Annex B: Scheme of Delegation

1 August 2019

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1 Introduction

This Scheme of Delegation sets out the arrangements for the delegation of functions within NHS Improvement (both Monitor and NHS TDA functions), as approved by NHS Improvement's Board.

The scheme reflects the joint working arrangements between NHS Improvement and NHS England in place from 1 April 2019. Those organisations have made a commitment to transform the way they work to provide a single system view, single messaging and shared leadership to support and enable integrated care across England, whilst ensuring that both organisations continue to respect the separate statutory responsibilities exercisable by NHS England and NHS Improvement.

The organisations now work under a single operating model to deliver all aspects of the existing organisations – this defines our joint purpose and sets up our shared governance, systems and processes, organisation structures and capabilities, culture and behaviours and financial set up.

Under these arrangements, a substantial number of senior staff hold joint contracts of employment with both NHS England and NHS Improvement (Monitor and NHS TDA in order to discharge functions and perform duties for each organisation. In performing their duties, and specifically in discharging those functions delegated to them under this Scheme of Delegation, all employees must have due regard to all potential conflicts of interest between the duties they owe to NHS Improvement and their duties to any other employer, including NHS England. Where an employee identifies the potential for any such conflict, they should report this immediately in accordance with NHS Improvement's procedures for the management of conflicts of interest.

1.1 Delegation of Functions

- 1.1.1 The functions of Monitor and NHS TDA are exercisable by the members of Monitor and the members of NHS TDA respectively. All members of the board of NHS Improvement are appointed as members of both Monitor and NHS TDA¹ and as such are able to exercise the functions of each body.
- 1.1.2 Monitor may arrange for the exercise of its functions by a committee, subcommittee or employee of Monitor, and NHS TDA may arrange for the exercise of its functions by a committee, sub-committee or employee of NHS TDA². A committee or sub-committee which is appointed as a committee or sub-committee of both bodies is therefore able to exercise the relevant functions of either body, as may delegated in accordance with this scheme. An individual employed by both bodies is able to exercise the relevant functions of either body, as may be delegated in accordance with this scheme.
- 1.1.3 As part of the joint working arrangements with NHS England, Monitor and NHS TDA may in particular arrange for the exercise of the functions of those bodies by a committee which meets in common with an equivalent

¹ The National Health Service Trust Development Authority (Amendment) Regulations 2015 (SI 2015 no 1559) amend the regulations governing the membership of NHS TDA (SI 2012 no. 922) so as to enable joint non-executive director positions between Monitor and NHS TDA. Joint executive appointments are also permitted under the governing legislation of the two bodies (SI 2012 no 922 (NHS TDA) and Schedule to 2012 Act Monitor)).

² See paragraph 11(2) of Schedule 8 to the 2012 Act and regulation 11 of SI 2012 no 922.

committee of NHS England ("committees in common") and by an employee who is jointly employed by NHS England, Monitor and NHS TDA.

- 1.1.4 The exercise of these powers by NHS TDA is subject to such directions as may be given by the Secretary of State.
- 1.1.5 Monitor is under a statutory duty to carry out its functions effectively, efficiently and economically³.
- 1.1.6 The purpose of this document is to set out arrangements made by Monitor and NHS TDA for the exercise of functions, in particular the delegation of functions of those bodies to committees and to staff, and the matters which are reserved to the board of NHS Improvement ("the Board").
- 1.1.7 The functions of Monitor and NHS TDA are set out primarily in:
 - the National Health Service Act 2006
 - the Health and Social Care Act 2012
 - regulations or directions made/given under those Acts.
- 1.1.8 The Board remains accountable for all functions of Monitor and NHS TDA, including those delegated in accordance with this scheme, and expect to receive information about the exercise of delegated functions to assure it and enable it to maintain a monitoring role (see rule 5.11.5 of the Rules of Procedure).
- 1.1.9 Any function not specifically delegated may be delegated by a separate Board resolution.
- 1.1.10 In addition to this Scheme, the Standing Financial Instructions of NHS Improvement provide for the reservation and delegation of various functions and decisions relating to financial matters.

Chief executive

1.1.11 The Chief Executive of NHS Improvement is both the chief executive of Monitor and the chief executive of NHS TDA, and also the Chief Operating Officer of NHS Improvement and NHS England. Overall responsibility for the day-to-day management of NHS Improvement is delegated to the Chief Executive/Chief Operating Officer, who is able to exercise any function not specifically reserved to the Board or delegated to a committee, sub-

³ Paragraph 11(1) of Schedule 8 to the 2012 Act.

committee or other employee (see rule 5.11.9 of the Rules of Procedure). The Board, however, maintains ultimate responsibility for all its functions.

1.1.12 The specific responsibilities to be exercised by the Chief Executive include:

Corporate governance

- acting as Monitor and NHS TDA's accounting officer and NHS TDA's Chief Accountable Officer (as appointed by the Principal Accounting Officer of the Department of Health and Social Care and as directed by the Secretary of State);
- the development and approval of operational policies and business processes;
- approval of NHS Improvement's detailed financial policies;
- appointment of executives as officer members of NHS TDA.
- Annual report and accounts
- approval of annual report and accounts for Board consideration, and signing the annual accounts

The specific responsibilities to be exercised by the Chief Executive, in consultation with the Chief Executive of NHS England and the NHS Executive, include:

Strategy

- approval of the organisation's strategic plan for recommendation to the Board; and
- oversight of the successful delivery of the programme of work required by the strategic objectives set out in NHS Improvement's business plans.

Business plans and budget

- preparation of the annual business plan and budget, and determination on budget and planning assumptions in advance of each financial year;
- approval of the medium-term financial plan for recommendation to the Board;
- variations to the approved budget within limits delegated by the Board (less than £5 million); and
- approval of directorate business plans to deliver the strategic plan. *Performance and risk management*
- approval of corporate targets for recommendation to the Board;
- approval of the statement on internal control; and
- approval of overall risk management arrangements for Board consideration.

Human resources

- making recommendations on the remuneration of senior executives to the Strategic HR, Nominations and Remuneration committee;
- approval of all major human resources policies; and
- approval of overall establishment and staff terms and conditions for recommendation to the Board.

Publications and communications

- identification of significant publications requiring Board approval and discussion of these with the chair;
- approval of reports and publications by NHS Improvement and NHS Improvement's responses to major consultations, where appropriate for recommendation to the Board;
- approval of press releases and press statements where the release or statement is of public, political or reputational significance; and
- approval of evidence to parliamentary committees.
- 1.1.13 The Chief Executive may authorise any of NHS Improvement's corporate or regional directors to act on his behalf. The Chief Executive can at any time reassume the exercise of the function in question should the need arise.
- 1.1.14 The Board may choose to delegate to the Chief Executive specific matters which would otherwise be reserved to the Board (as set out in the matters reserved to the Board). In addition, the Chief Executive may act in any way consistent with Monitor and NHS TDA's statutory obligations to enable him to be satisfied that:
 - NHS Improvement's functions are properly exercised in accordance with legislation, applicable directions from the Secretary of State and NHS Improvement's remit letter from the Department of Health and Social Care;
 - in his capacity as Accounting Officer, Monitor and NHS TDA funds are properly applied and accounted for in accordance with the instructions, memoranda and guidance issued by the Department of Health and Social Care, HM Treasury and the Cabinet Office.

1.2 Reservation of Functions, Duties and Powers to the Board

- 1.2.1 The Board will have the overall function of establishing and maintaining the strategic direction of NHS Improvement.
- 1.2.2 It is for the Board to decide which matters it does not delegate. The matters reserved for decision by the Board are set out in Section 4 of this scheme see also rule 5.11.3 to 5.11.6 of the Rules of Procedure.

- 1.2.3 The Board, in full session, may decide on any matter it wishes that is within its legal powers.
- 1.2.4 The Board reserves the ability to, at any time, withdraw the delegation of a function and exercise that function or further delegate it (see rule 5.11.8 of the Rules of Procedure).

1.3 Caution over the use of Delegated Functions, Duties and Powers

- 1.3.1 Functions are delegated to committees, sub-committees, members of the board and employees on the understanding that they will not exercise delegated powers in a matter which in their understanding was likely to be a cause for public concern or which might have an effect on the reputation of NHS Improvement (see rule 5.11.11 of the Rules of Procedure).
- 1.3.2 The exercise of all delegated powers is on the basis that appropriate expert advice will be sought as necessary and that any costs involved can be met within the authorised budget (see rules 5.11.12 of the Rules of Procedure).

1.4 Ability to Delegate Delegated Functions, Duties and Powers

- 1.4.1 The committees, sub-committees, members and employees to which a function has been delegated may not delegate that function, unless specifically authorised to do so under this scheme.
- 1.4.2 The Scheme of Delegation should be used in conjunction with other established procedures within NHS Improvement, including the Rules of Procedure and Standing Financial Instructions.

1.5 Failure to Comply with Rules of Procedure, Scheme of Delegation and Standing Financial Instructions

- 1.5.1 Failure to comply with the Rules of Procedure, the Standing Financial Instructions and the Scheme of Delegation may result in disciplinary action in accordance with the NHS Improvement disciplinary policy and procedure at that time.
- 1.5.2 Disciplinary sanctions may include dismissal. Any financial or other irregularities or impropriety in relation to compliance with the Rules of Procedure, Standing Financial Instructions or Schedule of Delegation, which involve evidence or suspicion of fraud, bribery or corruption will be

dealt with in accordance with paragraph 4.2 of the Standing Financial Instructions and the Tackling Fraud, Bribery and Corruption policy.

- 1.5.3 If for any reason the reservation of powers or delegations detailed in this document are not complied with, including the exercise of powers without proper authority, full details of the non-compliance and any justification for non-compliance shall be reported to the next formal meeting of the Audit and Risk Assurance Committee for determining or ratifying action.
- 1.5.4 Notwithstanding the above, all members of the Board and all employees must report any instance of non-compliance to the Chief Financial Officer, Chief Executive or General Counsel for NHS Improvement immediately they become aware of it.

1.6 Committees and Sub-committees

- 1.6.1 Monitor and NHS TDA may appoint committees and sub-committees. A committee or sub-committee of Monitor may consist of or include persons who are not members or employees of Monitor. A committee or sub-committee of NHS TDA may consist of or include persons who are not members or employees of NHS TDA. In accordance with rules 6.1.1 and 6.1.2 of the Rules of Procedure, the Board may appoint committees and each committee should usually be appointed as a committee of both Monitor and NHS TDA. In addition, as part of the joint working arrangements with NHS England, committees of Monitor and NHS TDA may meet in common with the equivalent committee of NHS England.
- 1.6.2 The Board may arrange for the delegation of the functions of NHS Improvement to committees and sub-committees, in accordance with the following paragraphs.
- 1.6.3 The Board may delegate:
 - (a) any function of NHS TDA to a committee or sub-committee, which is a committee or sub-committee of Monitor; and
 - (b) any function of NHS TDA to a committee or sub-committee, which is a committee or sub-committee of Monitor,

provided it has not delegated that function elsewhere in this scheme (see also rules 5.11.7 and 5.11.8 of the Rules of Procedure).

