two financial years. This is to support increased capital spending this year to support Frontline Digitalisation slippage which would otherwise result in loss of national funding.	

Business Case

This paper recommends the procurement of end-user devices and associated peripherals at a total cost of £REDACTED + VAT (£REDACTED inc VAT), subject to the availability of capital funding across both years.

2.Summary of Proposal

The original "Hit Squad" initiative, launched in 2014, was established to address the absence of a structured, rolling replacement programme for IT devices across the Trust. Despite its initial impact, a formalised replacement strategy has yet to be embedded, resulting in an ageing device estate. This has now necessitated a renewed focus, particularly in relation to device compatibility with the Trust's Electronic Patient Record (EPR) system.

The Trust currently maintains approximately 2,400 devices within its IT asset register. Under the agreed five-year rolling replacement model, this would equate to an annual refresh of around 480 devices. However, this figure is indicative and subject to variation based on operational requirements and asset lifecycle changes.

To address this, the Trust has initiated a replacement programme based on device age, enabling a more sustainable and proactive approach to asset management. As the Trust continues to advance its digital capabilities, this programme aims to ensure that devices are fit for purpose, support agile and flexible working practices, and are capable of accommodating emerging technologies.

This is currently based off a 5 year replacement programme discussions are also underway around moving to an alternate model of 6 years.

Option 1

Failure to progress with the device replacement programme may result in approximately 943 devices becoming unsupported and falling outside of maintenance agreements. These devices would no longer receive essential security patches, rendering them non-compliant with current cybersecurity standards. As a result, they would need to be decommissioned and removed from the Trust's infrastructure to mitigate operational and security risks.

Option 2

In line with the Trust's agreed five-year rolling replacement programme, it is projected that approximately 1,043 devices will require replacement over the next two refresh cycles. This forecast supports the continued alignment with infrastructure standards, ensuring devices remain compliant, secure, and capable of supporting clinical and operational needs.

3.Recommendation

Purchase of end user devices and peripherals for a total value of £REDACTED + VAT (£REDACTED inc VAT)

4.Planned implementation date

Devices rollout is a rolling programme managed through the Staffordshire and Shropshire Health Informatics Service.

Business Case

Qty	Description	Cost	Total
100	REDACTED	£ REDACTED	£ REDACTED
250	REDACTED	£ REDACTED	£ REDACTED
943	REDACTED	£ REDACTED	£ REDACTED
		Sub Total	£ REDACTED
		VAT	£ REDACTED
		Total	£ REDACTED

5.Financial Assessment

1 - Costs based on previous quotes and will need to be refreshed prior to purchase.

2 – Costs based on standard laptop model and equipment, this may be changed in line with new product lines and user requirements within the approved budget. This may adjust the number of devices and specifications purchased.

The source of funding is from the 2025/25 and 2026/27 Capital Programmes

7.Workforce Impact

The implementation of the device replacement programme is expected to positively impact workforce productivity. By equipping staff with faster, more reliable, and efficient devices, the Trust can enhance operational performance, reduce downtime, and better support agile working practices. This investment in modern technology will support staff to work more effectively and deliver improved outcomes across clinical and administrative functions.

8.Activity Impact

The device replacement programme will support more efficient use of the Trust's Electronic Patient Record (EPR) system by ensuring staff have access to reliable and responsive hardware. This will facilitate improvements in data collection processes and enhance the overall quality of clinical and operational data, contributing to better decision-making and patient outcomes.

9.Procurement Impact

Direct procurement from Dell via NHS Link IT framework

Business Case

10. Informatics Impact

Resources will need to be provided from informatics to support the installation of the devices this cost may be capitalised which may result in a reduction in the number of devices purchased.

11. Estates and Facilities Impact

Please describe changes to estate including any impact on leases.

No impact on estates and facilities expected from this programme.

12. Communications

A detailed communication plan will be required at project mobilisation however please provide details of key stakeholders.

See appendix 1 QIA

13. Risks and Mitigations

Please capture risks associated with each option and how they will be mitigated. Is there a link to the trust risk register? (Consider link to Board Assurance Framework (BAF) for business cases of £500k or above)

Note – this is an initial risk assessment and should your business case be approved, any agreed risks should be recorded on Ulysses.

