



NHS DUMFRIES AND GALLOWAY

SCHEME OF DELEGATION

| | | | |
|------------------------------|----------------|----------------------------|---------------|
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The only current version of this policy is on the intranet

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1. Schedule of Decisions Reserved for Full Board

The following items may only be approved by decision of the full Board:

| Item | Description |
|------|---|
| 1.1 | Updates and changes to Board Standing Orders |
| 1.2 | The establishment, terms of reference, reporting arrangements and membership of Board Committees |
| 1.3 | Scheme of Delegation (SoD) |
| 1.4 | All strategic plans relating to Dumfries and Galloway wide services or major service changes proposed for locality services with the approval of the Integrated Joint Board |
| 1.5 | Approval of NHS Board's Annual Delivery Plan and Tactical Priorities. |
| 1.6 | The annual revenue budget and three year financial plan; |
| 1.7 | The 5 year capital plan, the annual capital budget, and individual business cases over £500,000 |
| 1.8 | Approval of the Annual report and accounts |
| 1.9 | Acquisition and disposal of any land and property by Dumfries and Galloway Health Board (DGHB) and recommendations to the Scottish Government relating to the closure or change of use of hospitals |
| 1.10 | Variation to a Private Finance Initiative (PFI)/Not for Profit Distribution (NPD) contract agreement |
| 1.11 | Authority to commit revenue expenditure for which no provision has been made in approved plans/budgets > £1m |
| 1.12 | Approval of Capital Business Cases £0.5m - £3m within Scottish Government (SG) delegated limits |
| 1.13 | Approval of Capital Business Cases > £3m to go forward to Scottish Government Health and Social Care Directorate (SGHSCD) for approval |
| 1.14 | Temporary Governance Arrangements for Board and Standing Committees in light of an emergency situation |
| 1.15 | Approval of Integrated Joint Board (IJB) Directions in line with Framework for Approval of Implementation Plans for IJB Directions |

2. Schedule of Delegation arising from Extraordinary Events

Where an urgent decision is required that cannot, without loss to the organisation, wait until the next Board but is outwith the normal delegated limits, the Chief Executive will consult with the Chair. The Chair, having regard to the materiality of the issue will call a Special Board meeting.

3. Authority Delegated to Board Standing Committees

| Item | Audit and Risk Committee |
|--|---|
| 3.1 | <ul style="list-style-type: none"> • Provide assurance that all aspects of financial governance and internal control is managed effectively • Provide assurance that there is a comprehensive risk management system in place • Provide assurance that Information Governance is managed effectively • Oversee all audit arrangements • Approval of all Audit Plans, including those submitted by Audit Scotland • Approval of changes to Standing Financial Instructions (SFI's) • Approval of minor changes to the Scheme of Delegation which do not change the underlying intention. • Approval of changes to bank account signatories • Approval of the Board's accounting policies • Approval of the Counter Fraud policies and arrangements for special investigations |
| Performance and Resource Committee | |
| 3.2 | <ul style="list-style-type: none"> • Ensure the Board meets its obligations across a range of activities including, financial governance, value for money on investments, delivery of best value • Provide assurance that financial and operational risk is managed effectively • Review and Scrutiny of Post Project evaluation of Projects >£5m in advance of submission to NHS Board and SGHSCD. • Ensure the Board meets obligations by ensuring oversight of financial and operational performance and delivery against planned budgets • Provide assurance that all corporate risk related to its remit are properly scrutinised and give oversight to the development of appropriate financial and operational strategies and plans • Oversight of the Boards Climate Emergency and Sustainability Programme Board and associated climate change targets • Provide oversight and monitor a range of activities including: Revenue and Capital plans; plans to achieve financial balance; Tactical Priorities in relation to the delivery of sustainable service models; delivery of Best Value; outcomes from Board Investment decisions; performance in relation to Annual Operational Plans, Remobilisation Plans and targets; remedial action plans required to achieve or rectify financial or operational performance; progress of capital projects; effectiveness of systems that are in place for the delivery of procurement |
| Staff Governance Committee/Remuneration Sub Committee | |
| 3.3 | <ul style="list-style-type: none"> • Decisions relating to Executive and Senior Managers' pay, in line with extant Scottish Government guidance and direction • Ensure appropriate structures and processes are in place in relation to Staff Governance matters to provide assurance to the Board |

| 3. Authority Delegated to Board Standing Committees | |
|--|---|
| | <ul style="list-style-type: none"> • Provide assurance that Staff Governance risks are adequately controlled |
| | Healthcare Governance Committee |
| 3.4 | <ul style="list-style-type: none"> • Review major reports into NHS system failings to identify the implications for locally provided services and to endorse action plans for correcting any perceived deficiencies • To provide assurance that systems and structures are in place to effectively manage a number of areas including clinical governance, healthcare associated infections, quality improvement, adverse incidents, public protection and child protection • Provide assurance that non-financial risk is managed effectively • Oversight of the Spiritual Care Committee, which is chaired by the Medical Director |
| | Public Health Committee |
| 3.5 | <ul style="list-style-type: none"> • Providing assurance to the NHS Board that public health governance is being discharged in relation to the Board's statutory duty for quality of care and protection and improvement of the health of the population • To have oversight of the development and implementation of work at strategic, tactical and operational levels to underpin a system wide approach to addressing the Public Health Priorities, with a specific focus on improving population health and wellbeing and addressing inequalities • Ensuring there is development and implementation of work that relates to the health protection, immunisation and screening functions of public health • Monitoring key public health measures with a clear focus on inequalities • Providing leadership to reshape NHS Dumfries and Galloway services to have a greater emphasis on prevention, early intervention and tackling inequalities • Promoting effective partnership working arrangements ensuring a whole a whole systems approach between NHS Dumfries and Galloway, the Health and Social Care Partnership, the Local Authority, the Community Planning Partnership and thematic partnerships, Third Sector and local Communities to improve population health and wellbeing and reduce health inequalities • Receiving updates on both direct and indirect impacts of COVID-19 on population health and wellbeing and providing assurance to NHS Board that all necessary steps to contain COVID-19 are in place • Providing leadership and advocacy for public health work in Dumfries and Galloway |

4. Authority Delegated to Other Groups

| 4. Authority Delegated to Other Groups | |
|---|---|
| Item | Board Management Team |
| 4.1 | <ul style="list-style-type: none"> To approve all non-workforce related policies. All policies should be developed in accordance with the Policy Management Policy and available on Beacon To approve items in relation to the Capital Plan that have been escalated from the Strategic Capital Programme Board (SCPB), including Post Project Evaluations, leases for property etc |
| | Area Partnership Forum |
| 4.2 | <ul style="list-style-type: none"> To approve all workforce related policies |
| | Strategic Capital Programme Board |
| 4.3 | <ul style="list-style-type: none"> Operational Delivery of the Capital Plan Approval of Capital Business Cases < £0.5m Post Project Evaluation for Capital Projects. Scottish Capital Investment Manual (SCIM) guidance promotes best practice in all projects, process to be agreed by Board Management Team (BMT) depending on size, nature and nature of project. Projects over £1.5m will require onward circulation to NHS Board and SGHSCD as set out in SCIM following approval at BMT. Leases for Property, Equipment and vehicles (non lease cars) any value. Must now follow capital approval route with introduction of IFRS16. See also 16.3 (signing of a property lease). |

5. Schedule of Nominated Deputies

Under normal circumstances the following deputising arrangements would be in place and are authorised to act on behalf of the lead post holder unless specifically stated otherwise in the Scheme of Delegation. Where alternative arrangements are also in place these will be stated. Under special circumstances the Director/senior manager may nominate a different deputy; this should be reported to the Corporate Business Manager for reporting to the Board retrospectively.

This schedule includes all Board Directors who report directly to the Chief Executive as Accountable Officer and includes the Chief Operating Officer. The use of the word Director generically in this document relates only to those included in this table. Where a Director is in post on an interim appointment, unless specified otherwise, will have delegated authority as set out in this document.

Executive Directors

Authorised to act on their behalf for all Board duties including a voting member at Board and Board Committee meetings.

| Lead Post | Authorised Deputy |
|-----------------------------------|--|
| Chief Executive | Medical Director – Voting Duties Chief Operating Officer – Operational duties |
| Director of Finance | Deputy Director of Finance |
| Medical Director | Deputy Medical Director |
| Director of Public Health | Consultant in Public Health |
| Director of Nursing and Midwifery | Deputy Nurse Director |

Senior Managers

Authorised to act on their behalf for all Board duties including representing at Board and Board Committee meetings

| | |
|-------------------------|--------------------------------|
| Chief Operating Officer | Deputy Chief Operating Officer |
| Workforce Director | Deputy Workforce Director |

| 6. General Delegations | | | | |
|-------------------------------|--|-------------------------|---|--|
| Item | Area of Responsibility/Duties Delegated | Delegated to | Delegated further to | Constraints/Reference |
| 6.1 | Preparation of Corporate Objectives and Tactical Priorities | Chief Executive | Not to be further delegated | All changes must be approved by NHS Board. |
| 6.2 | Update and changes to Standing Orders | Chief Executive | Corporate Business Manager | All changes must be approved by NHS Board. |
| 6.3 | Responsibility for preparation and update of Scheme of Delegation | Chief Executive | Director of Finance | All changes must be approved by NHS Board. |
| 6.4 | Responsibility for preparation and update of Standing Financial Instructions | Director of Finance | Deputy Director of Finance | All changes must be approved by NHS Audit and Risk Committee. |
| 6.5 | Preparation of Annual Delivery Plan (excluding associated financial plan) | Chief Operating Officer | Director of Strategic Planning and Transformation - preparation | Supported by financial plan prepared by Director of Finance. |
| 6.6 | Delivery against Annual Delivery Plan | Chief Operating Officer | Deputy Chief Operating Officer - Delivery | |
| 6.7 | Preparation of Annual Delivery Plan – Financial Plan | Director of Finance | | |
| 6.8 | Implementation of IJB Directions | Chief Executive Officer | Chief Operating Officer | In line with Framework for Approval of Implementation Plans for Directions paper approved by Board in June 2022. |
| 6.9 | Internal Audit | Chief Internal Auditor | Not to be further delegated. | Overseen by NHS Audit and Risk Committee. |
| 6.10 | Fraud | Fraud Liaison Officer | Not to be further delegated. | Overseen by NHS Audit and Risk Committee. |

| 6. General Delegations | | | | |
|-------------------------------|---|---------------------|-----------------------------|--|
| Item | Area of Responsibility/Duties Delegated | Delegated to | Delegated further to | Constraints/Reference |
| 6.11 | Management of Endowments | Director of Finance | | As detailed in Endowment Charter, Standing Orders and Fund Operating Procedures. The Endowments are a separately run charity and therefore have their own arrangements. |
| 6.12 | Maintenance of Register for Interests for all Staff and Board Members | Chief Executive | Corporate Business Manager | Only Board Members Register of Interests is published. |
| 6.13 | Maintenance of Register of gifts/hospitality and interest in contracts. | Chief Executive | Corporate Business Manager | |
| 6.14 | Policies and Procedures – All | Chief Executive | Relevant Director | All policies and procedures should be maintained in accordance with the policy document and available on Beacon. Approval through either BMT or Area Partnership Forum (APF) in line with Policy Management Policy. |

| 7. Signing of Documents | | | | |
|--------------------------------|--|---|------------------------------|--|
| Item | Area of Responsibility/Duties Delegated | Delegated to | Delegated further to | Constraints/ Reference |
| 7.1 | Execution of documents on behalf of Scottish Ministers relating to property transactions | Chief Executive and Director of Finance collectively. | Not to be further delegated. | All signatures to be in accordance with the Property Transactions Manual. |
| 7.2 | Signing any legal document/commitment /contract/deed/ binding agreement in NHS Board name lifetime value < £250k | For NHS Corporate areas this is delegated to the Executive Directors and Senior managers as designated in Section 4. For directorates delegated to the Partnership which fall under the management of the Chief Operating Officer this is further delegated to the relevant General Manager. | Not to be further delegated. | If two signatures required, for NHS Corporate areas the designated deputies as per Section 4 should be used as the first signatory. If unavailable then another Director or Deputy can be used. If two signatures required, for directorates delegated the designated deputy as per Section 4 could be used as the second signatory or another General Manager. |
| 7.3 | Signing legal commitment /contract/ deed/binding agreement in NHS Board name lifetime value > £250k | Chief Executive or Director of Finance | | A summary report should be provided to allow signing. If two signatures required, one must be from section 7.2. |

| 8. Financial Governance | | | | |
|--|--|---|---|---|
| Financial Planning, Budgets and Budgetary Control – Revenue | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.1 | Preparation of Financial Plans | Director of Finance | To be specifically nominated in event of extended absence | Approval required by NHS Board. |
| 8.2 | Budget Setting for NHS Board | Director of Finance | | Limit as set in context of agreed Financial Plan. |
| 8.3 | Delegation of directorate budgets | Directors | Per authorised signatory database | With the approval of the Director of Finance and documented in the Authorised Signatory Database. |
| 8.4 | Financial governance compliance – with SFI's and SoD | Director of Finance | Deputy Director of Finance | Oversight by Audit and Risk Committee. |
| 8.5 | Waivers to SFI's and SoD | Director of Finance | Deputy Director of Finance | Oversight by Audit and Risk Committee. |
| 8.6 | Virement of approved delegated budgets between pays and non pays or between directorate areas <£100k | General Manager, Relevant Director and Divisional Finance Manager | | |
| 8.7 | Virement of approved delegated budgets between pays and non pays or between directorate areas >£100k | General Manager or Relevant Director and Director of Finance | | Divisional Finance Manager should be involved in discussion prior to taking to BMT or Health and Social Care Leadership Team for support before approaching Director of Finance. |
| 8.8 | Re-utilisation of underspends arising as a result of a vacancy | Director of Finance | | All underspends on pays will be returned centrally and used towards non-recurring flexibility and reported through Financial Recovery Board (FRB). There is no delegated authority to re-use this for an alternative purpose. |

| 8. Financial Governance | | | | |
|--|---|---|---|---|
| Financial Planning, Budgets and Budgetary Control – Revenue | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.9 | Authority to commit revenue expenditure for which no provision has been made in approved plans/budgets < £0.5m | Chief Executive or Director of Finance | None | Subject to confirmation of revenue affordability. |
| 8.10 | Authority to commit revenue expenditure for which no provision has been made in approved plans/budgets £0.5m - £1m | Director of Finance and Chief Executive | None | Subject to confirmation of revenue affordability and reporting items above £0.5m to the Board. FRB has been established to review all spend requests beyond budget. |
| 8.11 | Authority to commit revenue expenditure for which no provision has been made in approved plans/budgets > £1m | NHS Board | None | Subject to confirmation of revenue affordability. |
| 8.12 | Setting of Fees and Charges Private patients, overseas visitors, income generation and other patient related services | Deputy Director of Finance | Divisional Finance Manager | |
| 8.13 | Approval to award GP Improvement Grants < £10k | Head of Primary Care Services | Divisional Finance Manager responsible for Primary Care | Grants must be within budgetary limits and in liaison with Finance Manager. |
| 8.14 | Approval to award GP Improvement Grants > £10k | Director of Finance and Chief Operating Officer | | Grants must be within budgetary limits and in liaison with Finance Manager. |
| 8.15 | Funding Offers for GP premises developments (reimbursement) of any value | Chief Executive or Chief Operating Officer | None | Grants must be within budgetary limits, in line with Asset Management Strategy and latest Primary Care Premises Guidance and in liaison with Finance Manager. |

| 8. Financial Governance | | | | |
|---|--|-----------------------------|---|---|
| Financial Planning, Budgets and Budgetary Control – Revenue | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.16 | Patients Travel including ex gratia claims | Director of Finance | Deputy Director of Finance Manager Divisional Finance Managers | In line with NHS travel scheme and local policy. Ex gratia payments to be in line with losses and special payments section. |

| 8. Financial Governance | | | | |
|---|---|---|--|--|
| Financial Planning, Budgets and Budgetary Control - Capital | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.17 | Preparation of Capital Plan | Director of Finance | | Approval required by NHS Board |
| 8.18 | Preparation of Capital Business Cases of any value | Chief Operating Officer/Executive Lead as appropriate | General Manager for the area responsible | Require to follow SCIM guidance and instruction issued by BMT. |
| 8.19 | Approval of Capital Business Cases < £0.5m | Strategic Capital Programme Board | None | Business cases may be escalated to BMT. |
| 8.20 | Approval of Capital Business Cases £0.5m - £3m within SG delegated limits | NHS Board | None | Approval required by SCPB before submission to Board. |
| 8.21 | Approval of Business Cases above SG delegated limit > £3m | NHS Board then on to SGHSCD Capital Investment Group. | None | Require to follow instruction issued by SCPB depending on nature of bid – replacement/service change. Approval required by Board prior to submission to SG. |
| 8.22 | Leases for Property, Equipment and vehicles (non lease cars) any value | Board Management Team | None | Must now follow capital approval route with introduction of IFRS16. See also 16.3 (signing of a property lease). |

| 8. Financial Governance | | | | |
|---|--|--|---|--|
| Financial Planning, Budgets and Budgetary Control - Capital | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.23 | Operational Delivery of Capital Plan | Strategic Capital Programme Board | | |
| 8.24 | Lease Car Contracts any value | Director of Finance | | <p>Only after lease car approval process has been completed whereby General Manager signs off request and Finance Manager signs off lease car value for money as compared to travel.</p> <p>Operation of lease car scheme must be in accordance with the guidelines issued by the Scottish Government. With new arrangements approved by the Remuneration Sub Committee of the Staff Governance Committee.</p> |
| 8.25 | Post Project Evaluation for Capital Projects | Strategic Capital Programme Board and escalation to Board Management Team as appropriate | | Projects over £1.5m will require onward circulation to NHS Board/Performance Committee and SGHSCD as set out in SCIM following approval at BMT. |
| 8.26 | Process and physical disposal of Assets | Director of Finance | General Manager – Facilities and Clinical Support Services (physical disposal only) | |

| 8. Financial Governance | | | | |
|---|---|--|--|--|
| Quotes/Tenders/ Official Journal of the European Union (OJEUs) | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.27 | Issue of quick quotes/tenders/OJEUs through the Procurement Portal | Procurement Team and Relevant Officers | None | All users of portal require to be set up by Procurement Manager in line with authorised list. |
| 8.28 | Award of quotes/tender/OJEU when the most economically advantageous return is being sought | Procurement Team and Relevant Officers | None | All awards over £50k are reported to Audit and Risk Committee and ones over £250k are included in minute so can be seen at escalation of minutes to Board. |
| 8.29 | Acceptance of quotes/tender/OJEU when the most economically advantageous return is not being sought for award | Chief Executive or Director of Finance | | Any such awards require authorisation in advance, a report should be produced to seek authorisation. All are reported to Audit and Risk Committee. |
| 8.30 | Undertake post tender negotiations | Relevant Manager | None | To be confined to clarification of any points, no price changes are allowed. |

| 8. Financial Governance | | | | |
|--------------------------------|---|--|--|--|
| Banking | | | | |
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 8.31 | Maintenance and operation of bank accounts | Director of Finance | | Subject to appointment of Bankers by Board where not determined nationally. |
| 8.32 | Authorised bank signatories. | Director of Finance | Designated Officers as per current list approved by Audit and Risk Committee | Additions to the list requires authorisation of the Audit and Risk Committee. The Director of Finance may delete all or part of an authorised signatory list. |
| 8.33 | Exchequer/Patient Funds/Endowments Cheque signatories Payments | <£5k One >£5k Two authorised signatories | None | Designated Officers as per current list approved by Audit and Risk Committee. |
| Other | | | | |
| 8.34 | Maintenance and operation detailed financial systems | Director of Finance | | |
| 8.35 | Insurance | Director of Finance | | Clinical Negligence and Other Risks Scheme (CNORIS) and all other insurance matters. |
| 8.36 | Stock Control | Director of Finance | Designated Officer | Finance maintain a list of key contacts who are responsible for stock control within their department |
| 8.37 | Operation of staff benefit schemes | Workforce Director and Director of Finance | None | In accordance with any guidelines issued by the Scottish Government and approved by the Joint Negotiating Committee. |

9. Losses and Special Payments

This section is per Scottish Government and are all reported through SFR18 as part of annual accounts submissions

All losses and special payments are presented to Audit and Risk Committee for either information or approval depending on value

| Item | Category | A&R Committee and SGHSCD | Chief Executive or Director of Finance |
|---|---|--------------------------|--|
| Theft/Arson/Wilful Damage | | | |
| 1 | Cash | > 15,000 | <15,000 |
| 2 | Stores/Procurement | > 30,000 | <30,000 |
| 3 | Equipment | > 15,000 | <15,000 |
| 4 | Contracts | > 15,000 | <15,000 |
| 5 | Payroll | > 15,000 | <15,000 |
| 6 | Buildings and Fixtures | > 30,000 | <30,000 |
| 7 | Other | > 15,000 | <15,000 |
| Fraud/Embezzlement/Corruption/Theft (where documentation has been falsified), and attempts to perpetrate any of these activities | | | |
| 8 | Cash | > 15,000 | <15,000 |
| 9 | Stores/Procurement | > 30,000 | <30,000 |
| 10 | Equipment | > 15,000 | <15,000 |
| 11 | Contracts | > 15,000 | <15,000 |
| 12 | Payroll | > 15,000 | <15,000 |
| 13 | Other | > 15,000 | <15,000 |
| 14 | Nugatory and Fruitless Payments | > 15,000 | <15,000 |
| Claims Abandoned | | | |
| 15(a) | Private Accommodation | > 15,000 | <15,000 |
| 15(b) | Road Traffic Acts | > 30,000 | <30,000 |
| 15(c) | Other | > 15,000 | <15,000 |
| Stores Losses | | | |
| 16 | Incidents of Service: Fire, Flood, Accident | > 30,000 | <30,000 |
| 17 | Deterioration in Store | > 30,000 | <30,000 |
| 18 | Stocktaking Discrepancies | > 30,000 | <30,000 |
| 19 | Other Causes | > 30,000 | <30,000 |
| 20 | Disclosed at Physical Check | > 15,000 | <15,000 |
| Losses of Furniture and Equipment and Bedding and Linen in circulation | | | |
| 21 | Incidents of Service: Fire, Flood, Accident | > 15,000 | <15,000 |

| 9. Losses and Special Payments | | | |
|---|---|-------------------------------------|---|
| This section is per Scottish Government and are all reported through SFR18 as part of annual accounts submissions | | | |
| All losses and special payments are presented to Audit and Risk Committee for either information or approval depending on value | | | |
| Item | Category | A&R Committee and SGHSCD | Chief Executive or Director of Finance |
| 22 | Other Causes | > 15,000 | <15,000 |
| Compensation Payments - legal obligation | | | |
| 23 | Clinical | > 250,000 | <250,000 |
| 24 | Non Clinical | > 100,000 | <100,000 |
| Ex-gratia Payments | | | |
| 25 | Extra-contractual Payments | > 15,000 | <15,000 |
| 26 | Compensation Payments - Ex Gratia - Clinical | > 250,000 | <250,000 |
| 27 | Compensation Payments - Ex Gratia – Non-Clinical | > 100,000 | <100,000 |
| 28 | Compensation Payments - Ex Gratia - Financial Loss | > 25,000 | <25,000 |
| 29 | Other Payments | > 2,500 | <2,500 |
| Damage to Buildings and Fixtures | | | |
| 30 | Incidents of Service: Fire, Flood, Accident, Other Causes | > 30,000 | <30,000 |
| Other | | | |
| 31 | Extra-Statutory and Extra-Regulatory Payments | Nil | Nil |
| 32 | Gifts in Cash or Kind | > 15,000 | <15,000 |
| 33 | Other Losses | > 15,000 | <15,000 |

SGHSCD approval is granted in advance and reported for noting to Audit and Risk Committee for Compensation Payments. This is required until SGHSCD revise approval categories noted in table above.

| 10. Staff Governance | | | | |
|-----------------------------|--|------------------------------------|--|---|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 10.1 | Implementation of Staff Governance Standards | Workforce Director | | |
| 10.2 | Preparation of Human Resources Plan, policy and strategy | Workforce Director | | |
| 10.3 | Preparation of Human Resources policies and procedures | Workforce Director | | Approval required through Area Partnership Forum. |
| 10.4 | Preparation of Contracts of Employment | Workforce Director | | Compliance with current legislation and agreed terms and conditions. |
| 10.5 | Executive and Senior Manager pay – implementation of terms and condition/performance pay | Workforce Director | | Compliance with current legislation and agreed terms and conditions. Requires approval by Remuneration Committee. |
| 10.6 | Preparation and implementation of whistle blowing standards | Medical Director | | A review ongoing to confirm where this reports from a Committee perspective. |
| 10.7 | Approval of Medical Practitioners for the purposes of the Mental Health (Care and Treatment) (Scotland) Act 2003 | Medical Director | | |
| 10.8 | Appointment of Consultants with the purpose of the adherence to The National Health Service (Appointment of Consultants) (Scotland) Regulations 2009 | Medical Director | | Authority to the Medical Director is in the role of assessment panel chair for the appointment of consultants. |

| 11. Healthcare Governance | | | | |
|----------------------------------|---|------------------------------------|--|--|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 11.1 | Approval of research and development studies including associated clinical trials and indemnity agreements for commercial studies | Medical Director | | Ethics Committee approval required. |
| 11.2 | Preparation of Patients Complaints Policy | Director of Nursing and Midwifery | Director of Allied Health Professionals (AHPs) | All policies approved by BMT. |
| 11.3 | Monitoring arrangements and reporting of complaints | Director of Nursing and Midwifery | Director of AHPs | Healthcare Governance Committee. |
| 11.4 | Compliance and adherence to national standards in healthcare acquired infection | Director of Nursing and Midwifery | Infection Control Manager | Link to Healthcare Governance and Infection Control Committee. |
| 11.5 | Compliance and adherence to national standards in decontamination | Director of Nursing and Midwifery | Infection Control Manager/General Manager Operational Services | Link to Healthcare Governance and Infection Control Committee. |

| 12. Public Health | | | | |
|--------------------------|---|------------------------------------|--|---|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 12.1 | Health Protection strategies and information dissemination | Director of Public Health | | Link to Primary and Community Care Directorates. Key role of Public Health Committee to support this work. |
| 12.2 | Health Improvement strategies and information dissemination | Director of Public Health | | Link to Primary and Community Care Directorates. Key role of Public Health Committee to support this work. |
| 12.3 | Public Health information dissemination | Director of Public Health | | Link to Primary and Community Care Directorates. Key role of Public Health Committee to support this work. Work is supported through the Community and Engagement team. |

| 13. Information Governance | | | | |
|-----------------------------------|--|------------------------------------|--|--|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 13.1 | Responsibility for Information Management Systems and Strategy | Chief Operating Officer | General Manager – Information Communication Technology (ICT) | Clinical Responsibility through e-health Clinical Leads and eHealth Committees within Directorates |

| 13. Information Governance | | | | |
|-----------------------------------|---|------------------------------------|--|---|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 13.2 | Data Protection and General Data Protection Regulation (GDPR) | Chief Operating Officer | Head of Information Governance | The Head of Information Governance is able to enforce compliance with all current Data Protection legislation. Work is led and supported through the Information Governance Committee. |
| 13.3 | Caldicott Guardian | Medical Director | Director of Public Health | |
| 13.4 | Freedom of Information (Scotland) Act 2002 | Chief Executive | Corporate Business Manager | The Freedom of Information (FOI) Policy sets out the process for handling and approving requests. |
| 13.5 | Senior Information Risk Owner (SIRO) | Medical Director | Head of Information Governance | |

| 14. Risk Management | | | | |
|----------------------------|---|------------------------------------|---|--|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 14.1 | Preparation, development, monitoring and implementation of Risk Management Strategy | Director of Nursing and Midwifery | Patient Safety and Improvement Manager/Risk Manager | Role of Risk Exec Group in supporting the development and monitoring of the strategy. Required to be approved by NHS Board. |
| 14.2 | Preparation and Management of Corporate Risk Register | Chief Executive | Director of Nursing and Midwifery /Risk Manager | Regular reporting of risks agreed through NHS Board and relevant Board Committees. |
| 14.3 | Directorate, tactical and operational risk registers | Relevant Director | Relevant risk owners | |
| 14.4 | Health and Safety – staff | Chief Executive | Workforce Director | Accountable to the Corporate Health and Safety Committee. |
| 14.5 | Health and Safety - buildings | Chief Executive | Chief Operating Officer | Accountable to the Corporate Health and Safety Committee. |
| 14.6 | Fire Safety and Security | Chief Executive | Chief Operating Officer | |
| 14.7 | Preparation and maintenance of a comprehensive Emergency Plan | Chief Executive | Emergency Planning Manager | |
| 14.8 | Preparation and maintenance of Business Continuity Plans | Chief Executive | Chief Operating Officer/All Directors for their areas of responsibility | Supported by Emergency Planning Manager. |

| 15. Contracting for Patient Services, Access and Performance Management | | | | |
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| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 15.1 | Responsibility for ensuring that adequate funds are available to pay for services outwith NHS Dumfries and Galloway' | Chief Executive and Director of Finance | None | |
| 15.2 | Waiting Times | Chief Operating Officer | Relevant General Manager | Within overall budgetary limits. |
| 15.3 | Approval of Exceptional Referrals including Non Contracted Activity and Unplanned Activity | Medical Director | Consultant in Public Health | Where other agreements do not exist, must be within the budgets approved by the Board where clinically appropriate. The Medical Director (or delegated deputy) chairs the Exceptional Referral Panel which meets to approve all cases. |
| 15.4 | Resource Transfer Agreements | Chief Executive | Director of Finance | In accordance with appropriate guidance. |
| 15.5 | Public Information on access to services | Chief Operating Officer | Communication and Engagement Manager | |
| 15.6 | Procedure for patients who wish to appeal against clinical decisions on their continuing care | Medical Director | Associate Medical Director (Medical) | Chief Executive Letter (CEL) 6(2008) |

| 15. Contracting for Patient Services, Access and Performance Management | | | | |
|--|--|------------------------------------|--|---|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 15.7 | Regional Planning Group Decisions | Chief Executive | | <p>The Chief Executive will have authority (which may be delegated on a case by case basis) to commit the Board to the decisions of a Regional Planning Group acting in accordance with Health Dept Letter (HDL) (2004)46 and its own agreed constitution and procedures. In exercising this authority, the Chief Executive will, wherever possible:</p> <ul style="list-style-type: none"> - bring to the Board, in advance of a Regional Planning Group decision, any issue which, had it been a purely local issue, would be of such financial magnitude or service impact, that it would have been a decision reserved for the Board. This is to ensure that on matters of strategic importance, the views of the full Board can be represented, via the Chief Executive, to the Regional Planning Group. - communicate to the next available Board any Regional Planning decision which cannot be covered by approved budget or reserves |

| 16. Property Related Delegations | | | | |
|---|---|--|--|---|
| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 16.1 | Land and Buildings purchase, sale or acquisition | NHS Board | None | Chief Executive can sign paperwork once Board have declared surplus and purchase once approval for business case received. All transactions must be conducted in accordance with the Property Transactions Handbook. |
| 16.2 | Management and preparation of property transactions | Director of Finance | General Manager - Facilities and Clinical Support Services | All transactions must be conducted in accordance with the Property Transactions Handbook. |
| 16.3 | Signing of a property lease | Chief Executive or Director of Finance | | Approval of lease must have been approved by BMT as per 7.2. |
| 16.4 | Management of buildings and land | Chief Operating Officer | General Manager - Facilities and Clinical Support Services | In accordance with the Property Transactions Handbook. |
| 16.5 | Authorise any leases out where the annual rental does not exceed £50k per annum and the lifetime lease cost does not exceed £200k | Chief Executive or Director of Finance | | In accordance with the property transactions handbook. Requires to have been scrutinised at BMT. |

| 16. Property Related Delegations | | | | |
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| Item | Area of Responsibility/Duties Delegated | Delegated to/ Lead Director | Authorised Deputy different to Sch4 | Constraints/ Reference |
| 16.6 | Approval of using: <ul style="list-style-type: none"> - Framework Scotland - Southwest Hub - Non Profit Distributing for construction project | NHS Board | None | The initial approval of whether a scheme is suitable for this type of methodology for a construction project is a decision which is reserved for Board following review by NHS Dumfries and Galloway's BMT who will scrutinise the proposal. |
| 16.7 | PFI/Public Private Partnership (PPP)/NPD arrangements including contract variations and terminations | Chief Executive and Director of Finance | None | All approvals for such arrangements must be subject to a business case to demonstrate value for money and be approved by the Board. |