- 1.6.4 The Board may delegate its responsibility for determining the powers and functions of a committee and its responsibilities under rules 6.1.3 to 6.1.6 of the Rules of Procedure in relation to such a committee, to the chief executive (see rule 6.1.7 of the Rules of Procedure).
- 1.6.5 A committee may delegate any of the functions of NHS Improvement for which it is responsible to a sub-committee of that committee (which must be a sub-committee of Monitor, NHS TDA or both, depending on the functions which are being exercised), subject to the provisions of the committee's terms of reference.
- 1.6.6 In accordance with rule 6.6.2 of the Rules of Procedure, the terms of reference of a committee may provide that any functions of the committee may be exercised by a member of the committee acting alone, subject to the condition that any novel, contentious or high-risk matter must be considered by the committee in a meeting held in accordance with its rules on quorum.
- 1.6.7 If a committee appoints a sub-committee, then in accordance with rule 6.8.4 of the Rules of Procedure, the terms of reference of the subcommittee may provide that any functions of the committee may be exercised by a member of the sub-committee acting alone, subject to the condition that any novel, contentious or high-risk matter must be considered by the sub-committee in a meeting held in accordance with its rules on quorum.
- 1.6.8 Each committee has delegated responsibility for exercise of those functions falling within their terms of reference (as approved by the Board), other than any matter reserved to the Board (see rule 5.11.7 of the Rules of Procedure). The committees which have been appointed by the Board and the functions delegated to those committees are not set out in this Scheme, although this may be specified in another annex to the Rules of Procedure.

2 Scope, exercise of functions and interpretation

- 2.1 This scheme applies to all the directorates and employees of NHS Improvement, other than the Healthcare Safety Investigation Branch. The exercise of functions by that Branch is subject to the National Health Service Trust Development Authority (Healthcare Safety Investigation Branch) Directions 2016 and arrangements made by NHS TDA under those directions.
- 2.2 Where a function is delegated to more than one director, each director may exercise that function in respect of matters or cases falling within the remit of the directorate or team for which they are a director or, in the case of a Regional Director, in respect of the region for which they are responsible.
- 2.3 Where a function is delegated to Regional Directors, each Regional Director may exercise that function in respect of the region for which they are responsible.
- 2.4 A Regional Director may also exercise a function in respect of another region, whether generally or in relation to particular cases, if agreed by the Regional Director for that other region, the Chief Operating Officer or Chief Executive.
- 2.5 A delegated function must be exercised in accordance with any statutory requirement which applies to the exercise of that function. This may include duties that apply generally to the exercise of functions by public and NHS bodies, such as the duty to have regard to the NHS Constitution (section 2 of the Health Act 2009) and the Public Sector Equality Duty (section 149 of the Equality Act 2010). In addition, in relation to the exercise of Monitor's functions, functions must be exercised in accordance with the following duties:

Monitor's "general duties" in sections 62 and 66 of the Health and Social Care Act 2012:

- s.62(1) main duty of Monitor when exercising its functions is to protect and promote the interests of people who use health care services by promoting provision of health care services which (a) is economic, efficient and effective, and (b) maintains or improves the quality of the services
- s.62(3) duty to exercise functions with a view to preventing anticompetitive behaviour in the provision of NHS services which is against the interests of people who use such services

- s.62(4) to (6) duties to exercise functions with a view to enabling integration of NHS services, and integration of NHS services with other health and social care
- s.62(7) duty to secure that patients and public are involved to an appropriate degree in decisions that Monitor makes
- s.62(8) duty to obtain advice appropriate for enabling it effectively to discharge its functions from persons who have a broad range of professional expertise in prevention, diagnosis or treatment of illness, and the protection or improvement of public health
- s.62(9) duty to exercise functions in a manner consistent with the performance by the Secretary of State of the duty under section 1(1) of the NHS Act 2006 (duty to promote a comprehensive health service)
- s.62(10) duty not to exercise functions for the purpose of causing a variation in the proportion of NHS services provided by providers of different status
- s.66(1) in exercising its functions, Monitor must have regard, in particular, to the need to maintain the safety of patients
- s.66(2) Monitor must in exercising its functions also have regard to the following matters (in so far as they are consistent with the need to maintain safety of patients)—

(a) the desirability of securing continuous improvement in the quality of NHS services and in the efficiency of their provision,

(b) to (d) the need for NHS commissioner's purposes to ensure fair access to services and that people who require services are given access, and to make best use of resources when doing so,

(e) desirability of providers co-operating to improve quality of services,

(f) the need to promote research,

(g) the need for high standards of education and training for NHS health care professionals.

Monitor's duties of co-operation:

- s.288 of the 2012 Act duty to co-operate with the Care Quality Commission, including giving information which would assist the Commission in the exercise of its functions
- s.290 of the 2012 Act duty to co-operate with NHS England, the National Institute for Clinical Excellence, NHS Digital and Special Health Authorities
- 2.6 In this scheme, references to the holder of a named post includes references to an employee formally deputising for the post holder; for example, during a period of absence or to cover a vacant post, subject to such deputising arrangements being formally documented and signed off by the appropriate Director or Chief Executive. Records should be retained locally for audit.

Accountability for the discharge of the relevant functions will, however, remain with the designated post holder.

2.7 In addition, where a function is delegated to a postholder in accordance with this scheme, then unless the context otherwise requires and subject to any alternative arrangements agreed by the Board:

(a) an employee in the postholder's team who reports direct to that postholder and is an employee of the body (Monitor or NHS TDA) whose function is to be exercised, may exercise that function, if authorised in writing by the postholder (such authority must be retained for audit purposes);

(b) the function may be exercised by the postholder's line manager, if:

(i) the line manager is an employee of the body (Monitor or NHS TDA) whose function is being exercised, and

(ii) the postholder is absent, the post is vacant or the postholder has requested the manager to exercise the function in question in relation to a particular matter.

- 2.8 As explained at paragraph 1.6.8, the subsequent sections of this Scheme do not specify the functions that have been delegated to committees rather than employees.
- 2.9 Unless a contrary intention is evident or the context requires otherwise, words or expressions contained in this scheme shall have the same meaning as in the National Health Service Act 2006, the 2012 Act, or in regulations, orders or directions made under those Acts. In addition, the following terms shall have the meanings specified below:

| the 2012 Act | means the Health and Social Care Act 2012 |
|------------------|---|
| the Board | means the board of NHS Improvement, as constituted in accordance with the Rules of Procedure |
| Capital Guidance | means the NHS Improvement Guidance Capital regime, investment and property business case approval guidance for NHS trusts and foundation trusts and any guidance replacing that guidance |
| Chair | means the person appointed by the Secretary of State for Health and Social Care as chair of NHS Improvement (and the chair of both Monitor and NHS TDA); and references to the chair include references to the deputy chair where authorised to act in the absence of the chair |
| СМА | the Competition and Markets Authority |

| Committee | means a committee of NHS Improvement (whether a committee of Monitor or NHS TDA or both) |
|-------------------|---|
| Committee Member | means a person appointed as member of a Committee |
| Deputy Chair | means the Non-Executive Member appointed by the Board to act as deputy chair |
| Executive Member | means a member of the Board who has responsibility for overseeing the organisation's management (as a National Director), and has been appointed as both an executive member of Monitor and an officer member of NHS TDA |
| FT | means an NHS foundation trust |
| HSIB | means the Healthcare Safety Investigation Branch |
| National Director | means a director of NHS Improvement who is a member of the NHS Executive – as of 1 July this is one of the following directors: |
| | Chief Operating Officer |
| | the Regional Directors |
| | Chief Financial Officer |
| | National Medical Director |
| | Chief Nursing Officer |
| | Chief People Officer |
| | National Director Digital |
| | National Director of Strategy |
| | National Director for Transformation and Corporate Development |
| | National Director of Improvement |
| | National Director for Emergency and Elective Care |
| | For the purposes of this Scheme, the term also includes the Director of Provider Transformation |
| NHS Act 2006 | means the National Health Service Act 2006 |
| NHS England | means the National Health Service Commissioning Board |
| NHS Improvement | means Monitor and NHS TDA |

| NHS TDA | means the National Health Service Trust Development Authority |
|--------------------------|--|
| Non-Executive Member | means a member of the Board who does not have any management responsibilities, and has been appointed as both a non-executive member of Monitor and a non-officer member of NHS TDA |
| Operating Framework | sets out the planning, performance and financial requirements for organisations and the basis on which they will be held to account |
| PPCCR | the National Health Service (Procurement, Patient Choice and Competition) (No.2) Regulations 2013 (SI 2012 no 500) |
| Regional Director | means a person appointed to as director for a region of NHS Improvement and England (and a member of the NHS Executive), to provide strategic leadership for those bodies across the region, including co-ordination and oversight of local team |
| Rules of Procedure | means the Rules of Procedure of NHS Improvement |
| Secretary | means the member of NHS Improvement's staff appointed as secretary to the Board |
| Scheme of Delegation | means this Scheme |
| Sub-committee | means a sub-committee of a Committee |
| TDA Directions | means the National Health Service Trust Development Authority Directions and Revocations and the Revocation of the Imperial College Healthcare National Health Service Trust Directions 2016 |
| Transactions Guidance | means NHS Improvement's <i>Transactions guidance – for trusts</i> undertaking transactions, including mergers and acquisitions, including appendices and addendums, or any guidance replacing that guidance |

- 2.7 Within this document, unless the context otherwise requires:
 - words imparting any gender include any other;
 - words in the singular include the plural and words in the plural include the singular; and
 - a reference to an enactment is a reference to that enactment as amended.

3 Functions and matters reserved to the Board

| Reference: | Reserved To: | Functions: |
|--|--------------|--|
| Strategy and Management | | |
| | Board | The establishment and maintenance of NHS Improvement's strategic direction – reviewing, contributing to and approving NHS Improvement's vision, mission and values. |
| | Board | The approval of NHS Improvement's corporate and business plans, including the distribution of NHS Improvement's financial allocation as set out in the annual business plan and any subsequent material change to this. |
| | Board | The approval of NHS Improvement's risk management strategy/framework, including the determination of Monitor's risk appetite. |
| | Board | The approval of all of NHS Improvement's significant regulatory policies prior to consultation with stakeholders and any material amendments following responses received in response to consultation. |
| | Board | The review of performance in light of NHS Improvement's strategy, objectives, business plans and budgets with a view to ensuring that any necessary corrective action is taken. |
| | Board | The continuous appraisal of the affairs and effective management of NHS Improvement by means of the receipt of reports from committees and officers, including the review of the top level/strategic risks facing NHS Improvement and their mitigations. |
| Operational decision-making | 1 | |
| See related entries in later sections | Board | The determination of any operational decision considered to be policy-determining (i.e. having strategic implications) and/or very high risk. |
| For NHS TDA, see direction 6(k) of the TDA Directions | Board | Approval of (or, in the case of non-financially distressed FTs, providing an opinion on) trust business cases for capital investment and property transactions with a value in excess of £50m |
| Section 35 of the NHS Act 2006 (Monitor) | Board | Decisions on authorisation of an NHS trust as an FT, where decision is marginal |
| Section 65D of the NHS Act 2006 (Monitor) Direction 7 of the TDA Directions (NHS TDA) | Board | Decision on whether to appoint a trust special administrator for an FT or to recommend to Secretary of State that such an administrator is appointed for an NHS trust |
| Section 73 of the 2012 Act (Monitor) | Board | Agreeing proposals for regulatory market studies |
| Section 116 of the 2012 Act (Monitor) | Board | Decision to publish national tariff |
| Section 118 of the 2012 Act (Monitor) | Board | Approval of national tariff proposals for consultation |

