



Policy on the Standardisation of Documentation

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Target Audience	CCG Board members and staff
Approving Committee	CCG Executive
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The CCG is committed to an environment that promotes equality, embraces diversity and respects human rights both within our workforce and in service delivery. This document should be implemented with due regard to this commitment.

This document can only be considered valid when viewed via the CCG's intranet. If this document is printed into hard copy or saved to another location, you must check that the version number on your copy matches that of the one online.

Approved documents are valid for use after their approval date and remain in force beyond any expiry of their review date until a new version is available.

Version Control Sheet

Version	Date	Reviewed By	Comment
Draftv0.1	Nov 13	CCG Executive	Approved once update made to the font size from 11 to 12 and national guidance checked.
V1.0	Nov 13		On web.
V1.0	July 16	Board Secretary	Reviewed – no changes required.

Analysis of Effect completed:	By:	Date:
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Appendix 1 Definitions

1. Introduction

A significant number of reports, documents and correspondence material are produced by NHS Bolton Clinical Commissioning Group (CCG).

This document has been produced to provide staff with information for the standardisation of relevant documents developed by the CCG. All documents should be structured according to the CCG's templates and standards where available. Where they are not available, documents should be developed in line with this policy, using formatting where appropriate.

This policy should be read in conjunction with NHS England's national guidelines at:

<http://www.nhsidentity.nhs.uk/all-guidelines/guidelines/authorised-clinical-commissioning-groups/introduction>

2. Aims and Objectives

It is important that consistency of content and format is introduced for all documents produced as this will add clarity and professionalism to the work undertaken.

The aim of this document is therefore to provide clear and concise guidance for the production of reports, documents and other material in accordance with the required standard adopted by the CCG.

Templates will be provided for the following documents and can be found on the CCG's website or on the K drive under CCG Document Templates:-

- Policy template.
- Terms of reference template.
- Agenda template.
- Minute template.
- Attendance/apologies template.
- Audience attendance sheet template.
- CCG Board cover sheet and report template.
- Action log template.
- CCG Executive cover sheet.
- Committees/groups cover sheet.
- Memo template.
- Fax template.
- Letter template.
- Presentation template.
- Labels template.

3. The Key Aspects of Standardisation

3.1 Font type, size and layout

The standard text format and size for all documentation is Arial 12. An exception is applied to text contained within the header and footer areas of a document where Arial 10 should be used, and tables where it may be necessary to use font size 10.

Major headings within a document should be written in 'Arial' with 'Bold' applied, font size 14.

Minor headings within a document should be written in 'Arial' with 'Bold' applied, font size 12.

If automated index and tables are being used, ensure that headings are set to the font and size as stated above.

The layout of text within a document will very much depend on what is being produced, its purpose and the preferred style of the author. It is acceptable to use 'align left' or 'justify' when completing documents, align left is recommended when producing large blocks of text for public documents so that it can be easily read.

3.2 Use of CCG Logo

The CCG logo should be used carefully and correctly in accordance with NHS England's national identity guidelines. The normal position of the logo should be in the top right hand corner of a document and unless it is necessary for the logo to be in colour, eg. external letters, the black and white logo should be used.

3.3 Numbering of Headings

The numbering of headings within a document should follow the example below:

- 1.0 Main heading of section
- 1.1 Section sub-heading
- 1.1.1 Sub sub-heading

Each section should start with the next sequential number, 2.0, 3.0 and so on.

3.4 Header and Footer

Headers and footers must be put on all documents that require them, these documents are: policies, procedures, guidelines, protocols, strategies, codes of practice and consultation documents.

Header and footers can be applied by clicking on the insert menu and selecting 'Header and Footer' from the drop down box.

The header should contain the document reference number, the status of the document (indicating the version number) and the date (in format month/year). This information should be set out as shown in the example below:

Document Ref No status (version number) (month/year)

The footer should contain the document title, the page numbers and the author. This information should be set out as show in the example below:

Document title page x of y Author

Please note: The font size for writing placed in the header or footer should be Arial 10

3.5 Referencing/Unique Identifier

All documents should be appropriately referenced for ease of retrieval.

Letters

All letters that are to be sent externally from the CCG must use the letter template. An appropriate reference should be added to each letter which will assist in locating the letter when required. This should be based on the following:

- The initials of the person the letter is being sent to.
- The initials of the person sending the letter.
- The basic subject of the letter.
- The number of the letter sent against all the above criteria.

For example: the first letter sent to the HR Manager regarding HR policies would be referenced as:

- Our ref: LS/JT/HRPolicies/1

Letters should not be referenced in the footer section.

The standard text format for all letters is 'Arial' 12.

Written documents

Written documents such as policies, procedures, guidelines and strategies should have a document reference number to identify the document. Please

contact the Board Secretary who will issue a reference number for the document.

Saving of documents

Needs to be done in chronological order, ie save as the year, month, date of the document and then the document name.

3.6 Patient Information

Patient information must be developed in line with NHS England's national identity guidelines.

3.7 Version Control

The version control of a document is very important as it outlines the history of consultation, amendments that have taken place to produce the final document and ensures that the correct version is used to amend or distribute.

All documents (both excel and word) must have a version number. As changes are made to the document, each new "draft" will be given a higher sequential number using the convention 01, 0.2 etc. Once the "draft" document is signed off as approved, it will then be given the "final" version number, eg. 1.0.

A table of consultation history should be included at the bottom of the control page of the document. This should be updated with the version, date and consultation as per the example below:

Version	Date	Reviewed by	Comment
Draft v0.1	09/13	Issued to AD	Changes agreed
Draft v0.2	09/13	CCG Executive	Approved

It is important the version control number of the document is detailed in the header section of the document.

3.7.1 Review of Documents

All documents on the CCG website must be given a review date. It is the responsibility of the author to ensure that the document is up to date and fit for purpose.

When a document requires a review of its content, the version number will change. If a document is reviewed and **the content does not change**, the version number will be 1.1. This shows that it's the first version of the document and it has had 1 review. If on the next review the content does change, it will become 1.2 and so on.

If when the document is reviewed the **content does change**, the document version number becomes 2.0, this will indicate that at review the content has changed. This changed to the next sequential number each time the document content changes (3.0, 4.0 etc).

Please note: All previous versions must be saved by the author of the document.

It is important that the same methodology of version control is adopted within the CCG to ensure consistency and clarity. If you require further information or advice, please contact the Board Secretary or the CSU Information Governance team.

3.8 Page Numbers

Page numbers should be added to the document footer and will be in the format of page x of y. This can be applied automatically through functions within the 'header/footer' toolbar and should be positioned at the bottom right hand side of the page.

- Click on the **insert** menu and select **header and footer** from the drop down menu.
There should be no page number on the front sheet of the document. This can be achieved by:
- Clicking on the **insert** menu and selecting from the drop down menu, **footer**, edit footer, **page number** and select "**different first page**".

Appendix 1

Definitions:

There are a number of terms in use in the CCG. The following should be used as a guide in determining what to call a document:

Strategy – a long-term view (eg. three years plus) of the direction the CCG is going in relation to a particular service area, outlining what it plans to achieve in that time and allowing annual updates to tighten up broader intentions.

Policy – a plan of action to be adopted or pursued by an organisation. A policy reflects an objective and guides managers and employees towards that objective in situations requiring discretion and judgement. The use of policies increases the chances that different managers and employees will make similar choices when independently facing similar situations.

Procedure – the mode by which a policy will be implemented. Procedures set out the way things should be done eg. Codes of Practice. They define activities and how actions are to be performed in order to reflect practice.

Protocol – similar to procedure, but tends to be used more frequently in clinical areas eg. criteria. Clinical protocols are agreements to a particular sequence of activities that assist clinicians to respond consistently in complex areas of practice. They may be established on a multi-disciplinary basis.

Guidelines – set of directions or principles that give general advice but allow for local discretion, eg. standards.