

**Clinical Commissioning Group Governing Body
Paper Summary Sheet
Date of Meeting: 27 September 2016**

For: PUBLIC session PRIVATE Session

For: Decision Discussion Noting

Agenda Item and title:	GOV/16/09/12 Scheme of Reservation and Scheme of Delegation
Author:	Ian Loveys, Financial Accountant Susannah Long, Governance & Risk Manager
Lead Director/GP from CCG:	David Noyes, Director of Planning, Performance and Corporate Services
Executive summary:	<p>The Scheme of Reservation and Scheme of Delegation are part of the CCG's governance framework. They identify those decisions and actions which are reserved to the Governing Body and what is delegated to committees and individuals.</p> <p>The Scheme of Reservation is supported by the Scheme of Delegation, committee terms of reference and individuals' job description.</p> <p>NHS Wiltshire CCG has not previously held a separate Scheme of Reservation.</p>
Evidence in support of arguments:	The schemes together provide a comprehensive document defining roles and responsibilities within the CCG.
Who has been involved/contributed:	The Financial Accountant, supported by the Finance Team, and the Governance & Risk Manager have prepared these documents based on good practice examples.
Cross Reference to Strategic Objectives:	The schemes contribute to all strategic objectives.
Engagement and Involvement:	The schemes have been reviewed and agreed by the Audit & Assurance Committee with relevant input from Internal and External Audit.
Communications Issues:	The schemes will form part of the updated CCG Constitution and will be made available on the internet.

Financial Implications:	There are no direct financial implications.
Review arrangements:	The schemes will be reviewed on an ongoing basis.
Risk Management:	The schemes support the governance arrangements in the CCG.
National Policy/ Legislation:	The documents support the Health & Social Care Act 2012.
Equality & Diversity:	The report has no negative E&D impact.
Other External Assessment:	The schemes will contribute to external assessments.
What specific action do you wish the Governing Body to take?	The Governing Body is asked to approve the Scheme of Reservation and the updated Scheme of Delegation.

SCHEME OF RESERVATION

The following items and areas for decision are reserved to the CCG Governing Body:

Reservations to the CCG Governing Body	
Body/individual	Reservation
GOVERNING BODY	<p>General Enabling Provision</p> <p>The Governing Body may determine any matter, for which it has delegated or statutory authority, it wishes in full session within its statutory powers</p>
GOVERNING BODY	<p>Functions</p> <p>The functions that the Clinical Commissioning Group (CCG) is responsible for exercising are largely set out in the 2006 Act, as amended by the 2012 Act. An outline of these appears in the Department of Health's <i>Functions of Clinical Commissioning Groups</i>. They relate to:</p> <ul style="list-style-type: none"> a) commissioning certain health services (where NHS England is not under a duty to do so) that meet the reasonable needs of: <ul style="list-style-type: none"> i) all people registered with Member GP practices, and ii) people who are usually resident within the area and are not registered with a member of any Clinical Commissioning Group; b) commissioning emergency care for anyone present in the CCG's area; c) paying its employees' remuneration, fees and allowances in accordance with the determinations made by its Governing Body and determining any other terms and conditions of service of the CCG's employees; d) determining the remuneration and travelling or other allowances of members of its Governing Body.

Body/individual	Reservation
GOVERNING BODY	<p data-bbox="488 236 786 264">Regulations and Control</p> <ol data-bbox="488 309 2049 912" style="list-style-type: none"> 1. Approve the CCG Constitution, Standing Orders (SOs), a schedule of matters reserved to the Governing Body and Prime Financial Polices for the Regulation of its proceedings and business. 2. Suspend Standing Orders. 3. Vary or amend the Standing Orders. 4. Approve a scheme of delegation of powers from the Governing Body to other committees and to CCG officers. 5. Adopt the organisational structures, processes and procedures to facilitate the discharge of business by the CCG and to agree modifications thereto. 6. Receive reports from committees including those that the CCG is required by the Secretary of State for Health or Other Regulation to establish and to action appropriately. 7. Confirm the recommendations of the CCG's committees where the committees do not have executive powers. 8. Establish terms of reference and reporting arrangements of all committees and sub-committees that are established by the Governing Body. 9. Ratify use of the seal. 10. Approve any urgent decisions taken by the Chair of the CCG and Accountable Officer for ratification by the CCG in public session in accordance with SO 5.2. 11. Governing Body members share corporate responsibility for all decisions of the Governing Body. 12. Subscribe to the Code of Conduct.

Body/individual	Reservation
GOVERNING BODY	<p data-bbox="488 236 808 264">Strategy and Performance</p> <ol data-bbox="488 309 2042 868" style="list-style-type: none"> 1. Approve the three year business plan, medium term financial strategy, workforce, capital and IT plans. 2. Approve annual business plan and budget. 3. Define the strategic aims and objectives of the CCG. 4. Identify the key strategic risks, evaluate them and ensure adequate responses are in place and are monitored. 5. Approve proposals for ensuring quality and developing clinical governance in services commissioned by the CCG, having regard to any guidance issued by the Secretary of State for Health. 6. Commission health services for all the population in accordance with the requirements of the NHS Operating Framework and all other relevant national policy and guidance. 7. Ensure clinicians are engaged in the development and implementation of the strategic plan. 8. Assure implementation of the strategic plan 9. Ensure contracts with all providers reflect the requirements of the NHS Operating Framework and strategic plan. 10. Ensure required performance against all NHS Operating Framework requirements, all strategic plan requirements and all contract requirements is achieved. 11. Approve the CCG's proposed organisational development proposals. 12. Decisions relating to service reconfiguration i.e. service changes requiring formal consultation. 13. Formal adoption of a commissioning policy which has legal or budget implications e.g. restricted procedures policy.

Body/individual	Reservation
GOVERNING BODY	<p data-bbox="488 236 801 260">Finance and Procurement</p> <ol data-bbox="488 309 2033 1161" style="list-style-type: none"> 1. Ensure all financial duties are achieved. 2. Ensure all QIPP programme requirements are achieved. 3. Approve (with any necessary appropriate modification) the CCG annual Financial Strategy. 4. Approve decisions to procure for contracts exceeding or likely to exceed £10,000,000.00 (£10m) over a period of 3 years (or the period of contract if longer). 5. Approve award of Capital or Revenue Healthcare or Non Healthcare contracts exceeding or likely to exceed £10,000,000.00 (£10m) over a period of 3 years (or the period of contract if longer). 6. Approval to go to tender for contract values greater than £100,000.00. 7. Approve service developments or investment in new services greater than £500,000.00. 8. Approve annual budgets, which will be enacted by budget managers through the separate scheme of budgetary delegation. 9. Ratify budget virements for expenditure greater than £500,000.00. 10. Approve Outline and Final Business Cases for Capital Investment if this represents a variation from the plan. 11. Ratify proposals for acquisition, disposal or change of use of land and/or buildings. 12. Approve proposals in individual cases for the write off of losses above the limits of delegation to the Audit Committee. 13. Approve individual special payments including ex gratia payments to patients or staff for loss of personal effects greater than £15,000.00. 14. Approve individual compensation payments as follows: <ul data-bbox="533 922 1503 1058" style="list-style-type: none"> • To staff and former staff greater than £50,000.00; • To patients and former patients (non NHSLA) greater than £10,000.00; • As directed by the NHSLA; • Made under legal obligation. 15. To approve single items of loss in excess of £10,000.00. 16. Approve proposals for CCG or practice incentive schemes, having regard to guidance by the Secretary of State for Health. 17. Receipt and approval of the CCG's Annual Report and Annual Accounts.

Body/individual	Reservation
GOVERNING BODY	<p>Governance</p> <ol style="list-style-type: none"> 1. Approve and act in accordance with the Standards of Business Conduct and Conflicts of Interest Policy. 2. Require and receive the declaration of Governing Body members' interests which may conflict with those of the CCG and, taking account of any waiver which the Secretary of State for Health may have made in any case, determining the extent to which that member may remain involved with the matters under consideration. 3. Require and receive the public Register of Declarations of Interests that may potentially conflict with those of the CCG. 4. Approve the CCG's policies and procedures for the management of risk. 5. Approve the framework for procedural documents including relevant delegation to Committees of the Governing Body. 6. Approval of CCG Strategies. 7. Approve the CCG policy for Health & Safety. 8. Approve the CCG EPRR arrangements and policy. 9. Ensure proper and widely publicised procedures for voicing complaints, concerns about maladministration, breaches of Code of Conduct, and other ethical concerns. 10. Receipt of such reports as the Governing Body sees fit from the other committees in respect of its exercise of powers delegated.
GOVERNING BODY	<p>Audit</p> <ol style="list-style-type: none"> 1. Approve the appointment (and where necessary dismissal) of External Auditors (and where necessary change/removal) of External Audit and to receive reports of the Audit Committee meetings and take appropriate action. 2. Approve the appointment of an Auditor Panel to oversee the procurement of external audit services. 3. Receive the Annual Audit Letter received from the External Auditor and agreement of proposed action, taking account of the advice, where appropriate, of the Audit Committee. 4. Receive an Annual Report from the Internal Auditor and agree action on recommendations taking account of advice, where appropriate, of the Audit Committee. 5. To receive reports from the Audit Committee and take appropriate action, including recommendations on the treatment of losses and special payments. 6. Approve the appointment (and where necessary change or removal) of internal audit service providers.

Body/individual	Reservation
GOVERNING BODY	<p>Appointments / Dismissal</p> <ol style="list-style-type: none"> 1. Approve appointments and dismissals of members of the Governing Body in line with the CCG Constitution. 2. Appoint and dismiss other committees (and individual members thereof) that are directly accountable to the Governing Body in line with the CCG Constitution. 3. Confirm appointment of members of any committee of the CCG as representatives on outside bodies. 4. Approve proposals of the Remuneration Committee. 5. Appoint members of the Governing Body as Senior Information Risk Officer (SIRO), Caldicott Guardian, Security Director, Whistleblowing Guardian, Whistleblowing Director and Conflicts of Interest Guardian.

The following items and areas for decision are delegated to the Accountable Officer:

Delegations by the Governing Body to the Accountable Officer	
Body/individual	Delegation
ACCOUNTABLE OFFICER	<p>Role of the Accountable Officer</p> <p>This role of Accountable Officer is defined in the Constitution as:</p> <p>a) Being responsible for ensuring that the Group fulfils its duties to exercise its functions effectively, efficiently and economically thus ensuring improvement in the quality of services and the health of the local population whilst maintaining value for money;</p> <p>b) At all times ensuring that the regularity and propriety of expenditure is discharged, and that arrangements are put in place to ensure that good practice (as identified through such agencies as the Audit Commission and the National Audit Office) is embodied and that safeguarding of funds is ensured through effective financial and management systems.</p> <p>c) Working closely with the Chair of the Governing Body, the Accountable Officer will ensure that proper constitutional, governance and development arrangements are put in place to assure the Members (through the Governing Body) of the organisation's ongoing capability and capacity to meet its duties and responsibilities.</p> <p>This will include arrangements for the ongoing developments of its Members and staff.</p>
ACCOUNTABLE OFFICER	<p>Regulation and Control</p> <ol style="list-style-type: none"> 1. Advise on risk, quality and governance, having regard to any guidance by the Secretary of State for Health, and including preparation of proposals to develop and monitor clinical standards in the CCG and its constituent member practices. 2. Ratify or otherwise, instances of failure to comply with Standing Orders brought to the Accountable Officer's attention. Such failures to be reported to the CCG in formal session. 3. If the Accountable Officer considers the Governing Body is doing something that might infringe probity or regularity, he/she should set this out in writing to the Chair and the Governing Body. If the matter is unresolved, he/she should ask the Audit Committee to inquire and if necessary NHS England and ultimately the Department of Health. 4. Sealing of documents. 5. Variation to approved banking signatories.

Body/individual	Delegation
ACCOUNTABLE OFFICER	<p>Strategy and Performance</p> <ol style="list-style-type: none"> 1. Prepare the strategic plan for approval by the Governing Body. 2. Advise the Governing Body and Membership on the strategic aims and objectives of the CCG. 3. Ensure continuous appraisal of the affairs of the CCG by means of the provision of information to the Governing Body as the Governing Body may require from committees and officers of the CCG. 4. The Accountable Officer is accountable for ensuring that the Governing Body's decisions are implemented, that the organisation works effectively and in accordance with government policy, for public service values and for the maintenance of proper stewardship. The Accountable Officer should be allowed full scope, within clearly defined delegated powers, for action in fulfilling the decisions of the Governing Body. 5. Follow through the implementation of any recommendations affecting good practice as set out in reports from such bodies as the National Audit Office (NAO) and other relevant bodies. 6. Prepare, consider and endorse the CCG's draft Annual Report for approval by the Governing Body.
ACCOUNTABLE OFFICER	<p>Finance and Procurement</p> <ol style="list-style-type: none"> 1. Responsibility to keep expenditure within budgets and to ensure that budgets are only used for the type of expenditure for which they have been set. 2. Budget virements for income and expenditure between £25,000.00 and £500,000.00. 3. Approve decisions to procure for contracts up to or likely to reach a maximum of £9,999,999.99 over a period of 3 years (or the period of contract if longer). 4. Approve award of Capital or Revenue Healthcare or Non Healthcare contracts up to or likely to reach a maximum of £9,999,999.99 over a period of 3 years (or the period of contract if longer). 5. Approve service developments or investment in new services up to £500,000.00. 6. Approve Outline and Final Business Cases for Capital Investment if the case is within the annual plan. If the case is outwith the plan, preparation of advice to the CCG. 7. Advise on acquisition, disposal or change of use of land and/or buildings. 8. Advise on approval of individual compensation payments. 9. Approve purchase orders and invoices with no purchase order, including capital expenditure, up to £150,000.00. 10. Approve Continuing Healthcare packages and Mental Health/LD placements with an annual cost greater than £150,000.00. 11. Decision to terminate a contract before end of contract term. 12. Approve individual special payments including ex gratia payments to patients or staff for loss of personal effects between £1,000.00 and £15,000.00, advising the Governing Body for payments greater than £15,000.00.

	<p>13. Approve individual compensation payments as follows:</p> <ul style="list-style-type: none"> • To staff and former staff up to £50,000.00; • To patients and former patients (non NHSLA) up to £10,000.00. <p>14. Achieve value for money from the resources available to the CCG and avoid waste and extravagance in the organisation's activities. Use to best effect the funds available for commissioning healthcare, developing services and promoting health to meet the needs of the local population. If the Clinical Commissioning Group is contemplating a course of action that raises an issue not of formal propriety or regularity but affects the Accountable Officer's responsibility for value for money, the Accountable Officer should draw the relevant factors to the attention of the Governing Body. If the outcome is an over-ruling it is normally sufficient to ensure that the advice and overruling of it are clearly apparent from the minutes. Exceptionally, the Accountable Officer should inform NHS England and ultimately the Department of Health. In such cases, the Accountable Officer should as a member of the Governing Body vote against the course of action rather than merely abstain from voting.</p>
ACCOUNTABLE OFFICER	<p>Governance</p> <ol style="list-style-type: none"> 1. Sign a statement in the accounts outlining responsibilities as the Accountable Officer. 2. Sign a statement in the accounts outlining responsibilities in respect of Internal Control. 3. Comply with the NHS Standards of Conduct and the CCG Standards of Business Conduct Policy. 4. Declare all interests in line with the Standards of Business Conduct Policy. 5. Declare all gifts, hospitality and sponsorship in line with the Standards of Business Conduct Policy. 6. Authorise acceptance of sponsorship. 6. Ensure effective management systems that safeguard public funds and assist CCG Chair to implement requirements of integrated governance including ensuring managers: <ul style="list-style-type: none"> • have a clear view of their objectives and the means to assess achievements in relation to those objectives; • be assigned well defined responsibilities for making best use of resources; • have the information, training and access to the expert advice they need to exercise their responsibilities effectively. 7. Implement requirements of corporate governance. 8. Report an incident to the Police where a fraud is involved.
ACCOUNTABLE OFFICER	<p>Appointments / Dismissal</p> <ol style="list-style-type: none"> 1. Approve application for ill health retirement. 2. Decisions on redundancy. 2. Appointment of staff to post not on the establishment.

The following items and areas for decision are delegated to the Chief Finance Officer

Delegations by the Governing Body to the Chief Finance Officer	
Body/individual	Delegation
CHIEF FINANCE OFFICER	<p>Role of the Chief Finance Officer</p> <ol style="list-style-type: none"> 1. Prepare and review annually draft plans in respect of the application of available financial resources to support the agreed annual plans for approval by the Governing Body. 2. Operational responsibility for effective and sound financial management, information and procedures. 3. Ensure that expenditure by the CCG complies with Parliamentary requirements. 4. Ensure the accounts of the CCG are prepared under principles and in a format directed by the Secretary of State for Health. Accounts must disclose a true and fair view of the CCG's income and expenditure and its state of affairs. Sign the accounts on behalf of the Governing Body.
CHIEF FINANCE OFFICER	<p>Regulation and Control</p> <ol style="list-style-type: none"> 1. Sealing of documents. 2. Approval of banking arrangements. 3. Variation to approved banking signatories. 4. Approving payments for GBS bank account (RFT and BACS payments). 5. Approving cheque payments from GBS Bank account.

Body/individual	Delegation
CHIEF FINANCE OFFICER	<p>Finance and Procurement</p> <ol style="list-style-type: none"> 1. Responsibility to keep expenditure within budgets and to ensure that budgets are only used for the type of expenditure for which they have been set. 2. Budget virements for income and expenditure greater than £25,000.00. 3. Contracts signature (all values). 4. Approve sales orders. 5. Approve service developments or investment in new services up to £500,000.00. 6. Approve Continuing Healthcare packages and Mental Health/LD placements with an annual cost greater than £150,000.00. 7. Commitment to fund exceptional treatments or care over £100,000.00. 8. Approval of pre-payments (excluding subscriptions and training course fees). 9. Payments including payroll deductions, Pension Pay overs and other payroll deductions (known as balance sheet payments). 10. Approval to go to tender for contract values up to £100,000.00. 11. Approval to accept tender/quote other than the lowest that met the award criteria. 12. Waiving of quotations and tenders. 13. Decision to terminate a contract before end of contract term. 14. Approve individual special payments including ex gratia payments to patients or staff for loss of personal effects up to £1,000.00. 15. Approve individual compensation payments as follows: <ul style="list-style-type: none"> • To patients and former patients (non NHSLA) up to £10,000.00. 16. Approval for salary advances. 17. Approval to carry forward in excess of 5 days annual leave in exceptional circumstances. 18. Cancellation of invoices relating to current financial year or previous financial years, where invoice is to be re-raised for the same value, due to errors on the original invoice. 19. Cancellation of invoices relating to current financial year or previous financial years, where invoice is NOT subsequently re-raised due to the original invoice being incorrectly raised and funds not due to the CCG. 20. Write off non-pay bad debt relating to current or previous year (all values). 21. Authority to pursue legal action for bad debts. 22. Write off salary overpayment debt (all values). 23. Issuing of petty cash above £35 per claim.

Body/individual	Delegation
CHIEF FINANCE OFFICER	<p>Governance</p> <ol style="list-style-type: none"> 1. Comply with the NHS Standards of Conduct and the CCG Standards of Business Conduct Policy. 2. Declare all interests in line with the Standards of Business Conduct Policy. 3. Declare all gifts, hospitality and sponsorship in line with the Standards of Business Conduct Policy. 4. Maintenance of up-to-date financial policies and procedures. 5. Ensuring appropriate insurance cover is in place for: <ul style="list-style-type: none"> • Property and assets • Public liability • Employee liability 6. Maintain losses and special payments register. 7. Implement requirements of corporate governance. 8. Report losses through suspected fraud and theft. 9. Report an incident to the Police where a fraud is involved.
CHIEF FINANCE OFFICER	<p>Audit</p> <ol style="list-style-type: none"> 1. Ensure that audit plans are delivered within specification and timescale.
CHIEF FINANCE OFFICER	<p>Appointments / Dismissal</p> <ol style="list-style-type: none"> 1. Approve recruitment request forms. 2. Appointment of staff on paygrade above scale minimum. 3. Decisions on redundancy. 4. Engagement of consultancy services. 5. Appointment of staff to post not on the establishment.

The following items and areas for decision are delegated to the Chair:

Delegations by the Governing Body to the Chair	
Body/Individual	Delegation
CHAIR	<p>Role of the Chair</p> <p>The Chair of the Governing Body is responsible for:</p> <ul style="list-style-type: none"> a) Leading the Governing Body, ensuring it remains continuously able to discharge its duties and responsibilities as set out in this Constitution; b) Building and developing the Group’s Governing Body and its individual Members; c) Ensuring that the Group has proper constitutional and governance arrangements in place; d) Ensuring that, through the appropriate support, information and evidence, the Governing Body is able to discharge its duties; e) Supporting the Accountable Officer in discharging the responsibilities of the organisation; f) Contributing to building a shared vision of the aims, values and culture of the organisation; g) Leading and influencing to achieve clinical and organisational change to enable the Group to deliver its commissioning responsibilities; h) Overseeing governance and particularly ensuring that the Governing Body and the wider Group behaves with the utmost transparency and responsiveness at all times; i) Ensuring that public and patients’ views are heard and their expectations understood and, where appropriate as far as possible, met; j) Ensuring that the organisation is able to account to its local patients, stakeholders and NHS England; k) Ensuring that the Group builds and maintains effective relationships, particularly with the individuals involved in overview and scrutiny from the relevant Local Authority(ies) l) Ensuring that effective succession planning processes are in place. <p>Where the Chair of the Governing Body is also the senior clinical voice of the Group they will take the lead in interactions with stakeholders, including NHS England.</p>
CHAIR	<p>Finance and Procurement</p> <ul style="list-style-type: none"> 1. Approve service developments or investment in new services between £150,000.00 and £500,000.00.

Body/Individual	Delegation
CHAIR	<p>Governance</p> <ol style="list-style-type: none"> 1. Comply with the NHS Standards of Conduct and the CCG Standards of Business Conduct Policy. 2. Declare all interests in line with the Standards of Business Conduct Policy. 3. Declare all gifts, hospitality and sponsorship in line with the Standards of Business Conduct Policy.

To note:

DEPUTY CHAIR	<p>Role of the Deputy Chair</p> <p>The Deputy Chair of the Governing Body deputises for the Chair of the Governing Body where he or she has a conflict of interest or is otherwise unable to act. The Deputy Chair shall automatically become the Chair of the Governing Body for the interim period where a Chair has been removed from office or during an extended period of sickness absence, maternity leave or equivalent and another Chair is not immediately appointed.</p>
NON OFFICER MEMBERS	<p>Role of Non Officer Members</p> <p>Each member of the Governing Body should share responsibility as part of a team to ensure that the Group exercises its functions effectively, efficiently and economically, with good governance and in accordance with the terms of this Constitution. Each brings their unique perspective, informed by their expertise and experience.</p>

Delegation to committees

The following are delegated to the Audit and Assurance Committee:

Delegations by the Governing Body to the Audit and Assurance Committee	
Body/individual	Delegation
AUDIT AND ASSURANCE COMMITTEE	<ul style="list-style-type: none"> a) Ensuring there is an effective internal audit function established by management, that meets mandatory NHS Internal Audit Standards and provides appropriate independent assurance to the Audit Committee, Accountable Officer and Governing Body; b) Reviewing the work and findings of the external auditor and considering the implications of and management's responses to their work; c) Reviewing the findings of other significant assurance functions, both internal and external to the organisation, and considering the implications for the governance of the organisation; d) Ensuring that the systems for financial reporting to the Governing Body, including those of budgetary control, are subject to review as to completeness and accuracy of the information provided to the Governing Body; e) Reviewing financial and information systems and monitoring the integrity of the financial statements and reviewing significant financial reporting judgements; f) Reviewing the establishment and maintenance of an effective system of integrated governance, risk management and internal control, across the whole of the organisation's activities (both clinical and non-clinical), that supports the achievement of the organisation's objectives; g) Monitoring compliance with Standing Orders and Standing Financial Instructions; h) Reviewing schedules of losses and compensations and making recommendations to the Governing Body; i) Reviewing schedules of debtors/creditors balances £5,000 and over six months old and explanations/action plans; j) Review the annual report and financial statements prior to submission to the Governing Body focusing particularly on; <ul style="list-style-type: none"> (i) the wording in the Annual Governance Statement and other disclosures relevant to the Terms of Reference of the Committee; (ii) changes in, and compliance with, accounting policies and practices; (iii) unadjusted misstatements in the financial statements; (iv) major judgmental areas; (v) significant adjustments resulting from audit. k) Reviewing the annual financial statements and recommend their approval to the Governing Body; l) Reviewing the external auditors report on the financial statements and the annual management letter; m) Conducting a review of the CCG's major accounting policies;

	<ul style="list-style-type: none"> n) Reviewing any incident of fraud or corruption or possible breach of ethical standards or legal or statutory requirements that could have a significant impact on the CCG’s published financial accounts or reputation; o) Reviewing any objectives and effectiveness of the internal audit services including its working relationship with external auditors; p) Reviewing major findings from internal and external audit reports and ensure appropriate action is taken; q) Reviewing ‘value for money’ audits reporting on the effectiveness and efficiency of the selected departments or activities; r) Reviewing the mechanisms and levels of authority (e.g. Standing Orders, Standing Financial Instructions, Delegated limits) and make recommendations to the CCG; s) Reviewing the scope of both internal and external audit including the agreement on the number of audits per year and approving audit plans; t) Investigating any matter within its terms of reference, having the right of access to any information relating to the particular matter under investigation; u) Reviewing waivers to Standing Orders; v) Reviewing hospitality and sponsorship registers; w) Reviewing the information prepared to support the controls assurance statements prepared on behalf of the Governing Body and advising the Governing Body accordingly. x) Undertaking the procurement of the external audit contract through the establishment of an auditor panel, and then advising the Governing Body on the contract award.
	<p>Where the Audit Committee considers there is evidence of ultra vires transactions, evidence of improper acts, or if there are other important matters that the Committee wishes to raise, the Chair of the Audit Committee should raise the matter at a full meeting of the Governing Body. Exceptionally, the matter may need to be referred to the Department of Health.</p>

The following are delegated to the Remuneration Committee:

Delegations by the Governing Body to the Remuneration Committee	
Body/individual	Delegation
REMUNERATION COMMITTEE	<p>a) Advising the Governing Body on all aspects of salary (including performance related pay elements, bonuses and allowances), provision for other benefits including pensions and lease cars (where applicable) not covered by Agenda for Change.</p> <p>b) Advising the Governing Body on arrangements for termination of employment (including compulsory and voluntary redundancy payments and mutually agreed severance payments) and other contractual terms and conditions.</p> <p>c) Advising the Governing Body on the remuneration, allowances and terms of service of senior managers covered by the Very Senior Managers pay framework ensuring that the terms and conditions of service, remuneration and pay awards are in line with nationally agreed guidance.</p> <p>d) Monitoring and evaluating the performance of individual Executive Members.</p> <p>e) Advising and overseeing appropriate contractual arrangements for such staff including the proper calculation and scrutiny of termination payments taking into account such national guidance as appropriate.</p> <p>f) Advising the Governing Body on the remuneration, allowances and terms of service for the Chairs and Members of the Group.</p> <p>g) Reporting to the Governing Body that it has met and performed its function, within recognised national guidelines.</p> <p>h) Establishing Sub-Committees to assist in discharging delegated responsibilities of the Committee as set out in its Terms of Reference as agreed by the Governing Body (as required).</p> <p>i) Approving human resources policies and procedures within the functions of the Committee as set out in its Terms of Reference as agreed by the Governing Body.</p>

NHS Wiltshire CCG has responsibility for contractual GP performance management, budget management and the design and implementation of local incentive schemes. These are discharged under joint decision making processes through a Joint Committee of NHS England and the CCG. Accountability, and the associated income and expenditure related to primary care, remains with NHS England.

The following is delegated to the Primary Care Joint Commissioning Committee:

Delegations by the Governing Body to the Primary Care Joint Commissioning Committee	
Body/individual	Delegation
PRIMARY CARE JOINT COMMISSIONING COMMITTEE	<ul style="list-style-type: none"> a) Working with NHS England to jointly commission primary medical services for the CCG b) Management of a Primary Care Commissioning Operational Group, including defining terms of reference and governance arrangements c) Management of Locally Commissioned Services (known as LESs) d) Management of any PMS Premium funds release through the PMS review

The following are delegated to the Finance and Performance Committee:

Delegations by the Governing Body to the Finance and Performance Committee	
Body/individual	Delegation
FINANCE AND PERFORMANCE COMMITTEE	<ul style="list-style-type: none"> a) Agree detailed revenue financial plans, budgets and financial monitoring reports b) Monitor the financial performance of the CCG against the detailed plans and seek assurance that robust plans are in place to ensure financial risks are managed. c) Monitor the delivery of CCG projects in line with the endorsed project management methodology and to see rectification plans if a project is not delivering d) Monitor the delivery of all activity and access targets in line with the NHS constitutional requirements. e) Oversee the development and implementation of the financial information systems' strategy, f) Act as an Assurance Committee of the CCG's business and finance risks via the Assurance Framework and Risk Registers, g) Consider and assess any new investment decisions and make recommendations to the Governing Body or officers of the CCG h) Review any financial activity which impacts on the financial performance of the CCG i) Take any legal or other professional advice with regard to the financial performance of the CCG j) Review and agree the Procurement strategy for the CCG k) Review and agree the future procurements timetable for the CCG l) Monitor the effectiveness of procurements and the procurement service provided by the CSU.

The following are delegated to the Quality and Clinical Governance Committee:

Delegations by the Governing Body to the Finance and Performance Committee	
Body/individual	Delegation
QUALITY AND CLINICAL GOVERNANCE COMMITTEE	<ul style="list-style-type: none"> a) Ensure that the Governing Body mainstreams consideration of service and clinical issues b) Identify and manage risks to quality c) Act against poor performance d) Implement plans to drive continuous improvement, including the focus on patient feedback and its direct relationship to commissioning decisions e) Seek assurance through the contracting arrangements from all Provider services that their governance and patient safety systems are robust and measurable f) Monitor incidents and Action Plans linked to key areas of responsibility where Wiltshire CCG: <ul style="list-style-type: none"> - is Lead Commissioner - has statutory responsibility - or where responsibility falls directly to Wiltshire CCG g) Develop and implement processes for identifying issues that affect patient safety and monitor the implementation of changes and developments to prevent re-occurrence h) Monitor compliance of commissioned services with the Care Quality Commission regulations / standards and with the quality standards within the contracts with providers.

Detailed Scheme of Delegation July 2016

Wiltshire Clinical Commissioning Group

Purpose and Scope

The Scheme of Delegation is a key document which defines the delegated responsibilities across the organisation. It supports the delivery of the CCG's Prime Financial Policies, which are contained within the Constitution.

The Accountable Officer retains the CCG accountability for delegated functions. During periods of absence (annual leave, sickness, etc), the functions and decisions delegated to the Accountable Officer, can be taken by the Chief Financial Officer (CFO). Similarly, in the absence of the CFO, decisions are delegated to the Deputy Chief Financial Officer.

For the purpose of this document, the word 'employee' includes all employees of the CCG, clinicians, bank and agency staff, and contractors, including management consultants employed by the CCG. Anyone employing contractors, agency staff or management consultants are required to make them aware of the provisions of this Scheme of Delegation.

The CCG structure is designed to enable the CCG to discharge its responsibilities. It is divided into a number of separate directorates:

- Executive
- Finance and Information
- Corporate Services
- Quality
- Acute Commissioning
- Primary and Urgent Care
- Community and Joint Specialist Commissioning

The head of each directorate reports directly to the Accountable Officer and will have delegated responsibilities. In the scheme of delegation which follows, the directorate head is referred to as the "Executive Director".

Where the scheme of delegation refers to GPs, it is intended that only executive GPs with employment contracts with the CCG will be given delegated authority under the scheme of delegation.

On call managers

Where a member of staff is nominated as being on-call in response to out of hours health incident's for the CCG for that period, if they do not already have an expenditure approval limit, they will be authorised to commit up to £25,000 of non-pay expenditure in order to resolve an urgent out of hours need.

GENERAL AREA	DELEGATED MATTER	DELEGATED TO:
(1) BUDGET MANAGEMENT	1.1 Approve 3 year business plan, medium term financial strategy, workforce, capital and IT plans	Retained by Governing Body
	1.2 Approve annual business plan and budget	Retained by Governing Body
	1.3 Responsibility to keep expenditure within budgets and to ensure that budgets are only used for the type of expenditure for which they have been set: <ol style="list-style-type: none"> 1. At individual budget level (Pay and Non Pay) 2. At directorate level 3. All Other Areas 	<ol style="list-style-type: none"> 1. Budget Holder 2. Executive Director 3. Chief Financial Officer/Accountable Officer
	1.4 Budget virements for income and expenditure >£500,000	Chief Financial Officer, and notified to Governing Body
	1.5 Budget virements for income and expenditure between £25,000 and £500,000	Chief Financial Officer or Deputy Chief Financial Officer or Accountable Officer.
	1.6 Budget virements for income and expenditure below £25,000	Exec Director
(2) MAINTENANCE AND OPERATION OF BANK ACCOUNTS	2.1 Approval of banking arrangements	Chief Finance Officer (Notified to Audit and Assurance Committee)
	2.2 Variation to approved signatories	2 of Accountable Officer, Chief Finance Officer or Deputy Chief Financial Officer

	2.3 Approving payments from GBS bank account (RFT and BACS payments)	Chief Financial Officer, Deputy Chief Financial Officer, Chief Accountant or Financial Accountant.
	2.4 Approving cheque payments from GBS Bank account	Chief Financial Officer, Deputy Chief Financial Officer, Chief Accountant or Financial Accountant.
(3) PETTY CASH	3.1 Issuing of petty cash up to £35 per claim	Business Manager to the Accountable Officer
	3.2 Issuing of petty cash above £35 per claim	Chief Financial Officer
(4) NON PAY, REVENUE AND CAPITAL EXPENDITURE	4.1 Service developments or investment in new services <£150,000	Accountable Officer, Chief Financial Officer.
	4.2 Service developments or investment in new services, £150,000 to £500,000	Accountable Officer, Chief Financial Officer, Clinical Chair.
	4.3 Service developments or investment in new services, >£500,000	Governing Body.
	4.4 Approval of purchase orders and invoices with no purchase order >£150,000 (including Capital expenditure)	Accountable Officer, Chief Financial Officer or Deputy Chief Financial Officer
	4.5 Approval of purchase orders and invoices with no purchase order <£150,000 (non Capital expenditure)	Executive Directors
	4.3 Authority to delegate approval of purchase orders and invoices	Executive Directors

	<p>without purchase order is delegated to Executive Directors. Executive Directors are authorised to delegate the following approval limits to staff within their directorate as appropriate and in line with directorate need: Level 3 <£25k Level 2 <£5k Level 1 <£1k</p>	
	<p>4.6 Approval of Continuing Healthcare Packages, and Mental Health/LD placements, up to £50,000 annually</p>	<p>Associate Director of CHC/FNC/SPP/117</p>
	<p>4.7 Approval of Continuing Healthcare Packages, and Mental Health/LD placements, between £50,000 and £150,000</p>	<p>Director of Quality & Patient Safety/ Associate Director of CHC/FNC/SPP/117 (in the absence of the Director).</p>
	<p>4.8 Approval of Continuing Healthcare Packages, and Mental Health/LD placements, over £150,000 annually</p>	<p>Accountable Officer, Chief Financial Officer or Deputy Chief Financial Officer</p>
	<p>4.9 Commitment to fund exceptional treatments or care up to £100,000</p>	<p>Exceptions and Prior Approvals Panel</p>
	<p>4.10 Commitment to fund exceptional treatments or care over £100,000</p>	<p>Exception and Prior Approvals Panel and Chief Financial Officer or Deputy Financial Officer</p>
	<p>4.11 Approval of prepayments excluding subscriptions and training course fees</p>	<p>Chief Financial Officer or Deputy Chief Financial Officer</p>

	4.12 Payments including payroll deductions, Pension Pay overs & other payroll deductions (known as balance sheet payments).	Chief Financial Officer, Deputy Chief Financial Officer, Chief Accountant or Financial Accountant
(5) QUOTATION, TENDER and CONTRACT PROCEDURES	5.1 Establishment of a contract or SLA for all commissioned services of the CCG, which provide value for money and reflect CCG intentions.	Executive Directors.
	5.2 Maintenance of a contracts register	Executive Directors.
	5.3 Where no suitable nationally negotiated framework agreements/contracts are available for use: Contracts up to £1,000	No requirement to obtain quotes or tender but best value must be demonstrated
	Contracts between £1,000 and £5,000	2 written quotations provided by Exec Director
	Contracts over £5,000	3 formal quotations through Procurement Team
	Contracts over £25,000	3 formal tenders through Procurement Team
	Contracts above EU OJEU limits	EU OJEU process using Procurement Team
	5.4 Approval to accept tender/quote other than the lowest that met the award criteria	Chief Financial Officer
	5.5 Approval to go to tender	Contract value <£100,000 – Chief Financial Officer. Contract value >£100,000 – Governing Body

	5.6 Waiving of quotations and tenders	Chief Financial Officer after agreement with Procurement Team
	5.7 Decision to terminate a contract before term has ended	Accountable Officer or Chief Financial Officer
	5.8 Contract signature (all values)	Chief Officer or Chief Financial Officer. Where 2 signatories are needed, and one of the delegated officers is unavailable, authority is given to the Deputy Chief Financial Officer.
(6) INCOME COLLECTION	6.1 Approval of sales orders	Chief Financial Officer, Deputy Chief Financial Officer, Chief Accountant or Senior Finance Manager – Acute Commissioning.
	6.2 Cancellation of invoices relating to current financial year and/or previous financial years, where invoice is to be re-raised for the same value, due to errors on original invoice.	Chief Financial Officer, Deputy Chief Financial Officer, Chief Accountant or Senior Finance Manager – Acute Commissioning.
	6.3 Cancellation of invoices relating to current financial year or previous financial years, where invoice is NOT subsequently re-raised due to the original invoice being incorrectly raised and funds not due to the CCG.	Chief Financial Officer or Deputy Chief Financial Officer
	6.4 Write off of non-pay bad debt relating to current or previous year all values	Chief Financial Officer or Deputy Chief Financial Officer reported to Audit and Assurance Committee.
	6.5 Authority to pursue legal action for bad debts	Chief Financial Officer

	6.6 Write off of salary overpayment debt all values	Chief Financial Officer or Deputy Chief Financial Officer reported to Audit and Assurance Committee.
	6.7 Approval of bad debt provision annually	Deputy Chief Financial Officer.
(7) RECRUITMENT OF STAFF, PAY AND LEAVE	7.1 Approval of Recruitment Request forms	Executive Director and either Chief Financial Officer or Deputy Chief Financial Officer
	7.2 Appointment of staff	Executive Directors
	7.3 Appointment of staff on paygrade above scale minimum	Chief Financial Officer on receipt of written justification from budget holder/executive director
	7.4 Maintenance of authorised signatory list	Financial Accountant
	7.5 Authorisation of overtime and time off in lieu	Executive Directors
	7.6 Payment of expenses	In line with CCG travel and expenses policy and e-expenses system.
	7.7 Awarding of annual leave	In line with CCG annual leave policy.
	7.8 Approval for salary advances	Chief Financial Officer or Deputy Chief Financial Officer
	7.9 Approval to carry forward in excess of 5 days annual leave in exceptional circumstances	Chief Financial Officer
	7.10 Approval of application for ill health retirement	Accountable Officer
	7.11 Decisions on redundancy	Accountable Officer and Chief Financial Officer
7.12 Decisions on dismissal	Executive Directors in line with CCG disciplinary policy.	

(8) ENGAGEMENT OF STAFF NOT ON THE ESTABLISHMENT	8.1 Engagement of consultancy services	Chief Financial Officer
	8.2 Engagement of bank or agency staff, outside the criteria outlined in 8.4 below	Executive Director or budget holder with responsibility for pay related expenditure within directorate.
	8.3 Authority to appoint staff to post not on the establishment	Accountable Officer or Chief Financial Officer.
	8.4 Authority to engage off-payroll staff who meet any of the following criteria: - Cost greater than £600 per day, excluding VAT and expenses OR - Are engaged for a period greater than six months, regardless of cost per day OR - Are in roles of significant influence (AO or directors)	Business Case to be submitted to NHS England using standard pro-forma, before engaging. Business Case must be approved by the AO and CFO before submission. NHS England approve the engagement.
(9) PROCEDURAL DOCUMENTS	9.1 Maintenance of up to date operational policies	Director of Planning, Performance and Corporate Services
	9.2 Maintenance of up to date financial policies and procedures	Chief Financial Officer.
(10) INSURANCE AND LEGAL	10.1 Ensuring appropriate insurance cover is in place for: <ul style="list-style-type: none"> • Property and assets • Public Liability • Employee liability 	Chief Financial Officer
	10.2 Reporting and handling insurance claims	Director of Planning, Performance and Corporate Affairs.

	10.3 Management of legal claims and advice, including the signing of legal documents (admission, waivers, settlements, court order response)	Director of Planning, Performance and Corporate Affairs.
	10.4 Engagement of CCG's solicitors	Director of Planning, Performance and Corporate Services/ Director of Quality
(11) AUDIT	11.1 Approval of annual work plans for external audit, internal audit and counter fraud service.	Audit and Assurance Committee
	11.2 Ensuring that plans are delivered within specification and timescale	Chief Financial Officer
	11.3 Implementation of audit or counter fraud service recommendations	Appropriate Executive Director and designated officer.
(12) REPORTING OF INCIDENTS TO THE POLICE	12.1 Where a fraud is involved	Chief Financial Officer or Accountable Officer
	12.2 All other cases where a criminal offence is suspected	Appropriate Manager
(13) OTHER	13.1 Approval of CCG Constitution, Standing Orders, Prime Financial Policies, Scheme of Delegation, Scheme of Reservation	Retained by Governing Body
	13.2 Approval of CCG Strategies	Retained by Governing Body

	<p>13.3 Approval of CCG policies as follows: Health and Safety Risk Management Major Incident Standards of Business Conduct Commissioning Policies (with legal or budget implications)</p>	Retained by Governing Body
	<p>13.4 Approval of other policies and procedures</p>	Audit & Assurance Committee Finance and Information Committee Quality and Clinical Governance Committee
	<p>13.5 Declaration of gifts and hospitality</p>	All members of the Governing Body and all CCG employees
	<p>13.6 Declaration of interests</p>	All members of the Governing Body, Accountable Officer, Chief Financial Officer, Executive Directors, and all CCG employees
	<p>13.7 Maintenance of register of interests, and register of gifts, hospitality and sponsorship</p>	Director of Planning, Performance and Corporate Affairs
	<p>13.8 Compliance with NHS Standards of Conduct and CCG Standards of Business Conduct policy</p>	All CCG employees
	<p>13.9 Authorising acceptance of sponsorship.</p>	Accountable Officer`
	<p>13.10 Maintenance of Losses and Special Payments Register</p>	Chief Financial Officer
	<p>13.11 Reporting of losses through fraud and theft etc.</p>	Chief Financial Officer, reported to Audit and Assurance Committee

	13.12 Ex gratia payments to patients or staff for loss of personal effects <£1,000	Chief Financial Officer, reported to Audit and Assurance Committee
	13.13 Ex gratia payments to patients or staff for loss of personal effects, >£1,000 and <£15,000	Accountable Officer, reported to Audit and Assurance Committee
	13.14 Ex gratia payments to patients or staff for loss of personal effects, >£15,000	Governing Body
	13.15 Approval of individual compensation payments (staff or former staff) <£50,000	Accountable Officer, reported to Audit and Assurance Committee
	13.16 Approval of individual compensation payments (staff or former staff) >£50,000	Governing Body
	13.17 Approval of individual compensation payments (patients or former patients) Non NHSLA <£10,000	Accountable Officer or Chief Financial Officer
	13.18 Approval of individual compensation payments (patients or former patients) Non NHSLA >£10,000 or all NHSLA	Governing Body
	13.19 Compensation payments made under legal obligation	Governing Body
	13.20 Sealing of documents	Accountable Officer/ Chief Financial Officer, ratified by Governing Body

Equality Impact Analysis – the EIA form

Title of the paper or Scheme: **Scheme of Reservation and Scheme of Delegation**

For the record

Name of person leading this EIA Susannah Long, Governance & Risk Manager	Date completed 12 September 2016
Names of people involved in consideration of impact Sharon Woolley, Board Administrator	
Name of director signing EIA David Noyes, Director of Planning, Performance and Corporate Services	Date signed 13 September 2016

What is the proposal? What outcomes/benefits are you hoping to achieve?
 The Schemes define decisions and actions that are reserved to the Governing Body and those that are delegated to individuals and committees of the CCG. The clear definition of roles and responsibilities facilitates the discussion of matters and taking decisions at the most appropriate level.

Who's it for?
 Use by the staff within the organisation and for information to partner organisations, stakeholders and auditors.

How will this proposal meet the equality duties?
 The schemes contribute to the CCG governance framework by which the organisation is held to account and is open and transparent.

What are the barriers to meeting this potential?
 Decisions will be made at the appropriate levels but may still be discussed in sub-ordinate committees.

2 Who's using it Refer to equality groups
 The schemes will support all equality groups.

What data/evidence do you have about who is or could be affected (e.g. equality monitoring, customer feedback, current service use, national/regional/local trends)?
 The CCG holds committees and individuals to account for decision making.

How can you involve your customers in developing the proposal?
 The schemes reserve certain decisions to the Governing Body where input will be available from partners and Healthwatch, and meetings are conducted in public.

Who is missing? Do you need to fill any gaps in your data? (pause EIA if necessary)
 No gaps.

3 Impact

Refer to dimensions of equality and equality groups

Show consideration of: age, disability, sex, transgender, marriage/civil partnership, maternity/pregnancy, race, religion/belief, sexual orientation and if appropriate: financial economic status, homelessness, political view

Using the information in parts 1 & 2 does the proposal:

a) Create an adverse impact which may affect some groups or individuals. Is it clear what this is? How can this be mitigated or justified?

There is no adverse impact.

What can be done to change this impact?

N/A

b) Create benefit for a particular group. Is it clear what this is? Can you maximise the benefits for other groups?

There is an equal benefit for all groups.

Does further consultation need to be done? How will assumptions made in this Analysis be tested?

No further consultation is needed at this time.

4 So what?

Link to business planning process

What changes have you made in the course of this EIA?

None

What will you do now and what will be included in future planning?

The schemes will be published on the internet and the Constitution will be updated and shared with NHS England for approval.

When will this be reviewed?

The EIA will be reviewed at each submission to the Governing Body for approval of amendments to the scheme.

How will success be measured?

N/A