

Quality Impact Assessment Policy

Lancashire & South Cumbria ICB (L&SC)

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1 Introduction

- 1.1 NHS L&SC ICB is committed to ensuring that commissioning decisions, business cases and projects are evaluated for their impact on quality, in line with the statutory duty for quality.
- 1.2 This policy details the process to be undertaken to assess the quality impact of commissioning decisions, business cases, projects and other business plans.

2 Purpose

2.1 The purpose of this policy is to set out the responsibilities, process and format to be followed when undertaking a Quality Impact Assessment (QIA).

3 Scope

3.1 The policy relates to Quality Impact Assessments that are undertaken when developing commissioning decisions, business cases, projects and other business plans. It applies to staff that undertake Quality Impact Assessments, as well as those who scrutinise and approve Quality Impact Assessments.

4. Definitions

4.1 Quality

Quality in health and care services embraces three key components:

- Patient Safety: Care is delivered with an ethos of avoiding harm and any risks to individual's safety.
- Effectiveness of care: Care is delivered according to the best evidence as to what is clinically effective in improving an individual's health outcomes
- Patient Experience: Care is delivered to provide the individual with a positive experience of receiving and recovering from the care provided, including being treated according to what that individual wants or needs, with compassion, dignity and respect. The quality approach to patient experience is to minimise anxiety.

4.2 Quality Impact Assessment and Risk Mitigation

Quality Impact Assessment is a continuous process to ensure that commissioning decisions, business cases, projects and other business plans are assessed for the potential consequences on quality, with any necessary mitigating actions outlined in a uniformed way. It ensures a consistent approach to assessing the impact of change.

A QIA highlights the impact that change may impose on the provision and for other provisions that may be affected.

This can be a positive move forward when there is a need to improve health outcomes and if resource is appropriately managed. Removing or diverting resource (levelling down) or

introducing any measures that will have a negative impact on service provision requires full consideration and ICB approval.

Identifying the risk mitigations is fundamental within the QIA, as these inform the decision to be made. Unmitigated risks should be identified on the appropriate Risk Register.

4.3 Equality

Equality means ensuring individuals or groups of individuals are treated fairly and no less favourably, specific to their needs, including on the grounds of race, gender, gender reassignment, disability, marriage and civil partnership, pregnancy and maternity, religion or belief, sexual orientation, or age.

The ICB is committed to ensuring that Equality, Diversity and Inclusion is at the heart of everything we do – how we deliver health and care services for our population, how we commission such services, how we engage with the people we serve and how we manage our workforce.

4.4 Equality and Health Inequalities Impact and Risk Assessment

An Equality and Health Inequalities Impact and Risk Assessment (EHIIRA) is a key tool in ensuring that organisational decision-making is as inclusive as possible. EHIIRAs act as the key piece of evidence that the ICB's decision-making processes meet the requirements of the Equality Act (2010) and pay due regard to the three aims of the Public Sector Equality Duty (PSED):

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between people who share a protected characteristic and those who do not
- Foster good relations between people who share a protected characteristic and those who do not

Many policies, plans, proposals or decisions have the potential to impact on health and potentially widen health inequalities. By completing an EHIIRA, any potential impacts can be identified and recorded, and actions can be taken to mitigate against and reduce those impacts.

EHIIRAs are required to be undertaken at the formative stage of any decision-making process or change process and will need to be reviewed and signed off by the MLCSU Equality and Inclusion Team. More information on the EHIIRA process can be found at https://intranet.lancashireandsouthcumbria.nhs.uk/wp-content/uploads/2022/06/ICB-EHIIRA-Process-Flowchart.pdf and EHIIRA templates and guidance are available. For further information and/or support around the completion of EHIIRAs, please contact the MLCSU Equality and Inclusion Team at equality.inclusion@nhs.net.

4.5 Privacy and Data

Patients have the expectation that their privacy, data and confidentiality will always be respected, during their care and beyond. It is essential therefore, when considering or implementing any new initiatives, that the impact of the collection, use and disclosure of any patient information is considered regarding the individual's privacy.

4.6 Data Protection Impact Assessment

A Data Protection Impact Assessment (DPIA) is a process that helps an organisation to identify privacy risks and ensure lawful practice when a new project is designed or changes are made to a service. The purpose of the Data Protection Impact Assessment is to ensure that privacy and data risks are minimised while allowing the aims of the project to be met whenever possible. The DPIA will be signed off by Information Governance Team at Midlands and Lancashire CSU.

5. Procedures

- 5.1 The QIA must be commenced promptly and before the process/system is implemented or a system/access/process is procured or changed. An EHIIRA and a Data Protection Impact Assessment Checklist must also be completed for all projects and submitted separately to the relevant business partner at Midlands and Lancashire CSU for approval (see below). This is summarised in Appendix A.
- 5.2 Equality and Quality Interdependency

To ensure that tackling unmet needs and health inequalities remain a fundamental principle of all work the ICB undertakes, the Quality Impact Assessment Review Group will receive a completed EHIIRA to support their review of the QIA. The Quality Impact Assessment Review Group will not however sign off the EHIIRA and Data Protection Impact Assessment.

Review of EHIIRAs and Data Protection Impact Assessments will be undertaken and approved by the relevant teams at Midlands and Lancashire CSU with final sign off completed by:

- The ICB Corporate Governance Team for Equality and Health Inequalities Impact and Risk Assessments
- The Data Protection Officer/Senior Information Risk Officer for Data Protection Impact Assessments

6. ICB Roles and Responsibilities for QIAs

Accountable Chief Officer

6.1 The Accountable Officer has ultimate responsibility for QIAs, EHIIRAs and DPIAs and commissioning decisions across the ICB.

Project Leads

6.2 Responsible for undertaking QIAs, EHIRAs and DPIAs, identifying risks, mitigating actions, and submitting the assessment to any PMO in place as part of the required project planning and implementation processes, or to the Programme Lead/their executive lead. Project Leads will have regard for project assurance requirements and approval timescales, prior to the commencement of any project.

Responsible for submitting QIAs approved by the Programme Lead/executive lead, with the EHIIRA to the Associate Director of Quality Assurance, for consideration by the Quality Impact Assessment Review Group.

Responsible for attending and presenting their QIA submitted to the Quality Impact Assessment Review Group, if required.

Programme Lead/Executive

6.3 Responsible for reviewing and approving QIAs, EHIIRAs and DPIAs undertaken by Project leads in their programmes, prior to submission to the Associate Director of Quality Assurance for Quality Impact Assessment Review Group scheduling.

Responsible for assurance on the risk assessment process and escalation of any identified risks and mitigating actions required, to the Corporate Risk Register via the Senior Leadership Team Meeting.

The PMO team

6.4 For any programmes of work under the PMO, the PMO team is responsible for ensuring QIAs, EHIIRAs and DPIAs are completed; reviewing and making recommendations for actions and accountability for any identified risks prior to submission to the Quality Impact Assessment Review Group. Ensuring QIAs are submitted to the Quality Impact Assessment Review Group in a suitable period.

Chief Nursing Officer

6.5 Responsible for signing off Quality Impact Assessments jointly with the Medical Director.

Director of Quality Assurance and Safety

6.7 Responsibility for ensuring there is a robust and effective process through the Quality Impact Assessment Review Group for scrutiny and review of QIAs and for progression of the QIAs to the Chief Nursing Officer and the Medical Director for final sign off.

Associate Director of Quality Assurance

6.8 Responsible for provision of training for staff who need to complete QIAs and advice and support to Project Leads while completing QIAs, prior to submission to the Quality Impact Assessment Review Group.

The Quality Impact Assessment Review Group

6.9 Responsible for reviewing all QIAs and forwarding to the Chief Nursing Officer and the Medical Director for final sign off. Membership will include senior representatives from the Quality and Patient Experience functions and where appropriate other personnel with

relevant expertise, including safeguarding.

Quality Committee

6.10 The Quality Committee is responsible for providing assurance to the Governing Body that the Quality Impact Assessment process is robust and effective. The committee will receive a paper at least twice a year, outlining the QIAs received and reviewed by the Quality Impact Assessment Review Group.

Commissioning Committees

6.11 Commissioning Committees have specific responsibilities for supporting the delivery of the ICB's strategic objectives. The Quality Impact Assessment process forms part of larger project/programmes of work, therefore, a QIA must be referenced in any paper that would be received in a Commissioning Committee relating to a project or programme of work.

The Information Governance Team

6.12 Responsible for advice, support and review of Data Protection Impact Assessments.

The CSU Equality and Inclusion Business Partner

6.13 Responsible for advice, support, review and sign off of EHIIRAs.

7. When to Carry Out a Quality Impact Assessments

- 7.1 Quality Impact Assessment is a process to help decision makers fully think through and understand the consequences of possible and actual financial and operational initiatives and changes (e.g. commissioning decisions, business cases, projects and other business plans).
- 7.2 QIAs must be completed in parallel with any scheme or project development at the initiation stage and as standard protocol when developing business plans, commissioning intentions and financial recovery schemes.
- 7.3 Quality Impact Assessments must not to be documented and signed off retrospectively.
- 7.4 A QIA is required for all new, changing or paused commissioned schemes, or for those that are going to stop for any reason, earlier than the original commissioning intention.
- 7.5 QIAs should be reviewed on a regular basis by the Project Lead, as part of reviewing the actual impact throughout the implementation stage. A review period should be specified and documented on the initial Quality Impact Assessment template.

8. Quality Impact Assessment Review Group

- 8.1 The Quality Impact Assessment Review Group will meet at least monthly to review all submitted QIAs with the associated EHIIRAs. As owner of the QIA, the Project Lead will complete and submit the QIA once their Programme Lead/Executive has approved it. The Quality Impact Assessment Review Group will receive new QIAs and those where changes are identified to the impact on quality, through the life of the project.
- 8.2 The Quality Impact Assessment Review Group will determine the assurance required to recommend sign off to the Chief Nursing Officer and the Medical Director.

9. The Quality Impact Assessment template

9.1 The Quality Impact Assessment is available at Appendix B.

10. Monitoring and Review Arrangements

- 10.1 All Quality Impact Assessments in development, implementation and adaptations are intended to be monitored with full consideration of patient experience, patient safety and clinical quality. Individuals completing the assessments in conjunction with respective departments or directorates, will determine the key performance indicators, risk ratings and risk mitigations. This includes risks associated with finances and existing or potential Cost Improvement Plans. These should be clearly identified on the QIA template along with monitoring review dates.
- 10.2 At every stage in the development of the project or procurement the QIA can be challenged or escalated. In such cases, all views will be formally recorded for transparency and agreed decision making will be documented and retained with the relevant QIA.
- 10.3 The Associate Director of Quality will monitor this policy and formally advise the Director of Quality Assurance and Safety and the Chief Nursing Officer, initially at 6 month intervals of any revisions required to optimise the effectiveness of the QIA process.

11. List of Stakeholders Consulted

Date	Name of Individual or Group	Designation	Were comments received, considered and incorporated Yes/no	If not incorporated record reason why
22.06.2023	Claire Lewis	Associate Director of Quality	Yes	
22.06.2023	Travis Peters	Equality & Inclusion	Yes	

	Business Partner (supporting NHS Lancashire and South Cumbria ICB)	

12. References and Bibliography

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/809305/Quality_in_public_health_shared_responsibility_2019.pdf

13. Associated Documents

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/212819/How-to-Quality-Impact-Assess-Provider-Cost-Improvement-Plans-.pdf

https://nhsproviders.org/media/1160/prepprog-good-practice-qias-2.pdf

Appendix A QIAs, EHIIRAs and DPIAs Process Flow

EHIIRA process document

https://intranet.lancashireandsouthcumbria.nhs.uk/wp-content/uploads/2022/06/ICB-EHIIRA-Process-Flowchart.pdf

QIA Pathway

Project Lead completes the quality impact assessment (QIA) with support from the Associate Director Quality Assurance, as required and submits to Programme Lead/Executive for approval.

Project Lead submits the QIA for discussion at the next QIA Review Group, with the EHIIRA enclosed for reference.

The Project Lead will receive an invitation to join the panel to present the QIA if required.

