

Change Control Process**CCN Number:**

| | |
|------------------------|---|
| Title of Change | C292040 - GMTS - Moodle & Moodle Workplace Date Change |
| Service Line | |
| Operations Lead | |
| NHSE originator | |

| Change Control Notice (CCN to the following agreement: | | |
|--|-----------------|--------------------|
| Agreement name | | Date of Agreement |
| C292040 - GMTS - Moodle & Moodle Workplace | | 09/07/2024 |
| Date Change Requested | Date CCN Raised | Expiry date of CCN |
| 12/07/2024 | 12/07/2024 | 09/07/2025 |

| Contact Information for the proposed change | |
|---|-------------|
| Originator | Other Party |
| | |
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Clauses and Schedules affected

Start Date and End Date, duration

Associated Change Control Notices – N/A

| CCN No. | Name of Agreement | Date of Agreement |
|---------|-------------------|-------------------|
| | | |

Reason for change

Old version of contract accidentally sent out and not picked up when signed via DocuSign

Description of Change

Change Start Date to Signature Date 09/07/2024 and end date to 12 months after 09/07/2025. Duration change from 10 months to 12 months

Changes to contract charges and revised payment schedules

None

Price to implement change

None

Impact of change on other agreement provisions

None

Timetable for implementation
ASAP

Acceptance

Signed for and on behalf of NHS England:

Full Name: [Redacted]

Signed for and on behalf of Catalyst IT Europe:

Job Title/Role: [Redacted]

Date Signed:

Signed:

Print name:

Title: [Redacted]

Full Name:

Job Title/Role: [Redacted]

Date: [Redacted]

Date Signed: