

**Corporate Policy**

# **Corporate Document Policy**

Version: **V2**

Date Approved: **March 2015**

## Document Control Sheet

|   |   |              |            |
|---|---|--------------|------------|
| Title of document:  | Corporate Document Policy   |              |            |
| Supersedes:   | Corporate Document Template and Users Guidelines Policy<br>Policy Development Policy (NHS Manchester) July 2009 |              |            |
| Placement in Organisation:  | Corporate Policy and Procedures   |              |            |
| Consultation/Stakeholders   | North, Central and South Manchester CCGs  |              |            |
| Author(s) name:   | David Smith, Corporate Governance Manager   |              |            |
|   | Conor Lomas, Corporate Governance Manager (Previous)  |              |            |
| Department/Team:  | Corporate Governance Team   |              |            |
| Approved by:  | CMCCG Corporate Governance Committee, December 2014<br>Joint Governance Committee, March 2015                   |              |            |
| Approval date:  | March 2015  | Review date: | March 2018 |
| Implementation Date:  | March 2015  |              |            |
| Implementation Method:  | CCG Website<br>Manchester Matters   |              |            |
| <p><i>This document is to be read in conjunction with the following documents:</i></p> <ul style="list-style-type: none"> <li>• <i>Corporate Document Template</i></li> </ul> |   |              |            |

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|-------|---|
| 1.0   | Introduction  |
| 1.1   | Corporate documents – such as strategies, procedures and policies – set out the way North, Central and South Manchester CCGs (hereafter ‘the CCG’) conduct their business. This policy outlines the content, structure and monitoring of these documents.   |
| 1.2   | Through adherence to this policy, the CCG will produce documents that are of a consistently high quality, relevant to CCG business, regularly reviewed, and which achieve a high level of compliance.   |
| 2.0   | Purpose   |
| 2.1   | This policy has been developed to give CCG staff guidance in developing and structuring corporate documents. It sets out standards and processes which should be met and ensures that documents are suitably ratified, updated and implemented.   |
| 3.0   | Responsibilities  |
| 3.1   | The CCG’s board and its committees are responsible for reviewing and approving all policies, SOPs, guidelines and other CCG-wide procedural documentation. They must ensure that these documents are compliant with all relevant legislation and organisational policies, and that they meet suitable standards for content and presentation. |
| 3.2   | Authors must ensure they produce documents which are current, evidence-based and reflect best practice, while complying with all relevant legislation and organisational policies (including this one).   |
| 4.0   | Definitions of Terms Used   |
| 4.1.1 | <b>Corporate Document</b> – A corporate document covers any document produced by the CCG to provide formal guidance or instruction to staff. Examples of Corporate Documents include Policies, Frameworks, Strategies, and Standard Operating Procedures. Corporate documents should be produced as set out in this policy.                   |
| 4.1.2 | <b>Policy</b> – Policies are used to define appropriate conduct by CCG members and employees. They often outline best practice or statutory requirements of the organisation. They are subject to approval and ratification by the Governance Committee as they apply to all CCG stakeholders engaged in the full range of CCG business.      |
| 4.1.3 | <b>Governance Committee</b> – The Governance Committee is one of the delegated committees of the CCG’s Board, discharging functions required by the Health and Social Care Act 2012. The Governance Committee is responsible for approving CCG policies.  |

|       |   |
|-------|---|
| 4.1.4 | <b>Corporate Governance Team</b> – The Corporate Governance Team is a shared function covering North, Central and South Manchester CCGs. Among other things, they are responsible for ensuring the CCG meets its statutory and organisational responsibilities regarding the production and maintenance of policy documents. Contact details are available in section 11 of this policy.                                    |
| 5.0   | Content, Structure and Copyright  |
| 5.1   | Corporate documents should be structured and written to a consistent style in order to ensure readability and usability. The Corporate Document Template (see Appendix B) should be used to structure documents and provides a guide to required content.   |
| 5.2   | A style guide is provided in Appendix A, which covers fonts, numbering, and the use of headers and footers.   |
| 5.3   | It is illegal to copy original works without the copyright owner’s permission, and this includes policy and procedural documents published by other NHS bodies. Where information is being sourced from other documents it should be appropriately attributed and referenced, and the extent to which information is reused should not be excessive. Contact the Corporate Governance Team if you are concerned about this. |
| 6.0   | Version Control   |
| 6.1   | Every time changes to a corporate document are made, this should be recorded in the version control table. The version number should increase sequentially with each revision – thus drafts are numbered version 0.1, 0.2 etc. When a document has been ratified, it should be numbered version 1.0.  |
| 6.2   | If a document requires only minor amendments that do not significantly alter its purpose or content, there is no requirement to present these changes to the Governance Committee. The version number should be raised and the amendment explained in the version control. The Corporate Governance Team should be sent a copy of the revised document.   |
| 7.0   | Plain English   |
| 7.1   | All corporate documents should be written as concisely and clearly as possible. Avoid jargon and unnecessary use of acronyms. Guides on writing in plain English are available from the Plain English Campaign’s website here: <a href="http://www.plainenglish.co.uk/free-guides.html">www.plainenglish.co.uk/free-guides.html</a> .   |
| 8.0   | Equality Analysis   |
| 8.1   | All documents should have an Equality Analysis completed prior to being formally ratified. This should be submitted to the Equality and Diversity Lead for approval. Please see Appendix C for a template as well as guidance on completing it.   |

