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INDEPENDENT ASSURANCE

PROGRAMME: National Treatment Centres Programme

Gate 0 – Strategic Assessment

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Senior Responsible Owner (SRO):	Douglas McLaren
Date Appointment letter issued to SRO:	No formal SRO appointment letter issued; SRO effective from 16/08/2024
Draft report to SRO	24/04/2025
Final Report to SRO and PPPA	12/05/2025
Delivery Confidence Assessment:	[Redacted s.29(1)(a)]
Programme/ Project Director:	not applicable
Accountable Officer:	Caroline Lamb
Scottish Government Portfolio Accountable Officer:	Caroline Lamb
Investment Decision Maker:	Caroline Lamb
Business Case stage reached:	Benefits Realisation
Review Team Leader:	[Redacted s.38(1)(b)]
Review Team Members:	[Redacted s.38(1)(b)]
Previous Review:	Strategic Review Gateway Review 0 04/10/2021 to 06/10/2021 [Redacted s.29(1)(a)] Assurance of Action Plan Review 02/08/2022 to 03/08/2022 [Redacted s.29(1)(a)] Strategic Review Gateway Review 0 07/03/2023 to 09/03/2023 [Redacted s.29(1)(a)]

About this Report

This Report is an evidence-based snapshot of the Programme's status at the time of the Review. It reflects the views of the independent Review Team, based on information evaluated over the Review period, and is delivered to the SRO immediately at the conclusion of the Review.

This assurance review was arranged and managed by:

Portfolio, Programme and Project Assurance Hub
Scottish Government Directorate of Internal Audit and Assurance
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More information about the Portfolio, Programme and Project Assurance Hub and guidance on the requirements for integrated assurance and approvals is available from:

PPPAssurance@gov.scot

1. Gateway Review Conclusion/ Stage Gate Assessment (SGA)

Stage Gate Assessment
[Redacted s.29(1)(a)]
[Redacted s.30(b)(i)]

The Stage Gate Assessment RAG status should use the definitions below.

RAG	**Criteria Description**
Green	Successful delivery of the project to time, cost and quality appears highly likely and there are no major outstanding issues that at this stage appear to threaten delivery. **Recommendation: The programme/project is ready to proceed to the next stage.**
Amber/Green	Successful delivery appears probable. However, constant attention will be needed to ensure risks do not materialise into major issues threatening delivery. **Recommendation: The programme/project is ready to proceed to the next stage.**
Amber	Successful delivery appears feasible but significant issues already exist requiring management attention. These appear resolvable at this stage and, if addressed promptly, should not present a cost/schedule overrun. **Recommendation: This programme/project can proceed to the next stage with conditions but the programme/project must report back to the PPPA on the satisfaction of each time bound condition within an agreed timeframe**.
Amber/Red	Successful delivery of the project is in doubt with major risks or issues apparent in a number of key areas. Urgent action is needed to ensure these are addressed, and establish whether resolution is feasible. **Recommendation: This programme/project should not proceed to the next phase until these major risks or issues are managed to an acceptable level of risk and the viability of the project/programme has been re-confirmed.**
Red	Successful delivery of the project appears to be unachievable. There are major issues which, at this stage, do not appear to be manageable or resolvable. The project may need re-base lining and/or overall viability re-assessed. **Recommendation: This programme/project should not proceed to the next phase until these major issues are managed to an acceptable level of risk and the viability of the project/programme has been re-confirmed.**

2. Summary of Concerns, Evidence and Recommendations

	Recommendation	Risk and issue identified with evidence	Status	Classification	Aligned with Profession
R1	[Redacted s.29(1)(a)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
R2	[Redacted s.29(1)(a)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
R3	[Redacted s.29(1)(a)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
R4	[Redacted s.29(1)(a)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
R5	[Redacted s.29(1)(a)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
R6	[Redacted s.29(1)(a)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]

*Risks denotes risks, issues, concerns, assumptions and dependencies

All recommendations should be categorised as Critical, Essential or Recommended:

- **Critical (Do Now)**: To increase the likelihood of a successful outcome it is of the greatest importance that the programme/project should take action immediately.
- **Essential (Do By)**: To increase the likelihood of a successful outcome the programme/project should take action in the near future. *[Note to review teams – whenever possible Essential risk-based recommendations should be linked to programme/project milestones e.g. before contract signature and/or a specified timeframe e.g. within the next three months.]*
- **Recommended**: The programme/project should benefit from the uptake of this recommendation. *[Note to review teams – if possible Recommended risk-based recommendations should be linked to programme/project milestones e.g. before contract signature and/or a specified timeframe e.g. within the next three months.]*

ACTION PLAN - You must within three weeks of the final report provide your intended actions for addressing each recommendation. You should then share it with the relevant Scottish Government Portfolio Accountable Officer and copy it to the SG`s Portfolio, Programme and Project Assurance Hub (PPPA). Thereafter, you are responsible for implementing the actions in response to the recommendations. If the review has identified serious deficiencies or difficulties (including probable failure to meet the planned budget) within the programme the appropriate Officer should inform the relevant Minister/s.

3. Blockers to Delivery

Ref No:	Blocker	Describe specific nature of blocker	Consequence if not resolved
1	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]

4. Comments from the SRO

SRO Comments
I have reviewed the draft report and recommended actions and am content to accept the findings.

5. Review Team Findings and Recommendations

5.1 Strategic Context

5.1.1 The Review Team were provided with a suite of documents and saw that the National Treatment Centres (NTC) Programme (the Programme) had a solid strategic justification in both the 2016 National Clinical Strategy, which set the Scottish Government's strategic intent for NHS Scotland for the 15 years, and the NHS Recovery Plan 2021-2026 which set out an intention to increase inpatient/day case procedures by 55,500 by 2025/26. Continuing, in June 2024 the Cabinet Secretary for Health and Social Care set out a commitment to not only recover health and social care services, but to reform them to support improved wellbeing of people across Scotland.

5.1.2 The Review Team heard that the investment was to support a national network of purpose-built healthcare facilities across Scotland for planned and diagnostic care. These new facilities would be an important resource both locally and nationally providing:

- an increase in capacity to support patients to access treatment
- increased flexibility for patients accessing treatment
- support collaborative working across territorial NHS Boards.

The plan was that the centres would give sufficient planned care capacity in eleven specialties up until 2035, providing an additional 40,000 procedures per year. The Review Team heard that the original intentions were modified after COVID with a greater emphasis on use of the facilities to reduce long waits. Some patients identified by the Programme, and with consent, would be treated at an appropriate centre rather than at their "local" hospital.

5.1.3 Eleven new facilities were in scope originally. Due to current financial limitations, the Scottish Government Draft Budget, December 2023, instructed NHS Boards to pause all capital projects in development. [Redacted s.30(b)(i)]. Consequently, there are currently 5 NTC's in operation: Golden Jubilee Phase 1; NHS Fife NTC; NHS Highland NTC; NHS Forth Valley NTC and Golden Jubilee Phase 2. [Redacted s.29(1)(a)]

[Redacted s.30(b)(i)]

[Redacted s.29(1)(a)]

5.2 Business Case – Finance and Benefits Realisation

[Redacted s.30(b)(i)] Individual business cases have been generated and employed for each of the individual infrastructure projects within the NTC Programme, responsibility for delivery of the services rests with the (territorial) Health Boards. [Redacted s.30(b)(i)] most of the key Programme statements of direction and intent, such as Programme Vision, Aim and Objectives are presented in other documents, such as the Programme Playbook, and this also contains key details of intended outcomes and outputs, Programme structures and delivery approach. Benefits have also been identified and benefits management put in-place. [Redacted s.30(b)(i)]

5.2.2 [Redacted s.30(b)(i)] These centres deliver high volume low complexity treatments (and diagnostics to support this) for suitable patients from an area wider that the territorial boards would cover. [Redacted s.30(b)(i)]

[Redacted s.30(b)(i)]

[Redacted s.29(1)(a)]

[Redacted s.30(b)(i)]

[Redacted s.29(1)(a)]

5.4 Delivery of the Previous/Current Phase

[Redacted s.30(b)(i)]

5.4.5 The Review Team heard that Treatment Centres deal with high volume low complexity procedures most notably ophthalmology and orthopaedics. [Redacted s.30(b)(i)]

5.4.8 [Redacted s.30(b)(i)] For some NTC's, notably NTC Highland, many additional staff have been successfully recruited. [Redacted s.29(1)(a)] [Redacted s.30(b)(i)]

[Redacted s.29(1)(a)]

[Redacted s.29(1)(a)]

[Redacted s.30(b)(i)]

[Redacted s.29(1)(a)]

6. Acknowledgement

Review Team Acknowledgement
The Review Team would like to thank the Programme Team and all interviewees for their support and openness, which contributed to the Review Team's understanding of the Programme and the outcome of this Review.

7. Next Assurance Review

Next Assurance Review
[Redacted s.30(b)(i)]

8. Distribution of Report

The contents of this Report are confidential to the SRO and their representative/s. It is for the SRO to consider when and to whom they wish to make the Report (or part thereof) available, and whether they would wish to be consulted before recipients of the Report share its contents (or part thereof) with others. The Review Team Members will not retain copies of the Report nor discuss its content or conclusions with others.

A copy of the Report is lodged with the PPPA so it can identify and share the generic lessons from Independent Assurance Reviews. The PPPA will copy a summary of the Report recommendations to the Scottish Government Portfolio Accountable Officer, and where appropriate, to the Organisation's Accountable Officer where the Review has been conducted on behalf of one of the SG's Agencies, NDPBs or Health Sector organisations.

The PPPA will provide a copy of the Report to Review Team Members involved in any subsequent review as part of the preparatory documentation needed for Planning Meetings. Any other request for copies of the Report will be directed to the SRO.

ANNEX A - Terms of Reference for Hybrid Review

This is a Gate 0 Strategic Review. The standard terms of reference for all Guidance and Workbooks can be found here and does not need to be included within the body of the report UNLESS any amendments have been made to the original Terms of Reference.

In addition, the Review was asked to look at the following questions:

a. Are we optimising the current NTC's to realise the full benefits of the Programme ?
b. [Redacted s.29(1)(a)]

ANNEX B – Background

Question	Answer
Describe the aims of the project/ programme	The aim of the National Treatment Centres (NTC) Programme is to deliver a network of modern, efficient National Treatment Centres that will provide the infrastructure and elective capacity required to meet the needs of a growing and increasingly elderly population up to 2035. The Centres will deliver the highest standards of care to people across Scotland which will optimise both patient and staff experience and recruit, develop and retain multi-professional teams committed to the provision of both individual and collective excellence and innovation. Because of the increased backlog of patients waiting for treatment, the NTC Programme will have a key contribution towards achieving the increased additional activity set out in the NHS Scotland recovery plan – with the aim of undertaking 40,000 additional procedures by 2025/26.
Reasons for the project/ programme's existence, by type and description	The approach to health and social care, as set out in the Scottish Government Waiting Times Improvement Plan, is rooted in the right for people to have safe, effective and person-centred healthcare. Ensuring that we all have continuing, and improved access to high quality care is our guiding principle. In Scotland we are living longer, meaning we are often living with more complex health conditions than in the past. These are not unique challenges to Scotland and are being experienced across Europe and beyond. We have been focusing in recent years on shifting the balance of care to address the some of these evolving needs of the people of Scotland. However, increasing demand on our services makes it essential that we take action to guarantee our whole system of health and care has the capacity, coordination and workforce to deliver the best care possible in every setting.

	In response to this, in October 2015, the Scottish Government announced a major capital investment to deliver a network of elective, diagnostic and treatment centres across Scotland.
The impact if the project/programme fails to deliver e.g. any risks to or any material impact on citizens:	The NHS Recovery Plan sets out a requirement to deliver 40,000 additional procedures per annum with the NTC network being key to achievement of this target. The ability to reduce the number of patients waiting for treatment would be impacted if this level of additional activity was not achieved. At present the programme is on target to deliver the intermediary targets for additional activity set for 2024/25 and 2025/26 and mitigating plans around delivering a higher level of productivity through existing capacity (supported by national improvement programmes supported by the Centre for Sustainable Delivery) are being implemented as part of the Board medium term annual delivery plans.
Project/programme link to Scottish Government strategies or policies:	Key targets and policy commitments aligned to the project include: • NHS Scotland Recovery Plan commitments around 40,000 additional procedures and 1,500 additional staff by 2025/26 Achievement of net carbon zero – all projects due to commence building after 1 April 2023 must be net carbon zero
Projects/programme interdependencies [if applicable]:	The NTC programme is an integral element of the NHS Scotland recovery plan, with each NTC set a target towards achieving the target for additional activity across NHS Scotland. As the Centres are providing cross boundary activity to neighbouring boards, there are key interdependencies between boards to facilitate the treatment of patients and delivery the additional activity.
Has the SRO's letter of appointment been approved at the appropriate levels?	Yes
The procurement / delivery status:	The respective NHS Boards are responsible for the procurement of the individual projects in line with existing national frameworks established by Health Facilities Scotland.
Funding / Business Case:	Capital and revenue funding is in place to complete the current phase of the programme – NHS Golden Jubilee (Phase 1 and 2), NTC Fife, NTC Highland and NTC Forth Valley.

	[Redacted s.29(1)(a)]
Integrated Assurance and Approval Plan (IAAP):	A letter was issued to all NTC projects in November 2022, requesting that formal assurance is provided to the NTCP to ensure that these steps are being undertaken within the projects. 6 Independent Assurance Returns were received. The KSAR process has been undertaken for all NTC project and post occupancy evaluations concluded for the operational NTCs – GJ, Fife and Highland.
Programme/Project plan:	Does the project / programme have an appropriate plan in place? Yes Has the plan been baselined? Please include who signed it off etc. No
Current position regarding previous PPPA assurance reviews:	A summary of recommendations, progress and status from the previous assurance review can be found in Annex C.
Current position regarding Non-PPPA assurance reviews	[Redacted s.30(b)(i)] A summary of recommendations, progress and status from the previous assurance review can be found in Annex C.
Current position regarding SG PPM Capability Maturity Matrix	No

ANNEX C – Progress against previous assurance review

[Redacted s.30(b)(i)]			
[Redacted s.30(b)(i)]			
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]

[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]

[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]

[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]
[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]	[Redacted s.30(b)(i)]

ANNEX D – List of Interviewees

The following stakeholders were interviewed during the Review:

Name	Organisation and role
Gordon Frame	National Director for Planned Care Centre for Sustainable Delivery
[Redacted s.38(1)(b)]	[Redacted s.38(1)(b)]
Alan Gray/ [Redacted s.38(1)(b)]	Director of Health and Social Care Finance/ [Redacted s.38(1)(b)]
Alan Morrison	Deputy Director Health Infrastructure – Scottish Government
[Redacted s.38(1)(b)]	[Redacted s.38(1)(b)]
Paul Bachoo	Medical Director, Acute – NHS Grampian
[Redacted s.38(1)(b)]	[Redacted s.38(1)(b)]
Garry Fraser	Director of Acute Services - NHS Forth Valley
[Redacted s.38(1)(b)]	[Redacted s.38(1)(b)]
[Redacted s.38(1)(b)]	[Redacted s.38(1)(b)]
Douglas McLaren	SRO NTC Programme / Deputy Chief Operating Officer NHS Scotland – Scottish Government

ANNEX E – Scottish Government Project Delivery Principles and classifications

Principle	Definition	Ref	Classification	Description
1. Alignment	Recommendations related to the clarity of the change to be implemented. It covers alignment to vision, strategy, and policy; the purpose, objectives, justification and description of the change; and the determination of success and the necessary environment to ensure success. This theme also includes recommendations relating to alignment with pan-government priorities, strategies and controls.	1.1	Alignment to Strategy	Recommendations related to the strategic nature of the solution and its alignment with business & technology strategies, e.g. tactical versus strategic considerations, etc.
		1.2	Vision, Aims & Objectives	Recommendations related to alignment with Government and Departmental Priorities & Strategies and the clarity and understanding of what is to be achieved and why.
		1.3	Critical Success Factors	Recommendations related to the clear understanding and definition of those factors that will be essential to enable successful delivery.
		1.4	Effective across Organisational Boundaries	Recommendations related to key relationships with other parts of Government (excluding those referenced in theme 11 Risk).
2. Leadership	Recommendations related to that are aimed at the clarity of what success looks like; leadership and the necessary culture to ensure success.	2.1	Leadership Capability	Recommendations related to the experience, qualifications and commitment of key leadership roles.
		2.2	Commitment & Engagement	Recommendations related to the effectiveness of the behaviours of those involved in the Governance Processes.
3. Justification/	Recommendations related to the	3.1	Scope	Recommendations related to specific controls to cater for changes to

Business case	purpose, objectives and ongoing justification for the work			scope, clear description, and control of the work to be undertaken to deliver the project with the required outcomes.
		3.2	Business Case	Recommendations related to all aspects of the construction, iteration and maintenance of the Business Case in ensuring a firm understanding of the Costs, Benefits and Risk Profile of the Project or Programme.
4. Sustainability	Recommendations related to the end-to-end procurement process including: procurement strategy and planning, approaches to the market, contract negotiation and contract management, and recommendations related to financial planning, organising, directing and controlling of financial activities.	4.1	Sourcing Strategy	Recommendations related to the end-to-end procurement process including: Procurement strategy and planning, Approaches to the market and Contract negotiation.
		4.2	Contract Management	Recommendations related to the implementation, administration and processes involved from when the contract is awarded to when the work is completed. The function ensures the delivery of the supplies and services outlined in the contract and that the contract is successful.
		4.3	Supply Chain Management	Recommendations related to the oversight of products and services to be delivered by suppliers, particularly the end to end coordination and integration of suppliers in a multi-supplier environment.
		4.4	Financial Planning and Management	Recommendations related to financial planning and management, organising, directing, controlling financial activities, and contingency funding.
		4.5	Integration	Recommendations related to the approach to managing multiple suppliers of services and integrating them to provide a single business solution i.e. the seamless integration of interdependent services from various internal and external service providers into end of life.

5. Knowledge and Data	Recommendations related to the process of capturing, developing, sharing, and effectively using organisational knowledge. It includes sharing knowledge and experiences or lessons.	5.1	Lessons identified	Recommendations related to the sharing of knowledge acquired from an innovation or an adverse experience that results in improvements to a process.
		5.2	Security	Recommendations related to the processes, methodologies and documentation involved with keeping information confidential, available, and assuring its integrity including Access Controls, Protection of information in transit and the Detection and Remediation of security.
		5.3	Information Management	Recommendations related to the management and application of processes to collect information, communicate it and process it to enable effective decision making.
6. Flexibility and Capability	Recommendations related to all aspects of the identification, supply, optimisation, prioritisation and maintenance of resources and appropriate skills.	6.1	Capacity Planning & Management	Recommendations related to the estimation, prioritisation recruitment and availability of resources.
		6.2	Skills Assessment & Management	Recommendations related to the assessment and acquisition of the appropriate skills for all stages of the project or programme.
		6.3	Succession Planning & Management	Recommendations related to the retention and sustainability of the key resources required.
7. Roles and Responsibilities	Recommendations related to the oversight, structure and decision	7.1	Robust Governance Structures & Processes	Recommendations related to Structures & Processes, e.g. Board Terms of Reference, Independent Assurance, etc.

	making of a project/ programme.	7.2	Organisation	Recommendations related to the clarity of roles and responsibilities.
8. Stakeholders	Recommendations related to relationships with all parties with an interest in the outcome of the project/programme, whether internal to the agency, internal to government or external.	8.1	Engagement Strategy & Planning	Recommendations related to Stakeholder Engagement Strategy & Planning.
		8.2	Effective Engagement	Recommendations related to the effective delivery of the Strategy or Plan, i.e. the review of and commitment to engagement.
		8.3	Communications	Recommendations related to how the project's stakeholders are kept informed.
9. Benefits	Recommendations related to the identification, ownership, measurement and realisation of benefits and dis-benefits. Benefits can be either financial or non-financial.	9.1	Benefits Management & Realisation	Recommendations related to benefits management and realisation.
		9.2	Alignment of Delivery to Policy	Recommendations related to the outcomes of the project when compared to the original policy intent.

10. Planning	Recommendations related to all aspects of project, programme and portfolio management, and planning. '**Planning'** here is used in the broad sense, to encompass the detailed proposals for various types of activities that will lead to a successfully executed programme or project. but excludes recommendations on Risk, Issues and Dependency Management (Theme 11) and Flexibility & Capability Management (Theme 10)	10.1	Controls	Recommendations related to the efficacy of monitoring and reviewing progress against project plan, business case, aims, vision, and objectives.
		10.2	Quality Management	Recommendations related to the quality system, quality assurance, quality planning or quality control.
		10.3	Requirements Definition	Recommendations related to the process for understanding user needs. This includes processes used in an Agile environment.
		10.4	Methodology & Standards	Recommendations related Methods and Standards. This theme covers the use of structured proven approaches to programme and project management methodologies such as: MSP, Prince2, etc. The theme also covers recommendations relating to the use of agile and iterative approaches and methods.
11. Risk	Recommendations related to the identification, analysis, impact assessment, response and the on-going review and management of Risks, Issues and Dependencies (i.e.	11.1	Framework & Process	Recommendations related to the processes, techniques and resources involved.
		11.2	Active Risk Management	Recommendations related to the genuine engagement of project, stakeholders and wider organisation in the consideration and response to Risks, Issues and Dependencies.

	outputs that are required by a project to succeed, but which will be delivered by parties not under the direct control of the project).	11.3	Contingency Planning	Recommendations related to Contingency Planning to mitigate business impact.
12. Transition	Recommendations related to the Management of Business Change – all the work required with and in the business and with the customer to make ready for the initiative, in terms of changes to business processes including: business continuity planning, changes to work processes and resourcing, changes to organisational structures and staffing to support transformational or process changes to business delivery to ensure a smooth transition to BAU.	12.1	Organisational Culture	Recommendations related to the cultural and behavioural changes in an organisation necessary to the successful transformation of the business or service.
		12.2	Organisational Capability	Recommendations related to the capability of the organisation to successfully implement the change.
		12.3	Operational Readiness	Recommendations related to operational readiness. Operational readiness is defined as all those activities and processes that must be designed and established before a project can be signed off and considered part of the organisation's business-as-usual.
		12.4	Customer Engagement	Recommendations related to the preparedness of members of the public or enterprises to understand and cope with the change, e.g. transformed or new services, changes in legislation, etc.
		12.5	Go-live	Recommendations related to activities, processes, and documented procedures (including Testing) that must be designed and established

				before the solution can be transitioned into and subsequently maintained in “Live”.
13. Other	To be used only when classifications 1 to 12 do not apply.	13.	Other	To be used only when classifications 1 to 12 do not apply.