



PWYLLGOR ARCHWILIO A SICRWYDD RISG AUDIT AND RISK ASSURANCE COMMITTEE

| | |
|--|---|
| DYDDIAD Y CYFARFOD: DATE OF MEETING: | 18 April 2023 |
| TEITL YR ADRODDIAD: TITLE OF REPORT: | Scheme of Delegation |
| CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR: | Joanne Wilson, Director of Corporate Governance/Board Secretary |
| SWYDDOG ADRODD: REPORTING OFFICER: | Charlotte Beare, Assistant Director of Assurance and Risk |

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

To present the amendments to Hywel Dda University Health Board's (HDdUHB's) Scheme of Delegation (SoD) (Appendix 1) to the Audit and Risk Assurance Committee for comment, prior to onward submission to the Board for approval on 25 May 2023.

Cefndir / Background

It is necessary to ensure that Local Health Board, Trust, Welsh Health Specialised Services Committee (WHSSC) and Emergency Ambulance Services Committee (EASC) Model Standing Orders and Standing Financial Instructions are kept up to date and take account of any developments. NHS organisations in Wales are required to review their Standing Orders and Standing Financial Instructions against these Model Standing Orders and Standing Financial Instructions on an annual basis.

The current Scheme of Delegation was approved by Board in in July 2022, as part of the Model Standing Orders and Standing Financial Instructions annual review. However, following a number of changes, there is a requirement to present the revised SoD to ARAC, for comment, and Board, for approval, outside of the routine annual review. This is in line with Section 2.3.2 of the Local Standing Orders, which state:

The Chief Executive may periodically propose amendments to the Scheme of Delegation to Officers and any such amendments must also be considered and approved by the Board.

Asesiad / Assessment

Following approval of the Executive Director Portfolio and Title Changes at the Remuneration and Terms of Service Committee (RTSC) meeting on 12 January 2023, plans commenced to operationalise the changes for each of the Executive Director portfolios, which delayed presenting the changes to the SoD to ARAC.

Executive Director Portfolio and Title Changes

- Transfer of the executive leadership for the Health Board’s Corporate Commissioning function from the Director of Finance to the Director of Strategic Development & Operational Planning
- Change of job title for the Director of Strategic Development and Operational Planning to the Director of Strategy and Planning
- Transfer of the corporate leadership for public and staff engagement from the Director of Strategy and Planning to the Communications Director
- Change of job title for the Communications Director to the Communications and Engagement Director
- Change of job title for the Board Secretary to the Director of Corporate Governance

In addition to the Executive Director portfolio changes, the revised SoD has been updated to provide clarity on a number of areas, listed below:

| Section | What has changed? | Rationale? |
|--|--|--|
| STANDING ORDERS | Signature of Documents 9.2.1 Signing any agreement or other document (not required to be executed as a deed) on behalf of the Board where the subject matter has been approved either by the Board or a Committee to which the Board, as per the authority delegated within the Financial Scheme of Delegation | Additional line added in order to provide further clarity on which nominated Officers have operational responsibility to sign documents (as per financial scheme of delegation). |
| LEGISLATION COMPLIANCE | Information Governance Environmental Information Regulations 2004 | Operational responsibility has transferred from the Director of Corporate Governance to the Assistant Director of Corporate Legal Services and Public Affairs. |
| SCHEME OF DELEGATION FROM OTHER | International Health Partnerships (Working Overseas) | The addition of “working overseas” in order to provide clarity on who has operational responsibility for this area. |
| SCHEME OF DELEGATION FROM OTHER | International Health Partnerships (Volunteering) | The addition of “volunteering” in order to provide clarity on who has operational responsibility for this area. |

Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to **APPROVE** Hywel Dda University Health Board's (HDdUHB's) Scheme of Delegation for onward submission to the Board for approval on 25 May 2023.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

| | |
|---|---|
| Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor: | 3.10 The Committee will be responsible for reviewing the UHB's Standing Orders and Standing Financial Instructions and Scheme of Delegation annually, (including associated framework documents as appropriate), monitoring compliance, and reporting any proposed changes to the Board for consideration and approval. |
| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score: | Not Applicable |
| Safon(au) Gofal ac Iechyd: Health and Care Standard(s): | Governance, Leadership and Accountability |
| Amcanion Strategol y BIP: UHB Strategic Objectives: | Not Applicable |
| Amcanion Cynllunio Planning Objectives | Not Applicable |
| Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022 | 10. Not Applicable |

Gwybodaeth Ychwanegol:

Further Information:

| | |
|--|--|
| Ar sail tystiolaeth: Evidence Base: | Model Standing Orders and Standing Financial Instructions RTSC Minutes from 12 January 2023 |
| Rhestr Termâu: Glossary of Terms: | Included within the body of the report |
| Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: | Not Applicable |

| | |
|---|--|
| Parties / Committees consulted prior to Audit and Risk Assurance Committee: | |
|---|--|

| Effaith: (rhaid cwblhau) Impact: (must be completed) | |
|---|--|
| Ariannol / Gwerth am Arian: Financial / Service: | Robust governance arrangements underpinning financial management contribute towards internal control and value for money being achieved |
| Ansawdd / Gofal Claf: Quality / Patient Care: | Where applicable, included within the report. |
| Gweithlu: Workforce: | Where applicable, included within the report. |
| Risg: Risk: | A sound system of internal control ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed. |
| Cyfreithiol: Legal: | Model SOs are issued by Welsh Ministers to Health Boards using powers of direction provided in section 12 (3) of the National Health Service (Wales) Act 2006. Health Boards in Wales must agree SOs for the regulation of their proceedings and business. SOs are designed to translate the statutory requirements set out in the Local Health Boards (Constitution, Membership and Procedures) (Wales) Regulations 2009 (S.I. 2009/779 (W.67)) into day to day operating practice, and, together with the adoption of a Scheme of Decisions reserved to the Board; a Scheme of Delegations to officers and others; and SFIs, they provide the regulatory framework for the business conduct of the Health Board. |
| Enw Da: Reputational: | Not Applicable |
| Gyfrinachedd: Privacy: | No direct impacts |
| Cydraddoldeb: Equality: | <p>The Model SOs and SFIs have been subject to an Equality Impact Assessment as part of the NHS Reform Programme, and the revised SOs were subject to an in-house EqIA screening in September 2012, the outcome of which indicated no negative impacts in relation to the Health Board's duties under the Equality Act 2010. A summary report was produced to this effect. The March 2014 revisions have been scrutinised with no negative impacts identified, therefore, no amendments will be made to the report produced in September 2012.</p> <p>The most recent amendments outlined above and attached have been subject to an EqIA Screening, and there is no evidence at this stage of potential adverse impact in relation to equality, diversity or human rights. Should any issues arise at any stage following implementation of the revised SOs, a full EqIA will be undertaken as appropriate.</p> |

SCHEME OF DELEGATION DERIVED FROM THE ACCOUNTABLE OFFICER MEMORANDUM FOR CHIEF EXECUTIVES OF LOCAL HEALTH BOARDS

| SOURCE | REF | SECTION HEADER | SUB HEADER | DELEGATED MATTER | DELEGATED TO | OPERATIONAL RESPONSIBILITY |
|--------------------------------|------------|-----------------------|-------------------|--|---------------------|-----------------------------------|
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3a | Section 3 | N/A | Responsibility for:- a) The overall organisation, management and staffing of the LHB and its arrangements related to quality and safety of care as well as matters of finance, together with any other aspect relevant to the conduct of the LHB's business in pursuance of the strategic direction set by the LHB's Board, and in accordance with its statutory responsibilities; i) ensuring that all items of expenditure, including payments to staff, fall within the legal powers of the Board; ii) acting within the scheme of delegations and ensuring that you comply with guidance on classes of payment that you should authorise personally. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3b | Section 3b | N/A | b) Ensuring that in delegating functions to officers you are satisfied of their ongoing capacity and capability to deliver on those functions, facilitating access to the information they need, ongoing training and development, as well as professional or specialist advice where appropriate. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3c | Section 3c | N/A | c) Prudent and economical administration, for the avoidance of waste and extravagance, and for the efficient and effective use of all resources:- | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3d | Section 3 | N/A | d) Ensuring that the assets for which you are responsible are properly safeguarded, particularly: i) information, including systems for maintaining the trust of patients and the public by ensuring that the LHB will store, share and use information, including their personal information safely, and securely; and ii) land, buildings or other property (including stores and equipment) | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3e | Section 3 | N/A | e) Ensuring that, in the consideration of policy proposals relating to the expenditure or income for which you have responsibility, all relevant financial considerations (including any issues of propriety, regularity or value for money) are taken into account. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3f | Section 3 | N/A | f) Ensuring that risks to the achievement of the LHB's objectives and fulfilment of its statutory responsibilities are identified, that their significance is assessed, and that a sound system of internal control is in place to manage them; i) implementing an appropriate framework of assurance covering all aspects of LHB business, ensuring that research and evaluation work is planned so that strategic objectives and spending programmes for which you have responsibility are routinely evaluated to assess their effectiveness and value for money; ii) ensuring, as a key source of your internal assurance, that you establish arrangements for internal audit in accordance with the International Standards for the professional practice of Internal Audit as adopted by the NHS in Wales, Welsh Government and HM Treasury, and ensuring that appropriate action is taken in response to reports produced by Internal Audit. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3g | Section 3 | N/A | g) Ensuring that there are appropriate arrangements to counter fraud and that procedures for dealing with suspected cases of fraud are complied with; | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3h | Section 3 | N/A | h) Ensuring that the LHB co-operates fully with external auditors, regulators and inspectors - including the Wales Audit Office (WAO), Healthcare Inspectorate Wales (HIW), and the Care and Social Services Inspectorate Wales (CSSIW), and ensuring that appropriate action is taken in response to any reports produced by such bodies. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 3i | Section 3 | N/A | i) Signing the LHB's accounts and, in doing so, accepting personal responsibility for their proper presentation fully supported by sound financial procedures and records, and in accordance with the LHB Accounts Directions issued by Welsh Ministers, ensuring that losses or special payments are properly identified and handled in accordance with defined requirements. | Chief Executive | N/A |

| | | | | | | |
|--------------------------------|------------|------------|-----|---|------------------------|-----|
| ACCOUNTABLE OFFICER MEMORANDUM | Section 4 | Section 4 | N/A | In regard to the planning, designing, developing and securing the delivery of safe, high quality primary, community, in hospital care services and, specialised and tertiary services for the citizens within the geographical areas covered by the LHB:- i) Ensure the LHB carries out these responsibilities in a way that fulfils its duty to ensure the quality and safety of healthcare and the proper stewardship of public money. ii) Take account of your corporate responsibilities and accountability to the LHB Board of which you are a member. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 5 | Section 5 | N/A | Ensure compliance with the principles set out within Managing Welsh Public Money and the framework and standards of good governance set for the NHS in Wales (as embodied within the Welsh Government's Citizen Centred Governance Principles and reflected within the contents of the NHS Wales Governance e-manual) i) Assist the Chair in ensuring that his/her establishment and implementation of the LHB's governance framework accords with these standards and principles. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 6 | Section 6 | N/A | Work in partnership with other organisations to achieve its strategic aims and objectives. i) Ensure that the wider impact of the activities for which you are responsible are properly identified and, where appropriate, taken into account in determining the governance and accountability arrangements overseeing such work ii) Ensure that the governance arrangements are formally recorded and that you put in place appropriate arrangements to provide you with assurance on those areas for which you are accountable. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 7 | Section 7 | N/A | Take joint responsibility for the delivery of a service through joint arrangements that involve the pooling of budgets. Such arrangements may be handled under a specific statutory authority, e.g., Section 33 of the National Health Service (Wales) Act 2006. - Where you and another Accountable Officer or Officers take joint responsibility, ensure that that there is absolute clarity on all aspects of the service for which you are responsible and accountable. Specifically, you must set down, in a formal agreement, the governance and financial accounting arrangements, including audit and assurance requirements, in accordance with any requirements determined by the Welsh Government. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 8 | Section 8 | N/A | Ensure that where your LHB contracts with a third party for the provision of goods or services it does so in accordance with all relevant legislation together with any requirements determined by the Welsh Government. i) Ensure that appropriate systems are in place to provide assurance that such funds are allocated in accordance with the terms of the contract and are not misappropriated. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 9 | Section 9 | N/A | Responsibility to see that appropriate advice is tendered to the Board on all matters of financial propriety, regularity and value for money, and more broadly on all considerations of prudent and economic administration, efficiency and effectiveness. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 10 | Section 10 | N/A | If the Board or the Chair is contemplating a course of action which you consider would infringe the requirements of propriety, regularity or value for money, set out in writing to the Chair and the Board your objection to the proposal, the reason for your objection and your duty to inform NHS Wales Chief Executive and the external auditors if your advice is overruled. Wherever possible, the NHS Wales Chief Executive should be informed before the Board takes its decision. If it is not possible, due to the urgency of the situation, to notify the NHS Wales Chief Executive beforehand, and if the Board decides nonetheless to proceed against advice, a written instruction to take the action in question must be sought. The request for the instruction and the instruction itself should be communicated to the NHS Wales Chief Executive and to the external auditors without undue delay, and before the decision is implemented, so that any necessary intervene with the Board can be taken and Welsh Ministers informed. | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 11 | Section 11 | N/A | The Chief Executive should be generally available for consultation and that in any temporary period of unavailability, e.g., due to illness, or during normal periods of annual leave, responsibility should be delegated to a senior officer of the LHB. | Deputy Chief Executive | N/A |

| | | | | | | |
|--------------------------------|----------------|---|--|---|--|---|
| ACCOUNTABLE OFFICER MEMORANDUM | Section 12 | Section 12 | N/A | Should it becomes clear that the Chief Executive is so incapacitated that they are unable to discharge these responsibilities over a period of four weeks or more, the NHS Wales Chief Executive should be notified so that an Acting Accountable Officer can be designated pending the Chief Executive's return. The same applies if, exceptionally, an absence of more than four weeks is planned during which the Chief Executive cannot be contacted. | Deputy Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 14 | Section 14 | N/A | Responsibility for the Budgets assigned and to be held to account for the exercise of the responsibilities as Accountable Officer directly | Chief Executive | N/A |
| ACCOUNTABLE OFFICER MEMORANDUM | Section 16 | Section 16 | N/A | May be required to attend Public Accounts Committee with NHS Wales Chief Executive about matters relevant to the proper stewardship of funds within the NHS in Wales. i) May be required to appear before the Public Accounts Committee separately depending on the matter under consideration. | Chief Executive | N/A |
| STANDING ORDERS | xxvii & xxviii | GENERAL | Applying Standing Orders | Non Compliance and Variation of Standing Order | Director of Corporate Governance | Director of Corporate Governance |
| STANDING ORDERS | xxxi | GENERAL | Applying Standing Orders | Final interpretation of Standing Orders | Chair | Director of Corporate Governance and where appropriate the Director of Finance (for SFIs) |
| STANDING ORDERS | xxxiii | GENERAL | The role of the Board Secretary | Responsibility for providing advice to the Board on all aspects of governance/committee services | Director of Corporate Governance | Director of Corporate Governance |
| STANDING ORDERS | 2.1 | RESERVATION AND DELEGATION OF LHB FUNCTIONS | Chair's Action on Urgent Matters | Use of Chair's Action and onward reporting to Board | Chair and Chief Executive | Director of Corporate Governance |
| STANDING ORDERS | 2.3.1 | RESERVATION AND DELEGATION OF LHB FUNCTIONS | Delegation To Officers | Compilation of Scheme of Delegation for functions delegated to Chief Executive for consideration and approval by the Board | Chief Executive | Director of Corporate Governance |
| STANDING ORDERS | 2.3.1 | RESERVATION AND DELEGATION OF LHB FUNCTIONS | Delegation To Officers | Delegation of functions within Directorates/departments/localities in line with the framework established by the Chief Executive and agreed by the Board | Executive Directors | Executive Directors |
| STANDING ORDERS | 6 | WORKING IN PARTNERSHIP | Working In Partnership | Identification and engagement with all key partners and regular review of effectiveness | Chair | Director of Primary Care, Community & Long Term Care |
| STANDING ORDERS | 7.2 | MEETINGS | Annual Plan of Board Business | Development of the Annual Plan of Board Business | Chair | Director of Corporate Governance |
| STANDING ORDERS | 7.3 | MEETINGS | Calling Meetings | Call meetings of the Board | Chair | Director of Corporate Governance |
| STANDING ORDERS | 7.4 | MEETINGS | Preparing for Meetings | Preparation of Board meetings | Chair | Director of Corporate Governance |
| STANDING ORDERS | 7.5 | MEETINGS | Conducting Board Meetings | Report decisions made & review HB business conducted in private session | Chair | Director of Corporate Governance |
| STANDING ORDERS | 7.5 | MEETINGS | Conducting Board Meetings | Chair all HB Meetings & associated responsibilities | Chair (or Vice Chair in Chair's Absence) | Chair (or Vice Chair in Chair's Absence) |
| STANDING ORDERS | 7.6 | MEETINGS | Record of Proceedings | A record of proceedings of Board Meetings | Director of Corporate Governance | Director of Corporate Governance |
| STANDING ORDERS | 8.1 | VALUES AND STANDARDS OF BEHAVIOUR | Declaring and recording Board members' interests | Establishment, maintenance and annual review of a Register of Interests declared by all Board Members | Chief Executive | Director of Corporate Governance |
| STANDING ORDERS | 8.3 | VALUES AND STANDARDS OF BEHAVIOUR | Dealing with officers' interests | Establishment, maintenance and annual review of a Register of Interests for relevant LHB Officers | Chief Executive | Director of Corporate Governance |
| STANDING ORDERS | 8.7 | VALUES AND STANDARDS OF BEHAVIOUR | Register of Gifts, Hospitality and Sponsorship | Establishment, maintenance and annual review of a Register of Gifts, Hospitality, Sponsorship and Honoraria for Board Members and LHB Officers | Chair and Chief Executive | Director of Corporate Governance |

| | | | | | | |
|---------------------------------------|-------|--|------------------------|--|---|---|
| STANDING ORDERS | 9.1 | SIGNING AND SEALING DOCUMENTS | Register of Sealing | Establishment, maintenance and bi-annual reporting of a Register of Sealings | Director of Corporate Governance | Director of Corporate Governance |
| STANDING ORDERS | 9.2 | SIGNING AND SEALING DOCUMENTS | Signature of Documents | Signing and sealing of legal documents such as transfers of land, lease agreements and other important/key contracts on behalf of the Board. | Chief Executive | Chief Executive |
| STANDING ORDERS | 9.2.1 | SIGNING AND SEALING DOCUMENTS | Signature of Documents | Signing any agreement or other document (not required to be executed as a deed) on behalf of the Board where the subject matter has been approved either by the Board or a Committee to which the Board, as per the authority delegated within the Financial Scheme of Delegation. | Chief Executive | Nominated Officers (as per financial scheme of delegation) |
| STANDING ORDERS | 9.3 | SIGNING AND SEALING DOCUMENTS | Custody of Seal | Safe custody of Seal in a secure place | Director of Corporate Governance | Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 1.1.3 | INTRODUCTION | General | Approval of all financial procedures | Director of Finance, through Sustainable Resources Committee | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 1.1.4 | INTRODUCTION | General | Provision of advise in regard to the interpretation/applications of SFI's | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 1.2.1 | INTRODUCTION | General | Report non-compliance with SFI's for consideration by Audit Committee (to formally consider the matter and make proposals to the Board on any action taken) | Director of Finance and Director of Corporate Governance | Director of Finance and Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 1.3 | INTRODUCTION | General | Ensure the LHB meets its statutory obligation to perform its functions within the available financial resources | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.2.1 | RESPONSIBILITIES AND DELEGATION | The Board | Accountability for overall Financial Control | Chief Executive and Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.2.2 | RESPONSIBILITIES AND DELEGATION | The Board | Overall responsibility for ensuring that financial obligations and targets are met and overall responsibility for the system of internal control | Chief Executive | Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.2.3 | RESPONSIBILITIES AND DELEGATION | The Board | To ensure that Board Members and LHB Officers, and new appointees are notified of and understand their responsibilities within the SFI's | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.1 | RESPONSIBILITIES AND DELEGATION | The Board | a) Implementing Financial Policies and coordinating any corrective action necessary to further these policies | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.1 | RESPONSIBILITIES AND DELEGATION | The Board | b) Maintaining an effective system of internal financial control including ensuring that detailed financial procedures and systems are incorporating the principles of separation of duties and internal checks are prepared, documented and maintained to supplement these instructions; | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.1 | RESPONSIBILITIES AND DELEGATION | The Board | c) Ensuring that sufficient records are maintained to show and explain the LHB's transactions in order to disclose, with reasonable accuracy, the financial position of the LHB at any time | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.1 | RESPONSIBILITIES AND DELEGATION | The Board | d) The provision of financial advise to other Board members and LHB officers, and LHB committees and Advisory Groups | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.1 | RESPONSIBILITIES AND DELEGATION | The Board | e) the design, implementation and supervision of systems of internal financial control and, | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.1 | RESPONSIBILITIES AND DELEGATION | The Board | f) the preparation and maintenance of such accounts, certificates, estimates, records and reports as the LHB may require for the purpose of carrying out its statutory duties | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.3.2 | RESPONSIBILITIES AND DELEGATION | The Board | Ensuring an ongoing training and communication programme is in place to affect these SFI's | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.4.1 | RESPONSIBILITIES AND DELEGATION | The Board | Responsible for security of LHB's property, avoiding loss, exercising economy, efficiency, and sustainability in the use of resources & conforming with Sos, SFIs, financial procedures and Scheme of Delegation | All Board Members, LHB Officers, LHB Committees and Advisory Groups | All Board Members, LHB Officers, LHB Committees and Advisory Groups |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 2.5.1 | RESPONSIBILITIES AND DELEGATION | The Board | Ensure any contractor or employee of a contractor who is empowered by the LHB to commit the LHB to expenditure or who is authorised to obtain income are made aware of these SFIs and their requirement to comply | Chief Executive | All Executive Directors/Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.1.1 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Audit Committee | Establishment of an Audit Committee with clearly defined terms of reference. Detailed terms of reference and operating arrangements for the Audit Committee are set out in Schedule 3 to the SOs. This committee will follow the guidance set out in the NHS Wales Audit Committee Handbook. | Chief Executive | Director of Corporate Governance |

| | | | | | | |
|---------------------------------------|--------|--|----------------------|---|---|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.2.1a | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Chief Executive | a) Ensuring arrangements are in place to review, evaluate and report on the effectiveness of internal financial control including establishment of an IA function | Chief Executive | Director of Finance and Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.2.1b | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Chief Executive | b) Ensuring that the Internal Audit function meets the Public Sector Internal Audit Standards and provides sufficient independent and objective assurance to the Audit Committee and the Accountable Officer | Chief Executive | Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.2.1c | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Chief Executive | c) Deciding at what stage to involve the police in cases of misappropriation and other irregularities not involving fraud or corruption; | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.2.1d | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Chief Executive | d) Ensuring that an annual Internal Audit report is prepared for the consideration of the Audit Committee and the Board. The report must cover: • a clear opinion on the effectiveness of internal control in accordance with the requirements of the Public Sector Internal Audit Standards major internal financial control weaknesses discovered, • progress on the implementation of Internal Audit recommendations, • progress against plan over the previous year, • a strategic audit plan covering the coming three years, and • a detailed plan for the coming year | Chief Executive | Head of Internal Audit/Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.3.1 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Internal Audit | Ensure there is an internal audit function that operates in accordance with the standards and framework set for the provision of Internal Audit in the NHS in Wales. | Chief Executive | Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.4.1 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | External Audit | Ensure that there is a cost effective external audit service ??? | Audit and Risk Assurance Committee | Director of Finance and Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.4.2 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | External Audit | Invite External Audit representative to attend every Audit Committee | Director of Corporate Governance | Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.4.4 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | External Audit | Formally consider and review the External Audit Strategy | Audit and Risk Assurance Committee | Director of Finance and Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.4.5 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | External Audit | Review the External Audit Annual Plan and the associated fees, and consider any material changes to the annual audit plan | Audit and Risk Assurance Committee | Director of Finance and Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.5.1 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Fraud and Corruption | Monitor & ensure compliance with Directions issued by Welsh Ministers on fraud and corruption | Chief Executive and Director of Finance | Local Counter Fraud Specialist |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.5.2 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Fraud and Corruption | Nominate a suitable person to carry out the duties of the Local Counter Fraud Specialist (LCFS) as specified by the NHS Counter Fraud and Corruption Manual and guidance | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.5.4 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Fraud and Corruption | Provide a written report to the Director of Finance and Audit Committee, at least annually, on counter fraud work within the LHB | Director of Finance | Local Counter Fraud Specialist |

| | | | | | | |
|---------------------------------------|---------------|--|---|---|---|---|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.5.5 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Fraud and Corruption | Participate in the annual National Fraud Initiative. It must provide the necessary data for the mandatory element of the initiative by the due dates. | Director of Finance | Local Counter Fraud Specialist |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.5.5 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Fraud and Corruption | The Audit Committee should consider the LHB's participation in additional dataset matching in order to support the detection of fraud across the whole public sector | Director of Finance | Local Counter Fraud Specialist |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.6.1 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Security Management | Monitor and ensure compliance with Directions issued by the Welsh Ministers on NHS security management | Chief Executive | Director of Nursing, Quality & Patient Experience |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 3.6.2 | AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT | Security Management | Overall responsibility for controlling and coordinating security | Chief Executive | Director of Nursing, Quality & Patient Experience |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 4.2.4a | FINANCIAL DUTIES | First Financial Duty – The Breakeven Duty | a) Prior to the start of each financial year submit to the Board for approval a report showing the total allocations received, assumed in-year adjustments and their proposed distribution including any sums to be held in reserve; | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 4.2.4b | FINANCIAL DUTIES | First Financial Duty – The Breakeven Duty | b) Prior to the start of each financial year submit to the Board for approval a report showing the total allocations received, assumed in-year adjustments and their proposed distribution including any sums to be held in reserve; | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 4.2.4c | FINANCIAL DUTIES | First Financial Duty – The Breakeven Duty | c) Periodically review any assumed in-year allocations to ensure that these are reasonable and realistic; | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 4.2.4d | FINANCIAL DUTIES | First Financial Duty – The Breakeven Duty | d) Regularly update the Board on significant changes to the initial allocation and the application of such funds | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 4.2.5 | FINANCIAL DUTIES | First Financial Duty – The Breakeven Duty | Ensure the LHB meets its First Financial Duty | Chief Executive | Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 4.3.7-& 4.3.9 | FINANCIAL DUTIES | Second Financial Duty – The Planning Duty | To develop and submit to the Board, on an annual basis, the rolling 3 year Integrated Medium Term Plan (IMTP). The Board approved Integrated Medium Term Plan will be submitted to Welsh Government, for approval by the Minister, in line with the requirements set out in the NHS Planning Framework | Chief Executive | Director of Strategy and Planning |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.1.1 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budget Setting | Prepare and submit budgets for approval and delegation by the Board | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.1 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Delegate, via the Director of Finance, the management of a budget to permit the performance of a defined range of activities, including pooled budget arrangements under Regulations made in accordance with section 33 of the National Health Service (Wales) Act 2006 (c. 42). This delegation must be in writing, in the form of a letter of accountability, and be accompanied by a clear definition. | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.2 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Ensure delegated budget holders do not exceed the budgetary total or virement limits set by the Board. | Chief Executive, Director of Finance and Budget Holders | Chief Executive, Director of Finance and Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.3 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Ensure budgeted funds not required for their designated purpose(s) revert to the immediate control of the Chief Executive, subject to any authorised use of virement | Director of Finance | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.4 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Ensure non-recurring budgets are not be used to finance recurring expenditure without the authority in writing of the Chief Executive, as advised by the Director of Finance | All budget holders | All budget holders |