The QIA Review Group will determine whether there is adequate assurance to progress the QIA for Chief Nursing Officer and Medical Director sign off

EHIIRA Pathway

Project Lead completes the equality and inclusion impact assessment (EHIIRA)

Project Lead submits the completed EHIIRA to the CSU E&I team

The E&I team will review and support the Project Lead until the EHIIRA is ready for approval

DPIA Pathway

Project Lead completes the Data Protection Impact Assessment (DPIA)

Project Lead submits the completed DPIA to the CSU IG team

The IG team will review and support the Project Lead until the DPIA is ready for approval

The DPIA will be sent to the Data Protection Officer/Senior Information Risk Officer for Data Protection Impact Assessments

Appendix B – Quality Impact Assessment Template



Quality Impact Assessment

This Quality Impact Assessment will be used to assess and document the quality impact of commissioning decisions, business cases, projects and other business plans and to assess a change. For example, a change may be made to a strategy, policy, procedure, service, or function.

Please read the Quality Impact Assessment policy. This provides guidance on how to proceed with other essential impact assessments linked to this policy.

In addition to taking account of the quality impact for patients, carers staff and others, this tool will measure the potential for any controversy or reputational risks and subsequent impact for the ICB and public confidence.

Please identify if this is a new QIA or a review of an existing QIA.

1	Name of Quality Impact Assessment:				
Name	Name of QIA:				
Date:					
2	related/accompanying	ying out the Quality Impact og Equality and Health Ineq Protection Impact Assessr	ualities l	mpact and Risk	
Name	e:	Job Title:		Date:	
3	Programme Lead/Executive: Responsible for reviewing QIA, and other impact assessments prior to submission				
Name	Vame: Job Title:			Date:	
4	Quality Impact Assessment Review Group Director or Associate Director approval for progression to final sign off				
Name	e:	Job Title:	Date:		

5 Chief Nursing Officer Responsible for final approval				
Name	e:	Job Title:	Date:	
		<u> </u>	<u> </u>	
6	Medical Director Responsible for fina	l approval		
Name	e:	Job Title:	Date:	
7	Description and Aim in place now (Please	es of Strategy, Policy, Proce detail)	dure, Service or Function	
8	Description and Aim	ns of the Proposed Change (Please detail)	

Levelling Up – Levelling Down

Prior to risks scoring, it is important to consider if the suggested proposal will mean a levelling up. This is targeting one area and allocating additional resources, service provisions, finances and so on. This can be a positive move forward when there is a need to improve health outcomes and if resource is appropriately managed.

If the proposal indicates a levelling down, by removing or diverting resource from other areas where a) they are still needed, b) will be needed in future or c) by introducing any measures that will impact other service provision, please describe.

Completing the Quality Impact Assessment

The Quality Impact Assessment is documented below under the following domains with accompanying risk scoring.

- Impact of Patient Experience
- Impact on Patient Safety
- Impact on Clinical Effectiveness
- Mortality and Risk
- Will the proposal impact on patients, carers or other stakeholders?
- Impact on Staff
- Involvement, Engagement and Controversy

The document requests you to simultaneously consider and identify within your proposal any levelling up and/or down and then to calculate a score using the table below. When scoring, document the highest individual risk total in the levelling columns as opposed to adding all the scores together.

Risk Assessment Scoring Table

Use the table below to calculate the risk score.

Establishing Overall Score and Rating

Using the appropriate score for Consequence (1-5) multiplied by the appropriate score for Likelihood (1-5) follow the table below to obtain the overall Incident / Risk severity rating

				Likelihood		
		1 (Rare)	2 (Unlikely)	3 (Possible)	4 (Likely)	5 (Almost Certain)
	5	5	10 (High)	15	20	25
	(Catastrophic)	(Moderate)		(Extreme)	(Extreme)	(Extreme)
	4 (Major)	4	8	12 (High)	16	20
ce		(Moderate)	(Moderate)		(Extreme)	(Extreme)
ren	3 (Moderate)	3 (Low)	6	9 (High)	12 (High)	15
Conseduence			(Moderate)			(Extreme)
Sol	2 (Minor)	2 (Low)	4	6	8	10 (High)
			(Moderate)	(Moderate)	(Moderate)	
	1 (Negligible)	1 (Low)	2 (Low)	3 (Low)	4	5
					(Moderate)	(Moderate)

O Immediant Francisco			Tick the correct box				
9 In	npact on pa	tient Experience	yes	no	Don't know	Levelling Up Score	Levelling Down Score
change of provision		Levelling up (Impact description-please explain here)					
experien	nce?	Levelling down (Impact description-please explain here)					
change of provision		Levelling up (Impact description-please explain here)					
experien	nce?	Levelling down (impact description – please explain here)					
see a ch the servi	•	Levelling up (impact description – please explain here)					
		Levelling down (impact description – please explain here)					
Is there a that patie satisfact decrease	ion will	Levelling up (impact description – please explain here)					
		Levelling down (impact description – please explain here)					

Will there be an extended wait or extended stay (if applicable or necessary)?	Levelling up (impact description – please explain here)				
	Levelling down (impact description – please explain here)				
Will there be an impact on who is entitled to access the service Example: a	Levelling up (impact description – please explain here)				
change to referral conditions?	Levelling down (impact description – please explain here)				
	Scoring The assigned risk score for this the highest individual score from the final risk score will reflect a assessment domain	n the que	stions	above.	

40	40 Inspect on Detions Cofety			7	Γick the	correct bo	X
10	Impact o	n Patient Safety	yes	no	Don't know	Levelling Up Score	Levelling Down Score
		Levelling up (impact description – please explain here)					
patier service provis		Levelling down (impact description – please explain here)					
		Levelling up (impact description – please explain here)					
there identi enviro	•	Levelling down (impact description – please explain here)					

can affect patients?		
Are there any Infection prevention & control risks?	Levelling up (impact description – please explain here)	
	Levelling down (impact description – please explain here)	
Is there any unintended risk of harm for the patient	Levelling up (impact description – please explain here)	
Example: psychological, social, or emotional?	Levelling down (impact description – please explain here)	
	Scoring The assigned risk score for this section is based or the highest individual score from the questions above. The final risk score will reflect all the sections of the assessment domain	

44	Laurent au Olla	alora Effect Consumer	Tick the correct box				
11	impact on Cili	nical Effectiveness	yes	no	Don't know	Levelling Up Score	Levelling Down Score
Is there a positive impact on the effectiveness of patient service provision and		Levelling up (impact description – please explain here)					
	ision and ent outcomes?	Levelling down (impact description – please explain here)					
impa effect patie	ere a negative act on the ctiveness of ent service rision and	Levelling up (impact description – please explain here)					
patie	ent outcomes?	Levelling down (impact description – please explain here)					

Is there a risk of escalation of care, e.g., admission to	Levelling up (impact description – please explain here)			
an acute setting or risk of readmission?				
risk of readmission?	Levelling down (impact description – please explain here)			

40	1.91 - 191	1			Tick the	e correct bo	correct box		
12	Likelinoo	d of increased Incident levels?	yes	no	Don't know	Levelling Up Score	Levelling Down Score		
likeli incid	ere a hood that lents will ease?	Levelling up (impact description – please explain here)							
		Levelling down (impact description – please explain here)							
	Scoring The assigned risk score for this section is based on the highest individual score from the questions above. The final risk score will reflect all the sections of the assessment domain								

	Tick the correct box

	proposal impact on patients, other stakeholders?	yes	no	Don't know	Levelling Up Score	Levelling Down Score	
Positive Impact?	Levelling up (impact description – please explain here)						
	Levelling down (impact description – please explain here)						
Negative Impact?	Levelling up (impact description – please explain here)						
	Levelling down (impact description – please explain here)						
No Impact N/A	Levelling up (impact description – please explain here)						
	Levelling down (impact description – please explain here)						
Scoring The assigned risk score for this section is based on the highest individual score from the questions above. The final risk score will reflect all the sections of the assessment domain							

Tick the correct box

14 Impact on	staff	yes	no	Don't know	Levelling Up Score	Levelling Down Score
Is there a positive impact on the safety of staff and/or service provision?	Levelling up (impact description – please explain here)					
	Levelling down (impact description – please explain here)					
Is there a negative impact on the safety of staff and/or service	Levelling up (impact description – please explain here)					
provision?	Levelling down (impact description – please explain here)					
Will staff workload be affected?	Levelling up (impact description – please explain here)					
	Levelling down (impact description – please explain here)					
Has the plan been discussed with staff and have they been involved in	Levelling up (impact description – please explain here)					
decision making or provided their perspective?	Levelling down (impact description – please explain here)					
How will 'change' impact upon staff morale?	Levelling up (impact description – please explain here)					

	Levelling down (impact description – please explain here)			
How will changes for staff be monitored?	Levelling up (impact description – please explain here)			
	Levelling down (impact description – please explain here)			
Are there any identified hazards, including Health & Safety and	Levelling up (impact description – please explain here)			
environmental risks, for staff and others?	Levelling down (impact description – please explain here)			
	pased estions e			

45	larra la ranca de		Tick the correct box					
15	Involvemen Engagemer	nt/Communication		no	Don't know	Levelling Up Score	Levelling Down Score	
beer	e the public n consulted? , describe	Levelling up (impact description – please explain here)						
If so, describe the type of engagement that has taken place, level of involvement and		Levelling down (impact description – please explain here)						

the views, opinions or concerns for the proposal?	
	Scoring The assigned risk score for this section is based on the highest individual score from the questions above. The final risk score will reflect all the sections of the assessment domain

40	lance lance and a	ent/Engagement/ rsy		Tick the correct box			
16	Controvers			no	Don't know	Levelling Up Score	Levelling Down Score
prop pote cont	s the losal signify ntial roversy for service,	Levelling up (impact description – please explain here)					
patients, carers, stakeholders and public?		Levelling down (impact description – please explain here)					
beer	e there n previous plaints ut the ice?	Levelling up (impact description – please explain here)					
		Levelling down (impact description – please explain here)					
beer cont issu	e there n previous entious es, media erage or	Levelling up (impact description – please explain here)					
repu	erage or utational nage?	Levelling down (impact description – please explain here)					

Scoring	
The assigned risk score for this section is based	
on the highest individual score from the	
questions above. The final risk score will reflect	
all the sections of the assessment domain	

17 Additional Considerations:

It is important to ensure that risks are fully mitigated or removed to answer the following question:

question:					
Could your proposal impact upon any ICB	Tick the correct box				
existing policy or identified health inequalities, noting that protected characteristics are addressed in the ICB EHIIRA	yes	no	Don't know	Levelling Up Score	Levelling Down Score
Levelling up (impact description – please explain here)					
Levelling down (Impact description - please explain here)					

18 Strategic Decisions

These are not day to day decisions. These are decisions that impact upon the relevant public body whose remit is to achieve a statutory purpose. This involves utilising a set of duties, functions and powers over an extended period.

If you feel the proposal or decision is a strategic decision, this will require further scrutiny.

Please explain below, in as much detail as needed to provide full insight.

Explanation:

Risk Identification Score

19	Risk Identification –	System Risk				
	Please answer the following questions carefully:					
The pro		Risk Descriptor: (explain)	Tick the correct box			Score
The proposal:		The risk that	yes no Don't			Score
		The new triat) yes	110	know	
Is the pi	roposal of high					
importa						
Will the	proposal require					
	g up or levelling down.					
	ou identified changes					
	ervice provision					
	ledged in the					
proposa						
	gnify changes across le/wider system or					
	ded consequences for					
	ovisions/services or					
areas?	011010110/00111000 01					
(Refer to	o 18 above)					
Will the	proposal require					
	onal changes to					
resource						
	elling up					
	elling down					
	proposal affect					
_	or jobs in other					
services						
	ou considered any at may affect					
	lders, the public or					
	ion, including their					
	ion of risks?					
	e any risks affecting					
	utation of the ICB?					
Have id	entified risks been					
added to	o the relevant risk					
1	^	Ť	1	1	İ	ı

register?

20	Risk Mitigation
-	vide explanation below of the risk mitigations, actions, responsibilities, timeframes rther contingency measures:
Risk Descr	iptor:
	mitigate the risks (can include avoiding the risk, accepting the risk, isolating or ne risk or transferring the risk):
Further info	ormation (if necessary):
21 Risk N	litigation Evaluation Completion and Resubmission Date

Is this a first QIA or a review of the QIA?

If you are completing another QIA form,

What is the recommended frequency for evaluation

please link this with your first form.

Date of evaluation	
Date of next evaluation	
	Print Name:
Evaluation completed by	Sign Name:

Quality Impact Statement

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Having completed this impact assessment, your original assumptions may have changed. Please document any changes and the overall impact on the quality of service currently provided by implementing this change. Please include the expected improvement 'comparison' change will deliver.
Please ensure all risk mitigating factors noted in the risk mitigation section are incorporated in this statement to provide a comprehensive overview.

Please provide the statement.

Statement: