



NOT PROTECTIVELY MARKED

WEST MIDLANDS POLICE

Force Policy Document

POLICY TITLE:	POLICY GUIDANCE
POLICY REFERENCE NO:	Int/06

Executive Summary

Policy is created and applied to outline good practice and/or legal requirements regarding behaviour and actions of staff. Any policy commissioned or updated will need to conform to a fixed procedure to ensure corporacy and accountability. This document provides guidance in the creation, evaluation and management of all Policy, and Force and Local directives set against the Governance framework. It directs and simplifies how policy documents are produced, reviewed and amended and the required control methods and levels of responsibility/ownership throughout the 'life' of each of these documents.

At no time must policy be created without first ensuring the requisite recording through the Governance procedure is adopted and notification with the force policy co-ordinator

Any enquiries in relation to this policy should be made directly with the policy contact/department shown below.

Intended Audience

This policy is primarily aimed at policy authors, Departmental/LPU heads, and all police officers and staff involved in the creation of all Policy, Force and Local Directives.

Current Version And Effective Date.	Version 1.1	06/08/2013
Business Area Owner	Strategic Intelligence	
Department Responsible	Strategic Intelligence	
Policy Contact	Vicki Couchman, Policy Co-Ordinator	
Policy Author	Inspector Gail Rumble	
Approved By	Command Team	
Policy Initial Implementation Date	16/07/2012	
Review Date	01/06/2014	
Protective Marking	Not Protectively Marked	
Suitable For Publication – Freedom Of Information	Yes (no restrictions – see section 13)	

Supporting Documents

Policy – directly supporting documents

- Policy Template
- Force and Local Directive templates
- Policy Checklist
- Mandatory Consultation list
- Recorded evidence of Consultation
- Risk Prioritisation Model (RPM)
- EQIA – ([click here](#))
- Policy Governance flowchart – ([Appendix A](#))
- Policy content definitions – ([Appendix B](#))
- Policy Creation guidance – ([Appendix C](#))
- Roles and Responsibilities – ([Appendix D](#))

Evidence Based Research

Full supporting documentation and evidence of consultation in relation to this policy including that of any version changes for implementation and review, are held with the policy co-ordinator including that of the authorised original Command Team papers.

Please Note

PRINTED VERSIONS SHOULD NOT BE RELIED UPON. THE MOST UP TO DATE VERSION OF ANY POLICY OR DIRECTIVE CAN BE FOUND ON THE EQUIP database on the Intranet.

Diversity Vision Statement and Values

“Eliminate unlawful discrimination, harassment and victimisation. Advance equality of opportunity and foster good relations by embedding a culture of equality and respect that puts all of our communities, officers and staff at the heart of everything we do. Working together as one we will strive to make a difference to our service delivery by mainstreaming our organisational values”

“All members of the public and communities we serve, all police officers, special constables and police staff members shall receive equal and fair treatment regardless of, age, disability, sex, race, gender reassignment, religion/belief, sexual orientation, marriage/civil partnership and pregnancy/maternity. If you consider this policy could be improved for any of these groups please raise with the author of the policy without delay.”

CONTENTS

I. Acronyms 4

Section 1

1 INTRODUCTION.....5
2 AIM.....5
3 PURPOSE.....5
4 AUTHORITATIVE BASIS.....5
5 POLICY GOVERNANCE.....6

Section 2

6 DEFINITION OF POLICY and ASSOCIATED DOCUMENTS.....7
6.1 Policy.....7
6.2 Directive
6.3 Local Directives
6.4 Storage and Maintenance.....
7 TARGET AUDIENCE.....7
8 POLICY and LOCAL DIRECTIVES: - Standard Corporate Approach.....7
8.1 Policy.....7
8.2 Force and Local Directives.....8
9 REVIEWING POLICIES.....7
10 RECORDING AND ARCHIVE OF POLICIES.....8

Section 3

11 EQUALITY AND IMPACT ASSESSMENT (EQIA).....9
12 HUMAN RIGHTS.....10
13 FREEDOM OF INFORMATION (FOI).....10
14 TRAINING.....10
15 PROMOTION/DISTRIBUTION AND MARKETING.....10
16 REVIEW.....10
17 VERSION HISTORY.....11

Appendices:-

[Appendix A](#): Governance Flow Charts..... 12
[Appendix B](#): Policy content definitions..... 13
[Appendix C](#): Policy Creation guidance..... 15
[Appendix D](#): Roles and Responsibilities..... 18

