CCG Constitution Appendix F4a - individual and committee delegations for non-financial arrangements not covered elsewhere

Approval: Audit Committee 28.11.18

Review: November 2019

Delegation	Committee or other organisation	CCG Management Directors (*6)						Relevant named clinician	Relevant Associate Director or Head of (within function or where named)	Relevant Manager (within function or where named)	Relevant Lay Member
		AO	DAO	CFO	DCFO	DCD	DOT				
Statutory and other appointments											
Executive Lead for Counter Fraud	[redacted]		X								
Senior Information Risk Owner (SIRO)	[redacted]		X								
OC1 – Organisation Contact (NHS Digital)	[redacted]		X						**Head of Governance/Board Secretary**		
Accountable Emergency Officer (AEO)	[redacted]					X					
Freedom to Speak Up Guardian	[redacted]					X					**Secondary Care Doctor**
Director of Infection and Prevention & Control (DIPC)	[redacted]					X					
Executive Lead for Health and Safety	[redacted]						X				
Security Management Director	[redacted]		X								
Fire Safety Competent Person	**SCWCSU**										
Fire Safety Responsible Person	**SCWCSU**										
Health & Safety Competent Person	**SCWCSU**										
Local Counter Fraud Specialist (LCFS)	**TIAA**										
Caldicott Guardian	[redacted]							**Clinical Director - Integrated Care**			
Conflict of Interest Guardian	[redacted]										**Lay Vice Chair**
Controlled Drugs Accountable Officer (CDAO)	[redacted]								**AD Medicines Management**		
Chief Information Officer (CIO)	[redacted]								**Joint Strategic Director of Information Assets and Digital Development for Buckinghamshire County Council (BCC), Buckinghamshire Healthcare NHS Trust (BHT) and NHS Buckinghamshire Clinical Commissioning Group (this is not a statutory appointment and so is a named shared role between health and social care partners)**		
Data Protection Officer (DPO)	[redacted]								**Head of Governance/Board Secretary**		
Local Security Management Specialist (LSMS)	[redacted]								**Head of Governance/Board Secretary**		
Professional Accountability for Safeguarding Children and Adults	[redacted]								**Associate Director of Quality and Safeguarding**		
Safeguarding Adults Lead	[redacted]								**Safeguarding Adults Lead**		
Named GP for safeguarding adults	[redacted]							**Named GP for safeguarding adults**			
Designated Nurse (Safeguarding Children)	[redacted]							**Designated Nurse (Safeguarding Children)**			
Designated Doctor (Safeguarding Children)	[redacted]							**Designated Doctor (Safeguarding Children)**			
Named GP (Safeguarding Children)	[redacted]							**Named GP (Safeguarding Children)**			
Clinical Governance and quality											
SERIOUS INCIDENTS: Strategic Executive Information System (STEIS): serious incident downgrade request	[redacted]								**Associate Director of Quality and Safeguarding** **Head of Quality**		
SERIOUS INCIDENTS: Strategic Executive Information System (STEIS): extension request	[redacted]								**Associate Director of Quality and Safeguarding** **Head of Quality**	**Quality and Patient Safety Manager**	
SERIOUS INCIDENTS: Strategic Executive Information System (STEIS): closure of incident	**CCG Serious Incident Panel (subject to criteria)**								**Associate Director of Quality and Safeguarding** **Head of Quality**	**Quality and Patient Safety Manager**	
HCAI DCS (Data Capture System): CCG approve of applications for system access	[redacted]									**Infection, Prevention and Control Lead Nurse**	
Capital Schemes											
Preparation and signature of all tenancy agreements/licences for all staff subject to policy on accommodation for staff	[redacted]	X	X	X							
Delegation agreements for CCG functions											
Delegation agreements for CCG functions from CCG to other NHS organisations (application of signatories specified will be dependent on template requirements from originating organisation which will overrule this scheme of delegation)	**Governing Body or one of its sub-committees for information (at discretion of signatories depending on function to be delegated)**	Z	Z	X		Z					
Delegation agreements for other NHS organisations functions to CCG (application of signatories specified will be dependent on template requirements from originating organisation which will overrule this scheme of delegation)	**Governing Body or one of its sub-committees for information (as discretion of signatories depending on function to be delegated)**	Z	Z	X		Z					
(1) Business Case, (2) Service Level Agreement (3) Specification approval prior to award of contract (with or without formal external tender) - IN-YEAR											
Notes: supporting evidence **1. Business Case or process changes must also be accompanied by EIA, QIA, DPIA (impact assessments) and public engagement summary, or otherwise confirmatory statements as to why deemed not required. Full impact assessments may be required dependent on rating against criteria and threshold. The cover sheet to relevant committee to be fully completed accordingly.** **2. Finance: Business Case must also confirm (a) at investment level below £25 per annum whether the budget has been agreed by the Finance Team together with funding source (b) at investment level above £25k per annum whether separate investment decision by relevant CCG sub-committee has already been undertaken (refer to Constitution Appendix F3)** **3. Mandate: Business Case must also confirm that it is informed by a mandate to proceed (and forms part of commissioning intentions and annual operating plan).** **4. This authority, although it has a financial element, forms part of the non-financial scheme as only the final stage of award will confirm an investment commitment and therefore authority under CCG Constitution Appendix F1 and/or F2 and/or F3. Where a business case relates to a project or work which is fully funded by an external party, then the same scheme can be applied as is described below.** **5. Any contract or agreement with organisations other than NHS or other public bodies where the annual costs are expected to exceed £100,000 also requires use of the CCG Seal.** **6. All CCG Management Directors have authority as specified as CCG voting members of ICS groups/partnerships/forums and in lieu of CCG Programme Boards accountable to the CCG Executive Committee** **7. The following scheme applies only to in-year approvals required outside of the annual budget setting process**											
CCG investment level up to 10k per annum/financial year; RISK: Low (<8).	**CCG Executive Committee (information only)**	X	X	X	X	X	X				
CCG investment level up to £25k per annum/financial year; RISK: Low (<8), Medium-High (8-25)	**CCG Executive Committee (information only)**	X	X	X	X	X	X				
CCG investment level £25k to £250k per annum/financial year smaller schemes; RISK: Medium-High (8-25)	**Depending on purpose, CCG Executive Committee (approval and ratification, unless escalated for reasons of conflicts of interest) or Primary Care Commissioning Committee (PCCC)** **Governing Body (for information, unless escalated for reasons of conflicts of interest)**										
CCG investment level >£100k per annum/financial year; RISK: Medium-High (8-25)											
CCG investment level >£250k per annum/financial year (including recurrent); RISK: Medium-High (8-25)	**Governing Body (for approval and ratification, unless assurance is given for alternative process for reasons of timing or related application of other decision making authorities**										

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		AO	DAO	CFO	DCFO	DCD	DOT				
Fully funded by external body (e.g. NHS England) which the CCG is (a) mandated to deliver under direction and/or under statutory delegation or (b) has option to deliver implement but must still ensure appropriate governance for approval and ratification of Business Case,	**Depending on purpose, CCG Executive Committee (approval and ratification, unless escalated for reasons of conflicts of interest) or Primary Care Commissioning Committee (PCCC)** **Governing Body (for information, unless escalated for reasons of conflicts of interest)**										
Primary Care including Practice Payments (Direct Awards and Primary Care Development Schemes)											
Notes: this authority relates only to all non-financial process transactions for primary care											
Facilitate patient referral/repatriation to member practices under Special Allocation Scheme (SAS)								**Clinical Commissioning Director for Unplanned Community Care**	**AD Primary Care Commissioning**	**Senior Primary Care Manager/Primary Care Manager**	
NHS England Delegation agreements for NHS England functions to CCG - primary care only	**Primary Care Commissioning Committee (recommendation only)**	X									
Calculation of Annual PMS Contract value Monthly payment of PMS and GMS in accordance with contract: (1) GMS – Global sum & MPIG as calculated by Exeter Chief Finance Officer or Deputy CFO (2) PMS - Payment Requests in accordance with SLA (3) APMS - Payment Requests in accordance with SLA	**Primary Care Commissioning Committee (following recommendation from PCOG)**									**Finance Manager Primary Care (annual contract sum preparation)**	
Governance											
CCG approval of Freedom of Information Requests			X				X	**Caldicott Guardian**	**Data Protection Officer (holiday cover only)**		
CCG co-ordination of Freedom of Information Requests	**South Central and West Commissioning Support Unit**										
CCG publication of Freedom of Information Requests	**Buckinghamshire County Council Communications Team**										
CCG approval of Subject Access Requests for release. Relates to continuing healthcare only where CCG is data controller, otherwise all requests signposted to appropriate data controllers (i.e. providers and/or primary care practices)								**Caldicott Guardian**			
CCG co-ordination of Subject Access Requests for release. Relates to continuing healthcare only where CCG is data controller and primary care member practices where they are data controllers, otherwise all requests signposted to appropriate data controllers (i.e. providers)	**South Central and West Commissioning Support Unit**										
CCG approval of Data Privacy Impact Assessments for service redesign projects (subject to SCWCSU Information Governance Manager recommendation)	**CCG Information Governance Steering Group (Medium and Low Risk - with recommendation to Caldicott Guardian/SIRO/Data Protection Officer)** **SCWCSU Information Governance Steering Group (High Risk)**		X					**Caldicott Guardian**	**Senior Information Risk Officer, Data Protection Officer**		
CCG approval of Data/Information Sharing Agreements (Tier 1) and/or Protocols (Tier 2) /Data processing agreements - (1) service redesign projects, (2) interoperability between providers and (3) CCG to/fro SCWCSU			X					**Caldicott Guardian**	**Senior Information Risk Officer, Data Protection Officer**		
Information Governance registrations: Information Commissioners Office - Data Protection certification									**Data Protection Officer/SCWCSU Information Governance Manager**		
NHS Digital: Caldicott Guardian and Senior Information Risk Officer (SIRO) registers (there is no DPO register)						X					
CCG approval of SCW Integrated Population Analytics (IPA) applications								**Caldicott Guardian**			
CCG approval of smartcard applications (CCG staff only, not SCWCSU)									**Data Protection Officer**		
Reporting of IG breaches										**ALL STAFF (on Datix); Data Protection Officer (reporting to ICO through Data Security and Protection Toolkit where criteria met - level 2 and above only post SCWCSU investigation**	
CCG approval of Publication Scheme			X						**Senior Information Risk Officer**		
NHS Digital approvals including data sharing framework contracts, data sharing agreements for SUS and HES data, connection agreements such as health and social care network (previously N3) for primary care practices									**Senior Information Risk Officer**		
CCG signature of Memorandums of Understanding with (1) NHS England (2) Other NHS Organisations (3) Other third parties - either directly or not directly linked to contract awards or delegation of functions to or by the CCG. The CCG signatory may sign only for the CCG, or on behalf of other organisations (to be determined by individual templates from originating organisation)		X									
Procurement											
Evaluating Tender bids									**At least one individual not within the team awarding the tender**		
Opening tender bids (This is only expected to occur if exceptional circumstances prevent the use of electronic tender submission procedures)									**Employees of Band 8b or above**		
For any tender involving a bid from CCG member practices, the evaluation team must be in accordance with conflict of interest arrangements											
Financial management processes											

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New posts to be authorised as car users (when discretionary spend process not active)	[redacted]			X							
New posts to be authorised as mobile telephone or IPAD users (when discretionary spend process not active)	[redacted]			X							
Day to day maintenance of Cash Books	[redacted]			X					**Daily by SBS and reviewed by Finance Controller (CSU) (or equivalent). CSU to provide Deputy Chief Financial Officer with a monthly report detailing compliance with Cash Limit. Reviewed by financial accountants in CSU**		
Requesting of Department of Health monthly Drawdown	[redacted]			X					**CSU to prepare monthly RRL drawdown schedule and agree with Deputy Chief Financial Officer/Chief Financial Officer. SBS to action request following confirmation of amount by CSU**		
Processing of all General Ledger Journals (Budget, Actuals and Accruals) up to £1m	[redacted]								**Deputy Chief Finance Officers**		
Processing of all General Ledger Journals (Budget, Actuals and Accruals) up to £5m	[redacted]								**Deputy Chief Finance Officers**		
Processing of all General Ledger Journals (Budget, Actuals and Accruals) over £5m	[redacted]								**Deputy Chief Finance Officers**		
1. Processing of Payment Runs. 2. Release of Payroll from ESR Hub. 3. Requests to SBS to set up of New Suppliers and Customers 4. Requests to SBS to create Code Combinations. 5. Banking and Receipting of all cash and cheques received by CCG. 6. Setting any required Payment Run\Payroll Bank run ceiling and authorising payment when this is exceeded.	[redacted]								**Deputy Chief Finance Officers**		
Setting any required Payment Run\Payroll Bank run ceiling and authorising payment when this is exceeded.	[redacted]			X							
Certifying VAT periodic VAT returns for submission to HMRC				X					**Deputy Chief Finance Officers, CSU**		
Human Resources											
Facilities for staff not employed by the CCG to gain practical experience Professional Recognition, Honorary Contracts & Insurance of Medical Staff Work experience students	[redacted]										
Salary advances	[redacted]										
Nominal role	[redacted]										
IPAs/NCAs S.117 only (i.e. out of area referrals only where there is no provider contract in place)											
Agreeing the distribution of unused/residual funds relating to the pooled budget	[redacted]										
Medicines Optimisation											
Clinical approval associated with authorisation of New Drugs up to £50,000 per drug per year for inclusion in formulary, including their place in therapy and restrictions for use.	**ICS Medicines Optimisation Board (clinical decision only with financial authorisation provided in advance by named role holders)**							**Clinical Director for Medicines Management (as a CCG voting member of ICS medicines related boards/groups) Appointed member GPs to represent primary care (as voting members of ICS medicines related boards/groups)**	**AD Medicines Management (as a CCG voting member of ICS medicines related groups/boards) Lead for Medicines Optimisation (as a CCG voting member of ICS medicines related groups/boards)**		
Clinical approval associated with investment required in-year for compliance with NICE guidelines or technology appraisals up to £50,000 per intervention per year (technically no limit as it is statutory mandated to introduce within 3 months though local decision could be taken to overrule) Note: investment identified through horizon scanning may be incorporated within annual budget and separate financial authority, and therefore this process would not be required)	[redacted]							**Clinical Director for Medicines Management (as a CCG voting member of ICS medicines related boards/groups) Appointed member GPs to represent primary care (as voting members of ICS medicines related boards/groups)**	**AD Medicines Management (as a CCG voting member of ICS medicines related boards/groups) Lead for Medicines Optimisation (as a CCG voting member of ICS medicines related boards/groups)**		
Clinical approval associated with authorisation of New Drugs over £50,000 per drug per year	**Executive Committee (financial decision) ICS Medicines Optimisation Board (clinical decision only with financial authorisation provided by Executive Committee)**										
Clinical approval associated with Investment required in-year for NICE guidelines or technology appraisal compliance over £50,000 per intervention per year (technically no limit as it is statutory mandated to introduce within 3 months though local decision could be taken to overrule) Note: investment identified through horizon scanning may be incorporated within annual budget and separate financial authority, and therefore this process would not be required)	**Executive Committee ICS Medicines Optimisation Board (this could take place in either whereby the Board is aware of need for compliance and escalates, or through alternative route where Executive Committee takes financial decision first)**										

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Buckinghamshire Formulary: a) Approval of addition or delegation of drugs to/from formulary with classification b) Approval of new or revised guidelines with a medicines component c) Process for formulary inclusion within statutory time frames positive NICE Technology Appraisals for which there is no CCG cost implication d) Request audit forms to ensure compliance of high cost medicines with NICE and locally agreed criteria. e) Respond to important new information on drug safety e.g.. MHRA safety updates and new evidence of efficacy by amending the formulary and related guidelines, care pathways or shared care protocols. f) Approval of minor formulary changes where there is no financial impact g) Approval of major formulary applications changes for clinical impact only post separate financial decision and authority h) Providing assurance to the CCG on delivery of national medicines safety and value programmes	**ICS Medicines Value Group (with recommendation to ICS Medicines Optimisation Board)** **ICS Medicines and Safety and Quality Group (assurance on delivery of national medicines safety and value programmes only)**							**Clinical Director for Medicines Management (as a CCG voting member of ICS medicines related boards/groups)** **Appointed member GPs to represent primary care (as voting members of ICS medicines related boards/groups)**	**AD Medicines Management (as a CCG voting member of ICS medicines related boards/groups)** **Lead for Medicines Optimisation (as a CCG voting member of ICS medicines related boards/groups)** **CCG Interface Pharmacist (as a CCG voting member of ICS medicines related boards/groups)**		
Authorised signatory of Patient Group Directions (all categories related to Medicines Management)	**Medicines Value Group (for agreement on implementation need only)**								**AD Medicines Management** **Lead for Medicines Optimisation**		

Key:	
X	Delegated limit
Z	CFO and one other signatory
Y	Has sight of
V	Note to Body concerned
AO	Accountable Officer
DAO	Deputy Accountable Officer
CFO	Chief Finance Officer
DCFO	Deputy Chief Finance Officer
DCD	Director of Commissioning and Delivery
DOT	Director of Transformation

Note A:

i) Wherever possibly from agencies within the Framework. Appointments from agencies not on the Framework must show value for money.
ii) A day/hourly rate cap is to be set for agency staffing that must not exceed what would be paid to substantive appointments

Note B:

In absence of the CFO for whatever reason, his/her authority will be formally delegated as deemed appropriate at the time, to the Deputy Chief Finance Officer or Deputy Accountable Officer. Vice versa arrangement applies in respect of the absence of the Deputy Accountable Officer. Equivalent arrangements will also apply in absence of named CCG Management Directors.