| Reference: | Reserved To: | Functions: |
|---|--------------|---|
| Paragraph 5 of Schedule 11 to the 2012 Act (Monitor) | Board | Decision to impose a financial penalty |
| Organisation and internal co | ntrols | |
| | Board | The approval of NHS Improvement's high-level organisational design and control structure. |
| | Board | The approval of any significant change to the level and nature of insurance cover held by NHS Improvement. |
| | Board | The approval of significant corporate policies. |
| | Board | The approval of all proposed expenditure above £5 million. |
| | Board | The approval of the instigation or defence of legal proceedings. |
| | Board | The approval of the opening or closing of any bank account.* |
| | Board | The approval of audit arrangements and the receipt of reports from the audit and risk assurance committee meetings with a view to taking any appropriate action.* |
| - Paragraphs 19 and 21 of | Board | To consider and approve NHS Improvement's statutory annual report and accounts.* |
| Schedule 8 to the 2012 Act (Monitor) - Paragraphs 3 and 15(3) of Schedule 15 to the NHS Act 2006, regulations14 and 15 of SI 2012 no 922, and direction 8(b) of the TDA Directions (NHS TDA) | | In relation to NHS TDA, ensure annual report is presented at a public meeting within 30 days |
| Paragraph 7 of Schedule 8 to the 2012 Act (Monitor) Paragraph 3 of Schedule 6 to the NHS Act 2006 (NHS TDA) | Board | The determination of the remuneration policy for Executive Members of the Board, subject to cross-government controls.** |
| Section 50 of the NHS Act 2006 | Board | Determining if fees should be payable by FTs for maintaining FT register |

* Indicates the matter is the responsibility of the Audit and Risk Committee, with final decisions taken by the Board as a whole.

** Indicates the matters is the responsibility of the Strategic HR, Nominations and Remuneration Committee, with final decisions taken by the Board as a whole

Governance and appointments

| | Paragraph 2(1) of | Chair and Non-Executive | Appointment of chief executive and executive members of Monitor (subject in the case of the chief executive to the |
|---|---------------------------|-------------------------|--|
| S | chedule 8 to the 2012 Act | Members | consent of the Secretary of State) |
| | (Monitor) | | |

| Reference: | Reserved To: | Functions: |
|---|--------------|---|
| Paragraphs 10 and 11(2) of Schedule 8 to the 2012 Act (Monitor's procedure and exercise of functions) Regulation 11 and 12 of SI 2012 no 222 (NHS TDA standing orders and arrangements for exercise of functions) | Board | The approval of NHS Improvement's rules of procedure, including: arrangements for the exercise of functions, including a scheme of delegation and schedule of matters reserved for Board decision; and standing financial instructions (paragraph 10 of Schedule 8 to the 2012 Act and SI 2012 no. 922), The approval of any variation or amendment to these. |
| Paragraph 10(1) of Schedule 8 to the 2012 Act (Monitor) Regulation 7 of SI 2012 no 922 (NHS TDA) | Board | Appointment of Non-Executive Member to be vice/deputy chair |
| Paragraph 9 of Schedule 8 to the 2012 Act (Monitor) Regulations 7, 11 and 12(3) of SI 2012 no 922 (NHS TDA) | Board | The establishment of formal committees, agreeing terms of reference and membership thereof |
| | Board | The receipt of reports detailing the decisions and recommendations made by NHS Improvement's formal committees (as appropriate) |
| Rules of Procedure, rule 5.1.7 Public Bodies Admission to Meetings Act 1960 (NHS TDA) | | Ensuring board meetings held in public, in accordance with the requirements of the 1960 Act (NHS TDA) Decisions to exclude the public and conduct its business in private |
| Rules of Procedure, rule 5.10.2 | Board | The ratification of decisions taken by the chair pursuant to the exercise of emergency powers. |
| | Board | The evaluation of the performance of the Board at least once a year, including a review of NHS Improvement's overall governance arrangements |
| | Board | Final decision to approve recommendations to the Secretary of State for Health and Social Care with regard to changes to the structure, size and composition of the Board (Audit and Risk Assurance Committee to consider recommendations) |
| | Board | The appointment of the senior independent director |
| | Board | The appointment of NHS Improvement's principal professional advisers |

| Reference: | Reserved To: | Functions: |
|-----------------------------|---------------------------|--|
| International Development A | ct 2002 – Monitor and NHS | TDA |
| Section 9 and Schedule 1 | Board | Exercising the power, as a relevant public body, to make arrangements for the purposes of furthering sustainable development in countries outside the United Kingdom; improving the welfare of the population of one or more such countries, or alleviating the effects of natural or man-made disaster or other emergency on the population of one or more such countries |