Risk No.	Risk Name	Risk Description	Likelihood (1-5)	Impact (1-5)	Residual Risk Rating	Mitigation	Risk Lead
1		There is a cyber security risk that unsupported devices not meeting security requirements would increase the vulnerability to cyber attack	3	4	12	Procurement of replacement devices	REDACTED

Risk Matrix

		CONSEQUENCE				
		How severe could the outcomes be if the risk event occurred?				
		Negligible/Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
LIKELIHOOD What is the chance of the risk occurring?	Almost Certain - 5	5 Moderate	10 Significant	15 High	20 High	25 High
	Likely – 4	4 Moderate	8 Significant	12 Significant	16 High	20 High
	Possible – 3	3 Low	6 Moderate	9 Significant	12 Significant	15 High
	Unlikely – 2	2 Low	4 Moderate	6 Moderate	8 Significant	10 Significant
	Rare – 1	1 Low	2 Low	3 Low	4 Moderate	5 Moderate

14. CQC Registration Assessment

No risk to CQC registration assessment

Business Case

15.Quality Impact Assessment (QIA) Please complete a QIA and save as appendix 1. The QIA template can be accessed via the Trust templates page on CAT REDACTED See appendix 1
16.Equality Impact Assessment (EIA) Please complete a EIA via this link REDACTED and save as appendix 2. See appendix 2
17.Data Protection Impact Assessment (DPIA) Please complete a DPIA via this link REDACTED and save as appendix 3. Not required as no data impact.
18.Sustainability Impact Assessment (SIA) A SIA must be completed and saved as appendix 4. The SIA template can be accessed via the Trust templates page on CAT REDACTED See appendix 4
19.Interdependencies No interdependencies with other schemes

Appendix 1 - Quality Impact Assessment

Appendix 2 - Equality Impact Assessment

Appendix 3 – Data Protection Impact Assessment

Appendix 4 – Sustainability Impact Assessment

Approvals	
Group (as relevant)	Date
Execs Proof of Concept	
Directorate Management Team	
Senior Leadership Team	
Relevant Committee	
Trust Board	
Please consider any internal approvals that are required before submission to SLT	
Workforce	Deputy Director of People, OD and Inclusion

Business Case

Infection Prevention and Control	Head of Infection Prevention & Control
Estates & Facilities	Associate Director of Estates
Informatics / Digital	Chief Information Officer
Finances	Assistant Director of Finance
Procurement	Deputy Director of Finance

Business Case

Appendix 2 - Quality Impact Assessment (QIA)

Project Lead/Manager: REDACTED, Deputy CIO

Project Start Date: FY25/26

Completion Date: EoY 26/27

Purpose of the Project:

- To replace outdated devices with new models to enhance productivity, security, and overall IT performance across the Trust.
- Improve user experience and reduce maintenance costs by upgrading to modern, more reliable hardware.

Key Drivers for the Programme

- Technological Obsolescence: Current devices are outdated and out of support, resulting in decreased productivity and increased maintenance issues.
- Security Concerns: Newer devices provide enhanced security features (e.g., encryption, biometric authentication) necessary to meet current and future cybersecurity standards.
- User Feedback: Reports of inefficiency and frustration due to old hardware.

Impact on Quality Domains

Quality Domain	Impact	Risk Level (Low/Medium/High)	Mitigation Strategies
Patient/Customer Safety	No direct impact on safety. However, secure devices help protect sensitive data.	Low	Ensure all devices have up-to-date security features and data protection protocols.
Effectiveness	Newer devices will improve work efficiency and system responsiveness.	Low	Ensure adequate training for staff on new hardware and any software changes.
Staff Experience	Improved staff satisfaction by providing faster, more reliable hardware.	Medium	Offer technical support during transition and collect feedback post-implementation.
User Productivity	Enhanced by faster, more responsive machines, reducing downtime.	Low	Provide guidance on using the new machines efficiently.
Data Security	Stronger encryption, multi-factor authentication, better	Medium	Ensure IT team monitors all systems

Business Case

	virus protection in modern devices.		for vulnerabilities post-deployment.
Continuity of Service	Temporary disruption during the transition to new devices. Risk of compatibility issues with legacy systems.	Medium	Create a phased roll-out plan, with fallback options to mitigate service disruptions.
Cost	Initial cost of the new devices, but potential savings from reduced maintenance and improved efficiency long-term.	Medium	Conduct cost-benefit analysis to ensure value for money.

