

Corporate Scheme of Delegation

Accountable Officer Memorandum	Standing Orders	Standing Financial Instructions	Scheme of Delegation from Other	Legislation Compliance	Capital Schemes	Objectives 2018/2019
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SCHEME OF DELEGATION DERIVED FROM THE ACCOUNTABLE OFFICER MEMORANDUM FOR CHIEF EXECUTIVES OF LOCAL HEALTH BOARDS		
REF	DELEGATED MATTER	DELEGATED TO
Section 3	<p>Responsibility for:-</p> <ul style="list-style-type: none"> - 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; - ensuring that all items of expenditure, including payments to staff, fall within the legal powers of the Board; - acting within the scheme of delegations and ensuring that you comply with guidance on classes of payment that you should authorise personally; - 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; - Prudent and economical administration, for the avoidance of waste and extravagance, and for the efficient and effective use of all resources; - Ensuring that the assets for which you are responsible are properly safeguarded, particularly: <ul style="list-style-type: none"> ➢ 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 ➢ land, buildings or other property (including stores and equipment); - 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; - 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; - 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; - 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; - Ensuring that there are appropriate arrangements to counter fraud and that procedures for dealing with suspected cases of fraud are complied with; - 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; - 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
Section 4	<p>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:-</p> <ul style="list-style-type: none"> - 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. - Take account of your corporate responsibilities and accountability to the LHB Board of which you are a member. 	Chief Executive
Section 5	<ul style="list-style-type: none"> - Ensure compliance with the principles set out within <i>Managing Welsh Public Money</i> and the framework and standards of good governance set for the NHS in Wales (as embodied within the Welsh Government's <i>Citizen Centred Governance Principles</i> and reflected within the contents of the <i>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
Section 6	<ul style="list-style-type: none"> - Work in partnership with other organisations to achieve its strategic aims and objectives. - 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 - 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
Section 7	<ul style="list-style-type: none"> - 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

Section 8	<ul style="list-style-type: none"> - 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. - 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
Section 9	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
Section 10	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
Section 11	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
Section 12	Should it become 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
Section 14	Responsibility for the Budgets assigned and to be held to account for the exercise of the responsibilities as Accountable Officer directly	Chief Executive
Section 16	<ul style="list-style-type: none"> - 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. - May be required to appear before the Public Accounts Committee separately depending on the matter under consideration 	Chief Executive

STANDING ORDERS (SO)			
REF	DELEGATED MATTER	DELEGATED TO	OPERATIONAL RESPONSIBILITY
GENERAL			
xxvii & xxviii	Non Compliance and Variation of Standing Orders	Board Secretary	Board Secretary
xxxi	Final interpretation of SOs	Chair	Board Secretary
xxiii	Responsibility for providing advice to the Board on all aspects of governance/committee services	Board Secretary	Board Secretary
CHAIR'S ACTION ON URGENT MATTERS			
SO 2.1	Use of Chair's Action and onward reporting to Board	Chair and Chief Executive	Board Secretary
DELEGATION TO OFFICERS			
SO 2.3.1	Compilation of Scheme of Delegation for functions delegated to Chief Executive for consideration and approval by the Board	Chief Executive	Board Secretary
SO 2.3.1	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
WORKING IN PARTNERSHIP			
SO 6.	Identification and engagement with all key partners and regular review of effectiveness	Chair	Director of Primary Care, Community & Long Term Care
MEETINGS			
SO 7.2	Development of the Annual Plan of Board Business	Chair	Board Secretary
SO 7.3	Call meetings of the Board	Chair	Board Secretary
SO 7.4	Preparation of Board meetings	Chair	Board Secretary
SO 7.5	Report decisions made & review HB business conducted in private session	Chair	Board Secretary
SO 7.5	Chair all HB Meetings & associated responsibilities	Chair (or Vice-Chair in Chair's absence)	Chair (or Vice-Chair in Chair's absence)
SO 7.6	A record of proceedings of Board Meetings	Board Secretary	Board Secretary
VALUES AND STANDARDS OF BEHAVIOUR			
SO 8.1	Establishment, maintenance and annual review of a Register of Interests declared by all Board Members	Chief Executive	Board Secretary
SO 8.3	Establishment, maintenance and annual review of a Register of Interests for relevant LHB Officers	Chief Executive	Board Secretary
SO 8.7	Establishment maintenance and annual review of a Register of Gifts, Hospitality, Sponsorship and Honoraria for Board Members and LHB Officers	Chief Executive	Board Secretary
SIGNING AND SEALING DOCUMENTS			
SO 9.1	Establishment, maintenance and bi-annual reporting of a Register of Sealings	Board Secretary	Board Secretary
SO 9.2	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
SO 9.3	Safe custody of Seal in a secure place	Board Secretary	Board Secretary

STANDING FINANCIAL INSTRUCTIONS (SFI)			
SO/SFI REF	DELEGATED MATTER	DELEGATED TO	OPERATIONAL RESPONSIBILITY
GENERAL			
SFI 1.1.3	Approval of all financial procedures	Director of Finance, through Finance Committee	Deputy Director of Finance
SFI 1.1.4	Provision of advice in regard to the interpretation/application of SFIs	Director of Finance	Director of Finance
SFI 1.2.1	Report non-compliance with SFIs for consideration by Audit Committee (to formally consider the matter and make proposals to the Board on any action taken)	Director of Finance and Board Secretary	Director of Finance and Board Secretary
SFI 1.3	Meets its statutory obligation to perform its functions within the available financial resources	Chief Executive	Director of Finance
RESPONSIBILITIES AND DELEGATION			

SFI 2.2.1	Accountability for Overall Financial Control	Chief Executive and Director of Finance	Director of Finance
SFI 2.2.2	Overall responsibility for ensuring that financial obligations and targets are met and overall responsibility for system of internal control	Chief Executive	Chief Executive
SFI 2.2.3	To ensure that Board Members and LHB Officers are notified of and understand their responsibilities within the SFIs	Chief Executive	Director of Finance
SFI 2.3.1	a) Implementing Financial Policies and coordinating any corrective action necessary to further these policies;	Director of Finance	Deputy Director of Finance
	b) Maintaining an effective system of internal financial control including ensuring that detailed financial procedures and systems incorporating the principles of	Director of Finance	Deputy Director of Finance
	c) Ensuring that sufficient records are maintained to show and explain the LHB's transactions, in order to disclose, with reasonable accuracy, the financial	Director of Finance	Deputy Director of Finance
	d) the provision of financial advice to other Board members and LHB officers, and LHB committees and Advisory Groups,	Director of Finance	Deputy Director of Finance
	e) the design, implementation and supervision of systems of internal financial control, and	Director of Finance	Deputy Director of Finance
	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
SFI 2.3.2	Ensuring an ongoing training and communication programme is in place to affect these SFIs	Director of Finance	Deputy Director of Finance
SFI 2.4.1	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
SFI 2.5.1	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
AUDIT, FRAUD AND CORRUPTION, AND SECURITY MANAGEMENT			
Audit			
SFI 3.1.1	Establishment of an Audit Committee with clearly defined terms of reference to provide an independent check on effective internal control arrangements	Chief Executive	Board Secretary
SFI 3.2.1	a) Ensuring arrangements are in place to review, evaluate and report on the effectiveness of internal financial control incl establishment of an IA function	Chief Executive	Director of Finance and Board Secretary
	b) Ensuring that the IA function meets the NHS mandatory audit standards in accordance with the IA Manual and provides sufficient assurance to AC & AO	Chief Executive	Board Secretary
	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
	d) Ensuring that an annual Internal Audit report is prepared for the consideration of the Audit Committee and the Board. The report must cover the areas outlined in SFI 3.2.1:	Chief Executive	Head of Internal Audit/ Board Secretary
SFI 3.3.1	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	Board Secretary
SFI 3.4.1	Ensure that there is a cost effective external audit service	Audit & Risk Assurance Committee	Director of Finance/Board Secretary
SFI 3.4.2	Invite External Audit representative to attend every Audit Committee	Board Secretary	Board Secretary
SFI 3.4.4	Formally consider and review the External Audit Strategy	Audit & Risk Assurance Committee	Director of Finance and Board Secretary
SFI 3.4.5	Review the External Audit Annual Plan and the associated fees, and consider any material changes to the annual audit plan	Audit & Risk Assurance Committee	Director of Finance and Board Secretary
Fraud and Corruption			
SFI 3.5.1	Monitor & ensure compliance with Directions issued by Welsh Ministers on fraud and corruption	Chief Executive and Director of Finance	Local Counter Fraud Specialist
SFI 3.5.2	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
SFI 3.5.4	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
SFI 3.5.5	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
SFI 3.5.5	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
Security Management			
SFI 3.6.1	Monitor and ensure compliance with Directions issued by the Welsh Ministers on NHS security management	Chief Executive	Director of Nursing, Quality & Patient Experience
SFI 3.6.2	Overall responsibility for controlling and coordinating security	Chief Executive	Director of Nursing, Quality & Patient Experience
ALLOCATIONS AND FINANCIAL DUTY			
SFI 4.0.2	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
	b) Ensure that any ring-fenced or non-discretionary allocations are disbursed in accordance with Welsh Ministers' requirements;	Director of Finance	Director of Finance
	c) Periodically review any assumed in-year allocations to ensure that these are reasonable and realistic; and	Director of Finance	Director of Finance
	d) Regularly update the Board on significant changes to the initial allocation and the application of such funds.	Director of Finance	Director of Finance
SFI 4.0.3	Ensure the LHB meets its statutory provision not to breach its 3 year rolling financial duty	Chief Executive	Director of Finance
ALLOCATIONS AND FINANCIAL DUTY			
Integrated Planning			
SFI 5.1.1	Preparation of an integrated Medium Term Plan	Chief Executive	Director of Strategic Development and Operational Planning
SFI 5.1.3 & SFI 5.2.2	Compile and submit to the Board for approval, on an annual basis, prior to the beginning of the financial year of implementation, the rolling 3 year Integrated Medium Term Plan. Following Board approval, the plan must be submitted to Welsh Government prior to beginning of financial year of implementation	Chief Executive	Director of Strategic Development and Operational Planning
BUDGETARY CONTROL			
Budget Setting			
SFI 6.1.1	Prepare and submit budgets for approval and delegation by the Board	Chief Executive	Director of Finance
SFI 6.1.2	Monitor financial performance against budget and plans and report the current and forecast position on a monthly basis and at every Board meeting.	Director of Finance	Director of Finance
SFI 6.1.3	Provide information as required by the Director of Finance to enable budgets to be compiled and managed appropriately.	Executive Directors/Directors	All Budget Holders
SFI 6.1.4	Sign up to their allocated budgets at the commencement of the financial year	All Budget Holders	All Budget Holders
SFI 6.1.5	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
Budget Delegation			
SFI 6.2.1	Delegate the management of a budget to permit the performance of a defined range of	Chief Executive	Director of Finance

SFI 6.2.2	activities. Ensure the budgetary total or virement limits set by the Board are not exceeded	Chief Executive, Director of Finance and Budget Holders	Chief Executive, Director of Finance and Budget Holders
SFI 6.2.3	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
SFI 6.2.4	Ensure non-recurring budgets should 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
Budgetary Control and Reporting			
SFI 6.3.1	Devise and maintain systems of budgetary control as per SFI 6.3.1	Director of Finance	Deputy Director of Finance
SFI 6.3.2	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 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; 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 All Budget Holders	All Budget Holders All Budget Holders All Budget Holders
SFI 6.3.3	Identify and implement cost and efficiency improvements and income generation initiatives in accordance with the requirements of the Medium Term Financial Plans	Chief Executive	All Budget Holders
Monitoring Returns			
SFI 6.5.1	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
ANNUAL ACCOUNTS & REPORTS			
SFI 7.0.2	Sign the accounts on behalf of the LHB	Chair and Chief Executive	Chair, Chief Executive and Director of Finance
SFI 7.0.2	Signing of the: a) Annual Governance Statement b) Annual Quality Statement c) Accountability Report	Chief Executive Chief Executive Chief Executive	Board Secretary Director of Nursing, Quality & Patient Experience Board Secretary
SFI 7.0.3	Ensuring that financial reports and returns are prepared in accordance with the accounting policies and guidance determined by the Welsh Ministers and the Treasury and consistent with International Financial Reporting Standards	Director of Finance	Director of Finance
BANKING ARRANGEMENTS			
General & Bank Accounts			
SFI 9.1.1	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	Deputy Director of Finance
SFI 9.1.2	Approval of banking arrangements	Board	N/A
SFI 9.3.1	Prepare detailed instructions on the operation of bank accounts	Director of Finance	Deputy Director of Finance
SFI 9.3.2	Advise the LHB's bankers in writing of the conditions under which each account will be operated	Director of Finance	Deputy Director of Finance
SFI 9.3.3	Approve security procedures for any cheques issued without a hand-written signature e.g. lithographed.	Director of Finance	Deputy Director of Finance
Tendering and Review			
SFI 9.4.1 & SFI 9.4.2	Review the banking arrangements of the LHB at regular intervals to ensure they reflect best practice and represent best value for money. The results of the banking tendering exercise should be reported to the Board	Director of Finance	Deputy Director of Finance
INCOME, FEES AND CHARGES AND SECURITY OF CASH, CHEQUES AND OTHER NEGOTIABLE INSTRUMENTS			
Income Systems			
SFI 10.2.1	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
SFI 10.2.2	Ensure that systems are in place for the prompt banking of all monies received	Director of Finance	Deputy Director of Finance
Fees and Charges			
SFI 10.3.1	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
SFI 10.3.2	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	All LHB Officers	All LHB Officers
Debt Recovery			
SFI 10.4.1	Responsible for the appropriate recovery action on all outstanding debts.	Director of Finance	Deputy Director of Finance
SFI 10.4.4	Responsible for ensuring the Welsh Ministers' guidance on disputed debt arbitration is strictly adhered to	Chief Executive & Director of Finance	Director of Finance
Security of Cash, Cheques and other Negotiable Instruments			
SFI 10.5.1	Responsible for: a) Approving the form of all receipt books, agreement forms, or other means of officially acknowledging or recording monies received or receivable; b) Ordering and securely controlling any such stationery; c) Provision of adequate facilities and systems for officers whose duties include collecting and holding cash d) Establishing systems and procedures for handling cash and negotiable securities on behalf of the LHB	Director of Finance Director of Finance Director of Finance Director of Finance	Deputy Director of Finance All Budget Holders All Budget Holders Deputy Director of Finance
Grant Funding, Procurement and Contracting for Goods and Services			
SFI 11.1.2 & SFI 11.4.2	Ultimately responsible for ensuring that the LHB's grant and procurement procedures: <ul style="list-style-type: none">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; andAre strictly followed by all Executive Directors, Independent Members and staff within the organisation	Chief Executive	Director of Finance
Procurement - Sustainable Development			
SFI 11.7.1	Adopt a Sustainable Development Strategy consistent with the NHS Wales Sustainable Development Strategy	Director of Finance	Director of Finance and NWSSP/Head of Procurement
SFI 11.7.2	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
SFI 11.7.2	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
Procurement - Equality of Opportunity			
SFI 11.8.1	Secure equality of opportunity in procurement through its application of the Sustainable	Director of Finance	NWSSP/Head of Procurement

	Risk Assessment (SRA) tool developed by Value Wales for all contracts over £25,000, and its compliance with all relevant Welsh Ministers' guidance, as set out in Schedule 1 of these SFIs		
Procurement Procedures			
SFI 11.9.1	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
SFI 11.9.2	All procedures shall reflect the Welsh Ministers' guidance and the LHB's delegation arrangements and approval processes HdDUHB Standing Orders and Standing Financial Instructions	Director of Finance	Director of Finance
(note 1.7, Sch 1, SFIs)	Ensure there is a suitably qualified and experienced officer who shall oversee and manage procurement on behalf of LHB	Director of Finance	Director of Finance
Procurement Thresholds			
SFI 11.10.1	Thresholds for quotes and competitive tendering arrangements: Quotations <ul style="list-style-type: none">Quotations up to £5,000 (at the discretion of Director of Finance, Planning & Performance)Obtaining minimum of 3 written quotations for goods/services of value between £5,000 and £25,000Authorise and record where the required number of quotations is not available (Note 3.5, Scd 1, SFIs)Formally authorise and record single quotations and report to Audit Committee (Note 3.6, Scd 1, SFIs) Competitive Tenders – Total value of contract its entire period: <ul style="list-style-type: none">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)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)Authorise acceptance of lower number of tenderers based on receipt of a full report detailing the reasons (note 5.3 Scd 1, SFIs) <ul style="list-style-type: none">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)Receipt and custody of tenders prior to opening (paper based procurement only) (note 8.3, Scd 1, SFIs)Decide if late tenders should be considered (paper based procurement only) (note 8.3, Scd 1, SFIs)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)Maintain Tender Register in a secure place (note 9.3, Scd 1, SFIs)Evaluation of tenders in a robust and fair manner (note 10.2, Sch1, SFIs)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)Approve Single Tender Actions & report to Audit and Risk Assurance Committee (note 4.2 Schedule 1, SFIs)	Director of Finance Director of Finance Director of Finance Director of Finance Director of Finance Chief Executive/ Director of Finance Chief Executive/ Director of Finance Finance Director of Finance Director of Finance Director of Finance Chief Executive Director of Finance Chief Executive Chief Executive Chief Executive and Director of Finance	All Budget Holders All Budget Holders All Budget Holders Director of Finance and NWSSP/Head of Procurement Budget Holder/NWSSP (Procurement) Deputy Director of Finance Deputy Director of Finance NWSSP (Procurement) NWSSP (Procurement) PA to Chief Executive Director of Finance PA to Chief Executive plus an Executive Director or Board Secretary PA to Chief Executive Chief Executive or nominated committee, project group or other Director of Finance Director of Finance
SFI 11.12.1	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
Healthcare Agreements			
SFI 12.1.1	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 Finance (Medical Director for IPCAs)
SFI 12.3.1	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
PAY EXPENDITURE			
Remuneration and Terms of Service Committee (Refer to SO 3.4)			
SFI 13.1.2	Establish a Remuneration and Terms of Service Committee	Board	Board Secretary
SFI 13.1.3	The Committee shall report in writing to the Board the basis for its recommendations.	Remuneration & Terms of Service Committee	Director of Workforce & OD and Board Secretary
SFI 13.1.4	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
Funded Establishment			
SFI 13.2.2	Approval of any variation of funded establishment of any department	Chief Executive	All Executive Directors/Directors
Staff Appointments			
SFI 13.3.1	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 a) Authority to fill funded posts within the establishment with permanent staff b) Authority to appoint staff to posts not on the formal establishment c) Additional increments – the granting of additional increments to staff within budgets (subject to the rules of Agenda for Change) d) Applications for re-grading (in line with the agreed policy on Agenda for Change and in accordance with all Wales Terms and Conditions). e) Authority to complete standing data forms affecting pay, new starters, variations and leavers f) Authority to authorise overtime g) Authority to authorise travel and subsistence expenses h) Authority to book Bank or Agency Staff for (i) Consultants and Middle Grades (ii) Nursing Staff (iii) All other Staff i) Annual Leave approval	Chief Executive All Budget Holders Executive Directors/Directors Director of Workforce & OD Director of Workforce & OD Line Managers and Heads of Service Heads of Service/General Managers Line Managers and Heads of Service Director of Operations Director of Operations Director of Operations	All Executive Directors/Directors All Budget Holders Executive Directors/Directors Deputy Director of Workforce & OD Deputy Director of Workforce & OD Line Managers and Heads of Service Heads of Service/General Managers Line Managers & Heads of Service General Managers/Clinical Directors General Managers/Clinical Directors Directorate Management Teams

	(i) Approval of annual leave	Line Managers	Line Managers
	(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)
	(iii) Approval of Special Leave (including compassionate, carers and leave without pay (in line with All Wales Special Leave Policy)	Line Managers	Line Managers
	j) Approval of leave without pay	Line Managers	Line Managers
	k) Approval of Medical and Dental Staff Leave of Absence		
	(i) Doctors below Consultant Grade		
	Annual Leave	Line Managers	Line Managers
	Study Leave	Line Managers	Line Managers
	(ii) Consultant Staff		
	Annual Leave	Line Managers	Line Managers
	Study Leave	Line Managers	Line Managers
	(iii) Clinical Directors		
	Annual Leave	Line Managers	Line Managers
	Study Leave	Line Managers	Line Managers
	(iv) Medical Director		
	Annual Leave	Chief Executive	Chief Executive
	Study Leave	Chief Executive	Chief Executive
	l) Approval of time off in lieu	Line Managers/Service Delivery Managers	Line Managers/Service Delivery Managers
	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
	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
	o) Approval of extension of sick leave on full or half pay - Directors	Remuneration & Terms of Service Committee	Director of Workforce & OD
	p) Approval of extension of sick leave on full or half pay – Other staff	Director of Workforce & OD	Director of Workforce & OD
	q) Study leave & Conferences		
	(i) In-house learning & development programmes	Line Managers	Line Managers
	(ii) Applications for higher award	Line Managers, County Director/General Manager Professional Head & Executive led Panel	Line Managers, County Director/General Manager Professional Head led Panel
	r) Approval of relocation costs		
	(i) Chief Executive & Directors	Remuneration and Terms of Service Committee	Director of Workforce & OD
	(ii) Medical and Dental Staff	Director of Workforce & OD (as per Relocation Expenses Policy)	Director of Workforce & OD
	(iii) Other Staff groups	Director of Workforce & OD (as per Relocation Expenses Policy)	Director of Workforce & OD
	s) Approval of lease cars		
	(i) Chief Executive	Chair	Chair
	(ii) Directors	Chief Executive	Chief Executive
	(iii) Other Staff groups	Budget holder	Budget holder
	t) Approval of mobile phones		
	(i) Chief Executive	Chair	Chair
	(ii) Directors	Chief Executive	Chief Executive
	(iii) Other Staff groups	Line Managers	Line Managers
SFI 13.3.2	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
Payroll			
SFI 13.4.1	Responsibility for:		
	a) Securing the provision of an efficient, value for money payroll service;	Director of Workforce & OD	Director of Workforce & OD
	b) Specifying timetables for submission of properly authorised time records and other notifications;	Director of Workforce & OD	NWSSP
	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
	d) Agreeing the timing and method of payment with the payroll service;	Director of Workforce & OD	Assistant Director of Workforce
	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
	f) Verification and documentation of data;	Director of Workforce & OD	NWSSP
	g) The timetable for receipt and preparation of payroll data and the payment of employees and allowances;	Director of Workforce & OD	NWSSP
	h) Maintenance of subsidiary records for superannuation, income tax, social security and other authorised deductions from pay;	Director of Workforce & OD	NWSSP
	i) Security and confidentiality of payroll information;	Director of Workforce & OD	NWSSP
	j) Checks to be applied to completed payroll before and after payment;	Director of Workforce & OD	NWSSP
	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
SFI 13.4.2	a) Ensuring that any shared or hosted service arrangement is supported by appropriate contract terms and conditions, adequate internal controls and audit review procedures;	Chief Executive	Director of Finance
	b) Ensuring a sound system of internal control and audit review of any internally provided payroll service;	Chief Executive	Director of Workforce & OD
	c) Maintenance and/or the authorisation of regular and independent reconciliation of pay control accounts	Chief Executive	Director of Finance
SFI 13.4.3	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
Contracts of Employment			
SFI 13.5.1	Ensuring that all employees are issued with a Contract of Employment in a form	Director of Workforce & OD	NWSSP

	approved by the Board and which complies with employment legislation, and dealing with variations to, or termination of, contracts of employment		
NON-PAY EXPENDITURE			
Delegation of Authority			
SFI 14.1.1	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
SFI 14.1.2	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
SFI 14.1.3	Responsible for ensuring that the authorisation processes within any automated procurement systems is through the provision of electronic "signatures" authorised in accordance with the access and authority controls as set out in the operational scheme of delegation and authorisation	Director of Finance	Deputy Director of Finance
SFI 14.1.4	Set out procedures on the seeking of professional advice regarding the supply of goods and services	Chief Executive	Board Secretary
Requisitioning			
SFI 14.3.1	a) Advise the Board regarding the setting of thresholds above which quotations (competitive or otherwise) or formal tenders must be obtained; and, once b) Prepare procedural instructions or guidance within the Scheme of Delegation on the obtaining of goods, works and services; c) Ensure systems are in place for the prompt payment of all properly authorised accounts and claims; d) Ensure systems are in place for providing a system of verification, recording and payment of all amounts payable. e) Ensure systems are in place for ensuring that payment for goods and services is only made once the goods and services are received. f) Be 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 Director of Finance Director of Finance Director of Finance Director of Finance Director of Finance	Deputy Director of Finance Deputy Director of Finance Deputy Director of Finance Deputy Director of Finance Deputy Director of Finance Deputy Director of Finance
Prepayments			
SFI 14.4.1	Approval of proposed prepayment arrangements	Director of Finance	Assistant Director of Finance
SFI 14.4.2	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
Official Orders			
SFI 14.5.1	Authorise who may use and be issued with official orders	Chief Executive	Director of Finance
SFI 14.6.2	Ensure that the arrangements for financial control and financial audit of building and engineering contracts and property transactions comply with the guidance issued by the Welsh Ministers.	Director of Finance	Director of Finance
CAPITAL INVESTMENT, FIXED ASSET REGISTERS AND SECURITY OF ASSETS			
NHS Capital Investment			
SFI 15.1.1	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 b) Responsible for the management of all stages of capital schemes and for ensuring that schemes are delivered on time and to cost 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 d) Ensure that an annual capital programme is adopted by the Board prior to the commencement of the financial year e) Ensure the availability of resources to finance all revenue consequences of the investment, including capital charges 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 Chief Executive Chief Executive Chief Executive Chief Executive Chief Executive	Director of Strategic Development and Operational Planning Senior Responsible Owner for each capital scheme Director of Finance Director of Strategic Development and Operational Planning Director of Finance Director of Estates, Facilities & Capital Management
SFI 15.1.2	A business case is produced in line with Welsh Ministers' guidance and where appropriate the 5-case Model	Chief Executive	Senior Responsible Owner for each capital scheme
SFI 15.1.2	Certify professionally the costs and revenue consequences detailed in the business case and involved appropriate LHB personnel and external agencies in the process.	Director of Finance	Senior Responsible Owner for each capital scheme
SFI 15.1.3	Issue procedures for the management of contracts involving stage payments, in accordance with the Welsh Ministers' guidance	Chief Executive	Director of Finance
SFI 15.1.4	Issue procedures for the regular reporting of expenditure and commitment against authorised capital expenditure	Director of Finance	Director of Finance
SFI 15.1.6	Issue to the manager responsible for any capital scheme: a) Specific authority to commit expenditure b) Authority to proceed to tender c) Approval to accept a successful tender	Chief Executive	Senior Responsible Owner for each capital scheme
SFI 15.1.7	Issue a scheme of delegation for capital investment management in accordance with the Welsh Ministers' guidance and the LHB's SOs HdUHB Standing Orders and Standing Financial Instructions	Chief Executive	Director of Finance
SFI 15.1.8	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
Asset Registers			
SFI 15.3.1	Maintenance of asset registers (on advice from Director of Financial, Planning & Performance)	Chief Executive	Director of Finance
SFI 15.3.5	Approve procedures for reconciling balances on fixed assets accounts in ledgers against balances on fixed asset registers	Director of Finance	Director of Finance
Security of Assets			
SFI 15.4.1	Overall control of fixed assets	Chief Executive	All Executive Directors/Directors
SFI 15.4.2	Approval of fixed asset control procedures	Director of Finance	Director of Finance
SFI 15.4.3	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
Stores and Receipt of Goods			
SFI 16.2.1	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
SFI 16.2.1	Responsible for systems of control over stores and receipt of goods	Director of Finance	Director of Finance
SFI 16.2.1	Responsible for the control of pharmaceutical stocks	Director of Primary Care, Community & Long Term Care	Head of Medicines Management
SFI 16.2.1	Responsible for the control of fuel, oil and coal stocks	Director of Operations	Director of Estates, Facilities & Cap Mgmt
SFI	Security arrangements and custody of keys	Director of Operations/ Director of Primary Care, Community & Long Term Care	Designated Manager /Pharmaceutical Manager

16.2.2			
SFI	Set out procedures and systems to regulate the stores	Director of Finance	Director of Operations
16.2.3			
SFI	Agree stocktaking arrangements	Director of Finance	Designated Manager /Pharmaceutical Manager
16.2.4			
SFI	Approve alternative arrangements where a complete system of stores control is not justified	Director of Finance	Deputy Director of Finance
16.2.5			
SFI	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
16.2.6			
SFI	Approve system for slow moving and obsolete stock, and report to Director of Finance	Designated Manager	Designated Manager
16.2.6	evidence of significant overstocking		
Goods Supplied by an NHS Supplies Agency			
SFI	Identify persons authorised to requisition and accept goods from NHS Supplies store	Chief Executive	All budget holders
16.3.1			
Disposals and Condemnations, Losses and Special Payments			
SFI 17.1.1	Prepare detailed procedures for disposal of assets including condemnations and ensure that these are notified to managers	Director of Finance	Deputy Director of Finance
SFI 17.1.2	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
SFI 17.1.3	a) Condemning and disposal of all unserviceable articles b) Report evidence of negligence in use to Director of Finance who will take appropriate action	Director of Finance Condemning Officer	Deputy Director of Finance Condemning Officer
SFI 17.1.4	Take appropriate action on reported evidence of negligence in use	Director of Finance	Deputy Director of Finance
Losses and Special Payments			
SFI 17.2.2	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
SFI 17.2.3	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
SFI 17.2.4	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
	a) Where a fraud or corruption or anomalies which indicate fraud or corruption is suspected the Local Counter Fraud Specialist, NHS Counter Fraud Services	Director of Finance	Deputy Director of Finance
SFI 17.2.5	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
SFI 17.2.6	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
SFI 17.2.7	Take any necessary steps to safeguard the LHB's interests in bankruptcies and company liquidations	Director of Finance	Deputy Director of Finance
SFI 17.2.8	Maintain losses and special payments register	Director of Finance	Deputy Director of Finance
SFI 17.2.9	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
SFI 17.2.10	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
SFI 17.2.13	Ensure all losses and special payments are reported to the Audit Committee at every meeting	Director of Finance	Deputy Director of Finance
INFORMATION MANAGEMENT AND TECHNOLOGY			
Information Management and Technology (IM&T Strategy)			
SFI 18.1.1	Develop an IM&T Strategy	Director of Finance	Assistant Director of informatics
SFI 18.1.2	Publish and maintain a Freedom of Information (FOI) Publication Scheme	Board Secretary	AD of Corporate Legal Services & Public Affairs
SFI 18.2.1	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	Assistant Director of Informatics
	b) Ensure that adequate controls exist such that the computer operation is separated from development, maintenance and amendment;	Director of Finance	Assistant Director of Informatics
	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	Assistant Director of Informatics
	d) Ensure that policies, procedures and training arrangements are in place to ensure compliance with information governance law.	Director of Finance	Assistant Director of Informatics
SFI 18.3.1	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
SFI 18.4.1	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	Assistant Director of Informatics
SFI 18.4.2	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	Assistant Director of Informatics
SFI 18.4.2	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	Assistant Director of Informatics
Patient's Property			
SFI 19.1.4	Inform staff of their responsibilities and duties for the administration of the property of patients	Director of Operations	General Manager
SFI 19.2.1	Responsible for ensuring patients and guardians are informed about patients' money and property procedures on admission	Chief Executive	Director of Operations
SFI 19.3.1	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
FUNDS HELD ON TRUST			
Corporate Trustee			
SFI 20.1.3	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 and Patient Experience

SFI 20.2.2	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. Expenditure on Charitable Funds and Endowment Funds is delegated subject to the following limits: up to £1,000; £1,001 to £10,000; £10,001 to £50,000; £50,001 to £100,000 Over £100,000	Director of Nursing, Quality and Patient Experience Senior Nurse Manager Clinical, Hospital or Service Director Charitable Funds Sub-Committee Charitable Funds Committee Corporate Trustee	Head of Hywel Dda Health Charities
SFI 20.2.3	Make appropriate arrangements for the audit of Funds held on Trust in accordance with Charity Commission requirements	Director of Finance	Deputy Director of Finance
SFI 20.3.1	Ensure SFIs are applied to the management of funds held on trust	Director of Finance	Deputy Director of Finance
Retention of Records			
SFI 21.1.1	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	Board Secretary (FOI only) Director of Finance
SFI 21.1.2	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		
DELEGATED MATTER	DELEGATED TO	OPERATIONAL RESPONSIBILITY
CLINICAL LEADERSHIP		
Medical Professional Leadership and Engagement		
a) Establish a refreshed clinical leadership model	Medical Director	Medical Director
Medical Education		
a) Liaison with Deanery and Royal Colleges	Medical Director	Associate Medical Director – Medical Education
Research & Governance		
a) Authorisation of Research projects	Medical Director	Director of Research & Development
b) Authorisation of sponsorship deals in relation to research projects	Medical Director	Director of Research & Development
QUALITY, SAFETY AND EXPERIENCE		
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 (Legal & Patient Experience)
b) Recording, receipt and initial acknowledgement of concern/complaint	Director of Nursing, Quality & Patient Experience	Assistant Director (Legal & Patient Experience)
c) Grading of concern/complaint	Director of Nursing, Quality & Patient Experience	Assistant Director (Legal & Patient Experience)
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
e) Investigation of complaint	Director of Nursing, Quality & Patient Experience	Grade 5 – Assurance & Safety Team Grade 1-3 - Patient Support Service with Service
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
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
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)
i) Checking of final draft prior to submission to Chief Executive for signature	Assistant Director of Patient Experience	Assistant Director of Patient Experience
j) Final check and sign of response to complainant	Chief Executive	Chief Executive or Deputy Chief Executive
k) Sending final response to complainant	Director of Nursing, Quality & Patient Experience	PA to Director of Nursing, Quality & Patient 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
b) Completion of Incident Form	Staff member involved in incident or in immediate area	Staff member involved in incident or in immediate area
c) Initial Investigation of Incident	Manager of staff member/person in charge of area	Manager of staff member/person in charge of area
d) Reporting of Serious Adverse Incident to Welsh Government	Chief Executive	Assistant Director of Quality & Governance
e) Arranging serious incident (SI) meeting	Director of Nursing, Quality & Patient Experience	Nominated Investigation Officer
f) Investigation of Serious Incidents	Director of Nursing, Quality & Patient Experience	Nominated Investigation Officer
g) Preparation of final report	Director of Nursing, Quality & Patient Experience	Nominated Investigation Officer
h) Agreement of final report prior to submission to the Director of Nursing, Quality, and Patient Experience	Nominated Investigation Officer	Nominated Investigation Officer
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)
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
k) Reporting of breaches under the Ionising Radiation (Medical Exposure) Regulations to Health Inspectorate Wales (HIW)	Director of Operations	Radiology Services Manager
l) Reporting of Data Protection breaches to Information Commissioners Office (ICO)	Director of Finance	Head of Information Governance
Approval of compensation for staff and patients personal effects, clinical negligence and personal injury claims	See SFI 17.2.2	See SFI 17.2.2
Submission of 'No Surprises' notifications to Welsh Government	Chief Executive	All Executive Directors/ Directors
Improving Patient Experience		
a) Developing a Patient Experience Strategy	Director of Nursing, Quality & Patient Experience	Assistant Director of Patient 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
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

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
b) Completing assessment and compliance with the standards	Director of Nursing, Quality & Patient Experience	Assistant Director of Quality & Governance
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
b) Approval of Hywel Dda Clinical Audit Plan	Quality, Safety & Experience Assurance Committee	Assistant Director of Quality & Service Improvement
Ethics & Clinical Trials		
a) Lead for Ethics and the establishment of an Ethics Committee	Medical Director	Medical Director
b) Authorisation of clinical trials	Medical Director	Director of Research & Development
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 & Development
National Institute of Clinical Excellence (NICE)		
a) Maintaining a record of publications and recording compliance	Medical Director	Clinical Effectiveness Co-ordinator
b) Responding to requirements and providing information regarding ability to meet requirements	All Executive Directors	All Executive Directors
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
b) Maintain record of publications and recording compliance	Director of Nursing, Quality & Patient Experience	Heads of Service
c) Responding to requirements and providing information regarding ability to meet requirements	All Executive Directors/Directors	All Executive Directors/Directors
Safeguarding of Adults and Children		
a) Implementation of policy and procedures	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing – Assurance & Safeguarding
b) Investigation in accordance with POVA requirements	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing – Assurance & Safeguarding
c) Safeguarding supervision	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing – Assurance & Safeguarding
Safeguarding – Deprivation of Liberties		
a) Supervising Authority	Director of Primary, Community & Long Term Care	Head of Long Term Care
b) Managing Authority	Director of Operations	Head of Consent & Mental Capacity
Management of Infections, Diseases & Notifiable Outbreaks	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing, Infection Prevention & Control
Coordination of Welsh Risk Pool Assessments		
a) A&E Services	Director of Operations	General Manager (Unscheduled Care)
b) Claims & Complaints	Director of Nursing, Quality & Patient Experience	Assistant Director (Legal & Patient Experience)
c) Maternity Services	Director of Operations	General Manager (Women's & Children's Services)
d) Surgical Pathway	Director of Operations	General Manager (Scheduled Care)
e) Theatres	Director of Operations	General Manager (Scheduled Care)
Professional Standards, Revalidation and Regulation – Medical & Dental		
a) Deliver in-year requirements for medical revalidation	Medical Director	Associate Medical Director – Professional Standards
b) Referral to General Medical Council (GMC)/General Dental Council (GDC)	Medical Director	Associate Medical Director – Professional Standards
c) Monitoring of registration (GMC/GDC regulatory compliance)	Medical Director	Associate Medical Director – Primary Care & Workforce
Management of Nurse Development, Revalidation and Practice Standards		
a) NMC revalidation process	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing – Practice, Workforce & Professional Standards
b) Referral to Nursing & Midwifery Council (NMC)	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing – Practice, Workforce & Professional Standards
c) Monitoring of registration (NMC regulatory compliance)	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing – Practice, Workforce & Professional Standards
Professional leadership for Therapies and Health Science	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Clinical Governance & Quality)
a) Health and Care Professions Council (HCPC) registration, education and standards		
b) Referral to appropriate Professional Body		
Develop a Health & Well-being Strategy & Health Needs Analysis for Hywel Dda population	Director of Public Health	Director of Public Health
Accountable Officer for Controlled Drugs	Medical Director	Head of Medicines Management
Value Based Healthcare	Medical Director/ Director of Finance	Medical Director/ Director of Finance
COMMISSIONING		
Development of a Primary Care Strategy	Chief Executive	Director of Primary Care, Community & Long Term Care
Development of a medicines optimisation strategy (primary & secondary care)	Director of Operations	Head of Medicines Management
Commissioning (including Primary Care Services)		
a) Approval to commission healthcare services from NHS, private, third sector or independent organisations	Director of Finance	Director of Finance
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
c) Maintaining a register of commissioning contracts	Director of Finance	Director of Finance
d) Ensuring every commissioning contract has a lead manager responsible for ensuring that contract delivers activity, quality and finance	Director of Finance	Director of Finance
e) Agreement of annual contract with existing providers and within existing budgets - NHS, third sector, independent or private	Director of Finance	Director of Finance
f) Agreement of contract variations	Director of Finance	Director of Finance
g) Agreement to provide services and payments in accordance with Medicines Management Incentive Scheme	Director of PC, Community & Long Term	Head of Medicines Management
h) Signing contracts of value < £50,000 and contract variations > £25,000	As per Scheme of Delegation and Authorised Limits	N/A
i) Signing contracts of value < £500,000 and contract variations > £125,000	As per Scheme of Delegation and Authorised Limits	N/A
j) Signing of contracts of value >£1,000,000	As per Scheme of Delegation and Authorised Limits	N/A
k) 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
l) 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 Finance	Director of Finance

m) 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 Finance	Director of Finance
n) 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 Finance	Nominate Lead Manager
o) 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 Finance	Nominate Lead Manager
p) Authorisation of invoices against contracts (within budget) excluding NHS Long Term Agreements (LTAs)	Director of Finance	As per Scheme of Delegation and Authorised Limits
q) Authorisation of invoices against NHS LTAs	Director of Finance	As per Scheme of Delegation and Authorised Limits
Commissioning of Continuing Healthcare and Funded Nursing Care		
All above sections in primary care commissioning section apply to this area - these are supplementary		
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
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
c) Authorising of invoices against agreed packages of care outside panel	Director of Primary Care, Community & Long Term Care	Head of Long Term Care
d) Authorising CHC retrospective claims including Powys and UHB claims	Director of Primary Care, Community & Long Term Care	Head of Long Term 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
Commissioning of cross border secondary and tertiary services for population (WHSCC)		
a) Attending Joint Committee meetings	Chief Executive	Chief Executive
b) Attending WHSSC Management Group	Chief Executive	Chief Executive
c) Input to WHSSC commissioning decisions and agreement to WHSSC policies	Chief Executive	Chief Executive
d) Dissemination of WHSSC commissioning policies throughout the organisation	Chief Executive	Chief Executive
e) Approving and signing the annual contract with WHSSC as commissioner	Chief Executive	Chief Executive
f) Agreeing contract variations with WHSSC	Chief Executive	Chief Executive
Commissioning Ambulance Services		
a) Attending Joint Committee meetings	Chief Executive	Chief Executive
b) Approving and signing the annual contract with EASC as commissioner	Chief Executive	Chief Executive
c) Agreeing contract variations with EASC	Chief Executive	Chief Executive
IPFR Process and Prior Approval (in line with HB policy & Procedures)		
a) Screening of IPFR requests submitted by patient/ clinicians	Medical Director	IPFR Manager
b) Chairing of the IPFR Panel	Medical Director	IPFR Manager
c) Decisions on clinically urgent IPFR requests which cannot wait for screening and panel process	Medical Director	IPFR Manager
d) Arrangements for Review panels of IPFR screening process and/or panel decision	Medical Director	IPFR Manager
e) Communication with patient and referring clinician	Medical Director	IPFR Manager/Team
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
OPERATIONAL		
Operational Delivery of		
a) Acute Services	Director of Operations	Triumvirates
b) Community Services	Director of Operations	Director of Primary Community & Long Term Care
c) Mental Health Services	Director of Operations	Director of Mental Health & LD
d) Learning Disability Services	Director of Operations	Director of Mental Health & LD
e) Delivery on targets as per operation delivery plan	Chief Executive	All Executive Directors/Directors
Operational Delivery of Out of Hours Commissioning		
a) Out of Hours Service	Director of Operations	Deputy Director of Operations
b) Integration with Unscheduled Care Service	Director of Operations	County Directors
Management of School Nursing & Health Visiting Service	Director of Public Health	Head of Children's Public Health Nursing AD
Establish revised children's partnership arrangements	Director of Public Health	AD Strategic Partnerships, Diversity & Inclusion
Providing assurance on screening services	Director of Public Health	Consultant in Public Health
Management of Substance Misuse Service	Director of Operations	Commissioning Manager – Substance Misuse
Designated Education Clinical Lead Officer (DECLO)		
	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science
Emergency planning, readiness & resilience (including business continuity)		
a) Compliance with Emergency Planning & Major Incidents – Civil Contingencies Act 2004	Director of Public Health	Head of Health Emergency Planning
b) Maintaining the organisation's Major Incident Plan	Director of Public Health	Head of Health Emergency Planning
c) Ensure all Directorates/Services/Departments have up to date Business Continuity Plans in place	Director of Public Health	Head of Health Emergency Planning
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, Asst Director Informatics, Deputy Director of Operations
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, Asst Director Informatics, Deputy Director of Operations
Fire	Director of Operations	
a) Adherence to fire precautions	Director of Operations	
Operational Health Records Management		
a) Physiotherapy Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
b) Occupational Therapy Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
c) Speech and language Therapy Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
d) Dietetics Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
e) Podiatry Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)

f) Orthoptic Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
g) Audiology Records	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
h) Cardio Physiologist Records.	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
i) Neurophysiology Records.	Director of Therapies & Health Science	Assistant Director of Therapies & Health Science (Professional Practice, Quality and Safety)
j) OOH Clinical service Records	Director of Operations	Deputy Director of Operations
k) Medical Records	Director of Operations	Health Records Manager
l) Community, district nursing and Primary Care Records (not Children's Services)	Director of Operations	County Director and Commissioners (each County)
m) Outpatient service records	Director of Operations	County Director - Cerdigion
n) Palliative care Records	Director of Operations	County Director - Camarthenshire
o) Nursing Records (not Community)	Director of Operations	Assistant Director (Operations, Quality and Nursing)
p) Mental Capacity Records	Director of Operations	Assistant Director (Operations, Quality and Nursing)
q) Specialist Nurse (tissue viability records)	Director of Operations	Assistant Director (Operations, Quality and Nursing)
r) Cancer Services Records	Director of Operations	General Manager (Acute services and Women, Children's and Cancer Services)
s) Community Paediatric Records	Director of Operations	General Manager (Acute services and Women, Children's and Cancer Services)
t) Acute Paediatric and Neonates Records	Director of Operations	General Manager (Acute services and Women, Children's and Cancer Services)
u) Community Children's Service Records	Director of Operations	General Manager (Acute services and Women, Children's and Cancer Services)
v) Midwifery and Women's health Records	Director of Operations	General Manager (Acute services and Women, Children's and Cancer Services)
w) Obstetrics and Gynaecology Records	Director of Operations	General Manager (Acute services and Women, Children's and Cancer Services)
x) Pathology Records	Director of Operations	Head of Service - Pathology
y) Radiology Records	Director of Operations	Radiology Services Manager
z) Cardiology Records	Director of Operations	Hospital General Manager - GGH USC
aa) Renal Records	Director of Operations	Hospital General Manager - GGH USC
ab) General Medicine Records	Director of Operations	Hospital General Managers
ac) Gastroenterology Records	Director of Operations	Hospital General Manager - BGH USC
ad) Neurology Records	Director of Operations	Hospital General Manager - BGH USC
ae) Stroke Records	Director of Operations	Hospital General Manager - WGH USC
af) Care of The Elderly	Director of Operations	Hospital General Manager - WGH USC
ag) General surgery, vascular, breast care records.	Director of Operations	General Manager - Scheduled Care
ah) Ophthalmology Records.	Director of Operations	General Manager - Scheduled Care
ai) Ear, Nose and Throat Records.	Director of Operations	General Manager - Scheduled Care
aj) Trauma and Orthopaedics Records.	Director of Operations	General Manager - Scheduled Care
ak) Plaster Services Records.	Director of Operations	General Manager - Scheduled Care
al) Dermatology Records	Director of Operations	General Manager - Scheduled Care
am) Rheumatology Records.	Director of Operations	General Manager - Scheduled Care
an) Theatres Records.	Director of Operations	General Manager - Scheduled Care
ao) Day Surgery Unit Records.	Director of Operations	General Manager - Scheduled Care
ap) Pre-assessment Records.	Director of Operations	General Manager - Scheduled Care
aq) Endoscopy Records.	Director of Operations	General Manager - Scheduled Care
ar) Anaesthetics Records.	Director of Operations	General Manager - Scheduled Care
as) Urology Records.	Director of Operations	General Manager - Scheduled Care
at) Critical Care Records.	Director of Operations	General Manager - Scheduled Care
au) Mental Health and Learning Disability Records.	Director of Operations	Director of Mental Health & Learning Disabilities
av) Psychology Records	Director of Operations	County Director - Ceredigion
aw) Acute Subject Access Requests	Director of Operations	Acute Records Manager
ax) Mental Health Subject Access Requests	Director of Operations	Mental Health Act Administrator
Operational quality and safety and effectiveness		
a) Implementing Hospital Patient Environment audits	Director of Operations	Director of Estates, Facilities & Capital Management
b) Decontamination	Director of Operations	Deputy Director of Operations
c) Capital equipment renewal & replacement	Director of Operations	Deputy Director of Operations
d) EBME	Director of Operations	Deputy Director of Operations
Medical Devices	Director of Operations	Deputy Director of Operations
Medicines Management	Director of PC, Community & Long Term Care	Head of Medicines Management
Estates		
a) Develop an estates strategy and rationalisation plan	Director of Strategic Development and Operational Planning	Director of Estates, Facilities & Capital Management
b) Compliance with environmental regulations	Director of Operations	Director of Estates, Facilities & Capital Management
c) Management of land, buildings, included leased assets	Director of Operations	Director of Estates, Facilities & Capital Management
d) Authorised holder of deed and controller of property	Director of Operations	Director of Estates, Facilities & Capital Management
e) District Valuer issues and negotiations	Director of Operations	Director of Estates, Facilities & Capital Management
f) Delivery of Capital Estates Projects	Director of Operations	Director of Estates, Facilities & Capital Management
g) Licences and leases for property	Director of Operations	Director of Estates, Facilities & Capital Management
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
b) Caldicott Standards and Action Plan	Director of Finance	Deputy Caldicott Guardian /Head of Information Governance
c) Development and revision of Information Sharing Protocols	Director of Finance	Head of Information Governance
d) IG Training Programme	Director of Finance	Assistant Director of Informatics
e) Data Quality	Director of Finance	Assistant Director of Informatics & all information Asset Owners
f) Management and control of computer systems and facilities to ensure achievement and compliance with national standards and IM&T strategy	Director of Finance	Assistant Director of Informatics
g) Purchases/installation of IT software & hardware	Director of Finance	Assistant Director of Informatics
h) Delivery of specific IT projects	Director of Finance	Assistant Director of Informatics
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
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 Business Planning & Performance Assurance Committee	Director of Finance	Head of Performance
c) Establish Performance Management Office	Director of Finance	Head of Performance
d) Provide assurance on the overall performance and delivery against Health Board plans and objectives	Director of Finance	Head of Performance

NHS Shared Services Partnership		
a) Attending Joint Committee meetings	Chief Executive	Director of Finance
b) Agreeing actions to be taken where performance is off track	Chief Executive	Director of Finance
c) Ensure robust interface protocols are in place and test efficacy on a planned programme of review	Chief Executive	Director of Finance
CORPORATE		
Corporate Governance, Assurance Framework & Risk Management		
a) Develop Board Risk Appetite Statement	Board	Board Secretary
b) Review internal risk management processes	Board Secretary	Head of Assurance & Risk
c) Management & maintenance of Corporate Risk Register	Board Secretary	Head of Assurance & Risk
d) Management & maintenance of Directorate/Clinical Risk Registers	Executive Directors	Heads of Departments/Head of Service/General Managers
e) Development of Board Assurance Framework	Board Secretary	Head of Assurance & Risk
f) Implement recommendations from external governance reviews	Board Secretary	All Executive Directors
Policies & Procedures (written control documents)		
a) Maintaining a database of all written control documents	Board Secretary	Lead Clinical Pharmacist
b) Manage the process for developing and reviewing written control documents	Board Secretary	Lead Clinical Pharmacist
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
Board Secretariat	Board Secretary	Head of Corporate & Partnership Governance
Board Development & Committee Management		
a) Establish a process for establishment & abolition of committees and groups	Board Secretary	Head of Corporate & Partnership Governance
b) Establish procedures on the management of committees and groups to ensure consistency and good governance	Board Secretary	Head of Corporate & Partnership Governance
c) Board and Committee development	Board Secretary	Head of Corporate & Partnership Governance
Regulatory and inspections coordination and assurance	Board Secretary	Head of Assurance & Risk
Legal Advice		
a) Engagement of UHB solicitors	Board Secretary	Assistant Director of Corporate Legal Services and Public Affairs
b) Authority to seek legal advice – all issues	Board Secretary	Assistant Director of Corporate Legal Services and Public Affairs
Arrangements that appropriate insurance/indemnity is in place	Director of Nursing, Quality & Patient Experience	AD of Nursing (Quality, Assurance & Professional Regulation)
Maintenance of the University status of the organisation	Medical Director	Deputy Director for Research & Innovation
Freedom of information Act (FOI)		
a) Coordinate the collecting of information to prepare FOI responses within statutory deadlines	Board Secretary	AD of Corporate Legal Services and Public Affairs
b) Sign off of Final Responses	Relevant Lead Executive Director	AD of Corporate Legal Services and Public Affairs
c) Undertake internal reviews/complaints relating to FOI	Director of Nursing, Quality and Patient Experience	Director of Nursing, Quality and Patient Experience
Public Engagement		
a) Develop and implement public engagement strategy	Chief Executive	Communication & Engagement Director
b) Ensure public participation in service design and decision making	Chief Executive	Communication & Engagement Director
Stakeholder Engagement & Management (including armed forces)		
a) Organising a continuous programme of stakeholder events across Hywel Dda	Chief Executive	Communication & Engagement Director
b) Supporting services in engaging with staff, patients and the public during service change	Chief Executive	Communication & Engagement Director
c) Engaging with armed forces, carers, staff, refugees, asylum seekers and those with sensory impairment	Chief Executive	AD Strategic Partnerships, Diversity & Inclusion
Communications		
a) External Communications including relationships with press, key stakeholders and the public	Chief Executive	Communication & Engagement Director
b) Internal communications with staff (Corporate Information)	Chief Executive	Communication & Engagement Director
c) Developing and maintaining the organisation's external website, staff intranet, social media and e-communications	Chief Executive	Communication & Engagement Director
Sponsorship		
a) Sponsorship to attend courses and conferences	Executive Directors	Individual is responsible for completing Gifts, Hospitality & Sponsorship form
b) Sponsorship of HB events	Chief Executive	Communication & Engagement Director
Advertising		
a) Relating to recruitment	Director of Workforce & OD	Communication & Engagement Director
b) Other	Chief Executive	Communication & Engagement Director
Welsh Language		
a) Compliance with the Welsh Language Act 1993 and the Welsh Language Standards	Chief Executive	Communication & Engagement Director
b) Welsh translation services	Chief Executive	Communication & Engagement Director
c) Welsh Language Strategy and development	Chief Executive	Communication & Engagement Director
Partnership Governance		
a) Maintain a partnership governance framework to ensure a consistent approach of working across partners	Director of Public Health	AD Strategic Partnerships, Diversity & Inclusion
b) Performance management and monitoring of outcomes of work delivered through partnerships and other inter-organisational arrangements	Director of Public Health	
International Health Partnerships	Director of Public Health	Director of Public Health
Equality, Diversity and Human Rights Compliance with the Equality Act 2010 and Public Sector Equality Duty (2016)	Director of Public Health	AD Strategic Partnerships, Diversity & Inclusion
Committee Lead		
a) Public Board	Chief Executive	Chief Executive
b) Audit and Risk Assurance Committee	Board Secretary	Board Secretary
c) People Planning and Performance Assurance Committee	Director of Strategic Development Operational Planning/Director of Workforce & OD	Director of Finance/Director of Workforce & OD
d) Quality, Safety and Experience Assurance Committee	Director of Nursing, Quality and Patient Experience	Director of Nursing, Quality and Patient Experience

e) Charitable Funds Committee	Director of Nursing, Quality and Patient Experience	Director of Nursing, Quality and Patient Experience
f) Mental Health Legislation Assurance Committee	Director of Operations	Director of Operations
g) Finance Committee	Director of Finance	Director of Finance
h) Health & Safety Assurance Committee	Director of Nursing, Quality and Patient Experience	Director of Nursing, Quality & Patient Experience
i) Remuneration and Terms of Service Committee	Chief Executive	Chief Executive
WORKFORCE		
Staff Engagement and Support a) Occupational Health Service b) Staff psychological well-being c) Staff communication (corporate) d) Staff engagement on service change	Director of Workforce & OD Director of Workforce & OD Director of Workforce & OD Chief Executive	Assistant Director of Workforce Assistant Director of OD Communication & Engagement Director Communication & Engagement Director
Workforce Planning, recruitment and retention a) Develop & implement a workforce strategy 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 Director of Workforce & OD	Assistant Director of OD Assistant Director of OD
Organisational Development Strategy	Director of Workforce & OD	Assistant Director of OD
Staff Side and Employee Relations	Director of Workforce & OD	Assistant Director of Workforce
Workforce Equality and Diversity	Director of Workforce & OD and Director of Public Health	Assistant Director of OD and AD Strategic Partnerships, Diversity & Inclusion
Medical Staffing		
a) Authorisation above medical and locum cap	Medical Director	Assistant Director (Medical Directorate)
b) Job Planning	Medical Director	Assistant Director (Medical Directorate)
c) Monitoring and quality assurance of job plans	Medical Director	Assistant Director (Medical Directorate)
Disciplinary investigations and dismissal of staff		
a) Chief Executive i) Suspension/Exclusion ii) Dismissal	Chair of the Board Chair of the Board	
b) Director i) Suspension/Exclusion ii) Dismissal	Chief Executive Chief Executive	
c) All Other Staff (excluding Medical and Dental staff) i) Suspension/Exclusion ii) Dismissal	Appropriate Line Manager (must be minimum of Band 7) Appropriate Senior Manager (normally will be minimum of Band 8)	
d) Medical and Dental staff i) Suspension/Exclusion ii) Dismissal	See UPSW (or any subsequent policy which replaces UPSW) Medical Director (or nominated deputy)	
Workforce policies and procedures	Director of Workforce & OD	Assistant Director of Workforce
Finance Professional Leadership	Director of Finance	Assistant Directors of Finance and Head of Service Modernisation

Legislation Compliance			
REF	DELEGATED MATTER	DELEGATED TO	OPERATIONAL RESPONSIBILITY
LEGISLATION COMPLIANCE			
Key Legislative Frameworks			
Concerns	NHS Redress (Wales) Measure 2008 (2008 nawm1) - Measures of the Welsh 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 (Legal & Patient Experience)
Concerns	The National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011	Director of Nursing, Quality & Patient Experience	Assistant Director (Legal & Patient Experience)
Corporate	The Well-being of Future Generations (Wales) Act 2015	Director of Public Health	AD Strategic Partnerships, Diversity & Inclusion
Corporate	Social Services and Well-being (Wales) Act 2014	Director of Primary Care, Community and Long Term Care	AD Strategic Partnerships, Diversity & Inclusion
Equality	Equality Act 2010 - A legal framework to protect the rights of individuals and advance equality of opportunity for all	Director of Public Health	AD Strategic Partnerships, Diversity & Inclusion
Equality	Human Rights Act 1998 - Codifies the protections in the European Convention on Human Rights into UK law	Director of Public Health	AD Strategic Partnerships, Diversity & Inclusion)
Equality	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	Communication & Engagement Director
Estates	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
Estates	Energy Act 2008 (c.32) - Combined Heat and Power Quality Assurance (CHPOA)	Director of Operations	Director of Estates, Facilities & Capital Management
Health & Safety	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, Asst Director Informatics, Deputy Director of Operations
Health & Safety	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, Assistant Director Informatics, Deputy Director of Operations
Health & Safety	Ionising Radiation (Medical Exposure) Regulations 1999	Director of Therapies and Health Science	Head of Radiology
Information Governance	General Data Protection Regulations 2018 – • Protection of personal information • Non Medical Subject Access Requests • Acute Subject Access Requests • Mental Health Subject Access Requests	Director of Planning, Performance & Commissioning Director of Planning, Performance & Commissioning Director of Operations Director of Operations	Assistant Director of Informatics and Head of Information Governance Assistant Director of Informatics and Head of Information Governance Acute Records Manager MH Administrator
Information Governance	Access to Health Records Act 1990 - Access to the health records of a deceased person	Director of Operations	Health Records Manager/ MH Administrator
Information Governance	Common Law duty of Confidentiality	Director of Finance	Assistant Director of Informatics
Information Governance	Computer Misuse Act 1990 – Securing computer material against unauthorised access or modification; and for connected purposes	Director of Finance	Assistant Director of Informatics
Information Governance	Freedom of Information Act 2000 - Provides public access to information held by public authorities	Board Secretary	Assistant Director of Corporate Legal Services and Public Affairs

Medicines Management	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
Medicines Management	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
Medicines Management	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
Mental Health	Mental Health Act 1983	Director of Operations	Director of Mental Health
Mental Health	Mental Health (Wales) Measure 2010	Director of Operations	Director of Mental Health
Patient Safety	Human Tissue Act 2004 – Licence Holder	Director of Therapies and Health Science	Consultant Histopathologist (Pathology Lead)
Patient Safety	Human Transplantation (Wales) Act 2013	Director of Operations	Consultant Histopathologist (Pathology Lead)
Patient Safety	Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing, Assurance & Safeguarding
Patient Safety	Nurse Staffing Levels (Wales) Act 2016	Director of Nursing, Quality & Patient Experience	Assistant Director of Nursing (Practice)
Public Health	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	Head of Health Emergency Planning
Public Health	Smoke-Free Premises (Wales) Regulations 2007	Director of Public Health	Public Health Officer (Tobacco)
Public Involvement	Local Government and Public Involvement in Health Act 2007 (c.28) – Disclosure of information, ethical standards, patient and public involvement	Director of Public Health	Communication & Engagement Director
Public Safety	Civil Contingencies Act 2004 - Establishes a coherent framework for emergency planning	Director of Public Health	Head of Health Emergency Planning
Safeguarding	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
Safeguarding	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
Safeguarding	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
Safeguarding	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