

ENDORSEMENT AND VALIDATION

Endorsement

Endorsement confirms the workload impact and saving/ cost estimates are appropriate to the proposal given its scope and risk profile, and the benefits are realistic and can be delivered as outlined.

Name:	Signature:
Position: Executive Director <Insert Title>	Date: / /
Division:	Contact No:
Comment:	

Validation

Validation Stage confirms the robustness of the Business Proposal.

Chief Finance Officer- West Moreton Hospital and Health Service

Name:	Date: / /
Contact No:	Signature:
Endorsed	Not Endorsed
Comments:	

Approval

Chief Executive

Name:	West Moreton Hospital and Health Service
Date: / /	Contact No:
Approved	Not Approved
Signature:	
Comments:	

SUPPORTING DOCUMENTS AND ATTACHMENTS

The following documents support this business change proposal and assist in reducing proposal risk

Document Number/ Version	Document Title
Appendix one	Review Scoping Action Plan
Appendix two	Rehab and Allied Health Current Structure
Appendix three	Proposed structure of Rehab and Allied Health Services
Appendix four	Financial Savings by Position number and discipline