



Technology & Telecommunications Change Control Policy

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DOCUMENT CHANGE HISTORY		
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V 1.1	November 2012	IGG review
V 1.1	November 2012	Approved IGG
V 1.1	December 2012	Approved EMT
V 1.2	March 2015	Reviewed by A Marrs

Document Reference	
Recommended at Date	Information Governance Group
Approved at Date	IGG (authority delegated by IGC)
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Equality Impact Assessment	Completed February 2013
Linked procedural documents	N/A
Dissemination requirements	All IS&T staff, other staff as/when required/appropriate
Checklist completed?	Yes
Part of Trust's publication scheme	Yes

The East of England Ambulance Service NHS Trust has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups. This policy applies to all individuals working at all levels and grades for the Trust, including senior managers, officers, directors, non-executive directors, employees (whether permanent, fixed-term or temporary), consultants, governors, contractors, trainees, seconded staff, homeworkers, casual workers and agency staff, volunteers, interns, agents, sponsors, or any other person associated with the Trust.

All Trust policies can be provided in alternative formats.

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1. Introduction

This document outlines the processes to be followed for implementing system changes or fixes within the East of England Ambulance Service NHS Trust or any alteration of critical systems and/or processes, IT hardware or software, telephony, network infrastructure and voice recording.

- To enhance communication of change, provide standards to the expectations of communications, and review processes for validating change.
- To ensure that NO changes are applied without the correct authorisation.
- To ensure that all relevant stake holders are aware of changes, and ensure any processes/procedures/documentation/asset register information that requires updating is appropriately updated and all relevant parties are aware of the change and its implications.

It is the responsibility of all staff and managers that these procedures are followed. No change authorisation = no change takes place.

Changes should be dealt with using the standard 6 D's for change management:

- Disclose
- Discuss
- Decide
- Document
- Date
- Deploy

It is the responsibility of all staff and managers that all Information Governance standards are met as part of the change control process.

The SIRO, Caldicott Guardian and relevant Information Asset Owner should be consulted as part of the change control process, and where necessary approve the change as part of the approval process.

2. Purpose and Scope

2.1 Purpose

This policy outlines the procedure to be followed when changes or fixes are proposed to Critical systems and/or processes, IT hardware or software, Telephony, Network Infrastructure and Voice recording. The purpose of this policy is:

- To ensure that no unauthorised or unscheduled changes are applied without authorisation from Senior Management
- To ensure that the Trust Performance Lead is aware and approves any changes that may affect the performance statistics
- To ensure that the Information department is aware of any changes that may affect the data warehouse, KA34 and other reports.
- To ensure that the IT department is aware of any IT support requirements for implementation
- To ensure that the IT department is aware of changes that affect the IT out of hours support provision

2.2 In Scope

Change control will apply when making any system, software, hardware or other change to all systems in use in the Trust.

Change control will also apply where:

- Technology changes direction
- Technology replacements
- Access to data centres/server halls for all non IT team or external contractors.

2.3 Out of Scope

The Change Control process does not need to be followed for business as usual (BAU) type of changes such as replacing a keyboard, phone or a routine PC swap out; nor does this process need to be followed for BAU related IT Service Desk calls. For these BAU type changes, the standard Service Desk process will be utilized. If in doubt, contact the IT Service desk..

Example of items that would not require a change request but do require a service request

- Password reset
- General desktop support/replacing keyboards/routine PC swap out*
- Printer/PC maintenance / swap out
- New network cable for individual PC
- A desk move for 3 or less people, for moves involving more than 3 people will require discussions with the Service Desk team leader.

* where any hardware equipment such as PC's, E-PCR, Mobile phones etc. are swapped out, although no change process will apply asset registers and other such documentation must be updated and a record of the swap fully recorded.

All Hardware and software not listed in the Service Catalogue must go through formal IS&T approval process. Items must first be approved by the technical architect, then accepted as supportable by the Service Desk.

3. Duties

3.1 Requestor

- Request a Change Request Form from the IT Service Desk and return the completed the document to the Service Desk.
- Ensure all relevant required documents are completed
- Attend pre-CAB meeting if requested to present the change and be ready to answer questions about the change submitted.

3.2 Pre-CAB (Change Advisory Board)

- The pre-CAB is an opportunity for the technical and project teams to present their changes for technical approval.
- The pre-CAB is the forum at which the technical architect will seek to ensure the proposed change fits into the technical environment now and in the future.
- Once these changes are approved for the technical solution, they will go to the CAB for approval and scheduling.

3.3 Change Advisory Board (CAB)

- Attend all change meetings
- Validate the change request
- Assess Risks of the change
- Approve changes
- Schedule approved changes

Formally review changes for approval and schedule changes.

3.4 Technical Implementation Team

All changes require an implementation technical team, their roles are:

- To implement fully approved changes (unless instructed by senior managers under the emergency change process).
- To implement changes as per the steps and processes laid out in the change control documents and any relevant supporting designs or process documents.
- To report the status of the change on completion

- To report any variation to the process/change

3.5 Consultation and Communications with Stakeholders

CAB will agree the responsibility for and method of the communications on a change by change basis.

4 Definitions

CAB – Change Advisory Board

BAU – Business As Usual

4. Development

5.1 Prioritisation of Work

Changes are scheduled at the CAB, the CAB will review the business requirements and impact when making the assessment about any change.

5.2 Identification of Stakeholders

When a change request is logged all the relevant information about impacted stakeholders are clearly identified.

5.3 Responsibility for Document's Development

The development of this document is the responsibility of the IS&T Security and Resilience Manager, in conjunction with other IS&T senior managers.

6 Change Process

6.1 Submission & Approval Process

Before any changes can be made, a completed Change Request Form must be submitted to the IT Service Desk.

CAB will review the change and discuss the change request with the department requesting the change and/or any 3rd party supplier that will be involved in the process.

The change will be managed as per the flow chart below:

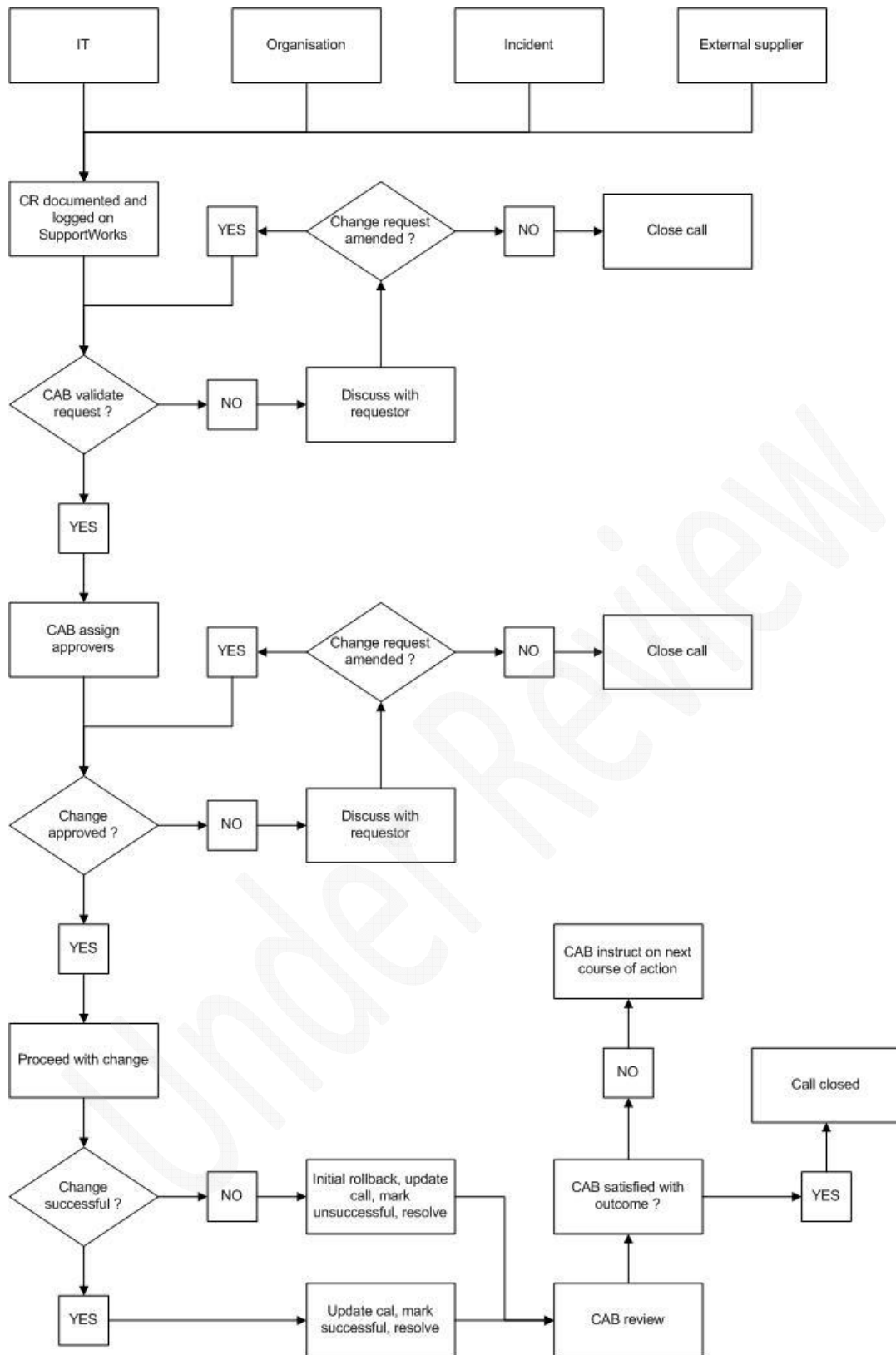
- Change is submitted to the IT Service Desk.
- The change is logged on the call logging system.
- The change is then put through the appropriate change approval process, this will vary on a case by case basis. The approval levels will also vary based on

the complexity and the impact of the change, however each change will initially go to pre-CAB then once approved by pre-CAB go to CAB for approval.

