Change Request for <Insert Programme Name>

|  |  |  |  |
| --- | --- | --- | --- |
| **Document filename:** | | | |
| **Programme** | <insert name> | **Project** | <insert name> |
| **Programme Manager** | [Manager] | **Status** | [Status] |
| **Owner** | <Insert> | **Version** | <insert> |
| **Author** | <insert> | **Issue date** | [Publish Date] |

**Note to Authors** (please delete from the final document).

* A Change Request should be written each time a change is **forecast** to fall outside of agreed tolerance levels. The deviation may impact one, or several, recognised areas: Time; Cost; Scope; Benefits. The changes may be in a relation to a:
* Programme (applied to the programme as a whole) or a programme stage;
* Project (applied to the project as a whole) or a project stage;
* Work package;
* Approved time, cost, scope, benefits contained within an approved New Work Commission, Brief, Business Case or MoU;
* Any other area(s) of tolerance set and agreed by the governing body/individual;
* Changes to programme allocation given to the SRO, i.e. change to the agreed baseline.
* For milestone
* Once you have completed sections 1, 2 and 3 of the Change Request Form, for NHSD programmes please contact CPMO before submission and for non-NHSD programmes please obtain approval from the relevant SRO or Programme Board and then submit this to the NHSX Portfolio Office
* If you have any questions about completing the report, please contact the NHSD CPMO Business Partner or NHSX Portfolio Office.
* Text in violet (using the style ‘NOTES purple’) provides guidance and should be deleted from the final document.
* Text within **<insert>** markers must be replaced by the appropriate text for your programme or project. All other text should remain in the final document.

# 1 Purpose of Submission

**Please select primary purpose for submission** Choose an item.

**[Mandatory]** This section should explain the aim of the submission, for example: “This Change Request Form seeks approval for forecast changes to the cost of developing a new electronic patient record system for primary and secondary care settings approved in the (insert investment justification type). This is due to (insert reasons). This request sets out proposed next steps and recommendations to mitigate the impact of this change for formal approval.”

# 2 Details of Change

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Category of Change** | **Time** | | **Cost** | **Scope** | **Benefits** |
| Yes / No | | Yes / No | Yes / No | Yes / No |
| **Type of change** | **Existing baseline (if applicable):**  A description of an existing baseline to be changed | | | | |
| **New baseline (if applicable):**  A description of a new change | | | | |
| **Reason for change:**  A description of the reason for the change | | | | | |
| **Expected benefit or disbenefit of the change:**  A description of the benefits that are expected if the change is implemented. | | | | | |
| **Expected impacts of the change:**  A description of the impact(s) that are expected if the change is implemented. This also requires a statement of the potential impacts on other programmes, information governance or clinical quality/safety. | | | | | |
| **Alternative solution(s) considered:**  Detail all other alternative solutions that have been considered to satisfy this change – describe the approach in detail | | | | | |
| **Consequences of not implementing change:**  A description of what would happen if the change was not implemented | | | | | |
| **Dependencies:**  A description of dependencies from this programme/project to other programmes/projects (Donor) and other programmes/projects to this programme/project (Recipient). Have interdependent programmes been informed of change, as benefits may be affected. | | | | | |
| **Proposed Implementation date:** | | Date on which the change is to take place. | | | |

# 3 Monitoring and Evaluation

**[Mandatory]** Please describe how the change will be: monitored; evaluated; and reported back to the governing body/individual e.g. SRO, Programme Board, TFPB etc. You will need to include this information in relevant reports and dashboards e.g. Highlight Reports.

# 4 Impact Assessment

**[Mandatory]** This section should explain the impact of the change on respective areas.

|  |  |
| --- | --- |
| **Impact Area** | **Assessment of Impact** |
| **Time** | |  |  |  |  | | --- | --- | --- | --- | |  | Year 1 | Year 2 | Year 3 | | Tier 1 |  | | | | Tier 2 |  | | | | Tier 3 | *Not needed for TFPB* | | | |
| **Cost** | |  |  |  |  | | --- | --- | --- | --- | |  | Year 1 | Year 2 | Year 3 | | Capital |  |  |  | | Cap. Proposed |  |  |  | | Revenue |  |  |  | | Rev. Proposed |  |  |  | |
| **Scope** | |  |  |  |  | | --- | --- | --- | --- | |  | Year 1 | Year 2 | Year 3 | |  |  |  |  | |  | |  | |
| **Benefits** | |  |  |  |  | | --- | --- | --- | --- | |  | Year 1 | Year 2 | Year 3 | | CRBs |  |  |  | | NCRBs |  |  |  | | SBs |  |  |  | | QBs |  |  |  | |
| **Resource** | |  |  |  |  | | --- | --- | --- | --- | |  | Year 1 | Year 2 | Year 3 | |  |  |  |  | |  | |  | |
| **Quality**  **(Customer expectations?)** | |  |  |  |  | | --- | --- | --- | --- | |  | Year 1 | Year 2 | Year 3 | | Customer expectations |  |  |  | | Product(s) |  |  |  | | User needs |  |  |  | |

# 5 Decision

This section should be updated as the document progresses through the change process.

|  |  |  |
| --- | --- | --- |
| **Name Board** | **Decision / Recommendation**  Accepted / Accepted with caveats / Rejected | **Date decision made** |
| **Programme Board/SRO** |  |  |
| **TFPB** |  |  |