

SOMERSET NHS FOUNDATION TRUST
SCHEME OF RESERVATION AND DELEGATION

| REF | THE BOARD | DECISIONS RESERVED TO THE BOARD |
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| NA | THE BOARD | <p>General Enabling Provision</p> <p>The Board may determine any matter, for which it has delegated or statutory authority, it wishes in full session within its statutory powers.</p> |
| NA | THE BOARD | <p>Regulations and Control</p> <ol style="list-style-type: none"> 1. Approve Standing Orders (SOs), a schedule of matters reserved to the Board and Standing Financial Instructions for the regulation of its proceedings and business. 2. Suspend Standing Orders. 3. Vary or amend the Standing Orders. 4. Ratify any urgent decisions taken by the Chairman and Chief Executive in accordance with the SOs. 5. Approve and delegate authority from the Board to committees. 6. Require and receive the declaration of Board members' and Governors' interests that may conflict with those of the Trust and determining the extent to which that member may remain involved with the matter under consideration. 7. Require and receive the declaration of Executive and Non-Executive Directors' interests that may conflict with those of the Trust. 8. Approve arrangements for dealing with complaints. 9. Adopt the organisation structures, processes and procedures to facilitate the discharge of business by the Trust and to agree modifications thereto. 10. Receive reports and/or minutes from committees including those that the Trust is required by regulation to establish and to take appropriate action on. 11. Confirm the recommendations of the Trust's committees where the committees do not have executive powers. 12. Approve arrangements relating to the discharge of the Trust's responsibilities as a corporate trustee for funds held on trust. |

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| | | <ul style="list-style-type: none"> 13. Establish terms of reference and reporting arrangements of all committees and sub-committees that are established by the Board. 14. Approve arrangements relating to the discharge of the Trust's responsibilities as a bailer for patients' property. 15. Receive quarterly reports on the use of the Corporate Seal. 16. Ratify or otherwise instances of failure to comply with Standing Orders brought to the Chief Executive's attention. 17. Discipline Executive Directors, consultants and those individuals, where a non-executive director formed part of the interview panel, or employees who are in breach of statutory requirements or SOs 18. Ensure compliance with the Code of Governance, the Risk Assessment Framework and the NHS Provider Licence. 19. Approve the "Going Concern" statement as part of the annual accounts approval process. 20. Non-Executive Directors shall appoint or remove the Chief Executive. 21. Subject to the provisions in the constitution, the appointment of the Chief Executive shall require the approval of the Council of Governors. 22. A committee, consisting of the Chairman, the Chief Executive and the other Non-Executive Directors shall appoint, discipline or remove the other Executive Directors. |
| NA | THE BOARD | <p>Appointments/Dismissal/Redundancy</p> <ul style="list-style-type: none"> 1. Recommend the appointment of the Deputy Chairman and the Senior Independent Director to the Council of Governors. 2. Appoint Chairs of Committees and dismiss committees (and individual members) that are directly accountable to the Board. 3. Confirm appointment of members of any committee of the Trust as representatives on outside bodies. 4. Approve staff redundancies. |
| NA | THE BOARD | <p>Strategy, Plans and Budgets</p> |

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| | | <ol style="list-style-type: none"> 1. Define the strategic aims and objectives of the Trust. 2. Approve proposals for ensuring quality and developing governance in services provided by the Trust, having regard to any guidance issued by NHS Improvement, the Care Quality Commission and the Secretary of State 3. Approve the Trust's policies and procedures for the management of risk. 4. Approve Outline and Final Business Cases for Capital Investment in line with the investment policy. 5. Approve the Trust's proposed organisational development proposals. 6. Ratify proposals for acquisition, disposal or change of use of land and/or buildings. 7. Approve PFI proposals. 8. Approve proposals on individual contracts (other than NHS contracts) of a capital or revenue nature amounting to, or likely to amount to over the defined limits within the SFIs and the investment policy. 9. Approve proposals in individual cases for the write off of losses or making of special payments above the limits of delegation to the Chief Executive and Director of Finance (for losses and special payments) previously approved by the Board. 10. Approve individual compensation payments above limits of delegation to Executive Directors. 11. Approve such business plans, budgets and capital programmes submitted by the Chief Executive on at least an annual basis, including the approval of Cost Improvement Programmes. 12. Approve business cases (requiring additional revenue resources) above limits of delegation to Executive Directors. |
| | THE BOARD | <p>Policy Determination</p> <ol style="list-style-type: none"> 1. Overall responsibility for policy, procedural documents such responsibility to be delegated by a specific policy for Managing Policies, Procedures and Guidance Documents as appropriate, which shall be approved and monitored by the Quality and Governance Committee |
| | THE BOARD | <p>Audit</p> <ol style="list-style-type: none"> 1. Review of the annual audit letter received from the external auditor and agreement of proposed action, taking account of the advice, where appropriate, of the Audit Committee. |

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| | | 2. Receive an annual report from the Internal Auditor and agree action on recommendations where appropriate of the Audit Committee |
| NA | THE BOARD | <p>Annual Reports and Accounts</p> <ol style="list-style-type: none"> 1. Receive and approve the Trust's Annual Report and Annual Accounts. 2. Receive and approve the Annual Report and Accounts for funds held on trust. |
| NA | THE BOARD | <p>Monitoring</p> <ol style="list-style-type: none"> 1. Receive such reports as the Board sees fit from committees in respect of their exercise of powers delegated. 2. Continuously appraise the affairs of the Trust by means of the provision of such reports to the Board as the Board may require from directors, committees, and officers of the Trust. All monitoring returns required by NHS Improvement as outlined in the NHS Provider Licence shall be reported, at least in summary, to the Board. 3. Receive reports from the Director of Finance on financial performance against budget including how income contracts are performing. |

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DECISIONS/DUTIES DELEGATED BY THE BOARD TO COMMITTEES

| REF | COMMITTEE | DECISIONS/DUTIES DELEGATED BY THE BOARD TO COMMITTEES |
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| SFI 4.1 | AUDIT COMMITTEE | <p>The Committee will:</p> <ol style="list-style-type: none"> 1. Review the establishment and maintenance of an effective system of integrated governance, risk management and internal control across the whole of the organisation's activities (both clinical and non-clinical) that supports the achievement of the organisation's objectives including approval of the Trust's policies and procedures for the management of risk. 2. Ensure the adequacy of the Risk Management Strategy in relation to the effective identification, assessment, mitigation and monitoring of risk within the Trust and ensure the implementation of the Strategy. 3. Review the adequacy of: <ul style="list-style-type: none"> • all statutory risk and control related disclosure statements (in particular the Annual Governance Statement, together with any accompanying Head of Internal Audit statement, external audit opinion or other appropriate independent assurances, prior to endorsement by the Board; • the underlying assurance processes (including the Board Assurance Framework and Corporate Risk Register) that indicate the degree of the achievement of corporate objectives, the effectiveness of the management of principal risks and the appropriateness of the above disclosure statements; • the policies for ensuring that there is compliance with relevant regulatory, legal and code of conduct requirements • the policies and procedures for all work related to fraud and corruption as set out in Secretary of State Directions and as required by the NHS Counter Fraud Authority (NHSCFA). |