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Acronyms

ACPO	Association of Chief Police Officers
BAPA	Black and Asian Police Association
CJU	Criminal Justice Unit
CPS	Crown Prosecution Service
EQIA	Equality Impact Assessment
EQUIP	Efficiency, Quality, Understanding, Improvement, Productivity
FLC	Force Leadership Conference
FOI	Freedom of Information
GPMS	Government Protection Marking Scheme
HRA	Human Rights Act
IAG	Independent Advisory Group
LPU	Local Policing Unit
NHS	National Health Service
NPIA	National Policing Improvement Agency
OSD	Organisation and Service Development
RPM	Risk Prioritisation Model
SOP	Standard Operating Procedure
SLA	Service Level Agreement
SPOC	Single Point of Contact
WMAWP	West Midlands Association for Women in Policing
WMP	West Midlands Police

SECTION 1

1 INTRODUCTION

- 1.1 Policy is created and applied to outline good practice and/or legal requirements regarding behaviour and actions of staff. This minimises risk to both the individual and the organisation. Any policy commissioned or updated will need to conform to a fixed procedure to ensure corporacy and accountability is maintained.

2 AIM

- 2.1 The aim of this document is to provide comprehensive guidance on the creation and amendment of all West Midlands Police (WMP) policy to ensure corporacy and accountability.

3 PURPOSE

- 3.1 This policy is intended to assist in the creation and management of Policy, Force and Local Directives.

- 3.2 The following areas will be addressed in the main body of this document:

- Establish clear **ownership** of policies
- Ensure that all staff have **access** to policies and understand the responsibilities which the service has placed on them
- Ensure that a **consistent approach** is maintained when producing policies
- Establish a **structured system** to manage their authorisation, development, publication, monitoring and review
- Provide information to members of the public about our service and areas of business
- Ensure that the force has a system in place to demonstrate an effective Governance process and structure

4 AUTHORITATIVE BASIS

- 4.1 The Chief Constable has overall direction and control of WMP and is ultimately accountable for the policies and supporting documents of the organisation and its actions. Policies are put in place to comply with statute and safeguard the legal position of WMP.
- 4.2 The law will always take precedence over Force policies and care must be taken to ensure their content is legally compliant and up to date.
- 4.3 Force policies are binding on all members of the organisation and individuals will be accountable for their actions. Non-compliance may render individuals subject to disciplinary action.
- 4.4 Each document must consider and state its own legal basis. The need to comply with all relevant legal responsibilities is combined with an additional legal requirement to promote positive outcomes in all areas and those characteristics that come under the Equality Act 2010.

5 POLICY GOVERNANCE

- 5.1 Force policy creation is a critical element of the organisations governance and all decisions should be clearly recorded by Command Team members at strategic meetings.
- 5.2 All requests for new policy must be approved by the appropriate Chief Officer/Command Team member prior to any work being instigated.
- 5.3 All approved requests for new policy must be logged with the policy co-ordinator who will allocate a unique reference number.
- 5.4 When the need for a new policy is identified the policy owner must take into account:
- Resources
 - Training Implications
 - Strategic Plan
 - Implementation Implications
 - Impact on frontline policing
 - Reducing Bureaucracy - increasing efficiency

Please refer to the supporting policy governance flowchart [Appendix A](#)

SECTION 2

6 POLICY DEFINITIONS

6.1 Policy

6.1.1 Policies set out the objectives of the organisation to provide a level of consistency, eliminate ambiguity and set the required standard for all officers and staff to follow. The policy may contain supplementary documentation (e.g. Standard Operating Procedures or Terms of Reference) to fulfil and comply with the policy or aid understanding, provided that it does not detract from the policy objective.

6.2 Directives

6.2.1 Directives are 'annual notifications or spontaneous information published to support an existing policy'. Examples would be Bank Holiday notifications or new pay scales.

6.3 Local Directives

6.3.1 It is recognised that Local Policing Units (LPU) and Departments will have a need to issue guidance to clarify a specific issue unique to that business area or location. Local directives will not amend, contravene or duplicate policy and should not use the term 'policy'.

6.3.2 Local Directives are still subject to the Equality Impact Assessment (EQIA) process to assess their impact on people.

6.4 Storage and Maintenance

6.4.1 Only policy or force directive documents will be managed and stored within the EQUIP database maintained by Strategic Intelligence.

6.4.2 Documents must be clear, concise and unambiguous. Wider publication will lead to WMP being judged both on the professional quality and the actions that arise from implementation.

7 TARGET AUDIENCE

7.1 The target audience for policy is both WMP staff and the public/community served; policy should be written to direct WMP staff and inform the public and shape public confidence.

8 POLICY, FORCE AND LOCAL DIRECTIVES: - Standard Corporate Approach

8.1 Policy

8.1.1 Policy will consist of:

- Executive summary (policy statement)
- Policy content - consisting of introduction/background, aims, objectives, requirements, roles and responsibilities; supported by associated reference documents, appendices, plans, tables etc
- Equality Impact Assessment (EQIA)
- Human Rights
- Freedom of Information (FOI)
- Training
- Promotion/Distribution and Marketing
- Review
- Version Control

A Definition of each stage is included at [Appendix B](#)

8.2 Force and Local Directives

8.2.1 Force and Local Directives will in general follow the same guiding principles as policy documents, however all ownership, content, approval and control for Local Directives rests with the designated LPU or departmental owner including the EQIA.

Directives should use the appropriate template and include the following:

- Executive summary
- Introduction/background, aims, LPU/Departmental requirements and supporting information
- Equality Impact Assessment
- Review
- Version Control

A definition is included at [Appendix B](#)

9 REVIEWING POLICIES

9.1 The owner is responsible for monitoring all policies and associated documentation to ensure that information is accurate and up to date. All policies should be considered a 'living document' and any internal changes, good practice, legislative changes etc, should be noted and acted upon. This would also include minor amendments such as contact names and telephone numbers.

9.1.1 A formal review of the policy will also take place dependent on the risk shown and review date recorded on the policy ([Appendix C](#) – section 4). The policy co-ordinator will take responsibility for reminding the owning department by e-mail, three months prior to the review date.

9.2 Considerations on Review

In undertaking the review, the following should be considered:

- Continued relevancy of the policy and ALL supporting documents, forms and guidance
- Adherence to current legislation and the impact of new/amended legislation that could affect the policy. This may also involve knowledge of current Home Office projects leading to the inclusion of further review dates
- Internal factors e.g. change to the organisation, spending restrictions
- Is the policy achieving its aims? What feedback has been received throughout the policy term
- The review should include those areas shown on the mandatory consultation list and, at the discretion of the owner, any key individuals within the unit and/or identified stakeholders to ensure that the policy is still fit for purpose
- Any significant changes should be included in the consultation process
- Community impact
- EQIA relevance
- Any recent considerations

9.2.1 A policy checklist should be completed however there is no requirement for Command Team approval (signature) unless there is a significant change.

9.3 EQUALITY IMPACT ASSESSMENT (EQIA)

- 9.3.1 The policy owner must arrange for the EQIA to be reviewed and where applicable, further consultation to be undertaken. The same procedures as set out on the Diversity Unit [website](#) will be followed.

9.4 Changes

- 9.4.1 If, as a result of the review, changes are required to the policy, a decision will be made whether these are minor or significant based on the risk to the organisation, individual and/or community.

9.4.2 No Changes or Minor Changes

If there have been no changes or only minor changes, the owner should forward the policy checklist and all supporting documents to the policy co-ordinator. This should include e-mail confirmation of any changes made.

Any changes made to the policy should be documented in the version control, both at the front and close of the policy document.

9.4.2 Significant Change.

Where there is significant change, the owner should ensure that the policy process is adhered to (see [Appendix A](#)). No policy will be accepted with any significant changes unless supported by the required evidence.

9.5 Policy Withdrawal

If a policy is to be withdrawn, this must be approved at the relevant Command Team Meeting. All documentation will then be forwarded to Strategic Intelligence where any communication will be retained in the policy library and all officers and staff advised where appropriate.

9.6 Transfer of Ownership

Where a policy transfers ownership, the policy owners at Command Team level involved must both agree (with supporting reasons) to the transfer and advise the policy co-ordinator of the change.

10 RECORDING and ARCHIVE

- 10.1 All policy and associated documentation will be recorded and available on the EQUIP database accessible via the Intranet home page
- 10.2 EQUIP will only contain current policy documents, all obsolete and amended versions of policy will be retained in a separate archive, maintained by Strategic Intelligence.
- 10.3 The control of all policy documents and their version history and evidence, will be the responsibility of the policy co-ordinator.

SECTION 3

11 EQUALITY IMPACT ASSESSMENT (EQIA)

This policy has been reviewed and drafted against all protected characteristics in accordance with the Public Sector Equality Duty embodied in the Equality Act 2010. The policy has been Equality Impact Assessed to show how WMP has evidenced 'due regard' to the need to:

- Eliminate discrimination, harassment and victimisation
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Supporting documentation in the form of an EQIA has been completed and is available for viewing in conjunction with this policy.

12 HUMAN RIGHTS

12.1 This policy has been implemented and reviewed in accordance with that set out with the European Convention and principles provided by the Human Rights Act 1998. The application of this policy has no differential impact on any of the articles within the Act. However, failure as to its implementation would impact on the core duties and values of WMP (and its partners), to uphold the law and serve/protect all members of its community (and beyond) from harm.

13 FREEDOM OF INFORMATION (FOI)

13.1 Public disclosure of this policy document is assessed by the policy co-ordinator who will apply the principles of FOI. Version 1.2 of this policy document is fully disclosable to members of the public and via the WMP internet website.

Which exemptions apply and to which section of the document?	Whole document	Section number
No issues – version 1.0	n/a	n/a.

14 TRAINING

14.1 The following training has been developed in line with this policy:-

- EQIA training via Learning and Development

15 PROMOTION / DISTRIBUTION & MARKETING

15.1 The following methods will be adopted to ensure full knowledge of the policy:

- Policy document and associated documents on the Intranet for the attention of all WMP officers and staff
- Recording and audit entry on the policy library
- Promotion of the policy and Governance via Force Leadership Conference

16 REVIEW

- 16.1 Ownership of the policy and any other associated documents remains with Strategic Intelligence who will be responsible for monitoring the policy to reflect any Force, Home Office/ACPO, legislative changes or good practice both locally and nationally.
- 16.2 A formal review of the policy document, including that of any other potential impacts will be conducted by the date shown on the first page.
- 16.3 Any amendments to the policy will be conducted and evidenced through the policy co-ordinator and set out within the version control template.
- 16.4 Feedback and any potential improvements to the content and layout of the policy document are always welcomed by the author/owner and policy co-ordinator.



CHIEF CONSTABLE

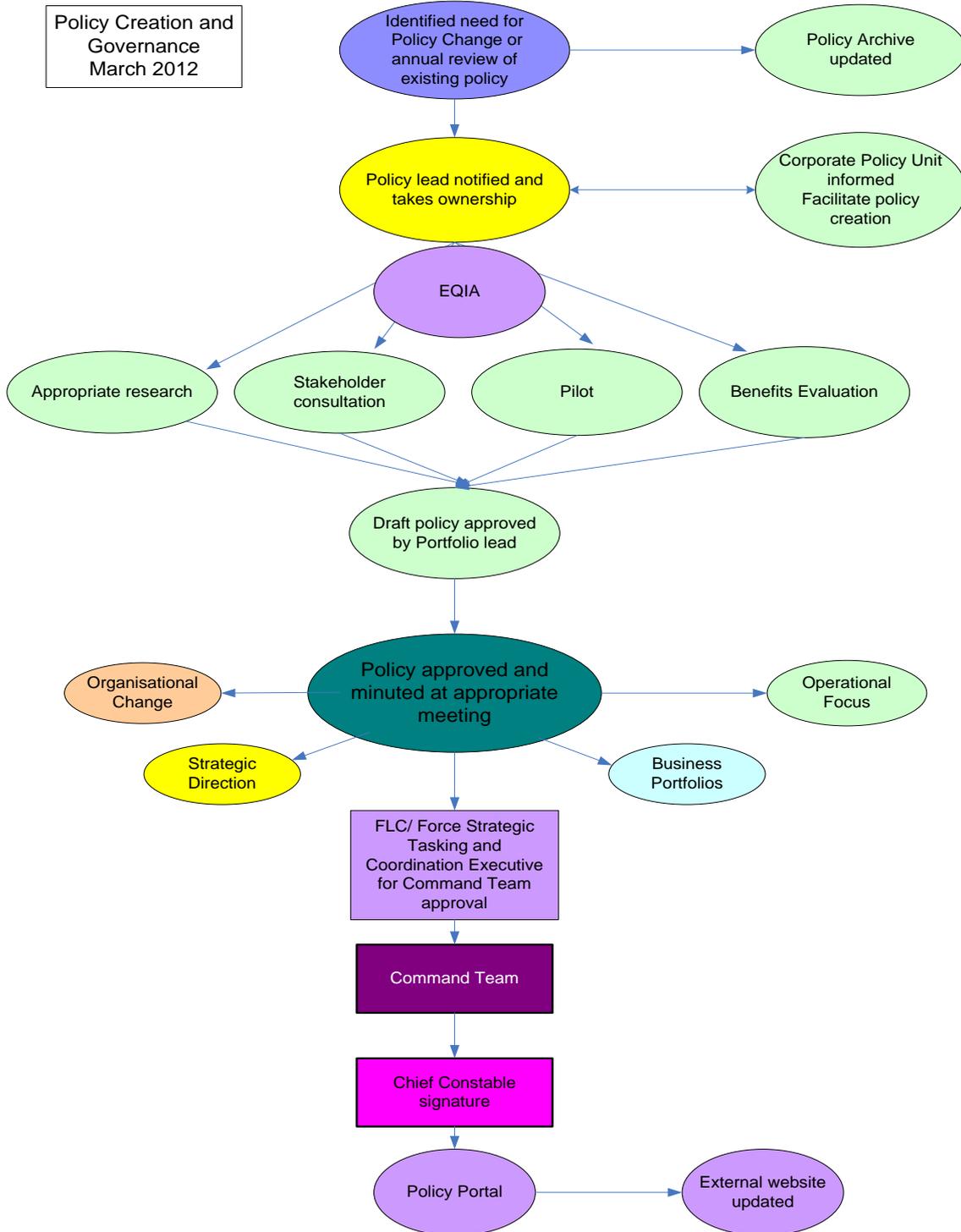
17 VERSION HISTORY

Version	Date	Reason for Change	Amended/Agreed by.
Version 1.0	16/07/2012	New Force policy. Policy supersedes that of Order 75/2003 which is withdrawn with immediate effect	Force policy authorised by CC Sims
Version 1.1	06/08/2013	GPMS amended to Not Protectively Marked as document did not fall under the Impact Criteria Guidance for Restricted	Amended by 56408 Vicki Couchman Agreed by Insp Gail Rumble
V1.2	10/10/2014	Strategic Intelligence new owner after OSD merger – amended policy ref and dept owner details	56408 Couchman



Policy Creation and Governance
March 2012

Governance Flow Chart





Policy content definitions

A) Executive Summary

This consists of a short statement that describes clearly the general aims and content of the policy.

B) Policy Content

This should set out:

- Introduction/background information leading to the requirement for a policy e.g. legislation, Home Office/ACPO requirements, local/ impacts etc
- Aims and objectives of the policy
- Detailed operational guidelines, product descriptions and instructions
- Roles and responsibilities for individuals, teams and, where required, other partners e.g. Courts, CPS, Home Office. These may be supported by appendices, tables, information sheets, guides
- Details specific to WMP, with consideration given to partners and stakeholders
- Process maps where required
- References to associated policies and plan; and other supporting documents

C) Equality Impact Assessment (EQIA)

The purpose of an EQIA is to assess and consult on the likely impact of functions and policies on protected groups. WMP function extends to corporate and local policy, corporate and local projects, operations and investigations.

The relevant protected characteristics are: age, disability, gender reassignment, marriage and civil partnership*, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

***Marriage and civil partnership – only the discrimination aim applies.**

All policy and function will have an impact on the service that we deliver to the public or staff and therefore there will be some relevance to the General Equality Duty.

If it is decided, **albeit unlikely**, that a policy does not impact on equality, the rationale for that decision should still be recorded, ideally including reference to the information that was available in order to make that decision.

- For further information for related guidance and EQIA assessors, please refer to the Diversity Unit ([click here](#)).
- EQIA [form](#)

D) Human Rights

All policy should be reviewed to ensure that all of the procedures and activities described are consistent and compliant with the duties set out in the Human Rights Act (HRA) and act appropriately and positively to support the rights of others. Activity which impinges upon HRA must be lawful, necessary and in the interests of a specified legitimate aim and only to an extent which is proportionate and as un-intrusive as practicable to achieve that aim.

All evidence and decision-making regarding the impact of HRA within a policy should be evidenced within the EQIA form.

**E) Freedom of Information (FOI) and Government Protected Marking Scheme (GPMS)**

Both public and (internal¹) disclosure of the policy document will be authorised by Command team; supported by the FOI manager. This will involve the mandatory GPMS review/marketing of the policy and supporting documents.

Clear information supported by detailed information will be retained.

F) Training

A learning needs analysis should be completed to assess the training required in order to assure compliance of the policy. This may include:

- Classroom training
- E-learning
- Video Box
- National programmes

G) Promotion / Distribution and Marketing

These will consist of both mandatory and supplementary processes as follows:-

Mandatory

- **EQUIP** recording of the policy and associated documents
- Noticeboard/internal advertising
- WMP external site as required under the Information Commissioner and Publication Scheme
- Marketing via Policy Owner on their intranet site

Supplementary

- E-mail notice to specific teams and users
- Training co-ordinated and advertised via Learning and Development (*see section F above*)
- Multi-agency teams, Councils, Community Partners and Voluntary Organisations e.g. domestic abuse (women's refuge and supporting charitable/community organisations)
- Press and PR e.g. advertising via local radio, television and newspapers, Facebook etc

H) Review

All policies will be assessed using the Risk Prioritisation Model (RPM) which will score the policy against category risks e.g. legal, organisational, environmental. This determines the review period required; 3 months notice will be given to the Policy Owner of the requirement to review the policy, associated documents and EQIA.

I) Version Control

Version control is an auditable record of the history of the policy and its supporting documents. All amendments should be recorded by date, reason for change and authorisation details.

¹ Internal documents may be classed as confidential or sensitive and only available on application from the policy owner with due reason and controlled audit processes. For example; names, telephone numbers of partner agencies e.g. CTU, and associated policy controlled plans.



POLICY CREATION and AUTHORISATION PROCESS

The following procedures are required to be completed to ensure authorisation of all Policy documents:-

1. Governance
2. Policy Template
3. EQIA
4. Risk Prioritisation Model
5. Consultation key stages
6. Policy Checklist
7. Final Draft
8. Command Team and Chief Constable approval
9. Promotion, Marketing and Publication

1 Governance

- 1.1 All requests for a new policy document must be approved by the appropriate Chief Officer / Command Team member responsible for the department making the request.
- 1.2 When the need for a new policy is identified the Policy Owner must take into account:
 - Resources
 - Training Implications
 - Strategic Plan
 - Implementation Implications
 - Impact on frontline policing
 - Reducing Bureaucracy
- 1.3 All approved requests for a new policy document must be logged with the policy co-ordinator who will allocate a unique reference number.

2 Policy Template

- 2.1 All authors should use the draft policy template ([click here](#)). The template will be watermarked with the wording 'Draft – do not copy' to ensure that, during the consultation process, it is clear that this is NOT yet approved as Policy
- 2.2 Key points for consideration when completing the draft policy document:-
 - The policy title, date, draft version and name of author and owning department must be recorded in the 'footer' section
 - Ownership and author/contact details must be included on the front page
 - The policy is only a draft and grammar, styling and formatting is not a major consideration at this stage
 - It is vital that the policy content is lawful, clear and concise and should not therefore need further interpretation or guidance
 - The version control at the close of the document is to track progress of the draft policy



3 Equality Impact Assessment (EQIA)

- 3.1 An EQIA of the policy document should be an integral part of the policy development. An assessor should be involved from the outset and continue throughout the development/review process. Impacts on the inter-relationship of other policies should also be considered e.g. impact on Learning and Development.
- 3.2 Where required, the feedback/advice obtained from members or groups contacted in the EQIA process for advice should be recorded on the EQIA form e.g. faith/belief group, WMAWP, BAPA, Disability and Carers Network, Age Concern etc.

Please Note: The [EQIA form](#) is for external publication alongside the policy document.

4 Risk Prioritisation Model

- 4.1 The Risk Model must be used at the earliest opportunity in order to deduce both the urgency of its implementation and subsequent review periods:
- **High** – 0 to 12 months;
 - **Medium** – 12 to 24 months;
 - **Low** – 3 year maximum review period.

The model will set out all the likely consequences that may impact on the policy by description against each area ([click here](#)).

5 Consultation

- 5.1 Appropriate consultation of the policy document is key to its success (both internal/external) to ensure that members/groups involved have been given the opportunity to contribute to the policy development. The extent of the consultation must be proportionate to the potential impact of the policy.
- 5.2 Consultation around the policy should be recorded and all evidence retained by the policy co-ordinator for audit purposes. Should any challenges be made following publication of the policy the consultation sheet can be made available through FOI

5.3 Consultation key stages:

5.3.1 Mandatory Consultation

The attached list of WMP consultees provides a cross section of expertise to give initial feedback on the draft policy.

All mandatory consultation must be evidenced.

In all cases, consideration of the following may be useful:-

- Be clear if there are any specific areas that require their particular expertise
- Allow sufficient time to negate any impact on workloads



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- Inform them of any previous reviews and supply evidence for the

APPENDIX C (continued)

5.3.2 Additional Consultation

The policy document must be forwarded to representatives of groups who will be affected by the policy. Any documentation generated will be retained by the policy coordinator

Additional consultees may include

- Stakeholders within the owning department
- Representatives from affected Departments/LPUs
- Multi-agency organisations; local partners e.g. CPS/Courts; community partnerships; voluntary/charitable organisations

6 **Policy Checklist**

The policy author should complete the attached checklist as they progress through the policy process which should be submitted with the draft policy and all other supporting documents to the policy co-ordinator.

7 **Final Draft**

The policy co-ordinator will ensure that all stages have been completed prior to submission for Command Team approval.

8 **Command Team and Chief Constable approval**

Policy will require Command Team approval by the relevant business owner prior to authorisation by the Chief Constable.

9 **Promotion, Marketing and Publication**

Promotion/distribution and marketing of the policy should be considered during development and recorded in the policy document.

Policy will be published on both the **EQUIP** and external web-sites and on the noticeboard. Consideration should also be made to its promotion and marketing by some of the following methods:

- Internal e-mail to key/dedicated personnel, roles and teams
- Marketing via owning departments webpage
- Training material co-ordinated through Learning and Development
- Newsbeat
- Conferences/workshops – internal staff and external partners
- Local Media, e.g. radio, press and television including community based media
- Social media e.g. Facebook, twitter, you-tube



ROLES and RESPONSIBILITIES

<p>All Officers and Staff</p>	<ul style="list-style-type: none"> • Are required to comply with policy • No changes are to be made to policy without informing the policy co-ordinator
<p>Policy Co-ordinator</p>	<ul style="list-style-type: none"> • Responsible for maintenance, updating and monitoring this policy • Will have overall responsibility for the co-ordination of the force's policies • Will assign a unique number to each policy • Will maintain a catalogue of each policy record, to include; identity number, title, owner, holder, current status, publication and review dates • Work closely with the author to ensure that the content of policy is accurate and succinct • Will review draft policy and provide initial feedback and areas of work required and concerns e.g. legislative impacts, force, partnership and community impacts • Will review all consultation evidence and requirements for further work/evidence • Will review the final draft in light of the consultation • Will review all supporting documents • Will be responsible for ensuring that policies, once approved, are published to enable full and easy access • Notify publication of a policy • Maintain an audit function • Inform policy owner three months before the review date • Review policy: FOI, GPMS, Human Rights, training and marketing



ROLES and RESPONSIBILITIES

<p>Policy Owner - Heads of Department and Command Team.</p>	<ul style="list-style-type: none"> • Each individual policy will have an owner, normally the lead department who has responsibility for the subject matter • The Policy Owner is responsible for deciding if a new policy is required, in conjunction with the Command Team member / Business Owner and through governance procedure • The Policy Owner will be directly responsible for the accurate content of the document and for notifying the policy co-ordinator of: <ul style="list-style-type: none"> a) any necessary changes b) withdrawal of the policy and/or supporting documents • Every policy will be signed by its Command Team owner to verify its accuracy and current relevance prior to publication • The Policy Owner must maintain a record of all actions/decisions/evidence that the correct procedure has been followed in producing the policy document. Copies will be forwarded and retained by the policy co-ordinator
<p>Policy Author</p>	<ul style="list-style-type: none"> • Person identified by the Policy Owner with the necessary expertise on the subject matter to produce policy • Ensure that the topic being written about is researched and consulted upon. • Ensure that all feedback provided by each consultee is responded to • Ensure that the content is clear, concise and accurate • Keep the Policy Owner and Co-ordinator informed of progress • Ensure that all records pertaining to the production of the policy are retained
<p>Mandatory Consultees</p>	<ul style="list-style-type: none"> • MUST confirm to the policy author their agreement to the policy document • Must provide feedback (usually within 4 weeks) about relevance to their area of work