



SCHEME OF DELEGATION AND EARNED AUTONOMY FRAMEWORK

Reference No:	UHB 217	Version No:	1.8	Previous Trust / LHB Ref No:	N/A
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Documents to read alongside this document	UHB Standing Orders, Reservation and Delegation of Powers UHB Standing Financial Instructions More detailed subject specific policies, procedures and guidelines
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Disclaimer

When using this document please ensure that the version you are using is the most up to date either by checking on the UHB database for any new versions. If the review date has passed please contact the author.

Version Control

Version Number	Date of Review Approved	Date Published	Summary of Amendments
1	25/03/2014	25/03/2014	New Document. Detailed scheme of delegation and earned autonomy framework to underpin Schedule 1 of UHB Standing Orders, Reservation and Delegation of Powers
1.1	18/08/2014	Not published	Amendments to reflect comments made regarding content of Version 1, revised authorisations for Clinical Boards at Levels 2 and 3 and some categories extended.
1.2	08/04/2015	22/04/2015	Section 8 - Executive lead for Senior Information Risk Officer changed from the Deputy Chief Executive to the Board Secretary
1.3	05/05/2015	20/05/2015	Review date extended to 30 September 2015
1.4	26/01/2017	27/02/2017	Amendment to section 5 Disciplinary Investigations and Dismissal of staff
1.5	05/12/2017	20/12/2017	Finance and Procurement - amend delegated limits for Head of Compliance & Discretionary Capital, Head of Capital Planning and Director of Therapies and Health Sciences. (AC17/078)
1.6	27/02/2018	18/05/2018	Finance and Procurement - amend to include off payroll working AC17/097)
1.7	30/09/2021	01/10/2021	Updated due to change of responsibilities from Executive Director of Strategic Planning to Executive Finance Director and other changes to Executive responsibilities plus clarifying and consistency in job titles
1.8	30/11/23	30/11/23	Reviewed alongside new release of standing orders and standing financial instructions
1.9	27/03/2025	27/03/2025	Reviewed at Board following changes to financial delegations decided on 25/01/2024

Contents	
Section 1	Quality, Safety and Experience
Section 2	Service
Section 3	Commissioning and Provision of Services
Section 4	Finance and Procurement
Section 5	Workforce and Organisational Development
Section 6	Corporate
Section 7	Higher Degree of Delegation and Earned Autonomy at Level 2 and 3
Section 8	Executive Responsibilities
<p>Note: Whilst this Scheme of Delegation captures a wide range of subject areas it is not exhaustive. Reference should also be made to policies, procedures, other written control documents and individual role profiles.</p> <p>References to a post or designation shall be deemed to include a reference to the employee for the time being performing those functions where the post or designation name is altered or the functions are reallocated (for example, the post title of Executive Director of Workforce and OD has changed to Executive Director of People and Culture)</p> <p>If further clarification is required please contact the Director of Corporate Governance or Head of Corporate Governance.</p>	

Quality, Safety and Experience

Area	Delegated Matter	Delegated to	Comment
Legislative Requirements where individuals are named as licence holders or designated individuals			Note: This section concentrates on legislation relating to patient safety and quality. It is not intended to be exhaustive. Where appropriate further information will be added to the Scheme of Delegation or will be maintained by Clinical Boards/Corporate Directorates.
Human Tissue Act 2004	Licence Holder	Executive Medical Director	Premises must be licensed to carry out post mortem examinations; to remove tissue/organs from a body and to store bodies or tissues/organs removed from bodies. Each Designated Individual has specific personal responsibilities detailed in legislation
	Designated Individuals	Clinical Board Director/Head of Department	
	Approval of agreements with Third Party for the collection of umbilical cord blood	Executive Medical Director	
Medicines Act 1968	Medicines and Healthcare Products Regulatory Agency (MHRA) Licenced activities	Chief Executive	
	Maintenance of standards to ensure ongoing compliance with licencing requirements	Clinical Board Director	
Medical Act 1983	Maintaining standards to ensure UHB retains Approved Practice Setting status	Executive Medical Director	
The Blood Safety and Quality Regulations 2005	Authorisation Holder	Chief Executive	
	Responsible Person (Blood)	Named Consultant Haematologist	This is the person who has been designated pursuant to regulation 6. A record of Responsible Persons will be maintained by the Governance Directorate.
	Approval of Blood and Component Products Policy	Quality, Safety and Experience Committee	

	Review of policies and approval of procedures and ensuring that arrangements in place.	Transfusion Group	
Concerns/Complaints Management	Set direction, policies and procedures	Executive Nurse Director	Policies approved by Quality, Safety and Experience Committee
	Recording, receipt and initial acknowledgement of concern/complaint	Assistant Director of Patient Experience supported by Concerns Department	Note: Any written concern received by any department/individual other than the Chief Executive must be forwarded to the Chief Executive's office immediately.
	Grading of concern/complaint	Executive Nurse Director or Assistant Director of Patient Experience	
	Identification of Investigating Officer	Head of Operations and Delivery (Dental), Assistant Director of Therapies/Professional Lead for QSE (CD&T), all other Clinical Boards = Clinical Board Nurse (all Grades of Concern) or Assistant Directors of Corporate Departments	
	Investigation of complaint	Investigating Officer	
	Maintaining regular contact with the complainant with regard to the processing of the concern.	Concerns Department	
	Maintaining regular contact with the complainant with regard to the matters raised in the concern.	Investigating Officer	
	Preparing final draft response (all Grades of Concern)	Investigating Officer	Note: Refer to level of autonomy for Clinical Boards at Levels 2 and 3

	Sign off of final draft	Head of Operations and Delivery (Dental), Assistant Director of Therapies/Professional Lead for QSE (CD&T), all other Clinical Boards = Clinical Board Nurse (all Grades of Concern) or Assistant Directors of Corporate Departments	
	Checking of final draft prior to submission to Chief Executive	Identified Executive Director	

	Sending final response to complainant	Chief Executive	
Incident Reporting and Investigation	Set direction, policy and procedures	Executive Nurse Director	Policies approved by Quality, Safety and Experience Committee
	a) Completion of Incident Form	Staff member involved in incident or in immediate area	
	b) Initial Investigation of Incident	Manager of staff member/person in charge of area	
	c) Reporting of Serious Adverse Incident to Welsh Government	Executive Nurse Director	
	d) Arranging serious incident (SI) meeting	Assistant Director of Patient Safety or Head of Operations and Delivery (Dental), Assistant Director of Therapies/Professional Lead for QSE (CD&T), all other Clinical Boards = Clinical Board Nurse	
	e) Investigation of Serious Incidents	Head of Operations and Delivery (Dental), Assistant Director of Therapies/Professional Lead for QSE (CD&T), all other Clinical Boards = Clinical Board Nurse or Executive Directors to appoint Investigating Officer	
	f) Preparation of final report	Investigating Officer	

	g) Agreement of final report prior to submission to the Executive Nurse Director	Clinical Board Director or Executive Director	
	h) Sign off of final report and closure of investigation.	Executive Nurse Director	
	i) Reporting of incidents in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations	Head of Health and Safety	
	j) Reporting of breaches under the Ionising Radiation (Medical Exposure) Regulations to Health Inspectorate Wales (HIW)	Assistant Director of Patient Safety	
	k) Reporting of Data Protection Breaches to Information Commissioners Office (ICO)	Executive Medical Director	
	Management of UHB notifications to ICO or received as a result of complaint to the ICO		
	- requests and response management	Head of Information Governance	
	- Local management and provision of information	Clinical Board Directors of Operations or Assistant Director of Corporate Directorates	
	- Approval of response	Medical Director	

	I) Reporting of Incidents to the Police	Unless incident reported at time (see below) Executive Nurse Director	
	Where a criminal offence is suspected	Person in charge of area	
	Criminal offence of a violent/harmful nature	Person in charge of area	
	other	Person in charge of area	
	Where a fraud is suspected	See financial section	
	Maintaining Datix Risk Management and Incident Reporting system including upload into National Reporting and Learning System (NRLS)	Assistant Director of Patient Safety and Head of Health and Safety	
HM Coroner	Maintaining relationship and ensuring appropriate response to requests for information.	Executive Nurse Director supported by Assistant Director of Patient Safety	
	Development and implementation of plans following the receipt of "Prevention of Future Death Reports" from HM Coroner	Clinical Board Directors of Operations and Clinical Board Directors of Nursing or Assistant Directors of Corporate Departments	
	Preparation of response to "Prevention of Future Death Reports" from HM Coroner	Clinical Board Directors of Operations and Clinical Board Directors of Nursing or Assistant Directors of Corporate Departments	
	Sign off of Clinical Board response to "Prevention of Future Death Reports" from HM Coroner prior to submission to Executive Nurse Director	Clinical Board Director or Executive Director	
	Sign off of response to "Prevention of Future Death Reports" from HM Coroner	Executive Nurse Director	
	Sending response to HM Coroner	Chief Executive	

Welsh Risk Pool Assessment	Executive Lead	Executive Nurse Director	
	Co-ordination of assessment	Assistant Director of Patient Safety	