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| | | <ol style="list-style-type: none"> 4. Review the Annual Accounts and make recommendations on the approval of the Annual Accounts to the Board 5. Monitor and review the internal audit function to ensure that it is effective enough to meet mandatory NHS Internal Audit standards and provide independent assurance 6. Develop and implement a policy on the engagement of the External Auditor to supply non-audit services, taking into account relevant ethical guidance regarding the provision of non-audit services by the External Audit firm 7. Make recommendations to the Council of Governors in relation to the appointment, re-appointment and removal of the external auditor and approval of the terms of engagement of the external auditor 8. Review the work and findings of the External Auditor and consider the implications and management's responses to their work. The Committee shall also monitor and review the External Auditor's independence and objectivity and the effectiveness of the audit process, taking into consideration relevant UK professional and regulatory requirements 9. Review the work and findings of the Counter Fraud Service and consider the implications and management's responses to their work 10. Review the findings of other significant assurance functions external to the organisation, and consider the implications to the integrated governance of the organisation. 11. Review the work of other committees and groups within the organisation, whose work can provide relevant assurance to the Audit Committee's own scope of work. This will particularly include the Quality and-Governance Committee. 12. Review reports and positive and negative assurances from directors and managers on the overall arrangements for governance, risk management and internal control. This will be evidenced through the Committee's use of an effective Assurance Framework to guide its work and that of the audit and assurance functions that report to it. 13. Review the Annual Report, Financial Statements, and external audit opinion on the Quality Accounts before submission to the Board |

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| | | <p>14. Ensure that the systems for financial reporting to the Board, including those of budgetary control, and formal announcements relating to the Partnership Trust's financial performance are subject to review as to completeness and accuracy of the information provided to the Board.</p> <p>15. Review and approve write offs/losses and special payments in line with the limit set out in the Standing Financial Instructions.</p> <p>16. Approve the National Cost Collection process.</p> |
| SO 6 | QUALITY AND GOVERNANCE COMMITTEE | <p>The Committee will:</p> <ol style="list-style-type: none"> 1. Enable the Board to obtain assurance that high standards of care are provided by the Trust and, in particular, that adequate and appropriate governance structures, processes and controls are in place throughout the Trust to: <ul style="list-style-type: none"> - promote safety and excellence in patient care - identify, prioritise and manage risks within the Trust - ensure the effective and efficient use of resources through evidence-based clinical practice - protect the health and safety and wellbeing of Trust employees 2. Enable the Board to obtain assurance that the Trust has systems in place to ensure it is compliant with and delivers: <ul style="list-style-type: none"> - legal and statutory requirements - agreed clinical standards and quality objectives - quality standards required by NHS Improvement and the Care Quality Commission - risk management standards 3. Review the annual reports on the implementation of strategies for: <ul style="list-style-type: none"> - Safeguarding Adults and Children; - Health and Safety; - Security Management; |

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| | | <ul style="list-style-type: none"> - Emergency Preparedness, Resilience and Response; - Suicide Prevention - Infection Control - Complaints - Patient and public involvement and patient-centred care. <ol style="list-style-type: none"> 4. Oversee and monitor the Trust's implementation of its Clinical Strategy 5. Ensure effective arrangements are in place to assure high standards of clinical governance, including clinical effectiveness, management of clinical risk, practice standards and patient safety; 6. Ensure effective arrangements are in place to deliver Care Quality Commission registration, requirements and outcomes in response to any CQC inspections and reports; 7. Enable the Board to obtain assurance that the Trust has systems and procedures in place to identify learning from deaths, Serious Incidents and other incidents, complaints, claims and ensuring they are shared across the Trust and implemented to improve patient safety, patient experience and colleague health and wellbeing; 8. Ensure the Trust has in place procedures to monitor and review the operational effectiveness of policies and procedures |
| SO 6 | FINANCE COMMITTEE | <p>The Committee will:</p> <ol style="list-style-type: none"> 1. Consider and keep under review the Trust's medium term financial strategy, in relation to both revenue and capital and risk; 2. Review proposals for major business cases and investment decisions and their respective funding sources and make recommendations to the Trust Board, in accordance with NHS Improvement guidance; 3. Maintain an oversight of, and obtain assurances, the robustness of the Trust's key income sources and contractual safeguards; |

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|-----------------------|---------------------------------------|---|
| | | <ol style="list-style-type: none"> 4. Scrutinise financial performance and review any areas of concern and report to the Board; 5. Review and make submissions to NHS Improvement as necessary on behalf of the Board; 6. Review major procurements and tenders; 7. Commission regular reviews of the Trust's key contracts with suppliers and partners to ensure they continue to deliver benefits for the Trust and its patients; 8. Approve and review the Trust's treasury management and working capital policy annually or as required; 9. Review and monitor progress against the capital plan through highlight reports and project plans; 10. Review the financial aspects of the Estates Strategy and ensure that the appropriate funding arrangements are in place; 11. Approve and review, on behalf of the Trust Board, the Trust's investment strategy and policy and maintain an oversight of the Trust's investments, ensuring compliance with the policy. 12. Approve investment decisions |
| SO 6 and Annex 7 3.12 | NOMINATION AND REMUNERATION COMMITTEE | <p>The Committee will:</p> <ol style="list-style-type: none"> 1. Review regularly the remuneration and terms of service of the Chief Executive and other Executive Directors (and other Very Senior Officers) to ensure they are fairly rewarded for their individual contribution to the Trust - having proper regard to the Trust's circumstances and performance and to the provisions of any national arrangements where appropriate; 2. Decide the appropriate remuneration of the Chief Executive and other Executive Directors. Any decisions made by the Nomination and Remuneration Committee shall be recorded in the minutes of the Nomination and Remuneration Committee meetings; 3. Monitor and evaluate the performance of individual Executive Directors; 4. Advise on and oversee appropriate contractual arrangements for such staff including scrutiny of termination payments taking account of such national guidance as is appropriate. |