| | | | | | | |
|---------------------------------------|-------|--|--|---|-------------------------------|---|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.5 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Provide information as required by the Director of Finance to enable budgets to be compiled and managed appropriately. | Executive Directors/Directors | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.6 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Sign up to their allocated budgets at the commencement of the financial year | All budget holders | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.2.7 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Budgetary Delegation | Ensure that appropriate and timely financial information is provided to budget holders and that adequate training is delivered on an on-going basis to assist budget holders managing their budgets successfully | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.1 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | Monitor financial performance against budget and plans and report the current and forecast position, and financial risks, on a monthly basis and at every Board meeting. Any significant variances should be reported to LHB Board as soon as they come to light and the Board shall be advised on any recommendations and action to be taken in respect of such variances. | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.2 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | Devise and maintain systems of financial management, performance reporting and budgetary control as per SFI 5.3.2 | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.3 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | Establish project management controls and financial reporting systems to ensure these objectives are met. Reporting requirements to Welsh Government will be set out in the approval letter provided post Ministerial approval. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.4 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | Ensure that: a) Any likely overspending or reduction of income that cannot be met by virement is not incurred without the prior consent of the Chief Executive subject to the Board's scheme of delegation | All budget holders | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.4 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | b) The amount provided in the approved budget is not used in whole or in part for any purpose other than that specifically authorised, subject to the rules of virement | All budget holders | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.4 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | c) No permanent employees are appointed without the approval of the Chief Executive other than those provided for within the available resources and workforce establishment as approved by the Board. | All budget holders | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.3.5 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Financial Management and Budgetary Control | Responsible for identifying and implementing cost and efficiency improvements and income generation initiatives in accordance with the requirements of the Medium Term Financial Plans and (SFI 9.1) | Chief Executive | All budget holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 5.5.1 | FINANCIAL MANAGEMENT AND BUDGETARY CONTROL | Reporting to Welsh Government - Monitoring Returns | Responsible for ensuring that the appropriate monitoring returns are submitted to the Welsh Ministers in accordance with published guidance and timescales | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 6.2 | ANNUAL ACCOUNTS AND REPORTS | Annual Accounts and Reports | Sign the accounts on behalf of the LHB | Chair and Chief Executive | Chair and Chief Executive and Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 6.2a | ANNUAL ACCOUNTS AND REPORTS | Annual Accounts and Reports | Signing of the: a) Annual Governance Statement | Chair and Chief Executive | Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 6.2b | ANNUAL ACCOUNTS AND REPORTS | Annual Accounts and Reports | Signing of the: b) Annual Quality Statement | Chair and Chief Executive | Director of Nursing, Quality & Patient Experience |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 6.3 | ANNUAL ACCOUNTS AND REPORTS | Annual Accounts and Reports | Ensuring that financial reports and returns are prepared in accordance with the accounting policies, guidance and timetable determined by the Welsh Ministers, as per Welsh Government's Manual for Accounts, and consistent with Financial Reporting Manual (FRM) and International Financial Reporting Standards | Director of Finance | Director of Finance |

| | | | | | | |
|---------------------------------------|--------|---|-----------------------------|--|---------------------|----------------------------|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 6.5 | ANNUAL ACCOUNTS AND REPORTS | Annual Accounts and Reports | Signing of the: c) Accountability Report | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 7.1.1 | BANKING ARRANGEMENTS | General & Bank Accounts | Responsible for managing the LHB's banking arrangements and for advising the Board on the provision of banking services and operation of accounts | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 7.1.2 | BANKING ARRANGEMENTS | General & Bank Accounts | Approval of banking arrangements | Board | N/A |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 7.3.1 | BANKING ARRANGEMENTS | Banking Procedures | Prepare detailed instructions on the operation of bank accounts | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 7.3.2 | BANKING ARRANGEMENTS | Banking Procedures | Advise the LHB's bankers in writing of the conditions under which each account will be operated | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 7.3.3 | BANKING ARRANGEMENTS | Banking Procedures | Approve security procedures for any payable orders issued without a hand-written signature e.g. automatically printed. All Payable Orders shall be treated as controlled stationery, in the charge of a duly designated officer controlling their issue. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 7.4.1 | BANKING ARRANGEMENTS | Review | Review the banking arrangements of the LHB at regular intervals to ensure they reflect best practice; that they are efficient and effective and represent best value for money. The results of the review should be reported to the Audit Committee | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 8.1.1a | CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS | General | Responsible for: a) Approving the form of all receipt books, agreement forms, or other means of officially acknowledging or recording monies received or receivable; | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 8.1.1b | CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS | General | Responsible for: b) Ordering and securely controlling any such stationery ensuring all cash related stationery treated as controlled stationery with management responsibility given to a duly designated employee | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 8.1.1c | CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS | General | Responsible for: c) Provision of adequate facilities and systems for officers whose duties include collecting and holding cash | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 8.1.1d | CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS | General | Responsible for: d) Establishing systems and procedures for handling cash and negotiable securities on behalf of the LHB | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 8.1.1e | CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS | General | Responsible for: e) Ensuring effective control systems are in place for the use of payment cards | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 8.1.1f | CASH, CHEQUES, PAYMENT CARDS AND OTHER NEGOTIABLE INSTRUMENTS | General | Responsible for: f) Ensuring that there are adequate control systems in place to minimise the risk of cash/card misappropriation. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 9.2.1 | INCOME, FEES AND CHARGES | Income Systems | Design and maintain procedures to ensure compliance with systems for the proper recording, invoicing, and collection and coding of all monies due | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 9.2.2 | INCOME, FEES AND CHARGES | Income Systems | Ensure that systems are in place for the prompt banking of all monies received. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 9.3.1 | INCOME, FEES AND CHARGES | Fees and Charges | Responsible for approving and regularly reviewing the level of all fees and charges other than those determined by the Welsh Ministers or by Statute | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 9.3.2 | INCOME, FEES AND CHARGES | Fees and Charges | Inform the Director of Finance promptly of money due arising from transactions which they initiate/deal with, including all contracts, leases, tenancy agreements, private patient undertakings and other transactions | Director of Finance | Deputy Director of Finance |

| | | | | | | |
|---------------------------------------|---------|--|---|---|---|---|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 9.4.3 | INCOME, FEES AND CHARGES | Income Due and Debt Recovery | Responsible for recovering income due and for ensuring debt recovery procedures are in place to secure early payment and minimise bad debt risk on all outstanding debts. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 9.4.6 | INCOME, FEES AND CHARGES | Income Due and Debt Recovery | Responsible for ensuring the Welsh Ministers' guidance on disputed debt arbitration is strictly adhered to. | Chief Executive and Director of Finance | Chief Executive and Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.1.1 | NON-PAY EXPENDITURE | Scheme of Delegation, Non Pay Expenditure Limits and Accountability | Approval of the non-pay expenditure and operational scheme of delegation and authorisation to budget holders and managers within the parameters set out in the LHB's scheme of delegation | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.1.2. | NON-PAY EXPENDITURE | Scheme of Delegation, Non Pay Expenditure Limits and Accountability | Set out in the operational scheme of delegation and authorisation: a)The list of managers who are authorised to place requisitions for the supply of goods and services; and b)The maximum level of each requisition and the system for authorisation above that level | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.2.1a | NON-PAY EXPENDITURE | The Director of Finance's responsibilities | a) 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 SOs and SFIs and regularly reviewed; | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.2.1b | NON-PAY EXPENDITURE | The Director of Finance's responsibilities | b) Prepare procedural instructions or guidance within the Scheme of Delegation on the obtaining of goods, works and services; | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.2.1c | NON-PAY EXPENDITURE | The Director of Finance's responsibilities | c) Ensure systems are in place for the prompt payment of all properly authorised accounts and claims; | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.2.1d | NON-PAY EXPENDITURE | The Director of Finance's responsibilities | d) Ensure systems are in place for providing a system of verification, recording and payment of all amounts payable. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.2.1e | NON-PAY EXPENDITURE | The Director of Finance's responsibilities | e) Ensure systems are in place for ensuring that payment for goods and services is only made once the goods and services are received. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.2.1f | NON-PAY EXPENDITURE | The Director of Finance's responsibilities | f) Responsible for ensuring compliance with the Public Sector payment policy ensuring that a minimum of 95 percent of creditors are paid within 30 days of receipt of goods or a valid invoice (whichever is later) unless other payment terms | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.6.1 | NON-PAY EXPENDITURE | Prepayments | Approval of proposed prepayment arrangements | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 10.6.2 | NON-PAY EXPENDITURE | Prepayments | Ensure that all items due under a prepayment contract are received and they must immediately inform the appropriate Director or Chief Executive if problems are encountered | All Budget Holders | All Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.7.1 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Sustainable Procurement | Adopt a Sustainable Development Strategy consistent with the NHS Wales Sustainable Development Strategy | Director of Finance | Director of Finance and NWSSP/Head of Procurement |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.7.2 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Sustainable Procurement | Benchmark its performance in sustainable procurement and produce annual action plans for improvement through its use of the Sustainable Procurement Assessment Framework (SPAF) | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.7.2 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Sustainable Procurement | For all contracts over £25,000, the LHB shall take account of social, economic and environmental issues when making procurement decisions using the Sustainable Risk Assessment Template (SRA) | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.7.5 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Sustainable Procurement | The LHB is required to consider the Welsh Government Guidance on Ethical Procurement and the new Code of Practice on ethical employment in supply chains which commits public, private and third sector organisations to a set of actions that tackle illegal and unfair employment practices including blacklisting, modern slavery and living wage. | Chief Executive | Director of Finance |

| | | | | | | |
|---------------------------------------|------------------|--|-------------------------|--|---|---|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.8.1 11.7.6 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Sustainable Procurement | The LHB shall make use of the tools developed by Value Wales in implementing the principles of the WBFGA 2015. The LHB shall benchmark its performance against the WBFGA 2015. For all contracts over £25,000, the LHB shall take account of social, economic and environmental issues when making procurement decisions using the Sustainable Risk Assessment Template (SRA). | Director of Finance | NWSSP/Head of Procurement |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.9.1 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Planning Procurement | Ensure that the LHB has procedures that set out: a) Requirements and exceptions to formal competitive tendering requirements; b) Tendering processes including post tender discussions; c) Requirements and exceptions to obtaining quotations; d) Evaluation and scoring methodologies; and e) Approval of firms for providing goods and services | Director of Finance | Director of Finance/NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.9.2 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Planning Procurement | Depending on the value of the procurement, a process of planning the procurement must be undertaken with the Procurement Services and appropriate representative from the service and other appropriate stakeholders. The purpose of a planning phase is to determine: • the likely financial value of the procurement, including whole life cost • the likely 'route to market' which will consider the legislative and policy framework set out above. • the availability of funding to be able to award a contract following a successful procurement process. • that the procurement follows current legislative and policy frameworks including Value Based Procurement | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1a | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | a) Quotations up to £5,000 (at the discretion of Director of Finance) | Director of Finance | All Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1b | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | b) Obtaining minimum of 3 written quotations for goods/services of value between £5,000 and £25,000 | Director of Finance | All Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1c | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | c) Authorise and record where the required number of quotations is not available (Note 3.5, Scd 1, SFIs) | Director of Finance | All Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1d | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | d) Formally authorise and record single quotations and report to Audit Committee (Note 3.6, Scd 1, SFIs) | Director of Finance | Director of Finance and NWSSP/Head of Procurement |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1e | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | Competitive Tenders – Total value of contract its entire period: e) Obtaining a minimum of 4 written competitive tenders for goods/services of value between £25,000 and the OJEU threshold (in compliance with EC Directives as appropriate) | Director of Finance | Budget Holder/NWSSP (Procurement) |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1f | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | f) Obtaining a minimum of 5 written competitive tenders for goods/services of a value in excess of OJEU threshold (in compliance with EC Directives as appropriate) | Chief Executive and Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1g | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | g) Authorise acceptance of lower number of tenderers based on receipt of a full report detailing the reasons (note 5.3 Scd 1, SFIs) | Chief Executive and Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1h | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | h) Establish all firms on the tender list are financially sound and professionally competent through a pre-qualification/financial vetting process (note 5.1 Scd 1, SFIs) | Director of Finance | NWSSP (Procurement) |

| | | | | | | |
|---------------------------------------|----------|---|---|--|---|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1i | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | i) Receipt and custody of tenders prior to opening (paper based procurement only) (note 8.3, Scd 1, SFIs) | Director of Finance | PA to Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1j | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | j) Decide if late tenders should be considered (paper based procurement only) (note 8.3, Scd 1, SFIs) | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1k | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | k) Opening of Tenders (paper based procurement only) within 2 days, authorised to be opened by a person authorised by Chief Executive in presence of officer not of the Directorate who has invited the tender) (note 9.1, Scd 1, SFIs) | Chief Executive | PA to Chief Executive plus an Executive Director or Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1l | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | l) Maintain Tender Register in a secure place (note 9.3, Scd 1, SFIs) | Director of Finance | PA to Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1m | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | m) Evaluation of tenders in a robust and fair manner (note 10.2, Sch1, SFIs) | Chief Executive | Chief Executive or nominated committee, project group or other |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1n | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | n) Extending contracts on a single occasion provided that it does not exceed 50% of original value of the contract to a maximum of £75,000. Contract extensions must be reported to Audit and Risk Assurance Committee (note 10.8, Sch 1, SFIs) | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.11.1o | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Procurement Thresholds | o) Approve Single Tender Actions & report to Audit and Risk Assurance Committee (note 4.2 Schedule 1, SFIs) | Chief Executive and Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.12.1 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Designing Competitions | Nominate officer who shall oversee and manage each contract on behalf of the LHB so as to ensure that these implicit obligations in SFIs are met | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.13.1 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Single Quotation Application or Single Tender Application | In exceptional circumstances, there may be a need to secure goods/services/works from a single supplier. This may concern securing requirements from a single supplier, due to a special character of the firm, or a proprietary item or service of a special character as required in SFI 11.13.1 | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.19 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | No Purchase Order, No Pay | Ensure compliance with the 'No Purchase Order, No Pay' policy, the All Wales policy which was introduced to ensure that Procure to Pay continues to provide world-class services on a 'Once for Wales' basis. | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 11.20.2 | PROCUREMENT AND CONTRACTING FOR GOODS AND SERVICES | Official Orders | Authorise who may use and be issued with official orders | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 12.1.1 | HEALTH CARE AGREEMENTS AND CONTRACTS FOR HEALTH CARE SERVICES | Healthcare Agreements | Responsible for ensuring the LHB enters into suitable Health Care Agreements (or Individual Patient Commissioning Agreements, where appropriate) for its provision of health care services | Chief Executive | Director of Strategy and Planning (Medical Director for IPCAs) |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 12.3.1 | HEALTH CARE AGREEMENTS AND CONTRACTS FOR HEALTH CARE SERVICES | Healthcare Agreements | Ensure that regular reports are provided to the Board detailing performance and associated financial implications of all health care agreements | Chief Executive | Director of Finance |

| | | | | | | |
|---------------------------------------|--------------|-----------------|---|---|--|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 13.2.2 | GRANT FUNDING | Policies and procedures | Ultimately responsible for ensuring that the LHB's grant and procurement procedures: •Are kept up to date; •Conform to statutory requirements; •Adhere to guidance issued by the Welsh Ministers; •Are consistent with the principles of sustainable development; and •Are strictly followed by all Executive Directors, Independent Members and staff within the organisation | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.1.1 | PAY EXPENDITURE | Remuneration and Terms of Service Committee | Establish a Remuneration and Terms of Service Committee | Board | Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.1.2 | PAY EXPENDITURE | Remuneration and Terms of Service Committee | The Committee shall report in writing to the Board the basis for its recommendations. | Remuneration & Terms of Service Committee | Director of Workforce & OD and Director of Corporate Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.1.3 | PAY EXPENDITURE | Remuneration and Terms of Service Committee | Present to the Board for approval, proposals for the setting of remuneration and terms of service for employees and officers not covered by the Committee | Chief Executive | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.2.1 | PAY EXPENDITURE | Funded Establishment | Approval of any variation of funded establishment of any department | Chief Executive | All Executive Directors/Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1 | PAY EXPENDITURE | Staff Appointments | Authorisation of engagement, re-engagement, re-engagement of employees, either on a permanent or temporary nature, or hire agency staff, or agree to changes in any aspect of remuneration outside of their approved budget and funded establishment | Chief Executive | All Executive Directors/Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1a | PAY EXPENDITURE | Staff Appointments | a) Authority to fill funded posts within the establishment with permanent staff | All Budget Holders | All Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1b | PAY EXPENDITURE | Staff Appointments | b) Authority to appoint staff to posts not on the formal establishment | Executive Directors/Directors | Executive Directors/Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1c | PAY EXPENDITURE | Staff Appointments | c) Additional increments – the granting of additional increments to staff within budgets (subject to the rules of Agenda for Change) | Director of Workforce & OD | Deputy Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1d | PAY EXPENDITURE | Staff Appointments | d) Applications for re-grading (in line with the agreed policy on Agenda for Change and in accordance with all Wales Terms and Conditions). | Director of Workforce & OD | Assistant Director of Workforce & OD (Resourcing & Utilisation) |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1e | PAY EXPENDITURE | Staff Appointments | e) Authority to complete standing data forms affecting pay, new starters, variations and leavers | Line Managers and Heads of Service | Line Managers and Heads of Service |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1f | PAY EXPENDITURE | Staff Appointments | f) Authority to authorise overtime | Heads of Service/General Managers | Heads of Service/General Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1g | PAY EXPENDITURE | Staff Appointments | g) Authority to authorise travel and subsistence expenses | Line Managers and Heads of Service | Line Managers and Heads of Service |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1h(i) | PAY EXPENDITURE | Staff Appointments | h) Authority to book Bank or Agency Staff for (i) Consultants and Middle Grades | Director of Operations | General Managers/Clinical Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1h(ii) | PAY EXPENDITURE | Staff Appointments | h) Authority to book Bank or Agency Staff for (ii) Nursing Staff | Director of Operations | General Managers/Clinical Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1h(iii) | PAY EXPENDITURE | Staff Appointments | h) Authority to book Bank or Agency Staff for (iii) All other Staff | Director of Operations | Directorate Management Teams |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1i(i) | PAY EXPENDITURE | Staff Appointments | i) Annual Leave approval | Line Managers | Line Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1i(ii) | PAY EXPENDITURE | Staff Appointments | (ii) Annual leave approval to carry forward 5 days | Executive Director/Director or nominated deputy (via Line Manager) | Executive Director/Director or nominated deputy (via Line Manager) |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1i(iii) | PAY EXPENDITURE | Staff Appointments | (iii) Approval of Special Leave (including compassionate, carers and leave without pay (in line with All Wales Special Leave Policy) | Line Managers | Line Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1j | PAY EXPENDITURE | Staff Appointments | j) Approval of leave without pay | Line Managers | Line Managers |

| | | | | | | |
|---------------------------------------|----------------|-----------------|--------------------|--|--|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1k(i-iii) | PAY EXPENDITURE | Staff Appointments | k) Approval of Medical and Dental Staff Leave of Absence (i) Doctors below Consultant Grade a) Annual Leave b) Study Leave (ii) Consultant Staff a) Annual Leave b) Study Leave (iii) Clinical Directors a) Annual Leave b) Study Leave | Line Managers | Line Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1k(iv) | PAY EXPENDITURE | Staff Appointments | (iv) Medical Director a) Annual Leave b) Study Leave | Chief Executive | Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1l | PAY EXPENDITURE | Staff Appointments | l) Approval of time off in lieu | Line Managers/Service Delivery Managers | Line Managers/Service Delivery Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1m | PAY EXPENDITURE | Staff Appointments | m) Approval of maternity, paternity and adoption leave in line with LHB Policy | Line Managers and Workforce & OD Manager | Line Managers and Workforce & OD Manager |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1n | PAY EXPENDITURE | Staff Appointments | n) Approval of sick leave – return to work on phased basis to assist with recovery in line with All Wales Sickness Policy | Line Managers | Line Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1o | PAY EXPENDITURE | Staff Appointments | o) Approval of extension of sick leave on full or half pay - Directors | Remuneration & Terms of Service Committee | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1p | PAY EXPENDITURE | Staff Appointments | p) Approval of extension of sick leave on full or half pay – Other staff | Director of Workforce & OD | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1q(i) | PAY EXPENDITURE | Staff Appointments | q) Study leave & Conferences (i) In-house learning & development programmes | Line Managers | Line Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1q(ii) | PAY EXPENDITURE | Staff Appointments | q) Study leave & Conferences (ii) Applications for higher award | Line Managers, County Director/General Manager Professional Head & Executive led Panel | Line Managers, County Director/General Manager Professional Head & Executive led Panel |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1r(i) | PAY EXPENDITURE | Staff Appointments | r) Approval of relocation costs (i) Chief Executive & Directors | Remuneration & Terms of Service Committee | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1r(ii) | PAY EXPENDITURE | Staff Appointments | r) Approval of relocation costs (ii) Medical and Dental Staff | Director of Workforce & OD (as per Relocation Expenses Policy) Director of Workforce & OD (as per Relocation Expenses Policy) | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1r(iii) | PAY EXPENDITURE | Staff Appointments | r) Approval of relocation costs (iii) Other Staff groups | Director of Workforce & OD (as per Relocation Expenses Policy) | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1s(i) | PAY EXPENDITURE | Staff Appointments | s) Approval of lease cars (i) Chief Executive | Chair | Chair |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1s(ii) | PAY EXPENDITURE | Staff Appointments | s) Approval of lease cars (ii) Directors | Chief Executive | Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1s(iii) | PAY EXPENDITURE | Staff Appointments | s) Approval of lease cars (iii) Other Staff groups | Budget holder | Budget holder |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1t(i) | PAY EXPENDITURE | Staff Appointments | t) Approval of mobile phones (i) Chief Executive | Chair | Chair |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1t(ii) | PAY EXPENDITURE | Staff Appointments | t) Approval of mobile phones (ii) Directors | Chief Executive | Chief Executive |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.3.1t(iii) | PAY EXPENDITURE | Staff Appointments | t) Approval of mobile phones (iii) Other Staff groups | Line Managers | Line Managers |

| | | | | | | |
|---------------------------------------|---------|--|-------------------------|---|----------------------------|-----------------------------------|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.4.1 | PAY EXPENDITURE | Staff Appointments | Present to the Board for approval, procedures for the determination of commencing pay rates, conditions of service, etc, for employees in accordance with pay, terms and conditions set out in Agenda for Change and other pay review bodies | Chief Executive | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.1 | PAY EXPENDITURE | Payroll | The Director of Workforce and Organisational Development, has responsibility for securing an efficient, well-controlled payroll service from NHS Wales Shared Services Partnership that: a) pays the correct staff with the correct amount, b) all payments are supported by properly authorised documentation. | Director of Workforce & OD | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2a | PAY EXPENDITURE | Payroll | Responsible for: a) Securing the provision of an efficient, value for money payroll service; | Director of Workforce & OD | Deputy Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2b | PAY EXPENDITURE | Payroll | Responsible for: b) Specifying timetables for submission of properly authorised time records and other notifications; | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2c | PAY EXPENDITURE | Payroll | Responsible for: c) The final determination of pay and allowances including verification that the rate of pay and relevant conditions of service are in accordance with current | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2d | PAY EXPENDITURE | Payroll | Responsible for: d) Agreeing the timing and method of payment with the payroll service; | Director of Workforce & OD | Deputy Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2e | PAY EXPENDITURE | Payroll | Responsible for: e) Authorising the release of payroll data where in accordance with the provisions of the Data Protection Act 1998 (C.29); Director of Workforce & OD Head of Information Governance | Director of Workforce & OD | Head of Information Governance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2f | PAY EXPENDITURE | Payroll | Responsible for: f) Verification and documentation of data; | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2g | PAY EXPENDITURE | Payroll | Responsible for: g) The timetable for receipt and preparation of payroll data and the payment of employees and allowances; | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2h | PAY EXPENDITURE | Payroll | Responsible for: h) Maintenance of subsidiary records for superannuation, income tax, social security and other authorised deductions from pay; | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2i | PAY EXPENDITURE | Payroll | Responsible for: i) Security and confidentiality of payroll information; | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2j | PAY EXPENDITURE | Payroll | Responsible for: j) Checks to be applied to completed payroll before and after payment; | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.2k | PAY EXPENDITURE | Payroll | Responsible for: k) A system to ensure the recovery from those leaving the employment of the LHB of sums of money and property due by them to the LHB | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.3a | PAY EXPENDITURE | Payroll | a) Ensuring that any arrangements for a payroll service from NHS Wales Shared Services Partnership (NWSSP) is supported by appropriate Service Level Agreements, contract terms and conditions; adequate internal controls and audit review procedures | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.3b | PAY EXPENDITURE | Payroll | b) Ensuring a sound system of internal control and audit review of any internally provided payroll service; | Chief Executive | Director of Workforce & OD |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.3c | PAY EXPENDITURE | Payroll | c) Maintenance and/or the authorisation of regular and independent reconciliation of pay control accounts | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.5.4 | PAY EXPENDITURE | Payroll | Submitting time records, and other notifications in accordance with agreed timetables, completing time records and other notifications in accordance with the contract of Service Level Agreements, and submitting termination forms in the prescribed form immediately upon knowing the effective date of an employee's or officer's resignation, termination or retirement. | Line Managers | Line Managers |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 14.6.1 | PAY EXPENDITURE | Contracts of Employment | Ensuring that all employees are issued with a Contract of Employment in a form approved by the Board and which complies with employment legislation, and dealing with variations to, or termination of, contracts of employment | Director of Workforce & OD | NWSSP |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.1a | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | a) Ensure that there is an adequate appraisal and approval process in place for determining capital expenditure priorities and the effect of each proposal upon plans | Chief Executive | Director of Strategy and Planning |

| | | | | | | |
|---------------------------------------|---------|--|---|--|-----------------|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.1b | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | b) Responsible for the management of all stages of capital schemes and for ensuring that schemes are delivered on time and to cost | Chief Executive | Senior Responsible Owner for each capital scheme |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.1c | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | c) Ensure that any capital investment above the Welsh Ministers' delegated limit is not undertaken without approval of the Welsh Ministers and that confirmation of capital resources has been received | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.1d | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | d) Ensure that an annual capital programme is adopted by the Board prior to the commencement of the financial year | Chief Executive | Director of Strategy and Planning |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.1e | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | e) Ensure the availability of resources to finance all revenue consequences of the investment, including capital charges | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.1f | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | f) Ensure that any 3rd party use of NHS estate is properly controlled, reimbursed and reported. This will include ensuring that appropriate security, insurance and indemnity arrangements are in place and that there is a written agreement as to each party's responsibilities and liabilities | Chief Executive | Director of Estates, Facilities & Capital Management |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.1.3 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Plan | The Board must approve a three year Capital Plan, and an annual Capital Programme, as set out in the Integrated Medium Term Plan and Budgetary Control chapters of these SFI. | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.2.1 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Investment Decisions | A business case is produced in line with Welsh Ministers' guidance and d guidance for the development of business cases as set out in: a) NHS Wales Infrastructure Investment Guidance (Welsh Health Circular WHC (2018) 043) https://gov.wales/nhs-wales-infrastructure-investment-guidance b) Better business cases: investment decision-making framework https://gov.wales/better-business-cases-investment-decision-making-framework | Chief Executive | Senior Responsible Owner for each capital scheme |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.4.5a | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Procedures and Responsibilities | Issue to the manager responsible for any capital scheme: a) Specific authority to commit expenditure | Chief Executive | Senior Responsible Owner for each capital scheme |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.4.5b | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Procedures and Responsibilities | Issue to the manager responsible for any capital scheme: b) Authority to proceed to tender | Chief Executive | Senior Responsible Owner for each capital scheme |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.4.5c | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Procedures and Responsibilities | Issue to the manager responsible for any capital scheme: c) Approval to accept a successful tender | Chief Executive | Senior Responsible Owner for each capital scheme |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.4.6 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Procedures and Responsibilities | Issue a scheme of delegation for capital investment management in accordance with the Welsh Ministers' guidance and the LHB's SO's | Chief Executive | Director of Finance |

| | | | | | | |
|---------------------------------------|-------------|--|--|--|---|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.4.7 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Capital Procedures and Responsibilities | Issue procedures governing the financial management, including variations to contract, of capital investment projects and valuation for accounting purposes. | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.6.1 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Asset Registers | Maintenance of asset registers (on advice from Director of Finance) | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.6.5 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Asset Registers | Approve procedures for reconciling balances on fixed assets accounts in ledgers against balances on fixed asset registers | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.7.1 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Security of Assets | Overall control of fixed assets | Chief Executive | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.7.2 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Security of Assets | Approval of fixed asset control procedures | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 15.7.3 | CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS | Security of Assets | All discrepancies revealed by verification of physical assets to fixed asset register shall be notified to the Director of Finance | Director of Finance | Budget Holder |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | SFI 16.2.1a | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | a) Delegate overall responsibility for control of stores (subject to Director of Finance). Further delegation for the day-to-day responsibility subject to delegation being entered in a record available to the Director of Finance | Chief Executive | Director of Operations |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | SFI 16.2.1b | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | b) Responsible for systems of control over stores and receipt of goods | Director of Finance | Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | SFI 16.2.1c | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | c) Responsible for the control of pharmaceutical stocks | Director of Primary Care, Community & Long Term Care | Head of Medicines Management |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | SFI 16.2.1d | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | d) Responsible for the control of fuel, oil and coal stocks | Director of Operations | Director of Estates, Facilities & Capital Management |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.2.2 | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | Security arrangements and custody of keys | Director of Operations/ Director of Primary Care, Community & Long Term Care | Designated Manager /Pharmaceutical Manager |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.2.3 | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | Set out procedures and systems to regulate the stores | Director of Finance | Director of Operations |

| | | | | | | |
|---------------------------------------|---------|--|--|---|---|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.2.4 | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | Agree stocktaking arrangements | Director of Finance | Designated Manager /Pharmaceutical Manager |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.2.5 | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | Approve alternative arrangements where a complete system of stores control is not justified | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.2.6 | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | Approve system for review of slow moving and obsolete items and for condemnation, disposal and replacement of all unserviceable items | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.2.6 | STORES AND RECEIPT OF GOODS | Control of Stores, Stocktaking, condemnations and disposal | Approve system for slow moving and obsolete stock, and report to Director of Finance evidence of significant overstocking | Designated Manager | Designated Manager |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 16.3.1 | STORES AND RECEIPT OF GOODS | Goods supplied by an NHS supplies agency | Identify persons authorised to requisition and accept goods from NHS Supplies store | Chief Executive | All Budget Holders |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.1.1 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Disposals and Condemnations | Prepare detailed procedures for disposal of assets including condemnations and ensure that these are notified to managers | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.1.2 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Disposals and Condemnations | Advise the Director of Finance of the estimated market value of the item, taking account of professional advice where appropriate, when disposing of LHB asset | Head of Department or authorised deputy | Head of Department or authorised deputy |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.1.3a | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Disposals and Condemnations | a) Condemning and disposal of all unserviceable articles | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.1.3b | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Disposals and Condemnations | b) Report evidence of negligence in use to Director of Finance who will take appropriate action | Condemning Officer | Condemning Officer |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.1.4 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Disposals and Condemnations | Take appropriate action on reported evidence of negligence in use | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.2 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Prepare procedural instructions on the recording of and accounting for losses and special payments; and ensure that all losses or special payments cases are properly managed in accordance with the guidance set out in the Welsh Government's Manual for Accounts | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.3 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Discovery or suspicion of loss of any kind must be reported immediately to Heads of Department who should then inform the Chief Executive and Director of Finance. | All Staff | All Staff |

| | | | | | | |
|---------------------------------------|---------|--|---|--|----------------------------------|---|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.4a | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | a) Where a criminal offence is suspected, the police must be informed if theft or arson are involved | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.4b | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | b) Where a fraud or corruption or anomalies which indicate fraud or corruption is suspected the Local Counter Fraud Specialist, NHS Counter Fraud Services Wales and NHS Protect in accordance with Directions issued by Welsh Ministers on fraud and corruption must be informed | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.5 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Notify the Audit Committee, Auditor General's representative and the fraud liaison officer within the Welsh Government's Department for Health, Social Services and Children of all frauds | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.6 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Notify the Audit Committee and Auditor General's representative of losses caused theft, arson, neglect of duty or gross carelessness (unless trivial) | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.7 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Take any necessary steps to safeguard the LHB's interests in bankruptcies and company liquidations | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.8 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Maintain losses and special payments register | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.9 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Approve the writing-off of losses or the making of special payments within delegated limits determined by the Welsh Ministers and as set out in Schedule 3 of the Sos | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.10 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Consider whether any insurance claim can be made from the Welsh Risk Pool or from other commercial insurance arrangements for any loss | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 17.2.13 | DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS | Losses and Special Payments | Ensure all losses and special payments are reported to the Audit Committee at every meeting | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.1.1 | DIGITAL, DATA and TECHNOLOGY | Digital Data and Technology Strategy | Develop an IM&T Strategy | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.1.2 | DIGITAL, DATA and TECHNOLOGY | Digital Data and Technology Strategy | Publish and maintain a Freedom of Information (FOI) Publication Scheme | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.2.1a | DIGITAL, DATA and TECHNOLOGY | Responsibilities and duties of the responsible Director | a)Devise and implement any necessary procedures to ensure adequate (reasonable) protection of the LHB's data, programs and computer hardware for which they are responsible from accidental or intentional disclosure to unauthorised persons, deletion or modification, theft or damage, having due regard for the Data Protection Act 1998 (C.29); | Director of Finance | Digital Director |

| | | | | | | |
|---------------------------------------|---------|--|--|--|---|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.2.1b | DIGITAL, DATA and TECHNOLOGY | Responsibilities and duties of the responsible Director | b)Ensure that adequate controls exist such that the computer operation is separated from development, maintenance and amendment; | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.2.1c | DIGITAL, DATA and TECHNOLOGY | Responsibilities and duties of the responsible Director | c)Ensure that an adequate management (audit) trail exists through the computerised system and that such computer audit reviews as the Director may consider necessary are being carried out. | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.2.1d | DIGITAL, DATA and TECHNOLOGY | Responsibilities and duties of the responsible Director | d)Ensure that policies, procedures and training arrangements are in place to ensure compliance with information governance law. | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.2.1e | DIGITAL, DATA and TECHNOLOGY | Responsibilities and duties of the responsible Director | e) Ensure comprehensive incident reporting. | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.3.1 | DIGITAL, DATA and TECHNOLOGY | Responsibilities and duties of the Director of Finance | Ensure that new financial systems and amendments to current financial systems are developed in a controlled manner and thoroughly tested prior to implementation. | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.4.1 | DIGITAL, DATA and TECHNOLOGY | Contracts for data and digital services with other health bodies or outside agencies | Ensure that contracts for computer services for financial applications with another health organisation or any other agency shall clearly define the responsibility of all parties for the security, privacy, accuracy, completeness, and timeliness of data during processing, transmission and storage. | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.4.2 | DIGITAL, DATA and TECHNOLOGY | Contracts for data and digital services with other health bodies or outside agencies | Where another health organisation or any other agency provides a computer service for financial applications, assurances should be periodically sought to ensure that adequate controls are in operation | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 18.5.1 | DIGITAL, DATA and TECHNOLOGY | Risk assurance | Ensure that risks to the LHB arising from the use of IT are effectively identified and considered and appropriate action taken to mitigate or control risk. This shall include the preparation and testing of appropriate IT disaster recovery plans. | Director of Finance | Digital Director |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 19.1.4 | PATIENTS' PROPERTY | LHB Responsibility | Inform staff of their responsibilities and duties for the administration of the property of patients | Director of Operations | General Manager |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 19.2.1 | PATIENTS' PROPERTY | Responsibilities of the Chief Executive | Responsible for ensuring patients and guardians are informed about patients' money and property procedures on admission | Chief Executive | Director of Operations |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 19.3.1 | PATIENTS' PROPERTY | Responsibilities of the 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 patients | Director of Finance | Deputy Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.1.3 | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Corporate Trustee | Establish a Charitable Funds Committee to ensure that each trust fund which the LHB is responsible for managing is managed appropriately with regard to its purpose and to its requirements | Board | Director of Nursing, Quality & Patient Experience |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.2.2 | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Accountability to Charity Commission and the Welsh Ministers | Take account of the Schedule of Matters Reserved to the Board and the Scheme of Delegation which make clear where decisions regarding the exercise of discretion regarding the disposal and use of the funds are to be taken and by whom. | Director of Nursing, Quality & Patient Experience | Head of Hywel Dda Health Charities and Senior Finance Business Partner |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.2.2a | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Accountability to Charity Commission and the Welsh Ministers | Expenditure on Charitable Funds and Endowment Funds is delegated subject to the following limits: a) up to £1,000; | Senior Nurse Manager, Service Delivery Manager, head of service or managers at equivalent level | N/A |

| | | | | | | |
|---------------------------------------|---------|--|--|--|--|--|
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.2.2b | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Accountability to Charity Commission and the Welsh Ministers | Expenditure on Charitable Funds and Endowment Funds is delegated subject to the following limits: b) £1,001 to £10,000; | Clinical, Hospital or Service Director, Hospital or Service General Manager, Head of Nursing or managers at equivalent level | N/A |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.2.2c | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Accountability to Charity Commission and the Welsh Ministers | Expenditure on Charitable Funds and Endowment Funds is delegated subject to the following limits: c) £10,001 to £50,000; | Charitable Funds Sub-Committee | N/A |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.2.2d | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Accountability to Charity Commission and the Welsh Ministers | Expenditure on Charitable Funds and Endowment Funds is delegated subject to the following limits: d) £50,001 to £100,000 | Charitable Funds Committee | N/A |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 20.2.2e | FUNDS HELD ON TRUST (CHARITABLE FUNDS) | Accountability to Charity Commission and the Welsh Ministers | Expenditure on Charitable Funds and Endowment Funds is delegated subject to the following limits: e) Over £100,000 | Corporate Trustee | N/A |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 21.1.1 | RETENTION OF RECORDS | Responsibilities of the Chief Executive | Maintain archives for all records required to be retained in accordance with the Welsh Ministers' guidance, the Data Protection Act 1998 (c.29) and the Freedom of Information Act 2000 (c.36) | Chief Executive | Director of Corporate Governance (FOI only) Director of Finance |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 21.1.2 | RETENTION OF RECORDS | Responsibilities of the Chief Executive | Records held in archives shall be capable of retrieval by authorised persons. | Chief Executive | Acute records - Acute Records Manager Mental Health records - MHA Administrator Community – County Directors |
| STANDING FINANCIAL INSTRUCTIONS (SFI) | 21.1.2 | RETENTION OF RECORDS | Responsibilities of the Chief Executive | Records held in accordance with regulation shall only be destroyed at the express instigation of the Chief Executive. Details shall be maintained of records so destroyed | Chief Executive | Acute records - Acute Records Manager Mental Health records - MHA Administrator Community – County Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | CLINICAL LEADERSHIP | Medical Professional Leadership and Engagement | a) Maintain a refreshed clinical leadership model | Medical Director | Medical Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CLINICAL LEADERSHIP | Nursing | b) Maintain a refreshed clinical leadership model | Director of Nursing, Quality and Patient Experience | Director of Nursing, Quality and Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | CLINICAL LEADERSHIP | Medical Education | a) Liaison with Deanery and Royal Colleges | Medical Director | Associate Medical Director – Medical Education |
| SCHEME OF DELEGATION FROM OTHER | N/A | CLINICAL LEADERSHIP | Research & Governance | a) Authorisation of Research projects | Medical Director | Director of Research Innovation and University Partnerships |
| SCHEME OF DELEGATION FROM OTHER | N/A | CLINICAL LEADERSHIP | Research & Governance | b) Authorisation of sponsorship deals in relation to research projects | Medical Director | Director of Research Innovation and University Partnerships |

| | | | | | | |
|---------------------------------|-----|--------------------------------|--|--|---|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | Management of Concerns/Complaints/Patient Feedback a) Overall responsibility for ensuring that all complaints are dealt with effectively; | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | b) Recording, receipt and initial acknowledgement of concern/complaint | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | c) Grading of concern/complaint | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | d) Identification of an Investigating Officer | Director of Nursing, Quality & Patient Experience | Dependent on Grade Grades 1-3 – coordinated by Patient Support Services with the Service Lead Grade 4 – Service Clinical Director/General Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | e) Investigation of complaint | Director of Nursing, Quality & Patient Experience | Grade 4/5 – Complaint Investigation Team with Service Senior management leadership Grade 1-3 - Complaint Investigation Team with Service Management leadership |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | f) Maintaining regular contact with the complainant with regard to the processing of the concern | Director of Nursing, Quality & Patient Experience | Grades 4 & 5 – Investigation Officer Patient Support Services |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | g) Maintaining regular contact with the complainant with regard to the matters raised in the concern | Director of Nursing, Quality & Patient Experience | Patient Support Service with Investigating Officer |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | h) Preparing final draft response (all Grades of Concern) | Director of Nursing, Quality & Patient Experience | Service (the service is provided with the findings of the investigation by Patient Support Services or Investigating Officer) Assistant Director of Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | i) Checking of final draft prior to submission to Chief Executive for signature | Assistant Director of Nursing (Legal and Patient Support) | Assistant Director of Nursing (Legal and Patient Support) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | j) Final check and sign of response to complainant | Chief Executive | Chief Executive or Deputy Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Concerns/ Complaints/ Patient Feedback | k) Sending final response to complainant | Director of Nursing, Quality & Patient Experience | Complaint Investigation Team/ Patient Support Service |

| | | | | | | |
|---------------------------------|-----|--------------------------------|--|---|--|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | a) Overall responsibility for ensuring that all incidents are dealt with effectively | Director of Nursing, Quality & Patient Experience | Assistant Director of Quality & Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | b) Completion of Incident Form | Staff member involved in incident or in immediate area | Staff member involved in incident or in immediate area |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | c) Initial Investigation of Incident | Manager of staff member/person in charge of area | Manager of staff member/person in charge of area |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | d) Reporting of Serious Adverse Incident to Welsh Government | Chief Executive | Assistant Director of Quality & Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | e) Arranging serious incident (SI) meeting | Director of Nursing, Quality & Patient Experience | Nominated Investigation Officer |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | f) Investigation of Serious Incidents | Director of Nursing, Quality & Patient Experience | Nominated Investigation Officer |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | g) Preparation of final report | Director of Nursing, Quality & Patient Experience | Nominated Investigation Officer |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | h) Agreement of final report prior to submission to the Director of Nursing, Quality, and Patient Experience | Nominated Investigation Officer | Nominated Investigation Officer |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | i) Sign off of final report and closure of investigation | Director of Nursing, Quality & Patient Experience (Grade 5's only) Director of Operations (other) | Assistant Director of Quality & Governance (Grade 5 only) Operation Team (other) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | j) Reporting of incidents in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations | Director of Operations | Director of Estates, Facilities & Capital Management and Health & Safety Managers |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | k) Reporting of breaches under the Ionising Radiation (Medical Exposure) Regulations to Health Inspectorate Wales (HIW) | Director of Therapies and Health Science | Radiology Services Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Incident Reporting & Investigation | l) Reporting of Data Protection breaches to Information Commissioners Office (ICO) | Director of Finance | Head of Information Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | N/A | Approval of compensation for staff and patients personal effects, clinical negligence and personal injury (also see SFI 17.2.2) | Director of Finance | Deputy Director of Finance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | N/A | Submission of 'No Surprises' notifications to Welsh Government | Chief Executive | All Executive Directors/ Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Improving Patient Experience | Developing a Patient Experience Strategy | Director of Nursing, Quality & Patient Experience | Assistant Director of Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Patient Safety Alerts | a) Maintaining a record of patient safety alerts and monitoring compliance | Director of Nursing, Quality & Patient Experience | Assistant Director of Quality & Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Patient Safety Alerts | b) Responding to the requirements of safety alerts and providing assurance/information on the ability to meet requirements | Relevant Heads of Service | Relevant Heads of Service |

| | | | | | | |
|---------------------------------|-----|--------------------------------|---|---|--|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Health and Care Standards Assessment | a) Ensuring there is a process for Health and Care Standards assessment | Director of Nursing, Quality & Patient Experience | Assistant Director of Quality & Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Health and Care Standards Assessment | b) Completing assessment and compliance with the standards | Director of Nursing, Quality & Patient Experience | Assistant Director of Quality & Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of the Clinical Audit Function | a) Coordination and participation in national audits and development of a Hywel Dda Clinical Audit Plan | Director of Nursing, Quality & Patient Experience | Assistant Director of Quality & Service Improvement |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of the Clinical Audit Function | b) Approval of Hywel Dda Clinical Audit Plan | Quality, Safety & Experience Committee | Assistant Director of Quality & Service Improvement |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Ethics & Clinical Trials | a) Lead for Ethics and the establishment of an Ethics Committee | Medical Director | Head of Medical Education and Professional Standards |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Ethics & Clinical Trials | b) Authorisation of clinical trials | Medical Director | Director of Research Innovation and University Partnerships |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Ethics & Clinical Trials | c) Developing and implementing a process for more systematic opportunities for Hywel Dda patients to be involved in clinical research | Medical Director | Director of Research Innovation and University Partnerships |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | National Institute of Clinical Excellence (NICE) | a) Maintaining a record of publications and recording compliance | Medical Director | Clinical Effectiveness Co-ordinator |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | National Institute of Clinical Excellence (NICE) | b) Responding to requirements and providing information regarding ability to meet requirements | All Executive Directors | All Executive Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | National Confidential Enquiry into Patient Outcome and Death (NCEPOD) | a) Collation and provision of information to contribute to NCEPOD audit findings | Director of Nursing, Quality & Patient Experience | Heads of Service |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | National Confidential Enquiry into Patient Outcome and Death (NCEPOD) | b) Maintain record of publications and recording compliance | Medical Director | Head of Effective Clinical Practice and Quality Improvement |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | National Confidential Enquiry into Patient Outcome and Death (NCEPOD) | c) Responding to requirements and providing information regarding ability to meet requirements | All Executive Directors/Directors | All Executive Directors/Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Safeguarding of Adults and Children | a) Implementation of policy and procedures | Director of Nursing, Quality & Patient Experience | Head of Safeguarding |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Safeguarding of Adults and Children | b) Investigation in accordance with POVA requirements | Director of Nursing, Quality & Patient Experience | Head of Safeguarding |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Safeguarding of Adults and Children | c) Safeguarding supervision | Director of Nursing, Quality & Patient Experience | Head of Safeguarding |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Safeguarding – Deprivation of Liberties | a) Supervising Authority | Director of Primary Care, Community & Long Term Care | Head of Long Term Care |

| | | | | | | |
|---------------------------------|-----|--------------------------------|--|--|--|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Safeguarding – Deprivation of Liberties | b) Managing Authority | Director of Operations | Head of Consent & Mental Capacity |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | N/A | Management of Infections, Diseases & Notifiable Outbreaks | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Nursing Practice) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Coordination of Welsh Risk Pool Assessments | a) A&E Services | Director of Operations | General Manager (Unscheduled Care) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Coordination of Welsh Risk Pool Assessments | b) Claims & Complaints | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Coordination of Welsh Risk Pool Assessments | c) Maternity Services | Director of Operations | General Manager (Women's & Children's Services) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Coordination of Welsh Risk Pool Assessments | d) Surgical Pathway | Director of Operations | General Manager (Scheduled Care) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Coordination of Welsh Risk Pool Assessments | e) Theatres | Director of Operations | General Manager (Scheduled Care) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Professional Standards, Revalidation and Regulation – Medical & Dental | a) Deliver in-year requirements for medical revalidation | Medical Director | Associate Medical Director – Professional Standards |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Professional Standards, Revalidation and Regulation – Medical & Dental | b) Referral to General Medical Council (GMC)/General Dental Council (GDC) | Medical Director | Associate Medical Director – Professional Standards |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Professional Standards, Revalidation and Regulation – Medical & Dental | c) Monitoring of registration (GMC/GDC regulatory compliance) | Medical Director | Associate Medical Director – Primary Care & Workforce |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Professional Standards, Revalidation and Regulation – Medical & Dental | d) Referrals to any professional body for any Primary care contractor including Medical and Dental | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Nurse Development, Revalidation and Practice Standards | a) NMC revalidation process | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Nursing Practice) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Nurse Development, Revalidation and Practice Standards | b) Referral to Nursing & Midwifery Council (NMC) | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Nursing Practice) |

| | | | | | | |
|---------------------------------|-----|--------------------------------|--|---|--|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Management of Nurse Development, Revalidation and Practice Standards | c) Monitoring of registration (NMC regulatory compliance) | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Nursing Practice) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Professional leadership for Therapies and Health Science | a) Health and Care Professions Council (HCPC) registration, education and standards | Director of Therapies & Health Science | Assistant Director of Therapies & Health Science |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | Professional leadership for Therapies and Health Science | b) Referral to appropriate Professional Body | Director of Therapies & Health Science | Assistant Director of Therapies & Health Science (Professional Practice, Clinical Governance & Quality) |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | N/A | Develop a Health & Well-being Strategy & Health Needs Analysis for Hywel Dda population | Director of Public Health | Director of Public Health |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | N/A | Accountable Officer for Controlled Drugs | Medical Director | Head of Medicines Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | QUALITY, SAFETY AND EXPERIENCE | N/A | Value Based Healthcare | Medical Director/ Director of Finance | Director of Research, Innovation and University Partnerships |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | N/A | Development of a Primary Care Strategy | Chief Executive | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | a) Approval to commission healthcare services from NHS, private, third sector or independent organisations | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | b) Agreement to provide services and payments in accordance with Medicines Management Incentive Scheme | Director of Primary Care, Community & Long Term Care | Head of Medicines Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | c) Maintaining a register of commissioning contracts | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | d) Ensuring every commissioning contract has a lead manager responsible for ensuring that contract delivers activity, quality and finance | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | e) Agreement of annual contract with existing providers and within existing budgets - NHS, third sector, independent or private | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | f) Agreement of contract variations | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | g) Signing contracts of value < £50,000 and contract variations > £25,000 | As per Scheme of Delegation and Authorised Limits | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | h) Signing contracts of value < £500,000 and contract variations > £125,000 | As per Scheme of Delegation and Authorised Limits | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | i) Signing of contracts of value >£1,000,000 | As per Scheme of Delegation and Authorised Limits | N/A |

| | | | | | | |
|---------------------------------|-----|---------------|--|---|--|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | j) Agreement of changes to contracts where this would place a cost pressure on the organisation which cannot be funded within existing budgets | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | k) Ensuring there is a commissioning framework in place which sets out expectations around what will be included in documentation and approach to management including meetings | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | l) Ensuring there is a contracting framework in place which sets out expectations around what will be included in documentation and approach to management including meetings | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | m) Ensuring that contracts have appropriate documentation in place including key performance metrics relating to activity, targets, quality and finance and that regular performance monitoring meetings take place | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | n) Ensuring that there are regular meetings in place to monitor performance against commissioning contracts, that recovery plans are agreed where there are performance or finance issues and that matters of concern are escalated appropriately | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | o) Authorisation of invoices against contracts (within budget) excluding NHS Long Term Agreements (LTAs) | Director of Primary Care, Community and Long Term Care | <u>As per Scheme of Delegation and Authorised Limits</u> |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning (including Primary Care Services) | p) Authorisation of invoices against NHS LTAs | Director of Finance | <u>As per Scheme of Delegation and Authorised Limits</u> |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of Continuing Healthcare and Funded Nursing Care | All above sections in primary care commissioning section apply to this area - these are supplementary | N/A | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of Continuing Healthcare and Funded Nursing Care | a) Approving new care packages in line with HB policy and procedures | Director of Primary Care, Community & Long Term Care | Head of Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of Continuing Healthcare and Funded Nursing Care | b) Authorising emergency care packages or changes to care packages outside panel | Director of Primary Care, Community & Long Term Care | Head of Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of Continuing Healthcare and Funded Nursing Care | c) Authorising of invoices against agreed packages of care outside panel | Director of Primary Care, Community & Long Term Care | Head of Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of Continuing Healthcare and Funded Nursing Care | d) Authorising CHC retrospective claims including Powys and UHB claims | Director of Primary Care, Community & Long Term Care | Head of Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of Continuing Healthcare and Funded Nursing Care | e) Decision to go to arbitration or take legal action in relation to any commissioning or provider contract | Chief Executive | Director of Primary Care, Community & Long Term Care |

| | | | | | | |
|---------------------------------|-----|---------------|--|--|------------------|-----------------|
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of cross border secondary and tertiary services for population (WHSCC) | a) Attending Joint Committee meetings | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of cross border secondary and tertiary services for population (WHSCC) | b) Attending WHSSC Management Group | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of cross border secondary and tertiary services for population (WHSCC) | c) Input to WHSSC commissioning decisions and agreement to WHSSC policies | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of cross border secondary and tertiary services for population (WHSCC) | d) Dissemination of WHSSC commissioning policies throughout the organisation | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of cross border secondary and tertiary services for population (WHSCC) | e) Approving and signing the annual contract with WHSSC as commissioner | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning of cross border secondary and tertiary services for population (WHSCC) | f) Agreeing contract variations with WHSSC | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning Ambulance Services | a) Attending Joint Committee meetings | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning Ambulance Services | b) Approving and signing the annual contract with EASC as commissioner | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | Commissioning Ambulance Services | c) Agreeing contract variations with EASC | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | IPFR Process and Prior Approval (in line with HB policy & Procedures) | a) Screening of IPFR requests submitted by patient/ clinicians | Medical Director | IPFR Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | IPFR Process and Prior Approval (in line with HB policy & Procedures) | b) Chairing of the IPFR Panel | Medical Director | IPFR Manager |

| | | | | | | |
|---------------------------------|-----|---------------|---|---|---|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | IPFR Process and Prior Approval (in line with HB policy & Procedures) | c) Decisions on clinically urgent IPFR requests which cannot wait for screening and panel process | Medical Director | IPFR Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | IPFR Process and Prior Approval (in line with HB policy & Procedures) | d) Arrangements for Review panels of IPFR screening process and/or panel decision | Medical Director | IPFR Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | IPFR Process and Prior Approval (in line with HB policy & Procedures) | e) Communication with patient and referring clinician | Medical Director | IPFR Manager/ Team |
| SCHEME OF DELEGATION FROM OTHER | N/A | COMMISSIONING | N/A | Hosting and Management of Low Vision Service (All Wales) | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | a) Acute Services | Director of Operations | Triumvirates |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | b) Community Services | Director of Operations | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | c) Mental Health Services | Director of Operations | Director of Mental Health & LD |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | d) Learning Disability Services | Director of Operations | Director of Mental Health & LD |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | e) Therapy Services | Director of Therapies & Health Science | Clinical Director of Therapies |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | f) Delivery on targets as per operation delivery plan | Chief Executive | All Executive Directors/Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of | g) Organ Donation | Director of Operations | Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of Out of Hours Commissioning | a) Out of Hours Service | Director of Operations | Deputy Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of Out of Hours Commissioning | b) Integration with Unscheduled Care Service | Director of Operations | County Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of Out of Hours Commissioning | c) Management of School Nursing & Health Visiting Service | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Head of Children's Public Health Nursing AD |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of Out of Hours Commissioning | d) Establish revised children's partnership arrangements | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Assistant Director Strategic Partnerships, Diversity & Inclusion |

| | | | | | | |
|---------------------------------|-----|-------------|--|---|---|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of Out of Hours Commissioning | e) Providing assurance on screening services | Director of Public Health | Consultant in Public Health |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Delivery of Out of Hours Commissioning | f) Management of Substance Misuse Service | Director of Operations | Commissioning Manager – Substance Misuse |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | N/A | Designated Education Clinical Lead Officer (DECLO) | Director of Therapies & Health Science | Regional DECLO with Powys & SBUHB |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Emergency planning, readiness & resilience (including business continuity) | a) Compliance with Emergency Planning & Major Incidents – Civil Contingencies Act 2004 | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Head of Health Emergency Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Emergency planning, readiness & resilience (including business continuity) | b) Maintaining the organisation's Major Incident Plan | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Head of Health Emergency Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Emergency planning, readiness & resilience (including business continuity) | c) Ensure all Directorates/Services/Departments have up to date Business Continuity Plans in place | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Head of Health Emergency Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Health and Safety, Security | a) Compliance with health and safety legislation requirements including control of substances hazardous to health regulations | Director of Nursing, Quality & Patient Experience | All Executive Directors/Directors, General Managers, County Directors, Director of MHL, Asst Director of EFCM, Digital Director, Deputy Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Health and Safety, Security | b) Management of security issues | Director of Nursing, Quality & Patient Experience | All Executive Directors/Directors, General Managers, County Directors, Director of MHL, Asst Director of EFCM, Digital Director, Deputy Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Health and Safety, Security | c) Adherence to fire precautions | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | a) Physiotherapy Records | Director of Therapies & Health Science | Clinical Director of Therapies |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | b) Occupational Therapy Records | Director of Therapies & Health Science | Clinical Director of Therapies |

| | | | | | | |
|---------------------------------|-----|-------------|---------------------------------------|---|--|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | c) Speech and language Therapy Records | Director of Therapies & Health Science | Clinical Director of Therapies |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | d) Dietetics Records | Director of Therapies & Health Science | Clinical Director of Therapies |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | e) Podiatry Records | Director of Therapies & Health Science | Clinical Director of Therapies |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | f) Orthoptic Records | Director of Therapies & Health Science | Lead Orthoptist |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | g) Audiology Records | Director of Therapies & Health Science | Head of Audiology |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | h) Cardio Physiologist Records. | Director of Therapies & Health Science | Head of Cardiophysiology |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | i) Neurophysiology Records | Director of Therapies & Health Science | Head of Neurophysiology |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | j) OOH Clinical service Records | Director of Operations | Deputy Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | k) Medical Records | Director of Operations | Health Records Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | l) Community, district nursing and Primary Care Records (not Children's Services) | Director of Operations | County Director and Commissioners (each County) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | m) Outpatient service records | Director of Operations | County Director - Ceredigion |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | n) Palliative care Records | Director of Operations | County Director - Carmarthenshire |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | o) Nursing Records (not Community) | Director of Operations | Assistant Director (Operations, Quality and Nursing) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | p) Mental Capacity Records | Director of Operations | Assistant Director (Operations, Quality and Nursing) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | q) Specialist Nurse (tissue viability records) | Director of Operations | Assistant Director (Operations, Quality and Nursing) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | r) Cancer Services Records | Director of Operations | General Manager (Acute services and Women, Children's and Cancer Services) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | s) Community Paediatric Records | Director of Operations | General Manager (Acute services and Women, Children's and Cancer Services) |