	Performance against the Welsh Risk Pool Standards and contributing to assessment process.	Clinical Board Directors of Operations and Clinical Board Directors of Nursing or Assistant Directors of Corporate Departments	
Standards for Health Services in Wales	Executive Lead	Executive Nurse Director	
	Standards for Health Services in Wales - assessment and compliance with provisions of standards	Clinical Board Directors of Operations and Clinical Board Directors of Nursing or Assistant Directors of Corporate Departments	
Patients Safety Alerts	Executive Lead	Executive Nurse Director	
	Maintaining record of Alerts and monitoring compliance	Assistant Director of Patient Safety	
	Responding to requirements and providing information regarding ability to meet requirements	Clinical Board Directors of Operations and Clinical Board Directors of Nursing or Assistant Directors of Corporate Departments	

National Institute of Clinical Excellence (NICE)	Executive Lead	Executive Medical Director	

	Maintaining record of publications and recording compliance	Assistant Director of Patient Safety	
	Responding to requirements and providing information regarding ability to meet requirements	Clinical Board Directors of Operations and Clinical Board Directors of Nursing or Assistant Directors of Corporate Departments	As above re delegation straight to QSE Lead
National Confidential Enquiry into Patient Outcome and Death (NCEPOD)	Executive Lead	Executive Medical Director	
	Performing the role of the NCEPOD Ambassador and collation and provision of information to contribute to NCEPOD audit findings	Assistant Medical Director - Clinical Effectiveness and Patient Safety	
	Maintaining record of publications and recording compliance	Assistant Medical Director - Clinical Effectiveness and Patient Safety	
	Responding to requirements and providing information regarding ability to meet requirements	Clinical Board Directors or Executive Directors	
Approval of compensation for staff and patients personal effects, clinical negligence and personal injury claims			Refer to Finance and Procurement section
Clinical Audit	Executive Lead	Executive Medical Director	
	Co-ordination and participation in national audits	Assistant Director of Patient Safety	
	Development of UHB wide Clinical Audit Plan	Assistant Director of Patient Safety	
	Approval of UHB wide Clinical Audit Plan	Quality, Safety and Experience Committee	
	Development and implementation of Clinical Board Audit Plans	Clinical Board Directors	
	Approval of Clinical Board Audit Plans	Clinical Board Quality, Safety and Experience sub-Committees	

Infection Prevention and Control	Set direction, policy and procedures	Executive Nurse Director	Policies approved by Quality, Safety and Experience Committee
	Implementation of procedures and good practice	All staff	
	Co-ordination of management of outbreaks	Executive Nurse Director	
Professional Standards and Regulation - Nursing	Development of Strategic Framework	Executive Nurse Director	
	Implementation of Strategic Framework	Deputy Director of Nursing and Clinical Board Nurse/Clinical Board Lead	
	Referral to Nursing and Midwifery Council (NMC)	Executive Nurse Director*	
	Monitoring of registration (NMC regulatory compliance)	Deputy Director of Nursing and Clinical Board Nurse/Clinical Board Lead	
Professional Standards and Regulation - Medical and Dental	Development of Strategic Framework	Executive Medical Director	
	Implementation of Strategic Framework	Clinical Board Directors and Executive Directors	
	Referral to General Medical Council (GMC)/General Dental Council (GDC)	Executive Medical Director*	
	Monitoring of registration (GMC/GDC regulatory compliance)	Clinical Board Directors and Executive Directors	
Professional Standards and Regulation - Therapies and Health Sciences	Development of Strategic Framework	Executive Director of Therapies and Health Sciences	
	Implementation of Strategic Framework	Clinical Board Directors and Executive Directors	

	Referral to appropriate Professional Body	Executive Director of Therapies and Health Sciences*	
	Monitoring of registration	Clinical Board Directors or Executive Directors	

Safeguarding - Adult Protection	Set direction, policy and procedures	Executive Nurse Director	Policies internal to UHB approved by Quality, Safety and Experience Committee
	Implementation of policy and procedures	Assistant Nurse Director/Clinical Board Leads	
	Investigation in accordance with Protection of Vulnerable Adults (POVA) requirements	Clinical Board Nurse/Designated Lead Managers (DLMs)	
Safeguarding - Child Protection	Set direction, policy and procedures	Executive Nurse Director	Policies internal to UHB approved by Quality, Safety and Experience Committee
	Implementation of policy and procedures	Executive Nurse Director	
	Safeguarding Supervision	Executive Nurse Director	
Safeguarding - Deprivation of Liberty	Supervising Authority	Executive Nurse Director	
	Managing Authority	Executive Nurse Director	

Service Freedoms

Scheme of Delegation and
Earned Autonomy
Framework

Area	Delegated Matter	Delegated to	Comment
Management of Capacity	Management of capacity	Clinical Directors and Assistant Director of Corporate Departments	
	Variation of operating and clinic sessions within existing resources - Outpatients - Theatres - Other	Clinical Board Directors following appropriate consultation with all affected areas.	
	Changes to Bed Allocations leading to relocation of services or permanent reduction in bed capacity		
	Permanent Change	Chief Operating Officer	Need to ensure appropriate engagement with Community Health Council in association with Executive Director of Strategic Planning
	Temporary Change	Chief Operating Officer	Need to ensure appropriate engagement with Community Health Council in association with Executive Director of Strategic Planning
	Changes to Bed Allocations where there is no relocation of services or permanent reduction in bed capacity		
	Permanent Change	Chief Operating Officer	Need to ensure appropriate engagement with Community Health Council in association with Executive Director of Strategic Planning
	Temporary Change	Chief Operating Officer	Need to ensure appropriate engagement with Community Health Council in association with Executive Director of Strategic Planning

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UHB217

Version 1.7

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Scheme of Delegation and Earned Autonomy Framework

Page 14 of 58
Scheme of Delegation and Earned Autonomy Framework
Review Date: 25 Nov 2024

Plans for service change	Material service change which impacts across more than one Clinical Board or has capital implications	Executive Director of Strategic Planning and Chief Operating Officer	Refer to "Guidance for and Consultation on CH Services"
	Material service changes to be identified in line with Integrated Medium Term Plan on an annual basis leading to requirement to potentially engage	Executive Director of Strategic Planning to confirm following discussion with Clinical Board	
	Community Health Council Any substantial service change to be identified in line with Integrated Medium Term Plan on an annual basis leading to requirement to enter into formal public	To be approved by Executive Director of Strategic Planning and endorsed by the Board	
Local Delivery Plans	consultation, Maintaining an up-to-date register of National Delivery Plans, ensuring that the UHBs response to these plans are managed within the required timeframe.	Assistant Director of Strategic Planning	
	Overall co-ordination, development and implementation of the Local Delivery Plans	Chief Operating Officer in collaboration with Clinical Board Directors	
	Delegated responsibility to oversee the development of the Local Delivery Plans.	Executive Director of Therapies and Health Sciences	To be managed as part performance management arrangements
Drugs and Medication	See Finance Section		See Finance and Procurement Medicines Management Procurement
Extended Role Activities	See Workforce Section		

UHB217
Version 1.7

UHB217
Version 1.7
Approved :25 Nov 2021
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Commissioning and Provision of Services To and From Other Organisations

Area	Delegated Matter	Delegated to	Comment
Commissioning including primary care but excluding Continuing Healthcare and Funded Nursing Care	Approval to commission new healthcare services from NHS, private, third sector or independent organisations	Executive Director of Strategic Planning	This relates to the commissioning of a new service. Any changes which will have a significant impact on provider strategy must be agreed with the Chief Operating Officer and other relevant Executives prior to agreement. Any additional funding requirements must be agreed with the Director of Finance prior to approval. May be subject to tendering in line with UHB procurement procedures including significant contract variations
	Approval to commission healthcare services from new organisations - NHS, third sector, primary care, private or independent sector	Executive Director of Strategic Planning	This relates to commissioning from an organisation not currently commissioned by the NHS. Any changes which will have a significant impact on provider strategy must be agreed with the Chief Operating Officer and other relevant Executives prior to agreement. Any additional funding requirements must be agreed with the Director of Finance prior to approval. May be subject to tendering in line with UHB procurement procedures including significant contract variations.
	Agreement to provide services and payments in accordance with Medicines Management Incentive Scheme	Clinical Board Director - Primary, Community and Intermediate Care	
	Maintaining a register of commissioning contracts	Executive Director of Strategic Planning delegated to Clinical Board Director	

	Ensuring every commissioning contract has a lead manager responsible for ensuring that contract delivers activity, quality and finance	Executive Director of Strategic Planning delegated to Clinical Board Director	
	Agreement of annual contract with existing providers and within existing budgets - NHS, third sector, independent or private	Nominated lead manager (within existing budget)	
	Agreement of contract variations	Nominated lead manager (within existing budget)	
	Signing/variations of contracts of value < £100,000	Nominated lead manager or above	
	Signing/variations of contracts of value < £250,000	Directors or above on recommendation of nominated lead manager	
	Signing/variation of contracts of value < £500,000	Director of Finance on recommendation of nominated lead manager	
	Signing/variation of contracts of value < £1m	Chief Executive on recommendation of nominated lead manager	
	Signing/variation of contracts of value >£1m	Board	
	Agreement of changes to contracts where this would place a cost pressure on the organisation which cannot be funded within existing budgets	Director of Finance (subject to business case/Integrated Medium Term Plan process)	
	Agreement of changes to contracts where this would place a cost pressure on the organisation which would have a significant impact on the delivery of outcomes	Executive Director of Strategic Planning	
	Ensuring there is a commissioning and contracting framework in place which sets out expectations around what will be included in documentation and approach to management including meetings	Executive Director of Strategic Planning	Finance and procurement elements to be signed off by Director of Finance, quality and safety to be signed off by Executive Nurse Director
	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	Nominated lead manager	
	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	Nominated lead manager	

	Ensuring every commissioning contract has a lead finance manager responsible for monitoring financial activity and supporting the lead manager to manage the contract	Executive Director of Finance	
	Authorisation of invoices against contracts (within budget) excluding NHS Long Term Agreements (LTAs)	Nominated lead manager (within delegated authority)	
	Authorisation of invoices against NHS LTAs	Head of Finance (Financial Management and Strategy)	

Commissioning - Continuing Healthcare and Funded Nursing Care	All above sections apply to this area - these are supplementary delegated powers		
	Approving new care packages	Continuing Healthcare (CHC) panel	In line with UHB procedure and panel decisions
	<£100k	Chair of CHC panel	
	<£250k	Directors	
	<£500k	Executive Director of Finance	
	<£1m	Chief Executive	
	Authorising emergency care packages or changes to care packages outside panel	Director of Operations PCIC or Mental Health	
	Authorising of invoices against agreed packages of care outside panel	Director of Operations PCIC or Mental Health	
	Authorising CHC retrospective claims including Powys and UHB claims		
	<£100k	Director of Operations PCIC and Assistant Director of Finance PCIC	
	<£250k	Directors	
	<£500k	Executive Director of Finance	
	<£1m	Chief Executive	

Providing staff to or seconding staff from other organisations (e.g staff with academic commitments, seconding staff to partner agencies)	Value <£250k or extension of existing contract for any value	Directors of Operations or relevant Executive Director	
	Value > £100k or change in contract >£100k	Director of Finance	
	Ensuring there is a named contract lead for this	Heads of Operations and Delivery or relevant Executive Director	
	Ensuring there is an appropriate agreement in place, supported by clear specification of what is to be delivered, monitoring arrangements, financial arrangements and exit arrangements	Named contract lead	
Pooled budget arrangements	Approval to enter into pooled budget arrangements under section 33 of the NHS (Wales) Act 2006	Executive Director of Finance on recommendation of Executive Director of Strategic Planning	

Provision of services by UHB to other organisations excluding JCC and provision of staffing	Approval to provide new healthcare services to new and existing organisations	Chief Operating Officer on advice of relevant Clinical Board Director	Signed off by Executive Director of Strategic Planning where there is a potential impact on commissioning strategy and Executive Director of Strategic Planning where there is a potential impact on the UHB long-term strategy Note: Clinical Boards at Level 3 have autonomy to provide services without deferring to Chief Operating Officer.
	Maintaining a register of provider contracts	Executive Director of Finance	
	Ensuring every provider contract has a lead manager responsible for ensuring that contract delivers activity, quality and finance	Executive Director of Finance	
	Agreement of annual contract	Nominated lead manager (within existing budget)	
	Agreement of contract variations	Nominated lead manager (within existing budget)	
	Signing/variations of contracts of value < £100,000	Nominated lead manager or above	
	Signing/variations of contracts of value < £250,000	Directors or above on recommendation of nominated lead manager	
	Signing/variation of contracts of value < £500,000	Director of Finance on recommendation of nominated lead manager	
	Signing/variation of contracts of value < £1m	Chief Executive on recommendation of nominated lead manager	
	Signing/variation of contracts of value >£1m	Board	
	Ensuring that services are provided to the appropriate standard and within the contract requirements	Nominated lead manager	Other Clinical Board Directors which provide support services or activity to this contract are responsible for supporting the nominated lead manager in this by delivering their requirements
	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	Nominated lead manager	

	Ensuring every commissioning contract has a lead finance manager responsible for monitoring financial activity and supporting the lead manager to manage the contract	Executive Director of Finance	
	Ensuring invoices are raised for contracts excluding NHS LTAs	Nominated lead manager (within delegated authority)	
	Ensuring invoices are raised for NHS LTAs	Head of Finance (Financial Management and Strategy)	
Arbitration or legal dispute	Decision to go to arbitration or take legal action in relation to any commissioning or provider contract	Chief Executive (or Executive Director of Finance in his/her absence)	
JCC as provider	Approval of business cases to go to JCC for extension of provision of services or new services	Executive Director of Finance on recommendation of relevant Clinical Board Director	Must be agreed with any other Clinical Board Directors whose service it will impact on and with the Chief Operating Officer > £0.5m. Cases over £0.5m recurring to be signed off via Management Executive to ensure alignment with UHB commissioning strategy.
	Approving and signing the annual contract with JCC	Executive Director of Finance	

	Responding to correspondence from JCC	Any Executive Director, Clinical Board Director or Director of Operations	Copied to Director of Finance or Head of Finance (Specialist Services)
	Agreeing contract variations with JCC	Executive Finance Director or Head of Finance (Specialist Services)	Based on business cases and recommendation of relevant Clinical Board Director
	Providing activity and financial contract monitoring information to JCC	Head of Finance (Specialist Services)	
	Providing quality contract monitoring information to JCC	Executive Nurse Director	
	Lead for regular contract monitoring meetings with JCC	Executive Director of Finance, Executive Nurse Director, Clinical Board Director, and Clinical Board Director of Operations, Head of Finance for Specialist Services and Women and Children Clinical Boards	Others as appropriate
	Ensuring that the services provided to JCC are in line with LTA i.e. activity, finance, safety and quality. Ensuring that appropriate quality of information is provided to enable contract monitoring	Clinical Board Directors, delegated to Clinical Directors and Directorate Managers	
	Ensuring that any issues which require escalation around JCC contracts are escalated with appropriate proposals around mitigations	All members of staff	
JCC as commissioner	Attending Joint Committee meetings	Chief Executive	
	Attending JCC Management Group	Executive Director Strategic Planning and Assistant Director - Corporate Finance	
	Input to JCC commissioning decisions and agreement to JCC policies	Executive Director of Strategic Planning (and Executive Director of Finance if these involve additional financial commitment)	Appropriate advice to be sought from Medical Director, Chief Operating Officer, other Executives and relevant Clinical Board Directors to gain a UHB view prior to input and/or agreement.
	Dissemination of JCC commissioning policies throughout the organisation	Executive Director of Strategic Planning	In accordance with UHB Policies, Procedures and Written Control Documents Policy

	Approving and signing the annual contract with JCC as commissioner	Chief Executive	
	Agreeing contract variations with JCC	Executive Director of Finance	

Financial Freedoms

Every cost centre must have a single approved budget holder. They are accountable for ensuring that budgets do not overspend and that expenditure is committed within the UHB Budget holders and their delegated approval levels are approved via the relevant documentation which is provided by the Finance Department with records held in the Finance Budget holders can nominate authorised signatories for individual cost centres who can commit expenditure on the budget within agreed delegation levels.

Individual members of staff can place orders, but these will be authorised either by a budgetholder or authorised signatory prior to expenditure being committed

Where no budget holder has been nominated for an individual cost centre, the default budgetholder for that cost centre is the Clinical Board Director or the relevant Executive Director

When budget holders are on leave they can appoint a formal deputy whilst they are on leave to manage their budgets. This needs to be confirmed to the budget holder's manager in

Area	Delegated Matter	Delegated to	Comment
Policies and procedures	Approve Standing Financial Instructions and Standing Orders	Board	
	Approve subsidiary financial procedures	Executive Director of Finance or Audit Committee where significant risk to the organisation or a control issue	
	Ensuring that budget holders have appropriate skills/knowledge to manage their budgets	Line manager of budget holder	Director of Finance has ultimate responsibility under SFIs for this
	Manage expenditure within budget	Budget manager	
	Work within financial policies and procedures	All employees	
Management of budgets (Excluding Capital Schemes)	Approval of annual budgets - Corporate Departments and Clinical Boards	Board	
	Approval of annual detailed budgets for Corporate Departments within budget signed off by Board	Relevant Executive Director	
	Approval of annual detailed budgets for Clinical Boards within budget signed off by Board	Chief Operating Officer and Executive Director of Finance	
	Delegation of budgets to budget holders including ensuring the appropriate documentation is completed and returned to the Finance Department	Executive Director or Clinical Board Director	
	Approval of additional budget signatories to budgets including ensuring the appropriate documentation is completed and returned to the Finance Department	Budget holder	
	Authorisation of expenditure above or outside budget	Chief Executive	Reported to Audit Committee

Budget virements	Within Clinical Board or Corporate Department	Clinical Board Director or relevant Executive Director or Head of Delivery	
	Across Clinical Boards	Chief Operating Officer and Executive Director of Finance	
	Across Corporate Departments	Relevant Executive Directors if agreed, or Chief Executive and Executive Director of Finance	
	Across Corporate Departments and Clinical Boards	Relevant Executive Directors if agreed, or Chief Executive and Executive Director of Finance	
	Notification of budget virements to Finance Department to ensure the budget is updated	Person authorising the virement	
Authority to procure revenue goods and services of excluding medicines, medical gases and contracts for healthcare	< £10k	Budgetholder (limit set by Clinical Board or relevant Executive Director)	
	<£250k	Clinical Board Director, Directors of Operations, Assistant Directors and other Senior Officers (limit set by Clinical Board Director or relevant Executive Director)	
	<£250k	Executive Director	
	<£500k	Director of Finance	
	<£1m	Chief Executive	
	>£1m	Board	
	> £1m (Total cost over the period of the contract)	Welsh Government	

Authority to procure medicines and medical gases	< £100k	Chief Pharmacist or Principal Pharmacist	A detailed scheme of delegation is in place for medicines procurement
		Chief Pharmacist or Principal Pharmacist	These relate to the size of an order for a group of medicines, not to an individual medicine
	<£250k	Clinical Board Director - Clinical Diagnostics and Therapeutics	
	<£250k	Chief Operating Officer	
	<£500k	Executive Director of Finance	
	<£1m	CEO	
	Stock for use at ward level including controlled drugs	Ward sister/charge nurse	
	Approval of business case to add/remove medicine to Formulary including NICE and AWMSG recommended drugs	Medical Director via Medicines Management Group	
	Approval to provide medicine (restricted or not normally available) to individual (exceptional) patient	Relevant Clinical Board Director(s)	Subject to IPFR framework and policies

UHB217

Off-payroll working (as per procurement process guidance)	Completion of service specification and check on employment status which is to be forwarded to the Head of Procurement	Clinical Board Director / Clinical Board Director of Operations / Executive Director (support provided by Finance and Workforce)	
	Procurement process undertaken ensuring suppliers are aware of the employment status.	Assistant Director of Procurement	
	Clinical Board Director / Clinical Board Director of Operations / Executive Director to be notified of the contract award including reaffirming the employment status of the engagement.	Assistant Director of Procurement	
	If status is deemed to be employed, completion of IR35 offpayroll enrolment	Clinical Board Director / Clinical Board Director of Operations / Executive Director	

UHB217

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Management of stock	Responsibility to ensure that stock levels are appropriately managed and rotated	Directors of Operations and Delivery	
	Agree consignment levels and hold consignment Registers for all stores areas	Assistant Director of Procurement	
	Completion of returns requesting write off of stock	Budget Holder	
	Approval of write off of stock	Reported to Losses and Special Payments Panel and approved by Audit Committee	
	Responsibility for the security of stock for their area including consignment stock	Directors of Operations - can be devolved to named individuals	
Cash including banking and patients' monies	Management of cash and bank accounts	Executive Director of Finance	
	Approval of petty cash <£20	Budget holders	
	Approval of petty cash £20-£100	Assistant Finance Director - Corporate and Strategy	
	Reimbursement of patients' monies held on trust (non-Mental Health)	Cashiers make payment on evidence of information provided within Cash and Valuables Book and official "system" receipt	Refer to Patients' Property Policy
	Reimbursement of patient monies (Mental Health)		
	Where patient has capacity	Cashiers make payment on authorisation of patient and Ward Manager/Deputy Ward Manager.	Note Cashiers check that the patient has available funds in their account

	Where patient is shown to lack capacity with regard to making this particular decision	Cashiers make payment on authorisation Ward Manager/Deputy Ward Manager witnessed by another member of staff. Another member of staff collects the money from Cashiers with the patient.	As above. Need to ensure that adequate checks in place to ensure compliance with Mental Capacity Act
Capital schemes	Approval of business cases for submission to Welsh Government		
	>£1m	Board	This is outside of current delegation limits but at submission stage there is no commitment to provide/recieve funding. Where the UHB is required to contribute funding the usual limits will apply.
	<£1m	Chief Executive on advice of Management Executive	As above
	Approval of business cases for submission for in-year funding e.g. Health Technologies fund	Management Executive	As above
	Set budgets for capital schemes as part of the annual budget setting arrangements	Board	Based on prioritised recommendations from the Management Executive
	Agree budget holders for each capital scheme and ensure appropriate documentation is completed and sent to the Finance Department	Executive Director of Finance	
	Nominate an Executive Director for each capital scheme with a value of > £200k	Executive Director of Finance	
	Ensure overall UHB capital programme is delivered within budget and financial policies	Assistant Director of Strateci Planning	
	Ensure individual capital scheme is delivered within budget and within financial policies	Nominated capital budget holder	
	Budget virements within capital schemes without exceeding approved budget and purpose for which budget originally approved	Nominated capital budget holder, with confirmation from Director of Planning for schemes over £200k	

	Budget virements across discretionary capital schemes and within discretionary capital budget available including use of contingency		
	<£500k	Executive Director Strategic Planning, Executive Director of Finance and Chief Operating Officer via Major Capital Group	Note this is above the usual limit for an individual director due to the relative low value within the total capital allocation.
	<£1m	Chief Executive following recommendation from Major Capital Group	As above
	>£1m	Board	The Welsh Government will be informed as part of financial monitoring
	Approval to sign contracts for capital expenditure -		
	<£5k	Head of Compliance & Discretionary Capital and Head of Capital Planning	
	<£250k	Director Capital, Estates and Facilities	
	<£500k	Executive Director of Finance	
	<£1m	Chief Executive	
	>£1m	Board	
	Approval of staged payments in line with contract for capital expenditure		
	<£250k	Director Capital, Estates and Facilities	
	<£500k	Executive Director of Finance	
	<£1m	Chief Executive	
	>£1m	Board	
	Approval of capital expenditure or staged payments for capital expenditure outside budget	Chief Executive, notified to Board	

	Appointment of architects, quantity surveyors, consultant engineer and other professional advisors with EU Regulations	Director of Capital, Estates and Facilities Executive Director of Finance for all other projects	In line with procurement procedures and within budget available
	Day to day liaison with Welsh Government over capital matters (estates, IM&T and medical equipment)	Director of Capital, Estates and Facilities	
	Approval of additional revenue costs associated with capital expenditure prior to commencement of financial year	Executive Director of Finance following consultation with Management Executive Team	Note: This will also take account of IMTP processes and timescales. CBs are not authorised to agree to fund a revenue cost pressure from within their existing resources.
	Approval of additional revenue costs associated with capital expenditure in year	Chief Executive	
			All figures include VAT

Decision to commence with the procurement process with regard to clinical equipment to ensure where appropriate standardisation	Equipment >£5k	Clinical Board Director to ensure agreement as appropriate via Clinical Equipment Group	Note - for Point of Care Testing Equipment ensure that procurement meets the provisions of the Point of Care Testing Policy
	Equipment <£5k	Clinical Director to ensure agreement as appropriate via Medical Equipment Management Group	As above

Quotation, tendering and contracting procedures for goods and services excluding primary care, continuing health care and funded nursing care and services commissioned from other health boards	No requirement to obtain quotes for single items up to £1,000 or for items to be purchased using a nationally negotiated contract, but there is always a responsibility to ensure best value	Budget holder	One quote is required
	Obtaining 2 written quotations for expenditure between £1,000 and £5,000	Assistant Director of Procurement and Directors of Operations	Note: up to £5,000 the minimum competition is at the discretion of the Director of Finance Single tender actions shall be permitted under certain limited circumstances. The Chief Executive has delegated authority to the Director of Finance to approve. (see below) All single tender actions will be reported to the Audit Committee.
	Obtaining a minimum of 3 quotations for goods/services from £5,000 to £25,000	Assistant Director of Procurement and Directors of Operations	
	Obtaining a minimum of 4 written competitive tenders for goods and services from £25,000-£113k (OJEU Threshold) - Local tender	Assistant Director of Procurement and Directors of Operations	This needs to be completed on the EBravo system. All quotations should be managed in this way. Procurement Services currently using the electronic system
	Authority to commence with Single Tender Actions	Executive Director of Finance	See above
	Approval to go out to contract above EU OJEU limit and upto £1million	Assistant Director of Procurement and Directors of Operations	Note: 5 written competitive tenders required.
	Approval to go out to tender for contracts above £1million	WAG approval required	
	Approval and signing of contracts < £250k (excluding management consultancy)	Directors	

	Approval and signing of management consultancy contracts < £500k (excluding capital projects professional advice)	Executive Director of Finance	
	Approval and signing of contracts <£500k	Executive Director of Finance	
	Approval of contracts <£1m	Chief Executive	
	Approval of contracts > £1m	Board and Welsh Government	
	Opening Quotations	E-Bravo System - Procurement	
	Opening Quotations	Capital and Estates	At present Capital and Estates manually process quotations. This will be moved over to E-Bravo asap
	Opening Tenders (Capital and Estates)	Finance Department	This is a temporary arrangement - previously managed by Governance Department
	Opening Tenders (Procurement)	E-Bravo System - Procurement	This needs to be completed on the ebravo system. All tenders should be managed in this way. Procurement Services currently using the electronic system

	Maintenance of Register of Tenders	Assistant Director of Procurement	This needs to be completed on the EBravo system. All tenders should be managed in this way. Procurement Services currently using the electronic system
	Adding products to catalogues	Assistant Director of Procurement	
	Inclusion of Supplies within OLR catalogue	Divisional Manager or Clinical Director in conjunction with Supplies Manager or Deputy	
	All OLR catalogue requisitions up to £20,000	OLR Designated Officer within Divisions	
	All OLR catalogue requisitions over £20,000	OLR Designated Officer with countersignature of Divisional Manager	
	Orders exceeding 3 years	Executive Director of Finance or Chief Executive	

	All contracts for goods and services and subsequent variations to contracts	Executive Director of Finance or Chief Executive with appropriate Clinical Board Director/Executive Director	
Information Management & Technology (IM&T)	All purchases of hardware and software must be undertaken in line with agreed IT policies, Procedures and contractual arrangements.		For advice please contact the IT Department
	No purchase or installation may be made of IT software whether new or upgrades to existing systems other than via the IT department		
	Purchases of routine desktop hardware should be procured via UHB contracts. Purchasing of servers should always be via IT		
Licences and leases for property	Preparation of all tenancy agreements/licences for all staff subject to UHB Policy on accommodation for staff	Director of Capital, Estates and Facilities	
	Signature of all tenancy agreements/licences for staff (as above)	Executive Director of Finance	
	Approval of rent based on professional assessment	Executive Director of Finance	
	Granting and termination and variation of leases or licences with annual rent less than £100k	Director of Capital, Estates and Facilities	Includes letting of UHB premises to third parties and UHB taking on additional premises
	Granting and termination of leases with annual rent greater than £100k	Board	
	Entering into PFI contract	Board	
Condemning and disposal of assets	Maintain losses and special payments register	Executive Director of Finance	Reported to Audit Committee
	Items with original value obsolete, obsolescent, redundant, irreparable or cannot be repaired cost effectively		
	with current/estimated purchase price <£499	Budget Manager	
	with current purchase new price >£500	Clinical Board Director or relevant Executive Director	
	with current purchase new price > £5000	Executive Director of Finance	

	Disposal of mechanical and engineering plant (subject to estimated income exceeding £1,000 per sale)	Executive Director of Finance	
	Disposal of property or land	Board	
Fraud	Reporting a suspected criminal offence relating to business eg fraud, theft etc to the police (see separate section re criminal offences relating to the provision of healthcare or employment)	Executive Director of Finance in association with the Local Counter Fraud Specialist	Refer to Counter Fraud and Corruption Policy
	Responsibility to notify Counter Fraud in confidence in case of suspected fraud	All staff	
	Liaison with the Local Counter Fraud Specialist and Counter Fraud and Security Management Services where there are cases of fraud or corruption or anomalies which indicate fraud or corruption	Executive Director of Finance	Reported to Audit Committee
Losses and compensation	Authorise fruitless payments (including abandoned capital schemes)	Audit Committee (upon recommendations from the Losses and Special Payments Panel)	
	<£250k	Chief Executive on advice from the Executive Director of Finance	
	>£250k	Welsh Government	
	Authorise payment for clinical negligence and personal injury claims where legal advice has been obtained and guidance applied (negotiated settlements)	Audit Committee (upon recommendations from the Losses and Special Payments Panel)	
	<£1m (including plaintiffs' costs)	Executive Nurse Director	
	>£1m	Welsh Government	
	Other clinical negligence and personal injury claims where legal advice has not been obtained	Audit Committee (upon recommendations from the Losses and Special Payments Panel)	
	<£25k	Assistant Director of Nursing	
	£25k-£50k	Executive Nurse Director	

	>£50k	Welsh Government	
	Authority to write off losses and authorise special payments for bad debts and claims abandoned - private patients, overseas visitors and others.		
	<£50k	Audit Committee (upon recommendations from the Losses and Special Payments Panel)	
	>£50k	Welsh Government	
	Authority to write off damage to buildings, fittings, furniture and equipment, loss of equipment and property in stores and in use due to culpable causes (e.g. fraud, theft, arson) or other.		
	<£50k	Audit Committee (upon recommendations from the Losses and Special Payments Panel)	
	>£50k	Welsh Government	
	Authorise compensation payments made under legal obligation (excluding Clinical Negligence and Personal Injury)	Chief Executive	
	Authorise extra contractual payments to contractors.		
	<£50k	Executive Director of Finance	
	>£50k	Welsh Government	
	Authorise ex-gratia payments to patients and staff for the loss of personal effects		
	<£1k	Small Claims Panel	
	<£10k	Executive Nurse Director	
	<£50k	Chief Executive	
	>£50k	Welsh Government	

	Authority to write off Losses of cash due to theft, fraud, overpayment of salaries, wages, fees and allowances		
	<£50k	Audit Committee (upon recommendations from the Losses and Special Payments Panel)	
	>£50k	Welsh Government	
Setting of fees and charges	Private patient, overseas visitors, income generation and other related services	Director of Finance	In line with Welsh Government policy

Sponsorship	Sponsorship to attend courses and conferences	Executive Director or Clinical Board Director. Individual is responsible for ensuring this is notified on the gifts and hospitality register	Refer to Standards of Behaviour Framework Policy incorporating Declarations of Interest, Gifts, Hospitality and Sponsorship
	Sponsorship of UHB events e.g. Nursing Conference	Executive Director or Clinical Board Director up to £500. Director of Finance above £500.	
Fundraising	Approval of fundraising using UHB premises or facilities or staff time within working hours	Executive Director of Finance on recommendation from Clinical Board Director	Need to be clear of difference between UHB and charitable funds
Advertising	Approval of paid for contracts for advertising UHB or its services other than those set out below	Director of Finance	Anything else we routinely advertise?
	Advertising relating to sale of properties	Director of Capital, Estates and Facilities	
	Advertising relating to recruitment	Executive Director of People and Culture	
	Advertising relating to public health initiatives	Director of Public Health	
	Public advertisements relating to UHB governance eg advertising AGM or Board meetings	Director of Corporate Governance	
	Advertising relating to income generation schemes within a Clinical Board up to £5,000	Clinical Board Director	

Intellectual Property	Agreement to register intellectual property	Executive Director of Finance	
Submission of funding bids excluding Research and Development (R&D)	Agreement to submit proposals for accessing capital or revenue funding from Welsh Government or any other funding body (excluding R&D but including Invest to Save, Health Technologies Fund etc)	Executive Director of Finance on recommendation of person drawing up the bid	Major bids may need to go via HSMB or Management Executive
Charitable Funds	Agreeing a budget holder for each individual fund	Executive Director of Finance	Note, authorised signatories are not allowed for charitable funds
	Approval of use of charitable funds < 25k	Budget holders	
	Approval of use of charitable funds > 25k	Charitable Funds Committee	
	Approval of new staff expenditure	Charitable Funds Committee	
	Approval of use of charitable funds > 125k	Trustee	
	Investment of charitable funds	Executive Director of Finance	
Commercial R & D	Approval and execution (by signature), on behalf of the UHB, of the contract between the UHB and commercial Sponsor for the UHB's delivery of a clinical trial/investigation on behalf of the Sponsor.	Executive Medical Director	Principal investigators (normally a consultant) initiate R&D authorised commercial clinical trials in association with external funding and external trial management.
	Approval and execution (by signature) of service level agreements between the UHB and other NHS organisations and/or third parties for support services required for commercial trials	Executive Medical Director	UHB provides support to other NHS Institutions (principally Velindre NHS trust) for the delivery of commercial trials and vice versa (e.g. radiology), other suppliers to the UHB include Spire and Cardiff University (CU).

	Allocation of Commercial R & D Income	Executive Director of Finance at direction of Executive Medical Director	Income allocated to Clinical Boards, Directorates, Principal Investigator (PI) accounts, support departments and third parties including Higher Education Institutes (HEIs) (principally CU) in line with process agreed with R & D Office (ISR-RD-005 FAQs re RD Funding - V1 FINAL 180713).
	Responsibility for delivering R&D activity in line with funded budgets and maintaining audit trail of expenditure to demonstrate that it is expended on R&D	Clinical Board Director via R&D Lead	Accountable to Medical Director
	Approval of expenditure to support Commercial R & D	Authorised by the relevant Clinical Board/Directorate Manager	Subject to UHB Standing Orders and SFIs
	Approval of use of Principal Investigator Balances	Authorised by the relevant Clinical Board/Directorate Manager & Clinical Board/Directorate R & D Lead	Subject to UHB Standing Orders and SFIs & agreed protocol (ISR-RD-005 FAQs re RD Funding - V1 FINAL 180713).
	Closure of 'Time Barred' (18 month post study closure date) Principal Investigator Balances	Executive Director of Finance	Subject to process agreed with R & D Office & T&F Finance Group (ISR-RD005 FAQs re RD Funding - V1 FINAL 180713).
	Allocation of budgets from Research Legacy Fund to Clinical Boards	Executive Director of Finance	Subject to process agreed with R & D Office & T&F Finance Group (Use of surplus funds generated from commercial trial activity)
	Approval of use of Central Research Legacy Fund	R&D Director	

	Approval of use of Research Legacy Funds devolved to Clinical Boards	Expenditure authorised by the relevant Clinical Board/Directorate Manager & Clinical Board/Directorate R & D Lead	The Clinical Board/Directorate Research & Development Leads Group review reports detailing the deployment of the Research Legacy Fund
Non-Commercial Funded R & D	Approval of UHB led R & D Grant applications	Executive Director of Finance on recommendation from R&D Office	PI to complete with advice and input from Finance Department. Signatures can be required at very short notice. Grant applications can vary from £1k to > £2m
	Approval of R & D Grant applications led by other organisations where UHB commitment is <£75k	R&D Director	
	Approval of R & D Grant applications led by other organisations where UHB commitment is <£250k	Medical Director	
	Approval of R & D Grant applications led by other organisations where UHB commitment is <£500k	Director of Finance	
	Approval of R & D Grant applications led by other organisations where UHB commitment is <£1m	Chief Executive	
	Acceptance of UHB R & D Grants	Director of Finance on recommendation from R&D Office	Terms and Conditions can vary.
	Agreement to support costs in Grant applications led by external organizations.	Director of R & D (delegated to R&D Manager in absence of R&D Director)	For example, the UHB may be asked to confirm that NHS support costs included within Cardiff University grant applications are reasonable and will be supported from core NISCHR funding.
	Agreement of annual contract with National Institute for Social Care and Health Research (NISCHR)	Executive Medical Director and Executive Director of Finance	
	Day to day liaison with NISCHR including submission of bids/proposals/contract changes <£75k	R&D Director	
	Approval of NISCHR bids/proposals/contract changes >£75k	Executive Medical Director and Executive Director of Finance	
	Allocation of NISCHR R & D Income	Executive Director of Finance	Determined by Financial Strategy & Plan

	Allocation of Budget associated with NISCHR R & D Income	Executive Director of Finance with agreement of Executive Medical Director	The Budget allocation to Clinical Boards & Directorates is informed by the NISCHR Funding formula, R&D Strategy and recommendation from the R&D Director
	Approval of application to NISCHR for Excess Treatment Cost Funding	R&D Director	PI to complete with advice and input from Finance Department. R&D Director to approve in accordance with NISCHR requirements
	Authorization of Expenditure associated with NISCHR & other externally funded R & D Projects	Expenditure Authorised by the relevant Clinical Board/Directorate Manager & Clinical Board/Directorate R & D Lead	
	Non Commercial Site Agreements where financial transactions are <£75k	R&D Director	
	Non Commercial Site Agreements where financial transactions are <£250k	Medical Director	
	Non Commercial Site Agreements where financial transactions are <£500k	Director of Finance	
	Non Commercial Site Agreements where financial transactions are <£1m	Chief Executive	
	Service Level Agreements where there are financial transactions <£75k	R&D Director	UHB provides support to other NHS organizations for the conductance of trials.
	Service Level Agreements where there are financial transactions <£250k	Medical Director	
	Service Level Agreements where there are financial transactions <£500k	Director of Finance	

	Service Level Agreements where there are financial transactions <£1m	Chief Executive	
Inter Clinical Board trading arrangements	Agreeing inter Clinical Board trading arrangements which involve recharging other Clinical Boards for services	Executive Director of Finance based on proposal to go to HSMB	
Business cases for new investment	Sign off of business cases for new investment	Chief Executive and Executive Director of Finance	Should normally be via annual budget setting process
Welsh Risk Pool	Approve UHB input into Welsh Risk Pool policies and procedures and financial risk sharing arrangements	Executive Director of Finance and Executive Nurse Director	Note: Further attention required as risk pooling arrangements change

Workforce and Organisational Development Freedoms

Area	Delegated Matter	Delegated to	Comment
Appointment of staff	Appointment of staff within funded establishment (all staff groups excl Consultant Medical and Dental)	Clinical Board Directors , Corporate Directors and Assistant Directors.	Delegation applies when Clinical Board/Corporate Directorate is in financial balance otherwise special interim arrangements may apply, for example approval via vacancy clearing panel.
	Engagement/Recruitment of Consultant Medical/Dental Staff - New, Replacement and Retire and Return	Chief Operating Officer/Executive Medical Director and Executive Director of Finance	
	Engagement of staff outside funded establishment leading to increase in revenue cost but within budget.	Chief Executive	
Pay and conditions	Approval of additional increments to staff within budget and All Wales Terms and Conditions on recruitment.	Heads of Workforce and Organisational Development	
	Approval of revised job resulting in change in grade in line with agreed policy and All Wales Terms and Conditions	Heads of Workforce and Organisational Development	
	Staff re-grading in line with agreed policy and All Wales Terms and Conditions	Assistant Director of Workforce	
	Agreement to recommend to the Welsh Government payments in accordance with Recruitment and Retention Payments Protocol	Director of People and Culture	Recommendation will be made by the Director of Workforce and Organisational Development following the completion of the appropriate steps within the protocol.
	Agreement of variations affecting pay and hours of work for existing employees in line with agreed policy and All Wales Terms and Conditions	Directorate/Locality Managers or Heads of Departments for Corporate Departments	

	Authority to complete standing data forms affecting pay, new starters, variations and leavers	Line Managers	
	Authority to authorise travel, subsistence expenses and exam fees (within 3 months of incurring expenditure)	Line Managers	
	Authority to authorise travel, subsistence expenses and exam fees (after 3 months of incurring expenditure)	Heads of Finance	
	Authorisation of non travel related expenses incurred by staff	Line Managers	
Approval of relocation costs	Chief Executive and Directors	Reserved for Remuneration and Terms of Service Committee	
	Medical and Dental Staff	Executive Medical Director	
	All other staff groups	Executive Directors	
Approval of lease cars	Chief Executive and Directors	Reserved for Remuneration and Terms of Service Committee	
	Other staff	Executive Director	Refer to Lease Car Policy
Approval of mobile phones	Chief Executive	UHB Chair	
	Directors	Chief Executive	
	Other staff	Line Manager based on needs of role	Refer to Management, Issue and Use of UHB Mobile Phone Policy and

Short term engagement of additional staffing resources	Approval of Overtime/Bank	Line Managers	
	Authorisation Of Temporary/Locum Medical and Dental Staff - on contract (MEDACS)	Clinical Board Director or Executive Directors for Corporate Departments*	Refer to arrangements for engaging staff via MEDACS. Executive Directors to retain authority for "corporate departments" e.g. Infection, Prevention and Control and Public Health.
	Authorisation Of Temporary/Locum Medical and Dental Staff - off contract	Clinical Board Director or Executive Directors for Corporate Departments	
	Approval of other Agency staff where agency on GPS Contract - Nursing	Clinical Board Nurses or Assistant Directors for Corporate Departments	
	Approval of other Agency Staff - Nursing utilising Thornbury	Executive Nurse Director	
	Approval of other Agency Staff - Therapies and Health Sciences	Directors of Operations	New section capturing Health Scientists.
Providing staff to or seconding staff from other organisations (e.g staff with academic commitments, seconding staff to partner agencies)	See Commissioning and Provision of Services section		
Approval of Leave	Setting framework for numbers of staff on leave at any one time to maintain service delivery.	Line Managers	
	Annual leave approval	Line Managers	May be formally delegated by Line Manager to supervisor/team leader
	Annual leave - approval of carry forward in exceptional circumstances (up to a maximum of 5 days)	Clinical Board Directors, Clinical Board Nurses or Directors of Operations /Assistant Directors for Corporate Departments	This should also only be in exceptional circumstances

	Annual leave - approval of carry forward of leave accrued during periods of approved absence e.g. sickness/maternity leave in accordance with policy and statutory provisions	In accordance with policy	Refer to appropriate policy. Seek further advice from Heads of Workforce and OD/Assistant Director of HR if necessary.
	Approval of Special Leave (to include compassionate, carers and leave with pay)	Line Managers	Refer to Special Leave Policy
	Approval of Leave without pay	Directorate Managers/ Head of Department for Corporate Departments	Refer to Special Leave Policy
	Medical and Dental Staff Leave of Absence (Paid and Unpaid)	Clinical Board Director*	Executive Director for "corporate departments" e.g. Public Health and Infection, Prevention and Control
	Approval of Time off in Lieu	Line Managers	
	Approval of maternity and paternity leave in line with Policy	Line Managers	
	Sick Leave - return to work on phased basis to assist recovery in accordance with policy.	Line Managers	
	Extension of sick leave on full or ½ pay - Directors	Reserved for Board	
	Extension of sick leave on full or ½ pay - Other Staff	Chief Operating Officer/Executive Directors for Corporate Departments	
	Approval of study leave <£2k	Heads of Department	
	Approval of study leave >£2k (Requires amendment to Scheme of Delegation)	Clinical Board Directors or Executive Directors	
Approval of voluntary early release (VERS), redundancy and early retirement		THIS HAS NOT BEEN DELEGATED - RESERVED FOR REMUNERATION AND TERMS OF SERVICE COMMITTEE	

Disciplinary Investigations and Dismissal of Staff	Dismissal of staff - in accordance with policy relevant to staff group. Where the policy applicable to the case in question does not confer delegated power (for instance where Welsh Health Circular 90 (22) applies), the UHB may delegate its functions to a sub Committee of the Board, comprising 3 Board Members, none of the Members of the Sub Committee will have had previous involvement with the case.	Appropriate officer with advice of Heads of Workforce and Organisational Development or Sub Committee of the Board as the case may be.	Refer to appropriate policy.
Recognition of Staff Representatives		Director of People and Culture	Note There should be discussion and agreement with line managers before individuals are put forward for accreditation.
Extended Role Activities	Approval of nurses and other professionals to undertake duties/procedures which can be properly described as beyond the normal scope of practice.	Appropriate executive lead in association with the Executive Medical Director	
Approval of Consultant Medical and Dental Job Plans	All staff excluding Clinical Directors	Clinical Directors	
	Clinical Directors	Clinical Board Directors	

Corporate

Area	Delegated Matter	Delegated to	Comment
Attestation of sealing in accordance with Standing Orders	(a) custody	Director of Corporate Governance	
	(b) register of sealings	Director of Corporate Governance	
Declarations of Interest and Gifts, Hospitality and Sponsorship of individual employees	Set direction, policies and procedures	Director of Corporate Governance	Policies approved by the Board on the recommendation of the Audit Committee Note: Policy subject to review
	Maintaining the Register of Interests and the Register of Gifts, Hospitality and Sponsorship	Head of Risk and Regulation	
	Responsibility for declaring a relevant interest or the receipt of a gift, hospitality or sponsorship	All employees	Refer to Standards of Behaviour Framework including Declarations of Interest, Gifts, Hospitality and Sponsorship Policy
	Approval of the receipt of any gift, hospitality or sponsorship requires recording under the policy	Clinical Board Directors or Executive Directors	Gifts above £25 should not be accepted but if a gift is offered and it is not possible to decline it must be declared. Only gifts of low value can be accepted from commercial organisations e.g. pens, diaries. Hospitality only acceptable under very limited circumstances. Tickets to sporting events must not be accepted. Refer to above policy for full details.
	Corporate sponsorship - see Finance section	Executive Director of Finance	
Contractor's Responsibilities	Ensuring contractors and their employees are aware of any requirement to comply with Standing Orders and Standing Financial Instructions	Executive Director for area to which contract relates or Designated Capital Scheme Manager	Also refer to Finance and Commissioning sections.

Indemnity/Insurance Policies	Making arrangements to ensure that appropriate insurance/indemnity is in place - UHB wide	Director of Corporate Governance	
	Making arrangements to ensure that appropriate insurance/indemnity is in place - Clinical Board Specific	Directors of Operations Assistant Directors for Corporate Departments	Note: There are strict rules regarding the UHBs ability to purchase commercial insurance. Advice should be sought from the Governance Department
Risk Management	Set direction, policies and procedures	Director of Corporate Governance	Policies approved by the Audit Committee
	Management and maintenance of the Corporate Risk Register and Assurance Framework	Head of Risk and Regulation	Refer to Risk Register and Risk Assessment Procedure
	Management and maintenance of the Clinical Board Risk Registers	Directors of Operations Assistant Directors for Corporate Departments	Refer to Risk Register and Risk Assessment Procedure
	Management and maintenance of Directorate Risk Registers	Directorate Managers or Heads of Department for Corporate Departments	Refer to Risk Register and Risk Assessment Procedure
Relationships with Press	Non-Emergency General Enquiries	Director of Communications, Manager on call or Executive Director	
	Within Hours		
	Outside Hours		
Documents for Legal Proceedings	Approve and sign documents necessary either in legal proceedings or resolution of the Board	Refer to Standing Orders and other sections regarding specific categories of documents.	

Legal advice	Engagement of UHB Solicitors and contract management	Director of Corporate Governance	
	Authority to seek legal advice - all issues	Director of Corporate Governance	
	Authority to seek advice on specific legal issues - clinical issues excluding mental health act legislation	Director of Corporate Governance	
	Advice regarding interpretation of Mental Health Act Legislation	Mental Health Act Manager for urgent items. Otherwise via Director of Corporate Governance	
	Advice regarding interpretation of Mental Capacity Legislation/Deprivation of Liberty	Mental Capacity Manager for urgent items. Otherwise via Corporate Governance	
	Advice regarding human resources legislation	Assistant Director of Workforce	
	Advice regarding property matters (relating to capital works and disposal of property)	Director of Capital, Estates and Facilities	
	Advice regarding clinical negligence and personal injury claims	Claims Managers	
Information Governance and Data Protection	Set direction, policies and procedures	Director of Digital Health Intelligence	Policies approved by Digital Health Intelligence Committee
	Information risk policy and statement of internal control in respect of information governance	Director of Digital Health Intelligence	As above
	Operational procedures within the Clinical Boards and Corporate Directorates and ensuring compliance with legal requirements, guidance and best practice.	Directors of Operations or Assistant Directors of Corporate Directorates	
	Provision of advice and support to Clinical Boards and Corporate Directorates	Head of Information Governance	

	Corporate training programme - development and maintenance	Head of Information Governance	
	Clinical Board and Corporate Directorates training programmes - local development and implementation	Directors of Operations or Assistant Directors of Corporate Directorates	
	Responding to the Records Management NHS Code of Practice - Subject Access Requests - General Enquiries	Head of Health Records	
	Responding to Data Protection Act - Subject Access Requests - specific to data protection queries and best practice	Director of Digital Health Intelligence	
	Data Protection Breaches - refer to Quality and Patient Experience section re incidents		
Caldicott Standards	Caldicott Standards and Action Plan	Executive Medical Director	

Freedom of Information Act Compliance	Set direction, policies and procedures	Director of Digital Health Intelligence	Policies approved by Digital Health Intelligence Committee
	Acknowledgement of request and liaison with requester	Director of Digital Health Intelligence	
	Ensure framework in place and arrangements for providing information to facilitate provision information to requester	Directors of Operations or Assistant Directors of Corporate Departments	
	Approval of response prior to sending to requester	Clinical Board Director or Executive Directors	
	Approval of response where it found that information is not held or will be refused under an appropriate exemption	Head of Information Governance	
	Sending final response to requester	Director of Digital Health Intelligence	

	Management of and response to any complaints received under the Freedom of Information Act	Director of Digital Health Intelligence	
Information Sharing Protocols (ISPs)	Set direction, policies and procedures in accordance with Welsh Accord for Sharing Personal Information	Director of Digital Health Intelligence	
	Operational procedures within the Clinical Boards and Corporate Directorates and ensuring compliance with legal requirements, guidance and best practice.	Directors of Operations or Assistant Directors of Corporate Directorates	
	Provision of advice and support and overall co-ordination	Head of Information Governance	
	Development of ISPs	Heads of Operations and Delivery or Assistant Directors of Corporate Departments	
	Approval and sign off of ISPs	Director of Digital Health Intelligence	
	Archiving of ISPs in corporate library	Head of Information Governance	
	Corporate training programme - development and maintenance	Head of Information Governance	
	Clinical Board and Corporate Directorates training programmes - local development and implementation	Directors of Operations or Assistant Directors of Corporate Directorates	
Data Quality	Set direction , policies and procedures	Director of Finance	

	Ensuring data input into systems is of appropriate quality, accuracy and timeliness and in accordance with UHB policies and procedures	All Employees	
	Ensuring data definitions are clear and in line with Welsh Government requirements	Assistant Director - Performance and Information	
	Ensuring that there is a nominated lead for all external data submission	Clinical Board Director, Clinical Director or Assistant Director responsible for data submission	
	Ensuring the accuracy and timeliness of data submissions and that any issues highlighted as appropriate	Nominated Lead for external data submission	

Higher Degree of Delegation and Earned Autonomy at Level 2 and 3

Note: The matters delegated within the wider Scheme of Delegation are delegated at Level 1 - the matters below are additional freedoms delegated to those Clinical Boards assessed as operating at Levels 2 and 3. **Quality, Safety and Experience**

Area	Delegated Matter	Level 2	Level 3	Comment
Concerns/Complaints Management	Sign off of final draft prior to sending to complainant			See Comments in main QSE Section re Concerns Management
	Grade 1	Clinical Boards to manage complete process after initial grading of concern. Copy of response to complainant to be sent to Concerns Department following signature	As Level 2	This level of authorisation is dependent on performance and Executive Nurse Director will formally advise each CB when they can proceed to this level of autonomy.
	Grade 2		Clinical Boards to manage complete process after initial grading of concern. Copy of response to complainant to be sent to Concerns Department following signature	
	Some Grade 3 concerns		Clinical Boards to manage complete process after initial grading and on advice of Concerns Department. Copy of response to complainant to be sent to Concerns Department following signature	

UHB217
Version 1.7
Approved :25 Nov 2021
Review Date: 25 Nov 2024

Workforce and Organisational Development

Area	Delegated Matter	Level 2	Level 3	Comment
Appointment of staff	Appointment of staff within funded establishment (all staff groups excl Consultant Medical and Dental)	Clinical Directors and Community Directors	Clinical Directors and Community Directors	Delegation applies when Clinical Board/Corporate Directorate is in financial balance otherwise special interim arrangements may apply, for example approval via vacancy clearing panel.
Pay and conditions	Staff re-grading in line in line with agreed policy and All Wales Terms and Conditions	Assistant Director of Workforce	Assistant Director of Workforce	
Short term engagement of additional staffing resources	Authorisation Of Temporary/Locum Medical and Dental Staff - on contract (MEDACS)	Clinical Board Director	Clinical Board Director	Refer to arrangements for engaging staff via MEDACS. Executive Directors to retain authority for "corporate departments" e.g. Infection, Prevention and Control and Public Health.

Approval of Leave	Medical and Dental Staff Leave of Absence (Paid and Unpaid)	Clinical Board Director	Clinical Board Director	

Commissioning and Provision of Services To and From Other Organisations

Area	Delegated Matter	Level 2	Level 3	Comment
Provision of services by UHB to other organisations excluding Welsh Health Specialist Services Committee (JCC) and provision of staffing	Approval to provide new healthcare services to new and existing organisations		Clinical Board Director	

UHB217
Version 1.7
Approved :25 Nov 2021
Review Date: 25 Nov 2024

Executive Director Responsibilities Delegated Matter	Corresponding Legislation if applicable	Responsible Officer
Freedom of Information - ensuring appropriate UHB response	Freedom of Information Act 2000	Director of Digital Health Intelligence
Information Governance	Data Protection Act 1998	Director of Digital Health Intelligence
Information Governance	Common Law duty of Confidentiality	Director of Digital Health Intelligence
Information Governance	Access to Health Records Act 1990	Medical Director
Mental Health	Mental Health Act 2007	Chief Operating Officer
Mental Health	Mental Health Measure	Chief Operating Officer
Human Rights	Human Rights Act 1998	Executive Director of People and Culture
Equality	Equality Act 2010	Executive Director of People and Culture
Equality	Socio-economic Duty - Equality Act 2010 (Authorities subject to a duty regarding Socio-economic Inequalities) (Wales) Regulations 2021	Executive Director of Public Health

Equality	Race Relations Act	Executive Director of People and Culture
Equality	Welsh Language Act	Executive Director of People and Culture
Public Interest/Whistleblowing	Public Interest Disclosure Act / Whistleblowing	Executive Director of People and Culture
Health and Safety - Staff , Students, Contractors and Visitors	Health and Safety at Work Act and Regulations	Executive Director of People and Culture
Health and Safety - Patients	Health and Safety at Work Act and Regulations	Executive Nurse Director
Health and Safety	Control of Substances Hazardous to Health Regulations	Executive Director of People and Culture
Fire Safety	Fire Safety legislation	Executive Director of People and Culture
Environmental	Environmental Protection Act	Executive Director of People and Culture
Health and Safety	Violence and Aggression legislation	Executive Director of People and Culture
Protection of Children	Children Act 1989, 2004	Executive Nurse Director
Protection of Children	Protection of Children Act 1999	Executive Nurse Director
Protection of Adults and Vulnerable Groups	Care Standards Act	Executive Nurse Director
Protection of Vulnerable Groups	Protecting Vulnerable Groups Act 2006	Executive Nurse Director
Protection of Vulnerable Groups	Sexual Offences Act 2003	Executive Nurse Director
Protection of Adults	Mental Capacity Act 2005	Executive Nurse Director
Protection of Adults and Vulnerable Groups	Deprivation of Liberty Safeguards	Executive Nurse Director
Concerns	NHS Redress Measure	Executive Nurse Director
Calculating nurse staffing levels for designated acute medical and surgical inpatient wards	Nurse Staffing Levels (Wales) Act 2016	Executive Nurse Director
Food Hygiene	Food Act (Food Hygiene Regulations)	Executive Director of Finance
Clinical Standards	Royal College Standards	Medical Director
Standards	Standards for Health Services in Wales	Executive Nurse Director

Decontamination		Executive Director of Therapies and Health Sciences
Nutrition		Executive Director of Therapies and Health Science
Health and Safety	Ionising Radiation (Medical exposure) Regulations	Executive Director of Therapies and Health Science
Medicines Management	Medicines legislation (European, UK and Welsh)	Executive Medical Director
Clinical Standards	National Institute for Clinical Excellence Directives	Executive Medical Director
Clinical Standards and Patient Safety	National Patient Safety Agency Directives	Executive Nurse Director
Patient Safety	Blood safety and quality regulations	Executive Medical Director
Patient Safety	Human Tissues Act 2004	Executive Medical Director
Patient Safety	Clinical trials directives and regulations	Executive Medical Director
Patient Safety	Organ Donation	Executive Medical Director
Employment/staff relations	Employment legislation	Executive Director of People and Culture
Patient Safety	Medical Device Directives and Regulations	Director of Therapies and Health Sciences
Employment/staff relations	European Working Times Directive	Executive Director of People and Culture
NHS Provision	NHS Wales (2006) Act	Executive Director of Strategic Planning
Commissioning	EU Directive on cross border healthcare	Executive Director of Strategic Planning
Public Safety	Civil Contingencies Act 2004	Executive Director of Strategic Planning
Protection of Adults and Vulnerable Groups	Carers Strategy Measure	Executive Nurse Director
Public Health	Smoke Free Premises etc Regulations	Executive Director of Public Health
Public Health	Health Promoting Hospital Vending Directions	Executive Director of Public Health
Finance	NHS Wales Statutory Financial Duties	Executive Director of Finance
Charities	Charities Act	Executive Director of Finance
Finance and probity	Procurement Legislation	Executive Director of Finance
Information Governance	Computer Misuse Act 1990	Director of Digital Health Intelligence
Continuing Health Care	-	Chief Operating Officer
Funded Nursing Care	-	Chief Operating Officer
Primary Care Contractor management and performance	-	Chief Operating Officer
Admission to Performers List	-	Executive Medical Director
Removal of violent patients from GMS services	Health and Safety at Work Act and Regulations	Chief Operating Officer
Accreditation of enhanced services	-	Chief Operating Officer supported by Executive Medical Director
Dental QAS returns	-	Chief Operating Officer

Primary Care Out of Hours Arrangements		Chief Operating Officer
Representation in Statutory Partnerships	-	Executive Director of Strategic Planning
Unified Assessment		Chief Operating Officer
Care Homes Sector		Chief Operating Officer
Performance Management Arrangements	-	Executive Director of Finance
Receipt and Opening of Quotations	Procurement Legislation	Executive Director of Finance UHB217
Cancer Network		Executive Medical Director
Cardiac Network		Chief Operating Officer
Access Targets/Referral to Treatment Times		Chief Operating Officer
Unscheduled Care		Chief Operating Officer
LTA/HCAs		Executive Director of Finance
Land, buildings and assets		Executive Director of Finance
Facilities and Estates Management		Executive Director of Finance
Sustainable Development		Executive Director of Strategic Planning
WHSCC Relationship - Commissioning		Executive Director of Strategic Planning
WHSCC Relationship - Provider		Executive Director of Finance
Primary Care Estates Investments and Approvals		Executive Director of Strategic Planning
Co-ordination of delivery plans (delivery through COO)		Executive Director of Strategic Planning
Clinical Strategy		Executive Director of Strategic Planning
Information Management and Technology (IM&T)		Director of Digital Health Intelligence
Barring and Disclosure		Executive Director of People and Culture
Procurement, Issuing Tenders and Post Tender Negotiations		Executive Director of Finance
External Communications including Media		Chief Executive

Version 1.7

Approved :25 Nov 2021

Review Date: 25 Nov 2024

Patient Group Directives		Executive Medical Director
Individual Patient Commissioning		Executive Director of Strategic Planning
Caldicott Guardian		Medical Director
Public Health		Executive Director of Public Health
Commissioning		Executive Director of Strategic Planning
Professional Nursing and Midwifery Workforce Standards Education Regulation		Executive Nurse Director
Professional Medical and Dental Workforce Standards Education Regulation Revalidation		Executive Medical Director
Professional Therapies and Health Sciences Workforce Standards Education Regulation		Executive Director of Therapies and Health Sciences
UHB217		
Workforce - excluding above Standards Education Regulation		Executive Director of People and Culture
Patient Experience		Executive Nurse Director
Royal College Guidelines - Implementation and Standards		Executive Medical Director
National Institute for Clinical Excellence (NICE)		Medical Director
Research and Development		Medical Director
Delivery of Clinical Services		Chief Operating Officer

Continuous Service Improvement (Clinical Services)		Chief Operating Officer
Continuous Service Improvement (Corporate Functions)		Executive Directors
Clinical Coding		Director of Digital Health Intelligence
Information		Director of Digital Health Intelligence
Data Quality		Director of Digital Health Intelligence
Corporate Governance		Director of Corporate Governance
Risk Management		Director of Corporate Governance
Intellectual Property Rights and Commercialisation		Executive Director of Finance
Information Governance - Senior Information Risk Owner (SIRO)		Director of Digital Health Intelligence
Professional Public health standards Education; revalidation and regulation		Executive Director of Public Health (discharged through Public Health)
Area Planning Board - Substance Misuse		Executive Director of Public Health
Relationships with Public Services Boards		Executive Director of Strategic Planning

UHB217