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| N/A | MENTAL HEALTH ACT COMMITTEE | <p>The Committee will:</p> <ol style="list-style-type: none"> 1. Monitor the Trust's implementation of, and compliance with, current mental health legislation and proposed changes to such legislation, in particular the Mental Health Act 1983, , within the Trust taking into account best practice; 2. Consider the implications of any changes to legislation and regulations within the policies, practices, procedures and resource requirements of the Trust and its partner organisations; 3. Monitor the processes relating to and outcomes of First Tier Tribunals (Mental Health) and of hearings held by the hospital managers' panels. 4. Ensure there is an appropriate number of Hospital Managers' panel members in place with the appropriate skills and experience to fulfil their role. 5. Monitor trends in compliance with and the application of the Mental Health Act 1983 (and any new Mental Health Acts or revisions to the existing Act) within the Trust and make recommendations where necessary. 6. Receive reports following Care Quality Commission Mental Health Act compliance visits for information and comment and ensure appropriate action is agreed and implemented within the organisation. 7. Monitor delivery against the Trust's action plan developed as a result of the Care Quality Commission's Annual Report as instructed by Trust Board. 8. Approve policies in relation to the Mental Health Act and Mental Capacity Act across the Trust and scrutinise the application of these policies throughout the Trust in relation to both Acts.. 9. Identify and address training issues in terms of delegation of responsibilities under the Mental Health Act 1983. 10. Identify and address quality issues in terms of delegation of responsibilities under the Mental Health Act 1983. 11. Manage risks identified and delegated by Trust Board and to identify and report to Trust Board any new risks that require escalation. |

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| SO 6 | PEOPLE COMMITTEE | <ol style="list-style-type: none"> 1. Oversee the development and delivery of the People Strategy, and providing strategic direction to the Board in respect of the elements contained within it. 2. Identify and monitor key performance indicators relating to the delivery of the People Strategy, undertaking detailed review against these indicators and aspects of the People Strategy, as required, or as directed by the Board or another Committee of the Board. 3. Review arrangements by which staff may raise in confidence, concerns about possible improprieties of financial reporting and control, clinical quality, patient safety or other matters 4. Review and implement strategies for: <ul style="list-style-type: none"> - Organisational Development; - Equality and Diversity; 5. Ensure that effective arrangements are in place to secure the availability of a competent and appropriately qualified workforce to deliver healthcare for the Trust. |
| SO6 | CHARITABLE FUNDS COMMITTEE | <ol style="list-style-type: none"> 1. Ensure Funds Held on Trust (charitable funds) are managed in accordance with the Trust's SOs and SFIs, as approved by the Board. 2. Receive regular reports from the Director of Finance covering: <ul style="list-style-type: none"> Number and value of funds Purpose of funds Income and expenditure analysis 3. Decide upon expenditure criteria. 4. Ensure that the requirements of the Charities Acts and the Charities Commission are met. 5. Provide reports for the Board of Directors (acting as the Corporate Trustee) as appropriate. 6. Review the Annual Accounts prior to submission to the Corporate Trustee for formal approval. |

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SCHEME OF DELEGATION DERIVED FROM THE ACCOUNTABLE OFFICER MEMORANDUM

| REF | DELEGATED TO | DUTIES DELEGATED |
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| 3 | CHIEF EXECUTIVE | Duty to prepare the accounts in accordance with the NHS Act 2006. Duty to personally sign the accounts. Witness before the Committee of Public Accounts to deal with questions arising from the accounts or from any report made to Parliament by the Comptroller and Auditor General under the National Audit Act 1983. |
| 5 | CHIEF EXECUTIVE | Responsible to Parliament for resources under his control. |
| 7 | CHIEF EXECUTIVE | Responsible for overall organisation, management and staffing of the Foundation Trust and for its procedures in financial and other matters. Ensure that: <ul style="list-style-type: none"> a) there is a high standard of financial management in the Foundation Trust as a whole; b) financial systems and procedures promote the efficient and economical conduct of business and safeguard financial propriety and regularity throughout the Foundation Trust; and c) financial considerations are fully taken into account in decisions on Foundation Trust policy proposals. |
| 9 | CHIEF EXECUTIVE | Required to: <ul style="list-style-type: none"> a) personally sign the accounts and accept personal responsibility for their proper form and content as prescribed by NHS Improvement; b) comply with the financial requirements of the NHS Provider Licence; c) ensure that proper financial procedures are followed and that accounting records are maintained in a form suited to the requirements of management, as well as in the form prescribed for published accounts; |

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| | | <p>d) ensure that the resources for which he is responsible are properly well managed and safeguarded, with independent and effective checks of cash balances in the hands of any official;</p> <p>e) ensure that assets for which he is responsible are controlled and safeguarded with similar care, and with checks as appropriate;</p> <p>f) ensure that protected property (or interest in) is not disposed of without the consent of NHS Improvement;</p> <p>g) ensure that conflicts of interest are avoided, whether in the proceedings of the Board of Directors, the Council of Governors or the actions of advice of Foundation Trust staff; and</p> <p>h) ensure that, in the consideration of policy proposals relating to the expenditure for which he is responsible, all relevant financial considerations, including any issues of propriety, regularity or value for money, are taken into account and brought to the attention of the Board of Directors.</p> |
| 10 | CHIEF EXECUTIVE | <p>Ensure that effective management systems appropriate for the achievement of the Foundation Trust's objectives, including financial monitoring and control systems, have been put in place. Ensure that managers at all levels:</p> <p>a) have a clear view of their objectives, and the means to assess and, wherever possible, measure outputs or performance in relation to those objectives;</p> <p>b) are assigned well-defined responsibilities for making the best use of resources, including a clinical scrutiny of output and value for money; and</p> <p>c) have the information (particularly about costs), training and access to the expert advice which they need to exercise their responsibilities effectively.</p> |
| 11 | CHIEF EXECUTIVE | <p>Ensure that their arrangements for delegation promote good management and that they are supported by the necessary staff with an appropriate balance of skills.</p> |
| 12 | CHIEF EXECUTIVE | <p>Responsibility to see that appropriate advice is tendered to the Board of Directors and the Council of Governors on all matters of financial propriety and regulation, and more broadly, as to all considerations of prudent and economical administration, efficiency and effectiveness. Determine how and on what terms such advice should be tendered, and whether in a particular case to make reference to their own</p> |

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| | | duty, as Accounting Officer, to justify to the Public Accounts Committee, transactions for which they are accountable. |
| 13 | BOARD | Act in accordance with the requirements of propriety or regularity; including the Fit and Proper Persons Test requirements. |
| 13 | CHIEF EXECUTIVE | Make written objections to proposals by the Board of Directors, Council of Governors or Chair which he considers to infringe the requirement to act with the requirements of propriety or regularity. If the Board of Directors, Council of Governors or Chair decides to proceed, seek a written instruction to take the action in question, and inform Monitor of the position (if possible, before the decision is implemented) |
| 14 and 15 | CHIEF EXECUTIVE | If a course of action is contemplated which raises an issue relating to his wider responsibilities for economy, efficiency and effectiveness, draw the relevant factors to the attention of the Board of Directors or Council of Governors and advise them in whatever way he deems appropriate. If his decision is overruled, and the proposal is one which he would not feel able to defend to the Public Accounts Committee as representing value for money, seek a written instruction before proceeding. Inform NHS Improvement of such an instruction, if possible, before the decision is implemented. If there is no time to submit advice in writing due to extreme urgency, ensure that if the advice is overruled, both the advice and the instructions are recorded in writing immediately afterwards. |
| 16 | CHIEF EXECUTIVE | Appear before the Public Account Committee from time to time to give evidence on the reports arising from examinations undertaken by the Comptroller and Auditor General, and answer questions concerning expenditure and receipts for which he is Accounting Officer. |
| 17 | CHIEF EXECUTIVE | Furnish the Public Accounts Committee with explanations of any weaknesses in the matters covered in paragraphs 8-15 of the NHS Foundation Trust Accounting Officer Memorandum, to which his attention has been drawn by the Comptroller and Auditor General or about which they may wish to question to Accounting Officer. |
| 19 | CHIEF EXECUTIVE | Ensure that he is adequately and accurately briefed on matters which are likely to arise at any hearing of the Public Accounts Committee. |
| 21 | CHIEF EXECUTIVE | Ensure that he is generally available for consultation, and that in any temporary period of unavailability, there will be a senior officer in the Foundation Trust who can act on his behalf if required. |

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| 22 | BOARD | Where it becomes clear that the Accounting Officer is so incapacitated that he or she will be unable to discharge his responsibilities over a period of four weeks or more, appoint an acting Accounting Officer (usually the Finance Director), until his return. |
| 23 | ACTING ACCOUNTING OFFICER | Sign accounts where the Accounting Officer is unable to sign in time for printing. |

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SCHEME OF DELEGATION DERIVED FROM THE CODES OF CONDUCT AND ACCOUNTABILITY AND CONSTITUTION

| REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
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| 1.3.1.7 | BOARD | Approve procedure for declaration of hospitality and sponsorship. |
| 1.3.1.8 | BOARD | Ensure proper and widely publicised procedures for voicing complaints, concerns about misadministration, breaches of Code of Conduct, and other ethical concerns. |
| 1.31.9 & 1.3.2.2 | ALL BOARD MEMBERS | Subscribe to the Standards for members of NHS Boards and Governing Bodies, Code of Conduct, the Nolan principles and the Fit and Proper Person requirements. |
| 1.3.2.4 | BOARD | Board members share corporate responsibility for all decisions of the Board. |
| 1.3.2.4 | CHAIR AND NON EXECUTIVE/OFFICER MEMBERS | Chair and non-officer members are responsible for monitoring the executive management of the Trust and are responsible to NHS Improvement for the discharge of those responsibilities. |
| 1.3.2.4 | BOARD | <p>The Board has six key functions:</p> <ol style="list-style-type: none"> 1. To ensure effective financial stewardship through value for money, financial control and financial planning and strategy; 2. To ensure that high standards of clinical and corporate governance and personal behaviour are maintained in the conduct of the business of the whole Trust; 3. To appoint, appraise and remunerate senior executives; 4. To ratify the strategic direction of the Trust within the overall policies and priorities of the Government and the NHS, define its annual and longer term objectives and agree plans to achieve them; 5. To oversee the delivery of planned results by monitoring performance against objectives and ensuring corrective action is taken when necessary; |

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| | | 6. To ensure effective dialogue between the Trust and the local community on its plans and performance and that these are responsive to the community's needs. |
| 1.3.24 | BOARD | <p>It is the Board's duty to:</p> <ol style="list-style-type: none"> 1. Act within statutory financial and other constraints; 2. Be clear what decisions and information are appropriate to the Board and review and draw up Standing Orders, a schedule of decisions reserved to the Board and Standing Financial Instructions to reflect these, 3. Ensure that management arrangements are in place to enable responsibility to be clearly delegated to senior executives for the main programmes of action and for performance against programmes to be monitored and senior executives held to account; 4. Establish performance and quality measures that maintain the effective use of resources and provide value for money; 5. Specify its requirements in organising and presenting financial and other information succinctly and efficiently to ensure the Board can fully undertake its responsibilities; 6. Establish Audit and Nomination and Remuneration Committees on the basis of formally agreed terms of reference that set out the membership of the sub-committee, the limit to their powers, and the arrangements for reporting back to the main Board. |
| 1.3.2.5 | CHAIRMAN | <p>It is the Chairman's role to:</p> <ol style="list-style-type: none"> 1. Provide leadership to the Board and to the Council of Governors. 2. Enable all Board members to make a full contribution to the Board's affairs and ensure that the Board acts as a team; 3. Ensure that key and appropriate issues are discussed by the Board in a timely manner, |

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| | | <ol style="list-style-type: none"> 4. Ensure the Board has adequate support and is provided efficiently with all the necessary data on which to base informed decisions; 5. Lead Non-Executive Board members through a formally-appointed Nomination and Remuneration Committee of the main Board on the appointment, appraisal and remuneration of the Chief Executive and (with the latter) other Executive Board members; 6. Lead the Council of Governors through a formally-appointed Nomination and Remuneration Group of the Council of Governors on the appointment and appraisal for the Non-Executive Directors; 7. Appoint Non-Executive Board members to an Audit Committee of the main Board; 8. Advise NHS Improvement on the performance of Non-Executive Directors when required; |
| 1.3.2.5 | CHIEF EXECUTIVE | <ol style="list-style-type: none"> 1. The Chief Executive is accountable to the Chairman and Non-Executive members of the Board for ensuring that its decisions are implemented, that the Trust works effectively, in accordance with Government policy, the Trust's constitution and public service values and for the maintenance of proper financial stewardship 2. The Chief Executive should be allowed full scope, within clearly defined delegated powers, for action in fulfilling the decisions of the Board. 3. The other duties of the Chief Executive as Accountable Officer are laid out in the Accountable Officer Memorandum. |
| 1.3.2.6 | NON EXECUTIVE DIRECTORS | Non-Executive Directors are appointed by the Council of Governors to bring independent judgement to bear on issues of strategy, performance, key appointments and accountability through NHS Improvement and to the local community. |
| 1.3.2.8 | CHAIR AND DIRECTORS | Declaration of conflict of interests. |
| 1.3.2.9 | BOARD | NHS Boards must comply with legislation and guidance issued by NHS Improvement, the Care Quality Commission, the Department of Health and other regulators, respect agreements entered into by themselves or in on their behalf and establish terms and conditions of service that are fair to the staff and represent good value for taxpayers' money. |
| 4. | COUNCIL OF GOVERNORS | The general responsibilities of the Council of Governors shall be: |

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| | | <ul style="list-style-type: none"> • to hold the Non-Executive Directors individually and collectively to account for the performance of the Board of Directors; and • to represent the interests of the members of the Trust as a whole and the interests of the public' • to assist the Board of Directors in setting the strategic direction of the Trust and targets for the Trust's performance; • to monitor the Trust's performance in achieving strategic objectives and performance targets that have been set; • to act as guardians to ensure that the Trust operates in a way that is consistent with NHS and Trust principles (as set out in Annex 9 of the constitution) and the NHS Provider Licence; to exercise such other powers and to discharge such other duties as may be conferred on the Council of Governors under the constitution; • to approve proposals to increase by 5% or more the proportion of the Foundation Trust's total income in any Financial Year attributable to activities other than the fulfilment of the Principal Purpose • to approve amendments to the Constitution and at least one member of the Council of Governors must attend the next Annual Members' Meeting to present any amendments that relate to the powers or duties of the Council of Governors (or otherwise in respect of the role that the Council of Governors has as part of the Foundation Trust). • to approve the Foundation Trust's application for a merger, acquisition, separate or dissolution. • to approve the Foundation Trust's entry into a Significant Transaction. • to approve the policy for non audit work. |

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SCHEME OF DELEGATION FROM STANDING ORDERS

| SO REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
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| 2.1 | CHAIRMAN | Final authority in interpretation of Standing Orders (SOs). |
| 3.1 | CHAIRMAN | Recommend the appointment of the Deputy Chairman and the Senior Independent Director to the Council of Governors. |
| 3.11 | COUNCIL OF GOVERNORS | To appoint the Chairman and Non-Executive Directors at a general meeting of the Council of Governors. To decide the period of office, remuneration and allowances, and other terms and conditions of office of the Chairman and other Non-Executive Directors. |
| 4.3 | CHAIRMAN | Call meetings of the Board. |
| 4.7 | CHAIRMAN | Chair all Board meetings and associated responsibilities. |
| 4.8 | CHAIRMAN | Give final ruling in questions of order, relevancy and regularity of meetings. |
| 4.13 | CHAIRMAN | Having a casting vote in the event of a tie. |
| 4.15 | BOARD | Suspension of Standing Orders |
| 4.15.5 | AUDIT COMMITTEE | Audit Committee to review every decision to suspend Standing Orders (power to suspend Standing Orders is reserved to the Board) |
| 4.16 | BOARD | Variation or amendment of Standing Orders |
| 6.1 | BOARD | Formal delegation of powers to sub committees or joint committees and approval of their constitution and terms of reference (terms of reference of sub committees may be approved by the Chief Executive.) |

Please read this document in conjunction with the Constitution, Standing Orders and Standing Financial Instructions

| SO REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|---------------|----------------------------|---|
| 5.2 | CHAIRMAN & CHIEF EXECUTIVE | The powers which the Board has retained to itself within these Standing Orders may in emergency be exercised by the Chair and Chief Executive after having consulted at least two Non-Executive members. |
| 5.4 | CHIEF EXECUTIVE | The Chief Executive shall prepare a Scheme of Delegation identifying his/her proposals that shall be considered and approved by the Board, subject to any amendment agreed during the discussion. |
| 5.5 | ALL | Disclosure of non-compliance with Standing Orders to the Chief Executive as soon as possible. |
| 8.1 | BOARD | Declare relevant and material interests. |
| 8.1 | CHIEF EXECUTIVE | Maintain Register(s) of Interests. |
| 9. | ALL STAFF | Comply with national guidance contained in HSG 1993/5 "Standards of Business Conduct for NHS Staff". Comply with Trust's Ethical Standards Policy. Comply with Nolan principles. Fit and Proper Person requirements. |
| 9. | ALL | Disclose relationship between self and candidate for staff appointment. (Chief Executive to report the disclosure to the Board.) |
| 10. | CHIEF EXECUTIVE | Tendering and contract procedure. |
| 10.3.3 | CHIEF EXECUTIVE | Waive formal tendering procedures. |
| 10.3.3 | CHIEF EXECUTIVE | Report waivers of tendering procedures to the Board. |
| 10.11 | DIRECTOR OF FINANCE | Where a supplier is chosen that is not on the approved list the reason shall be recorded in writing to the CE. |
| 10.5 | CHIEF EXECUTIVE | Responsible for the receipt, endorsement and safe custody of tenders received. |
| 10.6 | CHIEF EXECUTIVE | Shall maintain a register to show each set of competitive tender invitations dispatched. |

Please read this document in conjunction with the Constitution, Standing Orders and Standing Financial Instructions

| SO REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|---------------|---|---|
| 10.7 | CHIEF EXECUTIVE AND DIRECTOR OF FINANCE | Where one tender is received will assess for value for money and fair price. |
| 10.9 | CHIEF EXECUTIVE | No tender shall be accepted which will commit expenditure in excess of that which has been allocated by the Trust and which is not in accordance with these Instructions except with the authorisation of the Chief Executive. |
| 10.15 | CHIEF EXECUTIVE OR DIRECTOR OF FINANCE | No quotation shall be accepted which will commit expenditure in excess of that which has been allocated by the Trust and which is not in accordance with these Instructions except with the authorisation of the Chief Executive. |
| 10.18 | CHIEF EXECUTIVE | The Chief Executive shall demonstrate that the use of private finance represents value for money and genuinely transfers risk to the private sector. |
| 10.18 | BOARD | All PFI proposals must be agreed by the Board. |
| 10.19 | CHIEF EXECUTIVE | The Chief Executive shall nominate an officer who shall oversee and manage each contract on behalf of the Trust. |
| 10.20 | CHIEF EXECUTIVE | The Chief Executive shall nominate officers with delegated authority to enter into contracts of employment, regarding staff, agency staff or temporary staff service contracts. |
| 12. | CHIEF EXECUTIVE | The Chief Executive shall be responsible for ensuring that best value for money can be demonstrated for all services provided on an in-house basis. |
| 10.21 | CHIEF EXECUTIVE | Must ensure the Trust enters into contracts with service commissioners for the provision of NHS services. |
| NA | CHIEF EXECUTIVE | Approve the legally binding contract with the main commissioning Clinical Commissioning Group or successor body. |
| 13.1 and 13.3 | CHIEF EXECUTIVE | Keep seal in safe place and maintain a register of sealing. |
| 14. | CHIEF EXECUTIVE/ | Approve and sign all documents that will be necessary in legal proceedings. |

Please read this document in conjunction with the Constitution, Standing Orders and Standing Financial Instructions

| SO REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|---------------|---------------------|-------------------------------------|
| | EXECUTIVE DIRECTOR | |