|      |   |
|------|---|
| 9.0  | Archiving   |
| 9.1  | The Corporate Governance Team maintains a database of all CCG Policies, as well as all previously-approved versions of those policies. If you require a copy of one of these documents, contact the Corporate Governance Team.  |
| 10.0 | Process for Approval & Ratification   |
| 10.1 | This policy will be presented to the CCG's Governance Committee for approval and ratification.  |
| 11.0 | Dissemination, Training & Advice  |
| 11.1 | This document will be published on the CCG's website, and copies are available on request from the Corporate Governance team.   |
| 11.2 | For queries or comments regarding the Corporate Document Policy, please contact the Corporate Governance Manager.   |
| 12.0 | Review, Monitoring and Compliance   |
| 12.1 | This policy will be reviewed every three years (or earlier if circumstances dictate).   |
| 13.0 | References  |
| 13.1 | <p><b>Legislation</b></p> <ul style="list-style-type: none"> <li>Health and Social Care Act 2012:<br/> <a href="http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted">http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted</a> [retrieved 18 November 2014]</li> </ul>  |
| 13.2 | <p><b>Guidance</b></p> <ul style="list-style-type: none"> <li>NHS Brand Guidelines for authorised Clinical Commissioning Groups:<br/> <a href="http://www.nhsidentity.nhs.uk/nhs.download.guideline.action?guideline=6265&amp;rootArticleTypeId=6280">http://www.nhsidentity.nhs.uk/nhs.download.guideline.action?guideline=6265&amp;rootArticleTypeId=6280</a> [retrieved 18 November 2014]</li> </ul> |
| 13.3 | <p><b>Supporting Documentation</b></p> <ul style="list-style-type: none"> <li>NHS Manchester (defunct) – Policy Document Policy</li> </ul>  |

### Version Control

| Version | Date   | Brief description of change                                  |
|---------|--------|--|
| V1.0    | Jan 14 | <i>Policy ratified and approved</i>                          |
| V1.1    | Dec 14 | <i>Policy reviewed and rewritten to increase readability</i> |

*PLEASE NOTE: the most recent version of this document is available on the CCG's website. Printed copies (or saved electronic copies) must be checked to ensure they match the most recent version.*

## Appendix A – Corporate Document Style Guide

### Use of Fonts

Text in corporate documents should use the Arial font and should be black in colour. Except for the front cover, table of contents, headers/footers and section titles, text should be size 12 and justified.

### Front Cover

The front cover of a corporate document should include:

- the CCG logo
- the document type (font size 11)
- the document title (font size 28)
- the version number (font size 11)
- the issue date (font size 11)

The template in Appendix B shows how this information should be formatted.

### Headers and Footers

With the exception of the front page, each page should include:

- a header, containing the reference number, version number and approval date of the policy, and
- a footer, containing the document title and page number.

Both the header and footer should be in font size 9.

### Table of Contents

The table of contents should include each numbered section and all appendices.

### Numbering

- Discrete topics covered in corporate documents should be presented in separate sections, which are listed in the table of contents and are sequentially numbered (1.0, 2.0, 3.0 etc).
- Themes covered within those topics should be presented as separate items and numbered within the sections (3.1, 3.2 etc).
- Line items within themes – such as in definition lists – should also be presented separately (4.1.1, 4.1.2 etc).

## Appendix B – Corporate Document Template



Corporate Document  
Template.doc

Please use the attached document whenever possible.

*If you are viewing this policy in hardcopy, contact the Corporate Governance Team for an electronic copy of the template.*

## Appendix C – Equality Analysis Template and Guidance



Equality Analysis  
Template V5.xls



EA guidance v7  
(draft).docx



EA PPT v3.pptx

Please use the attached template and guidance wherever possible.  
*If you are viewing this policy in hardcopy or via a saved electronic version, please contact the Corporate Governance Team for up-to-date electronic copies of the template and guidance.*

## Appendix D – Equality Analysis

### GMCSU Equality Analysis Form

The following questions will document the effect of your activity on equality, and demonstrate that you have paid due regard to the Public Sector Equality Duty. The Equality Analysis (EA) guidance should be used read before completing this form.

#### Section 1: Responsibility

|     |   |   |
|-----|---|---|
| 1   | Name & role of person completing the EA:          | David Smith, Corporate Governance Manager |
| 2   | Service/Corporate Area                            | Corporate Governance Team                 |
| 3   | Head of Service or Director (as appropriate):     | Nick Gomm, Head of Corporate Services     |
| 4   | Who is the EA for? Select from the drop down box. | North, Central and South Manchester CCGs  |
| 4.1 | Name of Other organisation if appropriate         |   |

#### Section 2: Aims & Outcomes

|   |  |  |
|---|--|--|
| 5 | What is being proposed? Please give a brief description of the activity.   | A policy providing a template for corporate documents, policies etc.                           |
| 6 | Why is it needed? Please give a brief description of the activity.   | To provide guidance to staff regarding the format/structure required for a corporate document. |
| 7 | What are the intended outcomes of the activity?  | Policy to be approved and available to provide guidance to staff.                              |
| 8 | Date of completion of analysis (and date of implementation if different). Please explain any difference                      | December 2014  |
| 9 | Who does it affect? Select from the drop down box. If more than one group is affected, use the drop down box more than once. | CCG Staff  |

#### Establishing Relevance to Equality & Human Rights

10 What is the relevance of the activity to the Public Sector Equality Duty? Select from the drop down box and provide a reason.

| General Public Sector Equality Duties  | Relevance (Yes/No) | Reason for Relevance              |
|--|--------------------|-----------------------------------|
| To eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by Equality Act 2010 | Yes                | To provide guidance to all staff. |
| To advance equality of opportunity between people who share a protected characteristic and those who do not.         | Yes                | To provide guidance to all staff. |
| To foster good relations between people who share a protected characteristic and those who do not                    | No                 |                                   |

10.1 Use the drop down box and advise whether the activity has a positive or negative effect on any of the groups of people with protected equality characteristics and on Human Right

| Protected Equality Characteristic | Positive (Yes/No) | Negative (Yes/No) | Explanation |
|-----------------------------------|-------------------|-------------------|-------------|
| Age                               | No                | No                |             |
| Disability                        | No                | No                |             |

|   |  |   |  |
|---|--|---|--|
| Gender  | No   | No  |  |
| Pregnancy or maternity  | No   | No  |  |
| Race  | No   | No  |  |
| Religion and belief   | No   | No  |  |
| Sexual Orientation  | No   | No  |  |
| Other vulnerable group  | No   | No  |  |
| Marriage or Civil Partnership   | No   | No  |  |
| Gender Reassignment   | No   | No  |  |
| Human Rights  | No   | No  |  |
| If you have answered No to all the questions above and in question 10, explain below why you feel your activity has no relevance to Equality and Human Rights.  |  |   |  |
| Policy is for use by all staff.   |  |   |  |
| <b>Section 4: Equality Information and Engagement</b>   |  |   |  |
| <b>11 What equality information or engagement with protected groups has been used or undertaken to inform the activity. Please provide details.</b>   |  |   |  |
| <b>Details of Equality Information or Engagement with protected groups</b>  |  | <b>Internet link if published &amp; date last published</b> |  |
| None  |  |   |  |
| <b>11.1</b>   | <b>Are there any information gaps, and if so how do you plan to address them</b> | None  |  |
| <b>Section 5: Outcomes of Equality Analysis</b>   |  |   |  |
| <b>12 Complete the questions below to conclude the EA.</b>  |  |   |  |
| What will the likely overall effect of your activity be on equality?  |  | Policy for use by all staff.                                |  |
| What recommendations are in place to mitigate any negative effects identified in 10.1?  |  | None  |  |
| What opportunities have been identified for the activity to add value by advancing equality and/or foster good relations?   |  | None  |  |
| What steps are to be taken now in relation to the implementation of the activity?   |  | Approval by the CCGs and shared with staff.                 |  |
| <b>Section 6: Monitoring and Review</b>   |  |   |  |
| <b>13</b> If it is intended to proceed with the activity, please detail what monitoring arrangements (if appropriate) will be in place to monitor ongoing effects? Also state when the activity will be reviewed. |  |   |  |
| Policy will be reviewed in 2 years time or sooner if required.  |  |   |  |