4 Scheme of Delegation - Functions (general and corporate)

| Reference: | Delegated To: | Functions: | |
|------------------|--------------------|---|--|
| | | | |
| NHS Act 2006 (NH | IS IDA functions) | | |
| Section 2 | National Directors | Do anything which is calculated to facilitate, or is conducive or incidental to, the discharge of any function conferred on Secretary | |
| | | of State by the Act and exercisable by NHS TDA by virtue of directions | |
| Paragraph 3 of | National Directors | Appoint NHS TDA staff (subjection to HR and finance policies and internal controls) | |
| Schedule 6 | | | |

2012 Act (Monitor functions but * indicates also NHS TDA function)

| Paragraph 6 of | National Director of | Make payment of remuneration and expenses to Non-Executive Members |
|-----------------|-----------------------|--|
| Schedule 8 | Transformation and | |
| | Corporate Development | |
| Paragraph 7 of | National Directors | Appoint Monitor staff (subject to HR and finance policies and internal controls) |
| Schedule 8 | | |
| Paragraph 12 of | National Directors | Make arrangements for persons to assist Monitor in the exercise of its functions |
| Schedule 8 | | |
| Paragraph 14 of | National Directors | Acquire, compile and keep information about matters relating to the exercise of Monitor's functions |
| Schedule 8 | | |
| Paragraph 15 of | National Directors | Do anything which appears to be necessary or expedient for the purposes of, or in connection with, Monitor's functions |
| Schedule 8 | | |
| Paragraph 21 of | National Director of | Prepare and submit Monitor's annual report (subject to Board approval) |
| Schedule 8 | Transformation and | |
| | Corporate Development | |
| Paragraph 21(4) | National Directors | Provide Secretary of State with other reports and information (on Monitor's functions and on FTs) |
| of Schedule 8 | | |
| Paragraph 22 of | National Director of | Make arrangements for responding in writing to recommendations about Monitor's functions made by Parliamentary committees |
| Schedule 8 | Transformation and | |
| | Corporate Development | |
| Section 67 | National Director of | Make arrangements to comply with Monitor's duties as regards conflicts between functions |
| | Transformation and | Publish statements on resolution of conflicts between Monitor's duties |
| | Corporate Development | Include statement of steps taken to avoid/resolve conflicts within section 67 in annual report |
| Section 68 | National Directors | Ensure compliance with duty to review exercise of Monitor's functions and secure that in exercising those functions, Monitor |
| | | does not impose or maintain unnecessary burdens |

| | National Director of | Make arrangements to comply with Monitor's duty to review regulatory burdens |
|--------------|-------------------------|--|
| | Transformation and | Publish and revise annual statements on what Monitor has done pursuant to this duty |
| | Corporate Development | |
| Section 69 | National Directors | Ensure compliance with duty to carry out impact assessments (and consult) on proposals falling within section 69(1) |
| | National Director of | Make arrangements to ensure compliance (e.g. central guidance) |
| | Transformation and | Include list of impact assessments and decisions taken in annual report |
| | Corporate Development | |
| Section 109 | National Director of | Include information on discretionary requirement imposed and enforcement undertakings accepted (in relation to FTs and other |
| | Transformation and | licence holders) in the annual report |
| | Corporate Development | |
| Section 255* | Chief Executive | Request NHS Digital to establish information systems (both Monitor "mandatory requests" and NHS TDA requests) |
| | Chief Operating Officer | |
| | Chief Financial Officer | |
| | Director of Pricing and | |
| | Costing | |
| | Director of Data & | |
| | Analytics | |

NHS TDA Regulations and Directions (NHS TDA functions)

| Regulation 14 of | National Director of | Make arrangements to comply with NHS TDA's duty to provide reports and other information to Secretary of State |
|-------------------|-----------------------|--|
| SI 2012 no 922 | Transformation and | |
| | Corporate Development | |
| Direction 2(1) | National Directors | Work collaboratively with Monitor under single leadership and operating model, including support work, to ensure improvement |
| | | in the quality of care, patient safety and financial sustainability across the health service |
| Direction 8(b) | National Director for | Prepare NHS TDA's annual report of its activities in each financial year (subject to Board approval) and provide a copy to the |
| and regulation 14 | Transformation and | Secretary of State |
| of SI 2012 no | Corporate Development | |
| 922 | | |
| Direction 8(c) | National Directors | Provide such information to the Secretary of State as the Secretary of State may require |

Local Authority Social Services and NHS Complaints (England) Regulations 2009 (NHS TDA functions)

| Regulation 3 | National Director for | Making arrangements for handling and consideration of complaints (subject to approval of the Board) |
|-------------------|-----------------------|---|
| | Transformation and | |
| | Corporate Development | |
| Regulations 4, 13 | Chief Executive | Functions of "responsible person" under the Regulations |
| to 18 | (functions may be | Ensuring compliance including any necessary action taken in light of outcome of complaint |
| | delegated to National | |

| Director for | |
|--------------------------|---|
| Transformation and | |
| Corporate Development) | |
| NHS Improvement's Head | Functions of complaints manager under the Regulations |
| of Enquiries, Complaints | Managing procedures for handling and considering complaints, including complaint outcome decisions and preparing annual |
| and Whistleblowing | report on complaints |

Whistleblowing (Monitor and NHS TDA)

| NHS | Chief Executive | Decisions on how matters to be investigated and considering investigation reports |
|--------------------|---------------------------|---|
| Improvement's | National Medical Director | |
| 'raising concerns' | | |
| policy for NHS | | |
| Improvement | | |
| staff (FTSU) | | |
| Section 43F of | Chief People Officer | Managing responsibilities of Monitor as a "prescribed person" to whom protected disclosures may be made |
| Employment | | |
| Rights Act 1996 | | |
| and Public | | |
| Interest | | |
| Disclosure | | |
| (Prescribed | | |
| Persons) Order | | |
| 2014 | | |
| Prescribed | Chief People Officer | Publish annual report on protected disclosures Monitor and NHS TDA have received |
| Persons (Reports | | |
| on Disclosure of | | |
| Information) | | |
| Regulations 2017 | | |

Health and Safety at Work Act 1947

| Section 1 | Chief Executive/Chief | Overall responsibility for compliance with duty to ensure health and safety of staff |
|-----------|-----------------------|--|
| | Operating Officer | |
| | National Director for | Make arrangement to secure compliance (policies etc) |
| | Transformation and | |
| | Corporate Development | |

Information governance

| Data Protection | Data Protection Officer | Functions conferred on the data protection officer |
|-----------------|-------------------------|--|
| Act and General | | |
| Data Protection | | |
| Regulation | | |
| Freedom of | National Director for | Make arrangement to secure compliance with duties under the Act |
| Information Act | Transformation and | |
| | Corporate Development | |
| NHS | Chief Executive/Chief | Accountable for ensuring effective system of Information Governance and internal control is in place |
| Improvement's | Operating Officer | |
| Information | NHS Executive | Decide to sign off statement of compliance |
| Governance | | Consider reports from SIRO |
| Framework | Caldicott Guardian | Advise on options for lawful and ethical processing |
| | National Director for | Approval of IC attrategies, policies, implementation and support desumantation |
| | Transformation and | Approval of IG strategies, policies, implementation and support documentation |
| | Corporate Development | |
| | (SIRO) | |
| Information | National Director for | Approval for monitoring of individual email, internet and other communications |
| Security Policy | Transformation and | |
| | Corporate Development | |
| | (SIRO) | |

5 Scheme of Delegation - Functions relating to oversight and regulation of providers

| Reference: | Delegated To: | ated To: Functions: | | |
|--|---|--|--|--|
| NHS Act 2006 (Monitor functions) | | | | |
| Section 33 | Regional Directors Director of Provider Transformation | Receipt and processing of applications by NHS trusts to become an FT | | |
| Section 35 | Regional Directors Director of Provider Transformation | Assess FT applications, including decisions about deferral and delay Make recommendations to Provider Oversight Committee on authorisation | | |
| Section 39 | Director of Provider Transformation | Maintain register of FTs Provide copies/extracts from documents in the register | | |
| Sections 56 to 57A | Regional Directors | Assess statutory transactions involving FTs Make recommendations to: (a) Provider Oversight Committee, on statutory transactions involving FTs, if involves trust in special measures or transaction is red-rated or high risk; and (b) Regional Support Group, on other statutory transactions involving FTs | | |
| Sections 65D, 65DA, 65F, 65H, 65I, 65J, 65KA, 65L, 65LA, 65M 65N | Chief Operating Officer Director of Provider Transformation Regional Directors | Produce reports, carry out assessment and make recommendations to Provider Oversight Committee or the Board in relation to Monitor's functions in relation to trust special administration of an FT | | |

2012 Act (Monitor functions)

- - -

- -

| Section 85 | Director of Provider | • | Determine Monitor's requirements for form of licence application and information which must accompany or be |
|-----------------|----------------------|---|---|
| | Transformation | | included in such applications |
| Section 86 | Director of Provider | • | Determine or make recommendations to Provider Oversight Committee as to the criteria for grant of a licence by |
| | Transformation | | Monitor |
| Sections 87, 90 | Director of Provider | • | Make decisions on grant and refusal of licence applications, as authorised by Provider Oversight Committee |
| and 91 | Transformation | | |
| Section 93 | Director of Provider | • | Maintain and publish register of licence holders |
| | Transformation | • | Decide information to include in the register of licence holders and determine what fee, if any, is payable for |
| | | | copy/extract of register |

| Reference: | Delegated To: | Functions: |
|--|--|---|
| Sections 94, 97, | Director of Provider | Make recommendations to Provider Oversight Committee as to the standard conditions to be included licence, the |
| 100 and 101(4) | Transformation | modification of any such conditions and whether to make a reference to the CMA when the s.100 objection threshold is reached |
| Sections 95 and | Regional Directors | Make recommendations to Provider Oversight Committee as to whether to include special condition in an FT's licence |
| 101(2) | | and whether to make a reference to the CMA where the FT refuses consent |
| | Director of Provider Transformation | As above, but for licence holders other than FTs |
| Schedule 10 | Regional Directors Director of Provider Transformation | Make decisions (or make recommendations to the Provider Oversight Committee) in relation to references to the CMA |
| Section 99 | Regional Directors | Ensure NHS England and CCGs notified of action taken against an FT in reliance on a condition in the licence under section 97(1)(i), (j) or (k) (continuity of services) |
| | Director of Provider Transformation | As above, but for licence holders other than FTs |
| Section 104 | Regional Directors | Require a person mentioned in s.104(2) to provide information, documents, records or other items considered necessary or expedient for purposes of Monitor's functions under Chapter 3 of Part 3 of the 2012 Act (licensing) |
| | Director of Provider Transformation | Require a person mentioned in s.104(2) to provide information, documents, records or other items considered necessary or expedient for purposes of Monitor's functions under Chapter 3 of Part 3 of the 2012 Act (licensing) in relation to a licence holder other than an FT |
| Sections 105, 106 and Schedule 11 ⁴ | Regional Directors | Make recommendations to the Regional Support Group or Provider Oversight Committee as to accepting enforcement undertakings, imposing discretionary requirements, imposing additional licence conditions, taking action for breach of such a condition and issuing/revoking compliance certificates and statements of compliance, in relation to FTs Ensuring publication of enforcement action in relation to FTs |
| | Director of Provider Transformation | As above, but for licence holders other than FTs |
| Section 111 | Regional Directors | Make recommendations to the Regional Support Group or Provider Oversight Committee as to imposing and removing additional licence conditions on FTs and taking action for breach of such a condition |
| Section 108 and paragraph 11 of Schedule 8 | Chief Financial Officer Chief Operating Officer Director of Provider Transformation | Make recommendations to the Provider Oversight Committee (or the Board) on publication and revision of guidance as to use of enforcement powers and procedure for entering enforcement undertakings |