SCHEME OF DELEGATION FROM STANDING FINANCIAL INSTRUCTIONS (SFIs)

| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|--|---|
| 1.7 | DIRECTOR OF FINANCE | Approval of all financial procedures. |
| 1.8 | DIRECTOR OF FINANCE | Advice on interpretation or application of Standing Financial Instructions. |
| 2.4 | ALL MEMBERS OF THE BOARD AND EMPLOYEES | Have a duty to disclose any non-compliance with these Standing Financial Instructions to the Director of Finance as soon as possible. |
| 3.1.2 | CHIEF EXECUTIVE | Responsible as the Accounting Officer to ensure financial targets and obligations are met and have overall responsibility for the System of Internal Control. |
| 3.1.2 | CHIEF EXECUTIVE & DIRECTOR OF FINANCE | Accountable for financial control but will, as far as possible, delegate their detailed responsibilities. |
| 3.1.4 | CHIEF EXECUTIVE | To ensure all Board members, officers and employees, present and future, are notified of and understand Standing Financial Instructions. |
| 3.15 | DIRECTOR OF FINANCE | Responsible for: <ul style="list-style-type: none"> a) implementing the Trust's financial policies and coordinating corrective action; b) maintaining an effective system of financial control including ensuring detailed financial procedures and systems are prepared and documented; c) ensuring that sufficient records are maintained to explain Trust's transactions and financial position; d) providing financial advice to members of Board and staff; e) maintaining such accounts, certificates etc as are required for the Trust to carry out its statutory duties. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|-----------------|--|---|
| 3.2.5 | ALL MEMBERS OF THE BOARD AND EMPLOYEES | Responsible for security of the Trust's property, avoiding loss, exercising economy and efficiency in using resources and conforming to Standing Orders, Financial Instructions and financial procedures. |
| 3.2.6 | CHIEF EXECUTIVE | Ensure that any contractor or employee of a contractor who is empowered by the Trust to commit the Trust to expenditure or who is authorised to obtain income are made aware of these instructions and their requirement to comply. |
| 4.1 | AUDIT COMMITTEE | Provide independent and objective view on internal control and probity. |
| 4.1.2 | CHAIR OF AUDIT COMMITTEE | Raise the matter at the Board meeting where Audit Committee considers there is evidence of ultra vires transactions or improper acts. |
| 4.1.3 and 4.2.1 | DIRECTOR OF FINANCE | Ensure an adequate internal audit service, for which he/she is accountable, is provided (and involve the Audit Committee in the selection process when/if an internal audit service provider is changed.) |
| 4.2.1 | DIRECTOR OF FINANCE | Decide at what stage to involve police in cases of misappropriation and other irregularities not involving fraud or corruption. |
| 4.3 | HEAD OF INTERNAL AUDIT | Review, appraise and report in accordance with NHS Internal Audit Manual and best practice. |
| 4.6 | AUDIT COMMITTEE | Ensure cost-effective External Audit. |
| 4.4 | CHIEF EXECUTIVE & DIRECTOR OF FINANCE | Monitor and ensure compliance with Secretary of State Directions on fraud and corruption including the appointment of the Local Counter Fraud Specialist. |
| 4.5 | CHIEF EXECUTIVE | Monitor and ensure compliance with Directions issued by the Secretary of State for Health on NHS security management including appointment of the Local Security Management Specialist. |
| 5.1.1 | CHIEF EXECUTIVE | Compile and submit to the Board an Annual Plan. The content of the Annual Plan to comply with the NHS Improvement Planning Guidance. |
| 5.1.2 and 5.1.3 | DIRECTOR OF FINANCE | Submit budgets to the Board for approval. Monitor performance against budget; submit to the Board financial estimates and forecasts. |

Please read this document in conjunction with the Constitution, Standing Orders and Standing Financial Instructions

| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|----------------------------------|---|
| 5.1.5 | DIRECTOR OF FINANCE | Ensure adequate training is delivered on an on going basis to budget holders. |
| 5.2.1 | CHIEF EXECUTIVE | Delegate budgets to budget holders. |
| 5.2.3 | CHIEF EXECUTIVE & BUDGET HOLDERS | Must not exceed the budgetary total or virement limits set by the Board. |
| 5.3.1 | DIRECTOR OF FINANCE | Devise and maintain systems of budgetary control. |
| 5.3.2 | BUDGET HOLDERS | Ensure that a) no overspend or reduction of income that cannot be met from virement is incurred without prior consent of Board; b) approved budget is not used for any other than specified purpose subject to rules of virement; c) no permanent employees are appointed without the approval of the CE other than those provided for within available resources and manpower establishment |
| 5.4.4 | CHIEF EXECUTIVE | Identify and implement cost improvements and income generation activities in line with the Integrated Business Plan, the three year financial plan and the Annual Plan for NHS Improvement. |
| 5.6.1` | CHIEF EXECUTIVE | Submit monitoring returns to requisite monitoring organisations. |
| 6.1 | DIRECTOR OF FINANCE | Preparation of annual accounts and reports ensuring that a copy of the annual accounts and any reports of the external auditor are laid before Parliament and then sent to NHS Improvement and that the annual report is presented to the Council of Governors. Prepare a report for approval by the Board on "Going Concern". |
| 7.1 | DIRECTOR OF FINANCE | Managing banking arrangements, including provision of banking services, operation of accounts, preparation of instructions and list of cheque signatories. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|---------------------------------------|--|
| 8. | DIRECTOR OF FINANCE | Develop and maintain income systems, including system design, prompt banking, review and approval of fees and charges, debt recovery arrangements, design and control of receipts, provision of adequate facilities and systems for employees whose duties include collecting or holding cash. |
| 8.23 | ALL EMPLOYEES | Duty to inform Director of Finance of money due from transactions which they initiate/deal with. |
| 10.1 | BOARD | Establish a Nomination and Remuneration Committee, in accordance with the constitution. |
| 10.1 | NOMINATION AND REMUNERATION COMMITTEE | <p>The Committee will:</p> <ul style="list-style-type: none"> • decide the appropriate remuneration and terms of office for the Chief Executive and other Executive Directors (and Very Senior Officers) including all aspects of salary; provision for other benefits including pensions and cars and arrangements for termination of employment and other contractual terms and to advise the Board of Directors of any decisions made. • regularly review, discuss and if necessary approve changes to the remuneration and terms of service of the Chief Executive and other Executive Directors (and other Very Senior Officers) to ensure they are fairly rewarded for their individual contribution to the Trust – having proper regard to the Trust’s circumstances and performance and to the provisions of any national arrangements where appropriate and to advise the Board of Directors of any decisions made. • monitor and evaluate the performance of individual senior employees, including Executive Directors. • advise on and oversee appropriate contractual arrangements for such staff, including proper calculation and scrutiny of termination payments. |
| 10.2.2 | CHIEF EXECUTIVE | Approval of variation to funded establishment of any directorate. |
| 10.3.1 | CHIEF EXECUTIVE | Staff, including agency staff, appointments and re-grading. |
| 10.4 | DIRECTOR OF FINANCE | <p>Payroll:</p> <p>a) specifying timetables for submission of properly authorised time records and other notifications;</p> |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|---------------------|---|
| | | <ul style="list-style-type: none"> b) final determination of pay and allowances; c) making payments on agreed dates; d) agreeing method of payment; e) issuing instructions (as listed in SFI 11.4.2). |
| 10.4.3 | NOMINATED MANAGERS* | <p>Submit time records in line with timetable.</p> <p>Complete time records and other notifications in required form.</p> <p>Submit termination forms in prescribed form and on time.</p> |
| 10.4.4 | DIRECTOR OF FINANCE | Ensure that the chosen method for payroll processing is supported by appropriate (contracted) terms and conditions, adequate internal controls and audit review procedures and that suitable arrangements are made for the collection of payroll deductions and payment of these to appropriate bodies. |
| 10.5 | NOMINATED MANAGER* | <p>Ensure that all employees are issued with a Contract of Employment in a form approved by the Board and which complies with employment legislation; and</p> <p>Deal with variations to, or termination of, contracts of employment.</p> |
| 11.1 | CHIEF EXECUTIVE | Determine, and set out, level of delegation of non-pay expenditure to budget managers, including a list of managers authorised to place requisitions, the maximum level of each requisition and the system for authorisation above that level. |
| 11.1.3 | CHIEF EXECUTIVE | Set out procedures on the seeking of professional advice regarding the supply of goods and services. |
| 11.2.1 | REQUISITIONER* | In choosing the item to be supplied (or the service to be performed) shall always obtain the best value for money for the Trust. In so doing, the advice of the Trust's adviser on supply shall be sought. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|--------------------------------|--|
| 11.3 | DIRECTOR OF FINANCE | Shall be responsible for the prompt payment of accounts and claims. |
| 11.3.1 | DIRECTOR OF FINANCE | <ul style="list-style-type: none"> • advise the Board regarding the setting of thresholds above which quotations (competitive or otherwise) or formal tenders must be obtained; and, once approved, the thresholds should be incorporated in standing orders and regularly reviewed; • prepare procedural instructions [where not already provided in the Scheme of Delegation or procedure notes for budget holders] on the obtaining of goods, works and services incorporating the thresholds; • be responsible for the prompt payment of all properly authorised accounts and claims; • be responsible for designing and maintaining a system of verification, recording and payment of all amounts payable; • a timetable and system for submission to the Director of Finance of accounts for payment; provision shall be made for the early submission of accounts subject to cash discounts or otherwise requiring early payment; • instructions to employees regarding the handling and payment of accounts within the Finance Department; • be responsible for ensuring that payment for goods and services is only made once the goods and services are received |
| 12.4 | APPROPRIATE EXECUTIVE DIRECTOR | Make a written case to support the need for a prepayment. |
| 12.4 | DIRECTOR OF FINANCE | Approve proposed prepayment arrangements. |
| 12.4 | BUDGET HOLDER | Ensure that all items due under a prepayment contract are received (and immediately inform DoF if problems are encountered). |
| 12.5 | CHIEF EXECUTIVE | Authorise who may use and be issued with official orders. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|---|---|
| 12.6 | MANAGERS AND OFFICERS | Ensure that they comply fully with the guidance and limits specified by the Director of Finance. |
| 15.1 | CHIEF EXECUTIVE DIRECTOR OF FINANCE | Ensure that the arrangements for financial control and financial audit of building and engineering contracts and property transactions comply with the guidance contained within CONCODE and ESTATECODE or other relevant guidance. The technical audit of these contracts shall be the responsibility of the relevant Director. |
| 13.1 | DIRECTOR OF FINANCE | Lay down procedures for payments to local authorities and voluntary organisations made under the powers of section 28A of the NHS Act. |
| 14.2 | DIRECTOR OF FINANCE | The DoF will advise the Board on the Trust's ability to pay dividend on Public Dividend Capital (PDC) and report, periodically, concerning the PDC debt and all loans and overdrafts. |
| 14.2 | BOARD | Approve a list of employees authorised to make short-term borrowings on behalf of the Trust. (This must include the Chief Executive and Director of Finance.) |
| 14.2 | DIRECTOR OF FINANCE | Prepare detailed procedural instructions concerning applications for loans and overdrafts. |
| 14.2 | CHIEF EXECUTIVE OR DIRECTOR OF FINANCE | Be on an authorising panel comprising one other member for short term borrowing approval. |
| 14.2 | DIRECTOR OF FINANCE | Will advise the Board on investments and report, periodically, on performance of same. |
| 15.1 | CHIEF EXECUTIVE | Capital investment programme: <ul style="list-style-type: none"> • ensure that there is adequate appraisal and approval process for determining capital expenditure priorities and the effect that each has on plans • responsible for the management of capital schemes and for ensuring that they are delivered on time and within cost; • ensure that capital investment is not undertaken without availability of resources to finance all revenue consequences; • ensure that a business case is produced in line with the Capital Policy. |

Please read this document in conjunction with the Constitution, Standing Orders and Standing Financial Instructions

| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
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| 15.1 | DIRECTOR OF FINANCE | Certify professionally the costs and revenue consequences detailed in the business case for capital investment. |
| 15.1 | CHIEF EXECUTIVE | Issue procedures for management of contracts involving stage payments. |
| 15.1 | DIRECTOR OF FINANCE | Assess the requirement for the operation of the construction industry taxation deduction scheme. |
| 15.1 | DIRECTOR OF FINANCE | Issue procedures for the regular reporting of expenditure and commitment against authorised capital expenditure. |
| 15.1 | CHIEF EXECUTIVE | Issue manager responsible for any capital scheme with authority to commit expenditure, authority to proceed to tender and approval to accept a successful tender. Issue a scheme of delegation for capital investment management. |
| 15.1 | DIRECTOR OF FINANCE | Issue procedures governing financial management, including variation to contract, of capital investment projects and valuation for accounting purposes. |
| 15.2 | DIRECTOR OF FINANCE | Demonstrate that the use of private finance represents value for money and genuinely transfers significant risk to the private sector. |
| 15.2 | Board | Proposal to use PFI must be specifically agreed by the Board. |
| 15.3 | DIRECTOR OF FINANCE | Maintenance of asset registers. |
| 15.3 | DIRECTOR OF FINANCE | Approve procedures for reconciling balances on fixed assets accounts in ledgers against balances on fixed asset registers. |
| 15.3 | DIRECTOR OF FINANCE | Calculate capital charges in accordance with International Financial Reporting Standards and accepted accounting policies. |
| 15.5 | CHIEF EXECUTIVE | Overall responsibility for fixed assets. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|---|---|
| 15.5 | DIRECTOR OF FINANCE | Approval of fixed asset control procedures. |
| 15.5 | BOARD, EXECUTIVE MEMBERS AND ALL SENIOR STAFF | Responsibility for security of Trust assets including notifying discrepancies to DoF, and reporting losses in accordance with Trust procedure. |
| 16. | CHIEF EXECUTIVE | Delegate overall responsibility for control of stores (subject to DoF responsibility for systems of control). Further delegation for day-to-day responsibility subject to such delegation being recorded. (Good practice to append to the scheme of delegation document.) |
| 16.1 | DIRECTOR OF FINANCE | Responsibility for systems of control over stores and receipt of goods. |
| 16.1 | DESIGNATED PHARMACEUTICAL OFFICER | Responsibility for controls of pharmaceutical stocks |
| 16.1 | DESIGNATED ESTATES OFFICER | Responsibility for control of stocks of fuel oil and coal. |
| 16.1 | NOMINATED OFFICERS* | Security arrangements and custody of keys |
| 16.1 | DIRECTOR OF FINANCE | Set out procedures and systems to regulate the stores. |
| 16.1 | DIRECTOR OF FINANCE | Agree stocktaking arrangements. |
| 16.1 | DIRECTOR OF FINANCE | Approve alternative arrangements where a complete system of stores control is not justified. |
| 17.1 | DIRECTOR OF FINANCE | Approve system for review of slow moving and obsolete items and for condemnation, disposal and replacement of all unserviceable items. |
| 17.1 | NOMINATED OFFICERS* | Operate system for slow moving and obsolete stock, and report to DoF evidence of significant overstocking. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|--|---|
| 16.1 | CHIEF EXECUTIVE | Identify persons authorised to requisition and accept goods from NHS Supply Chain (NHS Shared Business Agency) stores. |
| 17.1 | DIRECTOR OF FINANCE | Prepare detailed procedures for disposal of assets including condemnations and ensure that these are notified to managers. |
| 17.2 | DIRECTOR OF FINANCE | Prepare procedures for recording and accounting for losses, special payments and informing police in cases of suspected arson or theft. |
| 15.5 | ALL STAFF | Discovery or suspicion of loss of any kind must be reported immediately to either head of department or nominated officer. The head of department / nominated officer should then inform the CE and DoF. |
| 17.2.2 | BOARD | Approve write off of losses of £10,000 or more. |
| 17.2.4 | DIRECTOR OF FINANCE | Consider whether any insurance claim can be made. |
| 17.2.5 | DIRECTOR OF FINANCE | Maintain losses and special payments register. |
| 18.1 | DIRECTOR OF FINANCE | Responsibility for accuracy and security of computerised financial data. |
| 18.1 | DIRECTOR OF FINANCE | Satisfy himself/herself that new financial systems and amendments to current financial systems are developed in a controlled manner and thoroughly tested prior to implementation. Where this is undertaken by another organisation, assurances of adequacy must be obtained from them prior to implementation. |
| 23.1.1 | DIRECTOR OF G5 AND CORPORATE DEVELOPMENT | Shall publish and maintain a Freedom of Information Scheme. |
| 18.2.1 | RELEVANT OFFICERS | Send proposals for general computer systems to DoF. |
| 18.3 | DIRECTOR OF FINANCE | Ensure that contracts with other bodies for the provision of computer services for financial applications clearly define responsibility of all parties for security, privacy, accuracy, completeness and timeliness of data during processing, transmission and storage, and allow for audit review. Seek periodic assurances from the provider that adequate controls are in operation. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|---------------------|---|
| 18.4 | DIRECTOR OF FINANCE | Ensure that risks to the Trust from use of IT are identified and considered and that disaster recovery plans are in place. |
| 18.5 | DIRECTOR OF FINANCE | Where computer systems have an impact on corporate financial systems satisfy himself that: a) systems acquisition, development and maintenance are in line with corporate policies; b) data assembled for processing by financial systems is adequate, accurate, complete and timely, and that a management trail exists; c) DoF and staff have access to such data; Such computer audit reviews are being carried out as are considered necessary. |
| 19.2 | CHIEF EXECUTIVE | Responsible for ensuring patients and guardians are informed about patients' money and property procedures on admission. |
| 19.3 | DIRECTOR OF FINANCE | Provide detailed written instructions on the collection, custody, investment, recording, safekeeping, and disposal of patients' property (including instructions on the disposal of the property of deceased patients and of patients transferred to other premises) for all staff whose duty is to administer, in any way, the property of. |
| 19.6 | MANAGERS | Inform staff of their responsibilities and duties for the administration of the property of patients. |
| 20.1 | DIRECTOR OF FINANCE | Shall ensure that each trust fund that the Trust is responsible for managing is managed appropriately. |
| 21 | DIRECTOR OF FINANCE | Ensure all staff are made aware of the Trust policy on the acceptance of gifts and other benefits in kind by staff. |
| 22 | CHIEF EXECUTIVE | Retention of documents procedures in accordance with Records Management: NHS Code of Practice part 1 and part 2 (2006). |
| 24.1.2 | CHIEF EXECUTIVE | Risk management programme. |
| 24.1.2 | AUDIT COMMITTEE | Approve and monitor risk management programme. |

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| SFI REF | DELEGATED TO | AUTHORITIES/DUTIES DELEGATED |
|----------------|---------------------|--|
| 24.1.4 | BOARD | Decide whether the Trust will use the risk pooling schemes administered by NHS Resilience or self-insure for some or all of the risks (where discretion is allowed). Decisions to self-insure should be reviewed annually. |
| 24.1.7 | DIRECTOR OF FINANCE | <p>Where the Board decides to use the risk pooling schemes administered by NHS Resilience the Director of Finance shall ensure that the arrangements entered into are appropriate and complementary to the risk management programme. The Director of Finance shall ensure that documented procedures cover these arrangements.</p> <p>Where the Board decides not to use the risk pooling schemes administered by NHS Resilience for any one or other of the risks covered by the schemes, the Director of Finance shall ensure that the Board is informed of the nature and extent of the risks that are self insured as a result of this decision. The Director of Finance will draw up formal documented procedures for the management of any claims arising from third parties and payments in respect of losses that will not be reimbursed.</p> |
| 24.7 | DIRECTOR OF FINANCE | Ensure documented procedures cover management of claims and payments below the deductible. |

* Nominated officers and the areas for which they are responsible should be incorporated into the Trust's Scheme of Delegation document.

Please read this document in conjunction with the Constitution, Standing Orders and Standing Financial Instructions