- Once approved the change will be scheduled and the appropriate communication plan will be set out to advise the impacted users.

Under Review

Title of Procedural Document



6.2 Change Review

Each change that has been resolved will be reviewed at CAB meetings.

Should any closing statuses of previous changes highlight any impact on the current changes submitted, these new changes will be highlighted and may have to be deferred.

The review of previous changes should also check that the following has been completed:

- All relevant documentation updated
- All post change testing was successful
- All interested parties noted and advised of change status
- Change status updated

6.3 Change Category and Submission Lead Times

The notification of changes must be submitted in a timely fashion.

Standard – Minimum 10 days notice.

Emergency – something that starts as an incident/problem and results in a change/or a security risk to the trust meaning it needs to be completed before the 10 day standard change timeframe.

Retrospective – a change that has email approval (at least IS&T manager) prior to going ahead, this is generally to fix an issue/security risk.

6.4 Change Closure

Once a change has been initiated, authorised and implemented it will end with a closing status.

When changes have finished the status will be changed to “Implemented successfully” or “Implemented unsuccessfully” and the call resolved. The call will then be reviewed at the next CAB.

Any issues arising from finished changes will be dealt with either as an incident or further change requests as appropriate.

The change will be reviewed and feedback submitted during the next CAB meeting.

7 Equality Impact Assessment

This is attached, Executive Summary is in Appendix A

8 Dissemination and Implementation

8.1 Dissemination

This policy will be held in the document library and advertised in line with the Trust policy on dissemination of procedural documents.

It will be circulated within IS&T via the senior management team, and with relevant stakeholders as and when required.

8.2 Implementation

IS&T Operational and Finance processes and are currently in place in line with this policy, current legislation and best practice.

9 Process for Monitoring Compliance and Effectiveness

Audits will be conducted periodically to ensure these procedures and protocols are being adhered to, failure to comply with these procedures and/or protocols will be deemed as a failure to comply with the policy and will be reported to senior management.

10 Standards/Key Performance Indicators

Standards will be measured throughout the change process, both in regards to success/failure, and in adherence to process, as per the change flow chart in 6.1.

11 Associated Documents

Information Security Policy

IS&T Operational Policy

Appendices

A Equality Impact Assessment: Executive Summary

B Monitoring Table

C Document Checklist

Appendix A – Equality Impact Assessment: Executive Summary

Executive Summary Page for Equality Impact Assessment:	
Document Reference:	Document Title: IS&T Change Control Policy
Assessment Date:	Document Type: Policy
Responsible Director: CIO	Lead Manager: IS&T Security & Resilience Manager
Conclusion of Equality Impact Assessment: There are no adverse effects of this policy on any group	
Recommendations for Action Plan: None	
Risks Identified: None	
Approved by a member of the executive team:	
YES	NO
Name: June Dodds	Position: CIO
Signature: Approved via email	Date:

Appendix B – Monitoring Table

What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
Progress of individual change requests	CAB	SupportWorks change control logs will be reviewed at each CAB meeting	Weekly at a minimum	SupportWorks change control logs	CAB will monitor directly	CAB will issue recommendations if/when relevant	CAB will review the process regularly and will amend processes or procedures if necessary
Adherence to the change process	CAB	SupportWorks change control logs	On-going monitoring will take place at least weekly	SupportWorks change control logs	CAB will monitor directly	CAB will issue recommendations if/when relevant	CAB will review the process regularly and will amend processes or procedures if necessary

Under Review

Appendix C

Document Checklist

	Title of document being reviewed:	Yes/No/ N/A	Comments
1.	Purpose		
	Are the reasons for the development of the Document stated?	Y	
2.	Definitions		
	Have all key terms been clearly defined?	Y	
3.	Consultation		
	Have relevant stakeholders and/or users been consulted with?	Y	
4.	Equality Impact Assessment		
	Has the Trust Equality Impact Assessment Screening Form been completed and attached by the author and approved by the responsible Executive Director?	Y	
5.	Monitoring		
	Has the Monitoring Table been fully completed and attached?	Y	
6.	References/Associated Documents		
	Are key references cited?	Y	
	Are linked documents identified where appropriate?	Y	
6.	Approval		
	Does the Document identify which committee/group will approve it?	Y	
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how this will be done?	Y	
	Does the plan include the necessary training/support to ensure compliance?	Y	
8.	Review Date		
	Is the review date identified?	Y	