



## NHS Gloucestershire Integrated Care Board

## Scheme of Reservation and Delegation (SoRD)

**v1.0** 1<sup>st</sup> July 2022

## 1. Background

- 1.1. NHS England has set out the following as the four core purposes of Integrated Care Systems:
  - a) improve outcomes in population health and healthcare;
  - b) tackle inequalities in outcomes, experience and access;
  - c) enhance productivity and value for money;
  - d) help the NHS support broader social and economic development.
- 1.2. The Integrated Care Board will use its resources and powers to achieve demonstrable progress on these aims, collaborating to tackle complex challenges, including:
  - improving the health of children and young people
  - supporting people to stay well and independent
  - acting sooner to help those with preventable conditions
  - supporting those with long-term conditions or mental health issues
  - caring for those with multiple needs as populations age
  - getting the best from collective resources so people get care as quickly as possible.
- 1.3. ICBs are statutory bodies and as such their powers, functions and duties are conferred, in the main, by legislation. Additional responsibilities for other functions may be conferred through delegation to the ICB from other bodies (such as NHS England and NHS Improvement).
- 1.4. ICBs are able to delegate to a committee or sub-committee of the board, or to an individual member of the board or an employee. The legislation gives the ICB board flexibility to appoint to ICB committees and sub-committees members who are neither ICB employees nor board members. In addition, ICBS' have the power to agree with specified other statutory organisations (NHS trusts/foundation trusts, local authorities) that they will exercise their functions on behalf of the ICB or jointly with the ICB.
- 1.5. This Scheme of Reservation and Delegation (SoRD) sets out those decisions that are reserved to the ICB Board and those decisions that have been delegated to ICB Committees, individuals, joint committees and other statutory organisations.

2. Background	Reference
The power to obtain information from the ICB and intervene where NHS England is satisfied that the ICB is failing, or has failed, to discharge any of its functions or that there is a significant risk that it will fail to do so.	S 14Z58 of NHS Act 2006 and s.14Z59). <sup>1</sup> Constitution 1.4.8
Approval of the ICB Constitution and any changes made to it; changes to the ICB constitution will not be implemented until, and are only effective from, the date of approval	Constitution 1.5.1 1.5.3
Variation of the ICB Constitution other than on application by the ICB;	para 15 Schedule 1B NHS Act 2006 Constitution 1.6.1b
Appointment of the ICB Chair, with approval of the Secretary of State	Constitution 3.3.1
Removal of the ICB Chair, subject to the approval of the Secretary of State	Constitution 3.13.4
Terminate the appointment of the Chief Executive and direct the Chair as to the appointment of a replacement where NHSE is satisfied that the ICB is failing or has failed to discharge any of its functions or there is a significant risk that the ICB will fail to do so	Constitution 3.13.6
Remuneration of ICB Chair	Constitution 3.14.1

<sup>&</sup>lt;sup>1</sup> To update with the Health Bill amendment of the 2006 Act to confer on ICBs the functions of primary care commissioning.

3. Decisions and functions reserved to the ICB Board	Reference
Consideration and approval of applications to NHS England on any matter concerning changes to the ICB's Constitution, including the Standing Orders	s14Z25 (5) and s1B NHS Act (2006) constitution 1.6.1a, 1.6.3
Make arrangements to publish the ICB Constitution	Constitution s1.4.4 s. 14Z29 NHS Act (2006).
Approve arrangements, including supporting policies, to minimise clinical risk, maximise patient safety and to secure continuous improvement in quality and patient outcomes.	s14Z34 NHS Act (2006) Constitution 1.4.5, 1.4.7, 4.2.1, 4.2.2
Formal review of the ICB Constitution at the end of year three of the ICB's establishment.	Constitution 1.6.2
Approval of the Partner Role Profiles, Nominations & Appointment process	Constitution 3.5.4
Appointment of the Board of the ICB	Constitution s2.1.4 para 3 of Sch 1B 2006 Act
Appointment of the ICB Independent Non-Executive Members	Constitution 3.11.1
Comply with directions and guidance issued by Secretary of State for Health and Social Care, NHS England; and have regard to statutory guidance including that issued by NHS England;	Constitution 4.2.1 (a, b, c, d)
Respond to reports and recommendations made by local Healthwatch organisations within the ICB area	Constitution 4.2.1 (f)

3. Decisions and functions reserved to the ICB Board	Reference
Under section 65Z5 of the 2006 Act, the ICB may arrange with another ICB, an NHS trust, NHS foundation trust, NHS England, a local authority, combined authority or any other body prescribed in Regulations, for the ICB's functions to be exercised by or jointly with that other body or for the functions of that other body to be exercised by or jointly with the ICB	Constitution 4.3.2
Under section 75 of the 2006 Act, the ICB may enter partnership arrangements with a local authority including the establishment of the ICB and local authority pooled fund	Constitution 4.3.2 s. 65Z5 Health Act (2006)
<ul> <li>Accountable for exercising its statutory functions and may grant authority to act on its behalf to:</li> <li>any of its members or employees</li> <li>a committee or sub-committee of the ICB</li> </ul>	Constitution 4.3.1
<ul> <li>Approve the SoRD and any amendments to the SoRD, which sets out:</li> <li>those functions that are reserved to the board;</li> <li>those functions that have been delegated to an individual or to committees and sub committees;</li> <li>those functions delegated to another body or to be exercised jointly with another body, under section 65Z5 and 65Z6 of the 2006 Act</li> </ul>	Constitution 4.4.2 & 4.4.3 s. 65Z5 and 65Z6 of the 2006 Act.
Determines the overarching vision of the ICB, the principles for working collaboratively and the joint system plan	(New section 14Z50 of the Act refers.)
Approve Functions and Decisions Map	Constitution 4.5.1
Establish Terms of Reference and reporting arrangements for all Committees of the Board	Constitution 4.6.3
Approval of amendments and changes to committee ToRs	Constitution 4.6.3 (c)

3. Decisions and functions reserved to the ICB Board	Reference
Receive reports from committees of the ICB including those which the ICB is required by its Constitution, or by NHS England, or the Secretary of State or by any other legislation, regulations, directions or guidance to establish and to take appropriate action	Constitution 4.6
Confirm the recommendations of committees where committees do not have executive powers	Constitution 4.6
Appoint and dismiss committees of the ICB that are directly responsible to the Board	Constitution 4.6.1
Enter into strategic or other transformation discussions with its partner organisations on an informal basis.	Constitution 4.7.5
Approve Standing Financial Instructions (SFIs)	SFIs 1.1.1 Constitution 5.2
Approve all disposals of property and/or land	SFIs 12
Approval of the arrangements for discharging the ICB's statutory financial duties.	constitution 5.2
<ul> <li>Make arrangements for Registers of Interests to be maintained and published to:</li> <li>Members of the ICB;</li> <li>Members of the Board's committees and sub-committees;</li> <li>Its employees.</li> </ul>	s14Z30 NHS Act (2006) Constitution s6.3
Approve the Standards of Business Conduct Policy including the Conflicts of Interests Policy	Constitution 6.1.2
Comply with the ICB policy on conflicts of interest in line with their terms of office and/ or employment.	Constitution 6.1.3, 6.4.1
Approve the appointment of the Chair of the Audit Committee to be the Conflicts of Interests Guardian	Constitution 6.1.6

3. Decisions and functions reserved to the ICB Board	Reference
Approval of the annual NHSEI performance assessment of the ICB	Constitution 1.4.6
Approval of the ICB Long Term Plan and annual operational plan, including financial plans	Constitution 7.3.8
Approval of the ICB's Annual Report and Accounts	Constitution 7.5
Approve any urgent decisions taken by the Chair of the ICB Board for ratification in public session	SO s4.9.4 – 4.9.7
Approval of the arrangements for discharging the ICB's statutory duties associated with its commissioning functions, including but not limited to promoting the involvement of each patient, patient choice, reducing inequalities, improvement in the quality of services, obtaining appropriate advice and public engagement and consultation.	Constitution 1.4.5, 1.4.7, 4.2.1, 4.2.2
Approval of a comprehensive system of internal control, including budgetary control, that underpins the effective, efficient and economic operation of the ICB.	Constitution 4.2.2
Approval of the ICB's corporate budgets that meet the ICB's financial duties	Constitution 4.2.2
The exercise of Delegated Functions to empower the ICB to commission a range of primary care services for the people of Gloucestershire as described in the Delegation Agreement and delegated by NHS England to the ICB	S65Z5 NHS Act 2006 Delegation Agreement (ref) Delegation Agreement (ref.)
Establish effective, safe, efficient, and economic arrangements for the discharge of Delegated Functions	S65Z5 NHS Act 2006 Delegation Agreement (ref)

3. Decisions and functions reserved to the ICB Board	Reference
Develop an operational scheme of delegation defining those individuals or groups of individuals, including committees, who may discharge aspects of the Delegated Functions (this may be included in this Scheme of Reservation and Delegation) and determining the arrangements for the exercise of the Delegation Functions	S65Z5 NHS Act 2006 Delegation Agreement (ref.)
Ensuring the ICB compliance with the NHS Provider Selection Regime including approval of the ICB's Procurement Policy	Constitution 7.4.3
The ICB will comply with local authority Health Overview and Scrutiny requirements	Constitution 7.4.4
Effective discharge of legal duties in respect of initiatives that promote equality and address health inequalities.	Constitution Equality Act (2021)
Approve arrangements for handling complaints and ensuring publication of the process	Constitution 7.3.4
Approve arrangements for handling Freedom of Information requests.	Constitution 7.3.5
Approve arrangements for contributing to and working with agencies responsible for safeguarding for children's, adults and carers.	Constitution 1.4.5 Children Acts 1989 and 2004, and the Children and Families Act (2014); Adult safeguarding and carers (the Care Act 2014);
Receipt and approval a report showing the total allocations received and their proposed distribution including any sums to be held in reserve; and receive updates on significant changes to the initial allocation and the uses of such funds.	SFIs 3.2.1

3. Decisions and functions reserved to the ICB Board	Reference
Receive and review the Annual safeguarding report of safeguarding and the annual children in care report	Constitution 1.4.5
Decision to join the risk pooling schemes administered by the NHS Resolution or self-insure for some or all of the risks covered by the risk pooling schemes.	SFIs 14.1.4
Approve plans for public consultation in relation to service changes and reconfiguration	Constitution 1.4.7 section 14Z44
Approve Strategy for Public Involvement and Engagement – called Working with People & Communities	Constitution 1.7.3
Approve the ICB's People and OD Strategy	People Committee ToR
Approve the ICB Health & Safety Policy	Committee ToR
Approve the arrangements for discharging the ICB's statutory duties as an employer, including Human Resource and employment policies	Constitution 8
Approve any urgent decision taken by the Chair / CEO or relevant lead director in the case of committees) for ratification in public session	Standing Orders 4.9.5
Make arrangements for Board meetings to be held in public are enacted	Standing Orders 7.3.1
The joint committee for the ICB's area called the Integrated Care Partnership shall be established by the ICB and GCC the responsible local authority whose area coincides with or falls wholly or partly within the ICB's area	Interim guidance on functions and governance of the ICB

3. Decisions and functions reserved to the ICB Board	Reference
Make arrangements for partners across the ICS to develop arrangements for ensuring that the Integrated Care Partnership (ICP) and locality-based partnerships have representation from local people and communities in priority-setting and decision-making forums.	Constitution 9.1.5
Make arrangements with Gloucestershire County Council (GCC) to develop Gloucestershire NHS Integrated Care Strategy for its whole population using the best available evidence and data, covering health and social care (both children's and adult's social care), and addressing health inequalities and the wider determinants which drive these inequalities.	Interim guidance on functions and governance of the ICB
To have due regard to the ICP's - Gloucestershire NHS Integrated Care Strategy for its whole population	Interim guidance on functions and governance of the ICB

4. Decisions and functions reserved to the ICB Chair	Reference
Appointment of the Chief Executive	Constitution 3.4
Assessment, selection, and appointment of partner members is subject to the approval of the Chair	Constitution 3.5 - 3.7 inclusive
Appointment of the ICB Vice-Chair from one of the five independent Non-Executive Members	Constitution 3.11.1
Approval of appointment of the Independent Non-Executive Members	Constitution 3.11.2
Subject to satisfactory appraisal the Chair may approve the re-appointment of an independent non- executive member up to the maximum number of terms permitted for their role	Constitution 3.11.7
Approval of appointment of the Chief Medical Officer	Constitution 3.8

4. Decisions and functions reserved to the ICB Chair	Reference
Approval of appointment of the Chief Nursing Officer	Constitution 3.9
Approval of appointment of the Chief Finance Officer	Constitution 3.10
Approval of appointment of the Director of People, Culture and Engagement	Constitution 3.12.4
Approval of the appointment of the Director of Strategy and Transformation	Constitution 3.12.4
Approve the membership of commissioning boards, committees etc	Constitution 4.6.6
Authority to suspend Standing Orders with agreement of two other board members	Standing Orders 5.1
Authority to veto membership of commissioning boards / committees where the independence of the NHS is compromised.	Constitution 4.6.6

## 5. Decisions and functions delegated by the Board to the ICB Committees

5.1. Decisions and functions delegated by the Board to the ICB Audit Committee	Reference
To review the adequacy and effectiveness of the system of integrated governance, risk management and internal control across the whole of the ICB's activities that support the achievement of its objectives, and to highlight any areas of weakness to the Board	Committee Terms of Reference 7
To agree the risk management framework, policies and procedures ensuring that the risk management structure and processes within the ICB are robust and effective	SFIs 2.3 Committee Terms of Reference 7
Review the accounts prior to submission for audit, management's letter of representation to the external auditors; and the planned activity and results of both internal and external audit.	Committee Terms of Reference 7 SFIs 2.3
Establish an auditor panel as a sub group to ensure the contract arrangements, including the procurement and selection, with the External Auditors is appropriate	Committee Terms of Reference SFIs
Internal audit services provided under arrangements proposed by the chief financial officer are approved by the Audit and Risk Assurance Committee, on behalf of the ICB board	SFIs 10.1.2
Endorse and recommend the ICB internal audit charter and annual audit plan, to the ICB board	SFIs 10.1.4

5.1. Decisions and functions delegated by the Board to the ICB Audit Committee	Reference
Ensure there is an effective internal audit function including; costs of audit services, performance of service, review and approval of the annual internal audit plan, the findings of audit work including the Head of Internal Audit Opinion and management responses to these, adequate resourcing of the function.	SFIs 10.1
Review the work and findings of the External Auditor and management responses	SFIs 10.2
Review schedules of losses and compensations and make recommendations to the Board	SFIs 11.1.5
Review the annual report and financial statements prior to submission to the Board	SFIs 2.3
To be assured that the ICB has adequate arrangements in place for the counter fraud, bribery and corruption (including cyber security) that meet NHS Counter Fraud Authority's (NHSCFA) standards and shall review the outcomes of work in these areas.	Committee Terms of Reference 7
To review the adequacy and security of the ICB's arrangements for its employees, contractors and external parties to raise concerns, in confidence, in relation to financial, clinical management, or other matters.	Committee Terms of Reference 7
To provide assurance to the Board that there is an effective framework in place for the management of Information Governance within the ICB including risks associated with information governance	Committee Terms of Reference 7
To monitor the integrity of financial statements of the ICB and any formal announcements relating to its financial performance, ensure systems for financial reporting to the Board are subject to review	Committee Terms of Reference 7
To be assured that the ICB has adequate arrangements for the management of declared interests and conflicts of interest, including gifts and hospitality	Committee Terms of Reference 7

5.2. Decisions and functions delegated by the Board to the ICB Remuneration Committee	Reference
Determine all aspects of remuneration for the Chief Executive, Directors and other Very Senior Managers including but not limited to salary, (including any performance-related elements) bonuses, pensions and cars	17 to 19 of Schedule 1B NHS Act 2006 s3.13.1 Constitution Committee Terms of Reference 7
Determine arrangements for termination of employment and other contractual terms and non-contractual terms for the Chief Executive, Directors and other Very Senior Managers	17 to 19 of Schedule 1B NHS Act 2006 s3.13.1 Constitution Committee Terms of Reference 7
Determine all aspects of remuneration for the Independent Non-Executive members of the ICB Board	17 to 19 of Schedule 1B NHS Act 2006 s3.13.1 Constitution Committee Terms of Reference 7
Determine the ICB pay policy for all staff	17 to 19 of Schedule 1B NHS Act 2006 Committee Terms of Reference 7
Setting any allowances for members of committees and sub-committees of the ICB who are not members of the Board	Committee Terms of Reference 7
Oversee contractual arrangements for all staff	17 to 19 of Schedule 1B NHS Act 2006 Committee Terms of Reference 7
Determine arrangements for termination payments and any special payments for all staff	17 to 19 of Schedule 1B NHS Act 2006 Committee Terms of Reference 7

5.3. Decisions and functions delegated by the Board to the ICB System Resources Committee	Reference
Committee will contribute to the overall delivery of the ICB objectives by providing oversight and assurance to the Board for matters relating to system resources allocation, performance against strategic plans and strategic financial performance: <ul> <li>Efficiency, outcomes and value for money in the use of resources across the ICB footprint</li> <li>Financial performance of the ICB</li> <li>Financial performance of NHS organisations within the ICB footprint</li> </ul>	Committee Terms of Reference 2
To agree key outcomes of the ICB financial strategy	Committee Terms of Reference 7
To agree the strategic financial framework of the ICB and monitor performance against it.	Committee Terms of Reference 7
Oversee the development of an approach with partners, including the ICB health and care partnership, to ensure the relationship between cost, performance, quality and environment sustainability are understood	Committee Terms of Reference 7

5.4. Decisions and functions delegated by the Board to the ICB Quality Committee	Reference
Develop and recommend to the ICB Board the key outcomes, quality and performance priorities to be included within the ICB strategy/ annual plan, including priorities to address variation/ inequalities in care	Committee terms of reference 7
Have oversight of and approve the Terms of Reference and work programmes for the groups reporting into the Quality Committee	Committee terms of reference 7

5.4. Decisions and functions delegated by the Board to the ICB Quality Committee	Reference
Scrutinise structures in place to support quality planning, control and improvement, to be assured that the structures operate effectively and timely action is taken to address areas of concern;	Committee terms of reference 7
Oversee and scrutinise the ICB's response to all relevant (as applicable to quality) Directives, Regulations, national standard, policies, reports, reviews and best practice as issued by the DHSC, NHSEI and other regulatory bodies / external agencies (e.g. CQC, NICE) to gain assurance that they are appropriately reviewed and actions are being undertaken, embedded and sustained	Committee terms of reference 7
Make arrangements, including supporting policies, to minimise clinical risk, maximise patient safety and to secure continuous improvement in quality and patient outcomes.	Committee terms of reference 7
Cooperate with the Health Service Safety Investigations Body (HSSIB) when carrying out an investigation into the same or related incident, must cooperate with each other regarding practical arrangements for coordinating those investigations	Committee terms of reference 7
Make arrangements for Business Continuity & Emergency Planning	Committee terms of reference 7
<ul> <li>Scrutinise the robustness of the arrangements for and assure compliance with the ICB's statutory responsibilities:</li> <li>Infection control;</li> <li>Medicines optimisation and safety;</li> <li>Equality and diversity as it applies to people drawing on services.</li> </ul>	Committee terms of reference 7
Scrutinise the robustness of the arrangements for and assure compliance with the ICB's statutory responsibilities for safeguarding adults and children	Committee terms of reference 7
Make arrangements for the handling of complaints	Committee terms of reference 7

5.5. Decisions and functions delegated by the Board to the ICB People Committee	Reference
Oversee the development of the people strategy, ensuring it remains current and relevant to the people drivers and requirements of the One Gloucestershire Integrated Care System	Committee terms of reference 7
Hold the People Board to account for delivering the People Strategy and its impact in the One Gloucestershire Integrated Care System, including the external reporting requirements contained within the System Oversight Framework	Committee terms of reference 7
Ensure that the ICB has well defined system EDI objectives, underpinned by strategic plans, measures and reporting arrangements that strengthen accountability and progress	Committee terms of reference 7
Oversee the strategic approach to developing system leaders, shaping culture, and facilitating behaviour change within the system, creating an environment for success	Committee terms of reference 7
Make arrangements for discharging the ICB's statutory duties as an employer, including Human Resources policies	Committee terms of reference 7

5.6.	Decisions and functions delegated by the Board to the ICB Primary Care & Direct Commissioning Committee	Reference
asses	ons in relation to the commissioning, management, planning (including carrying out needs sments), and undertaking reviews, of Primary Medical Services and other ancillary activities that cessary to exercise the delegated functions	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9

5.6. Decisions and functions delegated by the Board to the ICB Primary Care & Direct Commissioning Committee	Reference
The management of Delegated Funds in relation to Primary Medical Services	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Co-ordinating a common approach to the commissioning and delivery of Primary Medical Services with other health and social care bodies	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
The award of GMS, PMS and APMS contracts. This includes: the design of PMS and APMS contracts; and monitoring of contracts;	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Ensure action is taken related to issuing breach/remedial notices and removing a contract where there breaches occur.	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Design and commission Enhanced Services, including re-commissioning of services (in line with the ICB SFIs (put in reference)	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Design and offer Local Incentive Schemes for Primary Medical Services providers (in line with the ICB SFIs (put in reference)	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference
Make decisions on discretionary payments or support	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9

5.6. Decisions and functions delegated by the Board to the ICB Primary Care & Direct Commissioning Committee	Reference
Making decision regarding local incentive schemes as an alternative to the Quality Outcomes Framework (QOF);	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Plan and manage Primary Care Networks	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Approve Primary Medical Services provider mergers and closures	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9
Make decisions in relation to the Premises Costs Directions Function	Delegation Agreement 2015 (2A inclusive) Committee Terms of Reference 9 SFIs
Make procurement decisions relevant to the exercise of the Delegated Functions in accordance with the detailed arrangements regarding procurement set out in the procurement protocol issues and updated by NHS England and in line with ICB SFIs	Delegation Agreement 2015 (2A inclusive) Terms of Reference 9
Agreeing arrangements for the delivery of Essential Services, Advance Services, and Enhanced Services across the ICB footprint	Delegati Committee Terms of Reference 9on Agreement 2015 (2A inclusive)

5.6. Decisions and functions delegated by the Board to the ICB Primary Care & Direct Commissioning Committee	Reference
Duty to consult with Local Medical Committees and other stakeholders in accordance with the duty of public involvement and consultation under section 14Z2 of the NHS Act;	Delegation Agreement Schedule (2A inclusive) Committee Terms of Reference 1.3
Approving consultations with patients, the public and other stakeholders to the extent required by the duty of public involvement and consultation under section 14Z2of the NHS Act 2006	Delegation Agreement Schedule (2A inclusive) Committee Terms of Reference 1.3
<ul> <li>Committee shall report on and make recommendations to the ICB on the following:</li> <li>Primary medical care strategy for Gloucestershire;</li> <li>Planning primary medical care services in Gloucestershire (including needs assessment).</li> </ul>	Committee Terms of Reference 9
The Committee will at the point of delegation of services related to community dentistry, pharmacy and optometry to the ICB, review its terms of reference and include these services within its committee remit.	Committee Terms of Reference 2.1.2
To publish information about such matters as may be prescribed in relation to primary medical services (including primary dental services, primary pharmacy and ophthalmic services, when delegated)	Delegation Agreement Schedule (2A inclusive)

6. Decisions and functions delegated to individual board members and employees		
Individual	Decisions and functions delegated to the individual	Reference
Chief Executive Officer	Convening a panel to advise on the appointment of ICB Board partner members	Constitution 3.5 - 3.7 inc
Chief Executive Officer	Appoint the Chief Medical Officer	Constitution 3.8.3
Chief Executive Officer	Appoint the Chief Nursing Officer	Constitution 3.9.3
Chief Executive Officer	Appoint the Chief Finance Officer	Constitution 3.10.3
Chief Executive Officer	Appoint the Director of People, Culture and Engagement	Constitution 3.12.1
Chief Executive Officer	Appoint the Director of Strategy and Transformation	Constitution 3.12.1
Chief Executive Officer	Ensure that lists of all contractors, for which the ICB is responsible, are maintained in an up to date condition; ensure that systems are in place to deal with applications, resignations, inspection of premises, etc., within the appropriate contractor's terms and conditions of service	SFIs 16.1.2
Director of People, Culture & Engagement	Ensures the ICB complies with Health and Safety laws and regulations.	Health & Safety at Work Act (1974); (2004)
Chief Nursing Officer	The CNO is designated the Accountable Emergency Officer	Quality Committee ToR
Chief Executive Officer	CEO is the accountable officer for the ICB and is personally accountable to NHS England for the stewardship of ICBs allocated resources.	SFIs 2.2.1

6. Decisions and functions delegated to individual board members and employees			
Individual	Decisions and functions delegated to the individual	Reference	
Chief Executive Officer	Sets out the procedures on the seeking of professional advice regarding the supply of goods and services	SFIs 8.1.2	
Chief Executive Officer	Endorses the ICB internal audit charter and annual audit plan	SFIs 10.1.4	
Chief Executive Officer	To monitor and ensure compliance with Directions issued by the Secretary of State for Health and Social Care on NHS security management.	SFIs 10.3.1	
Chief Financial Officer	Preparation and audit of annual accounts.	SFI 2.2.4	
Chief Financial Officer	Ensuring that the allocated annual revenue and capital resource limits are not exceeded, jointly, with system partners.	SFIs 2.2.4	
Chief Financial Officer	Ensure that there is an effective financial control framework in place to support accurate financial reporting, safeguard assets and minimise risk of financial loss.	SFIs 2.2.4	
Chief Financial Officer	Meeting statutory requirements relating to taxation.	SFIs 2.2.4	
Chief Financial Officer	Ensuring that there are suitable financial systems in place	SFIs 2.2.4	
Chief Financial Officer	Meets the financial targets set for it by NHS England	SFIs 2.2.4	
Chief Financial Officer	Use of incidental powers such as management of ICB assets, entering commercial agreements	SFIs 2.2.4	
Chief Financial Officer	Planned budgets are approved by the relevant Board; developing the funding strategy for the ICB to support the board in achieving ICB objectives, including consideration of place-based budgets	SFIs 2.2.4	
Chief Financial Officer	Adherence to the directions from NHS England in relation to accounts preparation;	SFI 2.2.4	

6. Decisions and functions delegated to individual board members and employees			
Individual	Decisions and functions delegated to the individual	Reference	
Chief Financial Officer	Ensure the Governance statement and Annual Accounts & Reports are signed	SFI 2.2.4	
Chief Financial Officer	Ensure that planned budgets are approved by the Board; developing the funding strategy for the ICB to support the board in achieving ICB objectives, including consideration of place-based budgets	SFI 2.2.4	
Chief Financial Officer	Making use of benchmarking to make sure that funds are deployed as effectively as possible	SFI 2.2.4	
Chief Financial Officer	Executive members (partner members and non-executive members) and other officers are notified of and understand their responsibilities within the SFIs	SFI 2.2.4	
Chief Financial Officer	Specific responsibilities and delegation of authority to specific job titles are confirmed;	SFIs 2.2.4	
Chief Financial Officer	Provide financial leadership and ensuring financial performance of the ICB including advice to the Board of the ICB;	SFIs 2.2.4	
Chief Financial Officer	Identification of key financial risks and issues relating to robust financial performance and leadership and working with relevant providers and partners to enable solutions;	SFIs 2.2.4	
Chief Financial Officer	Responsible for maintaining policies and processes relating to the control, management and use of resources across the ICB	SFIs 3.1.1	
Chief Financial Officer	To delegate the budgetary control responsibilities to budget holders through a formal documented process	SFIs 3.1.2	

6. Decisions and functions delegated to individual board members and employees		
Individual	Decisions and functions delegated to the individual	Reference
Chief Financial Officer	<ul> <li>Financial leadership responsibility for the following statutory duties:</li> <li>the duty of the ICB, in conjunction with its partner NHS trusts and NHS foundation trusts, to exercise its functions with a view to ensuring that, in respect of each financial year;</li> <li>local capital resource use does not exceed the limit specified in a direction by NHS England;</li> <li>local revenue resource use does not exceed the limit specified in a direction by NHS England</li> </ul>	SFIs 3.1.4
Chief Financial Officer	<ul> <li>Prepare and submit budgets for approval by the Board of the ICB. Such budgets will:</li> <li>be in accordance with the aims and objectives set out in the plan;</li> <li>accord with workload and staffing plans;</li> <li>be produced following discussion with appropriate system partners and budget holders;</li> <li>be prepared within the limits of available funds (resource limits);</li> <li>identify potential risks.</li> </ul>	SFIs 3.3.2
Chief Financial Officer	Devise and maintain systems of budgetary control.	SFIs 3.6.1
Chief Financial Officer	Responsible for establishing effective systems and processes, including robust internal control mechanisms to discharge the ICB's statutory duties related to Income, banking arrangements and debt recovery in accordance with legal and regulatory requirements	SFIs 4 (inclusive)
Chief Financial Officer	Responsible for ensuring systems and processes are designed and maintained for the recording and verification of finance transactions such as payments and receivables for the ICB	SFIs 5
Chief Financial Officer	Take a lead role on behalf of the ICB to ensure that there are appropriate and effective financial, contracting including procurement, monitoring and performance arrangements in place to ensure the delivery of effective health services	SFIs 6 Public Contracts Regulations 2015 (PCR)

6. Decisions and functions delegated to individual board members and employees		
Individual	Decisions and functions delegated to the individual	Reference
Chief Financial Officer	Oversee and contract for NHS Security Management Services	SFIs 10.3.3
Chief Financial Officer	Responsible for ensuring appropriate arrangements are in place to provide adequate counter fraud provision. This includes reporting requirements to the Board and Audit Committee, and defining roles and accountabilities for those involved as part of the process of providing assurance to the Board	SFIs 10.4
All Executive Directors	Responsible for identifying and implementing cost improvements and income generation initiatives in accordance with the requirements of the Annual Operating Plan and a balanced budget	SFIs 3.7.2
Chief Financial Officer	Approval of the arrangements for ensuring appropriate and safekeeping and confidentiality of records and for the storage, management and transfer of information and data	SFIs 17 Health Records Act (2001) Records Management Code of Practice for Health and Social care 2016
Chief Financial Officer	Ensure that the payroll system has adequate internal controls and suitable arrangements for processing deductions and exceptional payments	SFIs 7.1
Chief Financial Officer	Ensure that at the commencement of each financial year, the ICB and its partner NHS trusts and NHS foundation trusts prepare a plan setting out their planned capital resource use	SFIs 13
Chief Financial Officer	Responsible for providing robust management of grants, including the governance of grants and assurance to the ICB	SFIs 13.2

6. Decisions and functions delegated to individual board members and employees		
Individual	Decisions and functions delegated to the individual	Reference
Chief Financial Officer	Ensure that contractors who are included on ICB's approved lists receive payments and that there is no evidence of inequality in payment value or method	SFIs 16.1.3
Chief Financial Officer	Responsible for the accuracy and security of the computerised financial data of the ICB whether this is 'in house' or hosted in an outsourced arrangement	SFIs 5.1
Director of People, Culture & Engagement	<ul> <li>Operationally responsible for;</li> <li>defining and delivering the organisation's overall human resources strategy and objectives; and</li> <li>overseeing delivery of human resource services to ICB employees.</li> <li>management and governance frameworks that support the ICB employees' life cycle</li> </ul>	SFIs 7.2
Director of People, Culture & Engagement	Leading system implementation of people priorities including delivery of the People Plan and People Promise by aligning partners across the ICS to develop and support 'one workforce', including through closer collaboration across the health and care sector, with local government, the voluntary and community sector and volunteers.	Committee Terms of Reference 7

7. Decisions and functions delegated by the Board to be exercised jointly		
Joint committee	Decisions and functions delegated to the joint committee	Reference

8. Decisions and functions delegated by the Board to other statutory bodies		
Statutory body	Decisions and functions delegated to the statutory body	Reference

9. Decisions and functions delegated to the board by other organisations		
Delegating body	Decisions and functions delegated by the delegating body	Reference
NHS England	Primary Care Commissioning – reference delegation agreement (TBC updated agreement expected)	