Risk Analysis and Mitigation

Risk	Likelihood (Low/Medium/High)	Potential Impact (Low/Medium/High)	Mitigation Strategy
Temporary reduction in productivity during transition period.	Medium	Medium	Provide clear communication, staggered replacement, and training.
Compatibility issues with legacy software/systems.	Medium	Medium	Test critical applications on new hardware before deployment.
User resistance to new technology.	Low	Medium	Engage users early in the process, provide training, and gather feedback.
Increased technical support demand post-replacement.	Medium	Low	Ensure IT support team is adequately resourced during the transition.
Data loss during migration.	Low	High	Ensure all data is backed up and tested before transfer.

Business Case

Stakeholder Engagement and Communication Plan

- Key Stakeholders:
 - S&SHIS
 - Digital Team
 - End Users (staff)
 - Departmental/Ward Managers
 - Procurement and Finance Teams
 - Information Security Team
- Communication Channels:
 - Regular updates via email newsletters.
 - Dedicated intranet page for the programme.
 - Training sessions (virtual or in-person) for staff on new devices.
 - Post-implementation surveys to gather feedback on the new devices.
- Engagement Activities:
 - Pre-rollout meetings to explain the process and collect input from staff.
 - Post-rollout support workshops and drop-in sessions for technical assistance.

6. Evaluation Metrics

- User Satisfaction: Post-implementation survey to gauge user experience and satisfaction with the new devices.
- Productivity Gains: Monitor staff productivity using performance metrics before and after the rollout.
- Support Tickets: Measure the number and types of support tickets logged related to the new devices.
- Cost Analysis: Track both the upfront costs of the new devices and long-term savings in maintenance and productivity.

Business Case

Appendix 2 - Equality Impact Assessment

Purpose and Scope of the Programme

- Programme Title: Device Replacement Programme
- Objective: Provide staff with updated, efficient devices for improved performance and security.
- Scope: Identify which groups of employees might be impacted and ensure no group is disadvantaged by the transition to new devices.

Assessment of Equality Impact

How different groups (protected characteristics) may be affected by the device replacement programme.

- Age
 - Potential Impact: Older employees might face more challenges adapting to new technology.
 - Mitigation: Offer additional training and support to those who might be less familiar with newer devices.
- Disability
 - Potential Impact: Employees with disabilities may have specific accessibility needs (e.g., vision impairments, mobility issues affecting keyboard/mouse use).
 - Mitigation: Ensure devices are compatible with assistive technology (e.g., screen readers, alternative input devices). Offer accessible training resources.
- Gender Reassignment
 - Potential Impact: No specific impacts anticipated, though there may be concerns around privacy and personal data during the replacement.
 - Mitigation: Ensure confidentiality and security when handling personal information during the programme.
- Marriage and Civil Partnership
 - Potential Impact: No specific impacts anticipated.
 - Mitigation: No actions required.
- Pregnancy and Maternity
 - Potential Impact: Employees on maternity leave might miss out on device distribution or training.
 - Mitigation: Ensure the replacement and training are available before or after leave and consider flexible delivery options.
- Race/Ethnicity
 - Potential Impact: Language barriers may exist for some employees, especially if training materials are not provided in multiple languages.
 - Mitigation: Ensure training materials and support are available in different languages, if necessary.
- Religion or Belief
 - Potential Impact: Religious observances could conflict with set distribution or training dates.
 - Mitigation: Offer flexible timings for training and device collection to accommodate various religious practices.
- Sex
 - Potential Impact: No specific impacts anticipated, though gender differences in caregiving responsibilities might affect timing.
 - Mitigation: Ensure flexible scheduling for training and collection, especially for those with caregiving duties.
- Sexual Orientation
 - Potential Impact: No specific impacts anticipated.

Business Case

- Mitigation: No actions required.

Consultation and Engagement

- Stakeholder Engagement: Engage with staff networks (e.g., disability network, diversity and inclusion groups) to gather feedback on potential issues or concerns related to the device replacement.
- Feedback Mechanism: Provide a channel for employees to give feedback on the new devices and raise any issues they face after the rollout.

Monitoring and Review

- Monitoring Plan: Track any issues that arise during and after the rollout, focusing on complaints or feedback from protected groups.
- Review Schedule: Conduct a review 3 month post-rollout to evaluate whether any further adjustments are necessary, particularly around training, accessibility, and performance.