| | | | | | | |
|---------------------------------|-----|-------------|---------------------------------------|--|------------------------|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | t) Acute Paediatric and Neonates Records | Director of Operations | General Manager (Acute services and Women, Children's and Cancer Services) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | u) Community Children's Service Records | Director of Operations | General Manager (Acute services and Women, Children's and Cancer Services) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | v) Midwifery and Women's health Records | Director of Operations | General Manager (Acute services and Women, Children's and Cancer Services) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | w) Obstetrics and Gynaecology Records | Director of Operations | General Manager (Acute services and Women, Children's and Cancer Services) |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | x) Pathology Records | Director of Operations | Head of Service - Pathology |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | y) Radiology Records | Director of Operations | Radiology Services Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | z) Cardiology Records | Director of Operations | Hospital General Manager - GGH USC |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | aa) Renal Records | Director of Operations | Hospital General Manager - GGH USC |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ab) General Medicine Records | Director of Operations | Hospital General Managers |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ac) Gastroenterology Records | Director of Operations | Hospital General Manager - BGH USC |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ad) Neurology Records | Director of Operations | Hospital General Manager - BGH USC |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ae) Stroke Records | Director of Operations | Hospital General Manager - WGH USC |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | af) Care of The Elderly | Director of Operations | Hospital General Manager - WGH USC |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ag) General surgery, vascular, breast care records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ah) Ophthalmology Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ai) Ear, Nose and Throat Records | Director of Operations | General Manager - Scheduled Care |

| | | | | | | |
|---------------------------------|-----|-------------|---------------------------------------|---|--|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | aj) Trauma and Orthopaedics Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ak) Plaster Services Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | al) Dermatology Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | am) Rheumatology Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | an) Theatres Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ao) Day Surgery Unit Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ap) Pre-assessment Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | aq) Endoscopy Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ar) Anaesthetics Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | as) Urology Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | at) Critical Care Records | Director of Operations | General Manager - Scheduled Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | au) Mental Health and Learning Disability Records | Director of Operations | Director of Mental Health & Learning Disabilities |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | av) Psychology Records | Director of Operations | County Director - Ceredigion |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ax) Mental Health Subject Access Requests | Director of Operations | Mental Health Act Administrator |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | aw) Acute Subject Access Requests | Director of Operations | Acute Records Manager |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | ay) Managed Practices records. | Director of Primary Care, Community & Long Term Care | Assistant Director of Primary Care |

| | | | | | | |
|---------------------------------|-----|-------------|--|--|--|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | az) Low Vision records | Director of Primary Care, Community & Long Term Care | Head of Dental and Optometry |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational Health Records Management | aaa) Dental services records | Director of Primary Care, Community & Long Term Care | Head of Dental and Optometry |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational quality and safety and effectiveness | a) Implementing Hospital Patient Environment audits | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational quality and safety and effectiveness | b) Decontamination | Director of Operations | Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational quality and safety and effectiveness | c) Capital equipment renewal & replacement | Director of Operations | Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Operational quality and safety and effectiveness | d) EBME | Director of Operations | Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Managed Practices | Delivery of Managed Practices Contacts | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Managed Practices | Management and service delivery of Health Board Managed Practices | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | N/A | Medical Devices | Director of Operations | Deputy Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | N/A | Medicines Management | Director of Primary Care, Community & Long Term Care | Head of Medicines Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | N/A | Development of a medicines optimisation strategy (primary & secondary care) | Director of Primary Care, Community & Long Term Care | Head of Medicines Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | N/A | National Contracts for GMS, Dental, Community Pharmacy and Optometry, including implementation, monitoring, performance management and reporting | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | a) Develop an estates strategy and rationalisation plan | Director of Strategy and Planning | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | b) Compliance with environmental regulations | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | c) Management of land, buildings, included leased assets | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | d) Authorised holder of deed and controller of property | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | e) District Valuer issues and negotiations | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | f) Delivery of Capital Estates Projects | Director of Operations | Director of Estates, Facilities & Capital Management |

| | | | | | | |
|---------------------------------|-----|-------------|--|---|---|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Estates | g) Licences and leases for property | Director of Operations | Director of Estates, Facilities & Capital Management |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | a) Information Governance (including compliance with the Data Protection Act, Access to Health Records Act and other IG legislation) | Director of Finance (Senior Information Risk Owner) | Head of Information Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | b) Caldicott Standards and Action Plan | Director of Finance | Deputy Caldicott Guardian /Head of Information Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | c) Development and revision of Information Sharing Protocols | Director of Finance | Head of Information Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | d) IG Training Programme | Director of Finance | Digital Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | e) Data Quality | Director of Finance | Digital Director & all information Asset Owners |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | f) Management and control of computer systems and facilities to ensure achievement and compliance with national standards and IM&T strategy | Director of Finance | Digital Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | g) Purchases/installation of IT software & hardware | Director of Finance | Digital Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Information Management & Technology Strategy | h) Delivery of specific IT projects | Director of Finance | Digital Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Performance Management & Business Intelligence | a) Review & establish the performance management framework which included meaningful performance measures for the totality of the services for the which the Health Board is responsible | Director of Finance | Head of Performance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Performance Management & Business Intelligence | b) Develop the Board Performance Report template on an annual basis, advising on aligning and integrating service, workforce and financial performance matters for sign off by the Strategic Development & Operational Delivery Committee | Director of Finance | Head of Performance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Performance Management & Business Intelligence | c) Establish Performance Management Office | Director of Finance | Head of Performance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | Performance Management & Business Intelligence | d) Provide assurance on the overall performance and delivery against Health Board plans and objectives | Director of Finance | Head of Performance |

| | | | | | | |
|---------------------------------|-----|-------------|---|--|----------------------------------|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | NHS Shared Services Partnership | a) Attending Joint Committee meetings | Chief Executive | Director of Finance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | NHS Shared Services Partnership | b) Agreeing actions to be taken where performance is off track | Chief Executive | Director of Finance |
| SCHEME OF DELEGATION FROM OTHER | N/A | OPERATIONAL | NHS Shared Services Partnership | c) Ensure robust interface protocols are in place and test efficacy on a planned programme of review | Chief Executive | Director of Finance |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Corporate Governance, Assurance Framework & Risk Management | a) Develop Board Risk Appetite Statement | Director of Corporate Governance | Director of Corporate Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Corporate Governance, Assurance Framework & Risk Management | b) Review internal risk management processes | Director of Corporate Governance | Assistant Director of Assurance & Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Corporate Governance, Assurance Framework & Risk Management | c) Management & maintenance of Corporate Risk Register | Director of Corporate Governance | Assistant Director of Assurance & Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Corporate Governance, Assurance Framework & Risk Management | d) Management & maintenance of Directorate/Clinical Risk Registers | Executive Directors | Heads of Departments/Head of Service/General Managers |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Corporate Governance, Assurance Framework & Risk Management | e) Development of Board Assurance Framework | Director of Corporate Governance | Assistant Director of Assurance & Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Corporate Governance, Assurance Framework & Risk Management | f) Implement recommendations from external governance reviews | Director of Corporate Governance | All Executive Directors |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Policies & Procedures (written control documents) | a) Maintaining a database of all written control documents | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Policies & Procedures (written control documents) | b) Manage the process for developing and reviewing written control documents | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |

| | | | | | | |
|---------------------------------|-----|-----------|---|--|--|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Policies & Procedures (written control documents) | c) Approval of written control documents | Appropriate committee as per Written Control Document Scheme of Delegation *Owning groups & approving committees - clinical written control documentation | As per Written Control Document Scheme of Delegation *Owning groups & approving committees - clinical written control documentation |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | Board Secretariat | Director of Corporate Governance | Assistant Director of Assurance and Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Board Development & Committee Management | a) Establish a process for establishment & abolition of committees and groups | Director of Corporate Governance | Assistant Director of Assurance and Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Board Development & Committee Management | b) Establish procedures on the management of committees and groups to ensure consistency and good governance | Director of Corporate Governance | Assistant Director of Assurance and Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Board Development & Committee Management | c) Board and Committee development | Director of Corporate Governance | Assistant Director of Assurance and Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | Regulatory and inspections coordination and assurance | Director of Corporate Governance | Assistant Director of Assurance & Risk |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Legal Advice | a) Engagement of UHB solicitors | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Legal Advice | b) Authority to seek legal advice – all issues | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | Arrangements that appropriate insurance/indemnity is in place (Corporate) | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | Arrangements that appropriate insurance/indemnity is in place (Nursing and Midwifery) | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | Maintenance of the University status of the organisation | Medical Director | Director for Research & Innovation and University Partnerships |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Freedom of information Act (FOI) | a) Coordinate the collecting of information to prepare FOI responses within statutory deadlines | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Freedom of information Act (FOI) | b) Sign off of Final Responses | Relevant Lead Executive Director | Assistant Director of Corporate Legal Services and Public Affairs |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Freedom of information Act (FOI) | c) Undertake internal reviews/complaints relating to FOI | Director of Nursing, Quality & Patient Experience | Director of Nursing, Quality & Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Public Engagement | a) Develop and implement public engagement strategy | Communications and Engagement Director | Head of Transformation and Engagement Programme Office |

| | | | | | | |
|---------------------------------|-----|-----------|--|---|--|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Public Engagement | b) Ensure public participation in service design and decision making | Communications and Engagement Director | Head of Transformation and Engagement Programme Office |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Stakeholder Engagement & Management (including armed forces) | a) Organising a continuous programme of stakeholder events across Hywel Dda | Communications and Engagement Director | Head of Transformation and Engagement Programme Office |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Stakeholder Engagement & Management (including armed forces) | b) Supporting services in engaging with staff, patients and the public during service change | Communications and Engagement Director | Head of Transformation and Engagement Programme Office |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Stakeholder Engagement & Management (including armed forces) | c) Engaging with armed forces, carers, staff, refugees, asylum seekers and those with sensory impairment | Chief Executive | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Communications | a) External Communications including relationships with press, key stakeholders and the public | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Communications | b) Internal communications with staff (Corporate Information) | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Communications | c) Developing and maintaining the organisation's external website, staff intranet, social media and e-Communications | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Sponsorship | a) Sponsorship to attend courses and conferences | Executive Directors | Individual is responsible for completing Gifts, Hospitality & Sponsorship form |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Sponsorship | b) Sponsorship of HB events | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Advertising | a) Relating to recruitment | Director of Workforce & OD | Assistant Director of Workforce & OD (Resourcing & Utilisation) |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Advertising | b) Other | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Welsh Language | a) Compliance with the Welsh Language Act 1993 and the Welsh Language Standards | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Welsh Language | b) Welsh translation services | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Welsh Language | c) Welsh Language Strategy and development | Chief Executive | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Partnership Governance | a) Maintain a partnership governance framework to ensure a consistent approach of working across partners | Director of Public Health | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Partnership Governance | b) Performance management and monitoring of outcomes of work delivered through partnerships and other inter-organisational arrangements | Director of Public Health | Assistant Director Strategic Partnerships, Diversity & Inclusion |

| | | | | | | |
|---------------------------------|-----|-----------|--------------------------------------|--|--|--|
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Partnership Governance | Regional Partnership Board Governance | Director of Primary Care, Community & Long Term Care | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Partnership Governance | Public Services Board Governance | Director of Public Health | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | International Health Partnerships (Working Overseas) | Director of Public Health | Director of Public Health |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | N/A | International Health Partnerships (Volunteering) | Director of Workforce & OD | Director of Workforce & OD |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Equality, Diversity and Human Rights | Compliance with the Equality Act 2010 and Public Sector Equality Duty (2016) | Director of Public Health | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | a) Public Board | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | b) Audit and Risk Assurance Committee | Director of Corporate Governance | Director of Corporate Governance |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | c) People, Organisational Development & Culture Committee | Director of Workforce & OD | Director of Finance/ Director of Workforce & OD |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | d) Quality, Safety and Experience Committee | Director of Nursing, Quality & Patient Experience | Director of Nursing, Quality & Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | e) Charitable Funds Committee | Director of Nursing, Quality & Patient Experience | Director of Nursing, Quality & Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | f) Mental Health Legislation Committee | Director of Operations | Director of Operations |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | g) Sustainable Resources Committee | Director of Finance | Director of Finance |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | h) Health and Safety Committee | Director of Nursing, Quality & Patient Experience | Director of Nursing, Quality & Patient Experience |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | i) Remuneration and Terms of Service Committee | Chief Executive | Chief Executive |
| SCHEME OF DELEGATION FROM OTHER | N/A | CORPORATE | Committee Lead | j) Strategic Development and Operational Delivery Committee | Director of Strategy and Planning | Director of Strategy and Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Staff Engagement and Support | a) Occupational Health Service | Director of Workforce & OD | Deputy Director of Workforce |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Staff Engagement and Support | b) Staff psychological well-being | Director of Workforce & OD | Assistant Director of OD |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Staff Engagement and Support | c) Staff communication (corporate) | Director of Workforce & OD | Communications and Engagement Director |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Staff Engagement and Support | d) Staff engagement on service change | Chief Executive | Communications and Engagement Director |

| | | | | | | |
|---------------------------------|-----|-----------|--|---|---|---|
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Workforce Planning, recruitment and retention | a) Develop & implement a workforce strategy | Director of Workforce & OD | Head of Strategic Workforce Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Workforce Planning, recruitment and retention | b) Establish & implement workforce plans to address key performance measures in sickness reduction, appraisal rates, mandatory training, job planning and employee relations, support & investigation | Director of Workforce & OD | Head of Strategic Workforce Planning |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | N/A | Organisational Development Strategy | Director of Workforce & OD | Assistant Director of OD |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | N/A | Staff Side and Employee Relations | Director of Workforce & OD | Head of Workforce |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | N/A | Workforce Equality and Diversity | Director of Workforce & OD and Director of Public Health | Assistant Director of Workforce & OD and Assistant Director Strategic Partnerships, Diversity & Inclusion |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Medical Staffing | a) Authorisation above medical and locum cap | Medical Director | Assistant Director (Medical Directorate) |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Medical Staffing | b) Job Planning | Medical Director | Assistant Director (Medical Directorate) |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Medical Staffing | c) Monitoring and quality assurance of job plans | Medical Director | Assistant Director (Medical Directorate) |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Disciplinary investigations and dismissal of staff | a) Chief Executive i) Suspension/ Exclusion ii) Dismissal | Chair of the Board Chair of the Board | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Disciplinary investigations and dismissal of staff | b) Director i) Suspension/ Exclusion ii) Dismissal | Chief Executive Chief Executive | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Disciplinary investigations and dismissal of staff | c) All Other Staff (excluding Medical and Dental) i) Suspension/ Exclusion ii) Dismissal | Appropriate Line Manager (must be minimum of Band 7) Appropriate Senior Manager (normally will be minimum of Band 8) | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Disciplinary investigations and dismissal of staff | d) Medical and Dental Staff i) Suspension/ Exclusion ii) Dismissal | See UPSW (or any subsequent policy which replaces UPSW) Medical Director (or nominated deputy) | N/A |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | Disciplinary investigations and dismissal of staff | Dismissal of Primary Care contracted Medical and Dental staff (and other Contractor professionals) | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | N/A | Workforce policies and procedures | Director of Workforce & OD | Head of Workforce |
| SCHEME OF DELEGATION FROM OTHER | N/A | WORKFORCE | N/A | Finance Professional Leadership | Director of Finance | Assistant Directors of Finance and Head of Service Modernisation |