Appendix 4 - Sustainability Impact Assessment	
Introduction	
This Sustainability Impact Assessment (SIA) is a tool to help teams and individuals consider sustainability and the social value for new business cases. It can also be used to support proposed projects, programmes, and policies. A SIA will help to ensure that any adverse or negative environmental impacts to the organisation are identified and, where possible, mitigated, to ensure that sustainability is considered in all decision making.	
Notes on completion and governance	
Sustainability Impact Assessments are to be completed alongside all new business cases. In the event that an SIA is not completed prior to business case approval, there will be a requirement for an SIA to be retrospectively completed. Review questions to support with completion can be found on page 3. Please forward completed Sustainability Impact Assessments for those business cases that are approved to the Transformation Management Office TMO-NSCHT@combined.nhs.uk. Completed SIA's will be shared within the Sustainability Steering Group, in alignment with the Trust's sustainability governance structure.	

Business Case

Responsible Person and Department		Date				
Proposed Project / Programme / Policy / Business Case						
Image	Area of Sustainability / Social Value	Description of Impact	Nature / Degree of Impact	Overall Impact*	How will impact be measured?	Actions to mitigate risks and enhance positive outcome
	Energy	The device replacement program could lead to both increases and decreases in energy consumption. Newer models tend to be more energy-efficient than older devices, reducing the overall energy demand for the organisation.	Modern laptops consume less energy per unit due to advancements in battery technology and energy-efficient processors.	+1 Positive	Energy consumption of the new devices will be measured and compared with the energy usage of the older models.	Encourage the use of energy-saving settings, such as enabling sleep modes and reducing screen brightness when not in use. Promote power-down protocols at the end of the workday.
	Water	The production of devices involves significant water usage, especially in the semiconductor and electronics manufacturing processes.	The production and disposal of devices contribute to global water consumption and pollution.	-1 Negative	Evaluate the water footprint of the new devices by assessing their manufacturers' environmental practices and policies.	Source devices from manufacturers that follow sustainable water management practices and have transparent environmental performance reports. Encourage repair or recycling options to extend laptop lifespan.
	Waste	The replacement of devices may contribute to electronic waste (e-waste), which is hazardous if not managed properly.	Improper disposal of old devices can lead to environmental contamination through heavy metals and other toxic components.	-1 Negative	Track the number of devices being replaced, how they are disposed of, and whether they are recycled or refurbished.	Partner with certified e-waste recyclers to ensure responsible disposal or refurbishment of old devices. Establish a policy for extending device life through repairs.
	Capital Projects	The device replacement program will require a capital investment, potentially impacting available funds for other sustainability initiatives.	The capital expenditure is necessary for technological upgrades but could divert resources from other projects.	0 Neutral	The cost and financial impact of the program will be monitored against capital budgets and returns on investment.	Prioritise purchasing energy-efficient devices that reduce long-term operational costs and contribute to broader sustainability goals.
	Travel and Transport	Devices enable remote working, potentially reducing the need for commuting and business travel.	By promoting flexible work arrangements, the device replacement program can reduce transportation-related carbon emissions.	+1 Positive	Monitor the reduction in employee travel by tracking remote work usage and related emissions.	Encourage remote work policies and provide training on using devices for virtual collaboration to minimize travel demands.
	Supply Chain (Inc climate related financial risk)	The procurement of devices involves a complex global supply chain, which includes climate risks such as extreme weather events, supply disruptions, and emissions from transportation.	The environmental and climate-related risks associated with global supply chains are significant, especially in the production and	-1 Negative	Assess suppliers' environmental policies, including carbon footprint, adherence to climate-related regulations, and risk	Select suppliers with strong sustainability credentials and climate resilience strategies. Prioritise local sourcing and suppliers that use low-carbon transportation methods.

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			transportation of electronics.		management strategies.	
	Models of Care	The device replacement program may indirectly influence healthcare models by enabling more digital and remote care options, reducing in-person visits and associated emissions.	Digital transformation can improve access to care and reduce the environmental impact of healthcare delivery.	+1 Positive	Track the uptake of digital health solutions and remote consultations made possible through the new devices.	Ensure that digital tools are integrated into patient care pathways, improving efficiency while reducing environmental burdens.
	Adaptation	The devices will provide flexibility to adapt to changing work environments, including shifts towards remote work and the need for greater technological resilience in the face of climate change.	Enhanced adaptability will reduce the carbon footprint of commuting and increase the organisation's resilience to climate-related disruptions.	+1 Positive	Assess the adaptability of the workforce, including the frequency and effectiveness of remote working enabled by the new devices.	Provide training and support to help employees maximise the adaptive potential of their new devices, fostering a culture of flexibility and sustainability.
	Workforce	The program will impact the workforce by potentially improving productivity through faster, more efficient devices. However, it may also introduce a digital skills gap.	Increased efficiency and satisfaction from using modern technology; Neutral/Negative if digital skills training is insufficient.	+1 Positive	Monitor workforce productivity, engagement, and the incidence of technical issues with new devices.	Provide comprehensive training for employees on how to use the new devices effectively, enhancing digital literacy and minimising disruptions.
	Digital Transformation	The device replacement program is a key component of broader digital transformation efforts within the organisation.	Digital transformation will improve efficiency, reduce paper usage, and enable more sustainable work practices.	+1 Positive	Track the reduction in paper usage, improvements in operational efficiency, and the adoption of digital tools across the organisation.	Encourage digital-first strategies, such as paperless workflows and cloud storage solutions, to maximise sustainability gains from the new devices.
	Nature and Biodiversity	Device production indirectly affects biodiversity due to raw material extraction, including mining for metals like lithium, cobalt, and gold, which can damage ecosystems.	The extraction of raw materials for electronics can result in deforestation, habitat destruction, and biodiversity loss.	-1 Negative	Assess the environmental impact of manufacturers by reviewing their supply chain sustainability reports, including their efforts to reduce ecological harm.	Choose suppliers that demonstrate responsible sourcing of materials, particularly those who engage in or support conservation efforts. Promote device recycling to reduce the demand for new raw materials.
	<i>Jobs: Promote Local Skills and Employment</i>	Social Value		Choose an item.		
	<i>Growth: Supporting Growth of Responsible Regional Business</i>	Social Value		Choose an item.		

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	<i>Social: Healthier, Safer and more Resilient Communities</i>	Social Value		Choose an item.		
	<i>Environment: Decarbonising and Safeguarding our World</i>	Social Value		Choose an item.		
	<i>Innovation: Promoting Social Innovation</i>	Social Value		Choose an item.		
TOTALS						

Review Questions
ENERGY – consider whether the project leads to: • an increase, or decrease, in the amount of electricity or battery usage. • an increase, or decrease, in the amount of heating/hot water required. • an increase, or decrease, in carbon emissions from building energy use.
WATER – consider whether the project leads to: • an increase/decrease in the amount of water used. • an increase/decrease in substances to be disposed of to foul sewer.
WASTE – consider whether the project leads to: • an increase or decrease in the amount of waste generated. • a variation in the type of waste to be disposed of, affecting segregation i.e. more/less hazardous.
CAPITAL PROJECTS – each building or refurbishment work should consider: • energy use, including natural light, ventilation, and renewable energy. • water use, including conservation measures. • use of space as a community resource/social enterprise • enhancing green spaces & biodiversity
TRAVEL & TRANSPORT - consider whether the project leads to an increase or decrease in: • 'care miles' i.e. care closer to home, telemedicine, repeat appointments • access to services for vulnerable or disadvantaged groups • sustainable travel options, i.e. walking, cycling, public transport, electric car.
SUPPLY CHAIN - all procurement related to the project should consider: • whole life costs, i.e. procurement vs. revenue costs (£ and carbon) • supporting local businesses, small businesses, and social organisations • promotion of ethical procurement and labour standards • food/catering from local, seasonal, and sustainable suppliers • social value, i.e. producing a local benefit through employment/training. • wider health impacts, such as antibiotic use, air pollution, modern slavery
MODELS OF CARE - consider the impact the project may have on: • 'Care miles' and delivering care in settings closer to people's homes • promoting prevention, healthy behaviours, mental wellbeing, living independently and self-management • reducing avoidable hospital admissions or admissions to residential care • delivering integrated care, streamlining care pathways
ADAPTATION - consider if the project is impacted by climate change, such as: • hotter, drier summers; milder, wetter winters; increased extreme weather events, including flooding and heatwaves. • support for vulnerable groups, including the elderly, people with long-term health conditions and those with mental health illnesses.
WORKFORCE: Consider whether your project can support social value by: • employment opportunities including disadvantaged groups, i.e. long-term unemployed, people with learning disabilities. • training of existing staff or apprenticeship opportunities • health and wellbeing, flexible hours or childcare / carer support • increasing community resilience & a reduction in social isolation • reduction in health inequalities and access to services • increasing participation of patients, the public and strategic partners
DIGITAL – Consider benefits and risks to digital transformation / digital by choice initiatives; - contributes positively
NATURE AND DIVERSITY – Consider benefits and risks to nature, and biodiversity; - investment into net zero biodiversity