| | | | | | | |
|------------------------|-----|-----------|-----|---|---|--|
| LEGISLATION COMPLIANCE | N/A | Concerns | N/A | NHS Redress (Wales) Measure 2008 (2008 nawm1) - Measures of the Welsh Director of Nursing, Quality & Patient Experience Assistant Director (Legal & Patient Experience) Government to make provision about arrangements for redress in relation to liability in tort in connection with services provided as part of the health service in Wales | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| LEGISLATION COMPLIANCE | N/A | Concerns | N/A | The National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Legal and Patient Support) |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Well-being of Future Generations (Wales) Act 2015 | Director of Public Health (Temporarily with Director of Workforce & OD) | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | Social Services and Well-being (Wales) Act 2014 | Director of Primary Care, Community & Long Term Care | Director of Primary Care, Community & Long Term Care |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Partnership Arrangements (Wales) Regulations 2015 | Director of Primary Care, Community & Long Term Care | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | Charities Act 2011 | Director of Nursing, Quality & Patient Experience | Head of Hywel Dda Health Charities |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | Charities Act 2022 | Director of Nursing, Quality & Patient Experience | Head of Hywel Dda Health Charities |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The National Health Service Act 1977 | Chief Executive | All Executives |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The National Health Services (Wales) Act 2006 | Chief Executive | All Executives |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Health and Social Care (Quality and Engagement) (Wales) Act 2020 | Director of Nursing, Quality & Patient Experience | All Executives |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Local Health Boards (Establishment and Dissolution) (Wales) Order 2009 | Chief Executive | Director of Corporate Governance |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Local Health Boards (Constitution, Membership and Procedures) (Wales) Regulations 2009 | Chief Executive | Director of Corporate Governance |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Local Health Boards (Directed Functions) (Wales) Regulations 2009 | Chief Executive | Director of Corporate Governance |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Local Health Boards (Transfer of Staff, Property, Rights and Liabilities) (Wales) Order 2009 | Chief Executive | Director of Corporate Governance |
| LEGISLATION COMPLIANCE | N/A | Corporate | N/A | The Local Health Boards (Establishment and Dissolution) (Wales) (Amendment) Order 2013 | Chief Executive | Director of Corporate Governance |
| LEGISLATION COMPLIANCE | N/A | Equality | N/A | Equality Act 2010 - A legal framework to protect the rights of individuals and advance equality of opportunity for all | Director of Public Health (Temporarily with Director of Workforce & OD) | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| LEGISLATION COMPLIANCE | N/A | Equality | N/A | Human Rights Act 1998 - Codifies the protections in the European Convention on Human Rights into UK law | Director of Public Health (Temporarily with Director of Workforce & OD) | Assistant Director Strategic Partnerships, Diversity & Inclusion |
| LEGISLATION COMPLIANCE | N/A | Equality | N/A | Welsh Language Act 1993 – Establishes the principle that Welsh and English languages should be treated on the basis of equality, in the conduct of public business in Wales | Chief Executive | Communications and Engagement Director |
| LEGISLATION COMPLIANCE | N/A | Equality | N/A | Welsh Language (Wales) Measure 2011 | Chief Executive | Communications and Engagement Director |
| LEGISLATION COMPLIANCE | N/A | Estates | N/A | Pollution Prevention and Control Act 1999 & Environmental Permitting Regulations 2010 (previously The Radioactive Substances Act 1993) -Inspections regarding Radioactive Waste, etc. Under Radioactive Substance Act 1993. Registration to keep radioactive substances and authorisation to store and dispose of radioactive waste to comply with the requirements | Director of Operations | Director of Estates, Facilities & Capital Management |
| LEGISLATION COMPLIANCE | N/A | Estates | N/A | Energy Act 2008 (c.32) - Combined Heat and Power Quality Assurance (CHPQA) | Director of Operations | Director of Estates, Facilities & Capital Management |

| | | | | | | |
|------------------------|-----|------------------------|-----|--|---|---|
| LEGISLATION COMPLIANCE | N/A | Health & Safety | N/A | Health and Safety at Work Act 1974 & Secondary Legislation (Regulations) | Director of Nursing, Quality & Patient Experience | All Executive Directors/Directors, General Managers, County Directors, Director of MHL, Assistant Director of EFCM, Digital Director, Deputy Director of Operations |
| LEGISLATION COMPLIANCE | N/A | Health & Safety | N/A | Fire & Rescue Services Act 2005 & Regulatory Reform (Fire Safety) Order 2005 | Director of Operations | All Executive Directors/Directors, General Managers, County Directors, Director of MHL, Assistant Director of EFCM, Digital Director, Deputy Director of Operations |
| LEGISLATION COMPLIANCE | N/A | Health & Safety | N/A | Ionising Radiation (Medical Exposure) Regulations 1999 | Director of Therapies & Health Science | Head of Radiology |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | General Data Protection Regulations 2018 - Protection of personal information | Director of Finance | Digital Director and Head of Information Governance |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | General Data Protection Regulations 2018 - Non Medical Subject Access Requests | Director of Finance | Digital Director and Head of Information Governance |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | General Data Protection Regulations 2018 - Acute Subject Access Requests | Director of Operations | Acute Records Manager |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | General Data Protection Regulations 2018 - Mental Health Subject Access Requests | Director of Operations | MH Administrator |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | Access to Health Records Act 1990 - Access to the health records of a deceased person | Director of Operations | Health Records Manager/ MH Administrator |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | Common Law duty of Confidentiality | Director of Finance | Digital Director |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | Computer Misuse Act 1990 – Securing computer material against unauthorised access or modification; and for connected purposes | Director of Finance | Digital Director |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | Freedom of Information Act 2000 - Provides public access to information held by public authorities | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| LEGISLATION COMPLIANCE | N/A | Information Governance | N/A | Environmental Information Regulations 2004 | Director of Corporate Governance | Assistant Director of Corporate Legal Services and Public Affairs |
| LEGISLATION COMPLIANCE | N/A | Medicines Management | N/A | Health Act 2006 (c.28) & Controlled Drugs (Supervision of Management and Use) (Wales) Regulations 2008 (under Health Act 2006) | Medical Director | Head of Medicines Management |
| LEGISLATION COMPLIANCE | N/A | Medicines Management | N/A | Controlled Drugs (Supervision of Management and Use) (Wales) Regulations 2008 (under Health Act 2006) - Regulations on the management of Controlled Drugs (Jan 2009) | Medical Director | Head of Medicines Management |
| LEGISLATION COMPLIANCE | N/A | Medicines Management | N/A | Misuse of Drugs Act 1971 (c.38) & Misuse of Drugs Act 2001- Restriction relating to production, supply, possession and destruction of controlled drugs | Medical Director | Pharmaceutical & Prescribing Manager, Head of Medicines Management |
| LEGISLATION COMPLIANCE | N/A | Mental Health | N/A | Mental Health Act 1983 | Director of Operations | Director of Mental Health & LD |
| LEGISLATION COMPLIANCE | N/A | Mental Health | N/A | Mental Health (Wales) Measure 2010 | Director of Operations | Director of Mental Health & LD |
| LEGISLATION COMPLIANCE | N/A | Patient Safety | N/A | Human Tissue Act 2004 – Licence Holder | Medical Director | Director of Research, Innovation and University Partnerships and Consultant Histopathologist (Pathology Lead) |
| LEGISLATION COMPLIANCE | N/A | Patient Safety | N/A | Human Transplantation (Wales) Act 2013 | Director of Operations | Consultant Histopathologist (Pathology Lead) |

| | | | | | | |
|------------------------|-----|--------------------|-----|--|---|--|
| LEGISLATION COMPLIANCE | N/A | Patient Safety | N/A | Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing for Quality, Assurance, Professional Regulation |
| LEGISLATION COMPLIANCE | N/A | Patient Safety | N/A | Nurse Staffing Levels (Wales) Act 2016 | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing (Practice) |
| LEGISLATION COMPLIANCE | N/A | Public Health | N/A | Public Health (Control of Diseases) Act 1984 (c.22) & Health Protection (Notification) (Wales) Regulations 2010 - Cases of notifiable diseases, death and disposal of bodies | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Head of Health Emergency Planning |
| LEGISLATION COMPLIANCE | N/A | Public Health | N/A | Smoke-Free Premises (Wales) Regulations 2007 | Director of Public Health | Public Health Officer (Tobacco) |
| LEGISLATION COMPLIANCE | N/A | Public Involvement | N/A | Local Government and Public Involvement in Health Act 2007 (c.28) – Disclosure of information, ethical standards, patient and public involvement | Director of Public Health | Communications and Engagement Director |
| LEGISLATION COMPLIANCE | N/A | Public Safety | N/A | Civil Contingencies Act 2004 - Establishes a coherent framework for emergency planning | Director of Public Health (Temporarily with Director of Therapies and Health Science) | Head of Health Emergency Planning |
| LEGISLATION COMPLIANCE | N/A | Safeguarding | N/A | Children's Act 1989, 2004 - Provides the legislative framework for child protection in Wales | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing for Quality, Assurance & Professional Regulation |
| LEGISLATION COMPLIANCE | N/A | Safeguarding | N/A | Care Standards Act 2000 - Provides for the administration of a variety of care institutions, including children's homes, independent hospitals, nursing homes and residential care homes | Director of Primary Care, Community & Long Term Care | Head of Long Term Care |
| LEGISLATION COMPLIANCE | N/A | Safeguarding | N/A | Protecting Vulnerable Groups Act 2006 - Provides the legislative framework for the new Vetting and Barring scheme | Director of Nursing, Quality & Patient Experience | Assistant Director of Nursing for Quality, Assurance & Professional Regulation |
| LEGISLATION COMPLIANCE | N/A | Safeguarding | N/A | Mental Capacity Act 2005 - Provides a statutory framework for people who lack capacity to make decisions for themselves | Director of Operations | Head of Consent & Mental Capacity |
| CAPITAL SCHEMES | N/A | N/A | N/A | Women & Children's Phase 2. GGH | Director, Secondary Care (SRO) | Project Director -GGH General Manager |
| CAPITAL SCHEMES | N/A | N/A | N/A | Fire Enforcement work WGH | Director of Operations (SRO) | Project Director - Director of Estates, Facilities and Capital Management |
| CAPITAL SCHEMES | N/A | N/A | N/A | Transforming Mental Health | Director of Operations (SRO) | Project Director - Director of Mental Health and Learning Disabilities |
| CAPITAL SCHEMES | N/A | N/A | N/A | Fire Enforcement work GGH | Director of Operations (SRO) | Project Director - Director of Estates, Facilities and Capital Management |
| CAPITAL SCHEMES | N/A | N/A | N/A | Diagnostic Imaging – All Schemes | Director of Operations (SRO) | Project Director - General Manager Uncheduled Care |
| CAPITAL SCHEMES | N/A | N/A | N/A | Demountable Theatre PPH | Director of Strategy and Planning (SRO) | Project Director - Director, Secondary Care |
| CAPITAL SCHEMES | N/A | N/A | N/A | Carmarthen Hwb | Director of Strategy and Planning (SRO) | Project Director - Integrated System Director |
| CAPITAL SCHEMES | N/A | N/A | N/A | Cross Hands Health & Wellbeing Centre, Cross Hands, Carmarthenshire | Director of Strategy and Planning (SRO) | Project Director - Integrated System Director |
| CAPITAL SCHEMES | N/A | N/A | N/A | Aseptic Unit, Witybush General Hospital | Director of Primary Care, Community & Long Term Care | Project Director - Clinical Director of Pharmacies and Medicines Management |
| CAPITAL SCHEMES | N/A | N/A | N/A | Business Continuity Programme Business Case | Director of Operations (SRO) | Project Director - Director of Estates, Facilities and Capital Management |

| | | | | | | |
|-----------------|-----|-----|-----|---|---|---|
| CAPITAL SCHEMES | N/A | N/A | N/A | Cylch Caron, Tregaron. | County Director & Commissioner Ceredigion (SRO). Project lead by Ceredigion County Council. | N/A |
| CAPITAL SCHEMES | N/A | N/A | N/A | Aberystwyth Integrated Care Centre | Director of Operations (SRO) | Project Director - County Director Ceredigion |
| CAPITAL SCHEMES | N/A | N/A | N/A | Aberystwyth Integrated Education & Research Centre | TBC | Project Director - County Director Ceredigion |
| CAPITAL SCHEMES | N/A | N/A | N/A | Integrated Primary and Community Development, Neyland | TBC | Project Director - Assistant Director of Primary Care |
| | N/A | N/A | N/A | Integrated Primary and Community Development, Neyland | Director of Primary Care, Community and Long Term Care | Project Director - Assistant Director of Primary Care |
| CAPITAL SCHEMES | N/A | N/A | N/A | Fishguard Wellbeing Centre | Director of Primary Care, Community and Long Term Care | Project Director - Assistant Director of Primary Care |
| CAPITAL SCHEMES | N/A | N/A | N/A | Llandovery Health and Wellbeing Hub | Director of Strategy and Planning (SRO) | Project Director - Integrated System Director |
| CAPITAL SCHEMES | N/A | N/A | N/A | Chemotherapy Day Unit Bronglais | Director of Operations (SRO) | Project Director - County Director Ceredigion |
| CAPITAL SCHEMES | N/A | N/A | N/A | Medical & Non Medical Equipment Replacement. HDUHB wide | Director of Operations (SRO) | Project Director - Deputy Director of Operations |
| CAPITAL SCHEMES | N/A | N/A | N/A | Regional Cellular Pathology services | TBC | N/A |