⁴ See also Section 9 (functions relating to pricing)

| Reference: | Delegated To: | Functions: |
|--|--|---|
| Chapter 3 of Part 3 and Transactions Guidance | Regional Directors | Assess and make recommendations as to risk-rating of transactions involving FTs and NHS trusts |
| Chapter 3 of Part 3 and Capital Guidance | Regional Directors | Assess FT proposals involving capital investment or property transactions and make recommendations to Chief Financial Officer, relevant NHS Improvement committee or the Board |
| Section 288(2)(b) and (c) and (3) | Director of Provider Transformation | Make arrangements with the Care Quality Commission (CQC) to ensure that (i) a person applying both for a licence and for CQC registration may do so in a single application form and (ii) such a person is granted a licence and registration by way of a single document Seek to secure that in such cases, the conditions in the licence are consistent with the conditions of the person's CQC registration Provide CQC, on request, with any material relevant to the exercise of Monitor's functions pursuant to section 73(2) (market investigations under the Enterprise Act 2002) |

TDA Directions (NHS TDA functions)

| Direction 2(1) | National Directors | • Work collaboratively with Monitor under single leadership and operating model, including support work, to ensure improvement in the quality of care, patient safety and financial sustainability across the health service |
|-------------------|---|--|
| Direction 2(2) | National Directors | Take such steps as considered necessary and appropriate to assist and support providers of health services to ensure continuous improvement in the quality of the provision of such services and their financial sustainability |
| Direction 3(1)(b) | National Directors | Take such steps as considered necessary and appropriate to design methods to be used by NHS TDA, and develop & publish guidance to NHS trusts, in connection with NHS TDA overseeing, developing and supporting NHS trusts in relation to: |
| | | a. clinical quality, governance and management of risk in NHS trusts; and b. compliance by NHS trusts with Care Quality Commission requirements and standards set by NHS TDA, (subject to approval of Board or relevant committee as may be necessary or appropriate) |
| Direction 3(1)(b) | Chief Operating Officer Director of Provider Transformation | Take such steps as considered necessary and appropriate to design methods to be used by NHS TDA, and develop & publish guidance to NHS trust, in connection with NHS TDA overseeing, developing and supporting NHS trusts in relation to progress of NHS trusts towards satisfying Monitor of matters necessary to obtain FT authorisation (subject to approval of Provider Oversight Committee or the Board as may be necessary or appropriate) |
| Direction 3(1)(c) | National Directors | Take such steps as considered necessary and appropriate to design methods to be used by NHS TDA, and develop & publish guidance, in connection with NHS TDA working collaboratively with Monitor to oversee, develop and support providers of health services with the objective of continuing the improvement in the quality of such services (subject to approval of Board or relevant committee as may be necessary or appropriate) |
| Direction 6(b) | National Directors | Oversee, develop and support NHS trusts, including by: a. assessing: |

| Reference: | Delegated To: | Functions: |
|--|---|--|
| | | i. clinical quality, governance and management of risk, including financial risk, in NHS trusts, ii. NHS trusts compliance with Care Quality Commission requirements and standards set by NHS TDA, and iii. progress of NHS trusts towards satisfying Monitor of matters necessary to obtain FT authorisation; and |
| | | b. where: NHS TDA considers improvements clinical quality, governance and management of risk, including financial risk, could be made, NHS trusts are not meeting with Care Quality Commission requirements and standards set by NHS TDA, or suitable progress is not being made towards satisfying Monitor of matters necessary to obtain FT authorisation, assisting those trusts to make improvements, meet such standards, or make such progress by |
| Direction 6(a), (b)(ii)(bb) and (c) ⁵ | Regional Directors | providing, advice, support, help or guidance Make recommendations to the Regional Support Group or Provider Oversight Committee as to accepting enforcement undertaking, giving directions and issuing/revoking compliance certificates or statements of compliance, in relation to NHS trusts Ensuring publication of enforcement action relating to NHS trusts |
| | Chief Financial Officer | Making recommendations to the Provider Oversight Group or the Board as to which conditions equivalent to the conditions of the Monitor licence are appropriate to apply NHS trusts Setting out those conditions in guidance issued by NHS TDA to NHS trusts |
| Direction 6(e) | Regional Directors | Provide advice to individual NHS trusts to assist those trusts to prepare place for each financial year as to how those trusts will exercise their functions |
| | Chief Financial Officer | Provide advice to NHS trusts generally to assist those trusts to prepare place for each financial year as to how those trusts will exercise their functions |
| Direction 6(f) | Regional Directors | Scrutinise the annual plans prepared by NHS trusts and consider that those plans could be improved— a. provide feedback on the plans to those trusts; and b. assist those trusts to amend those plans to take that feedback into account. |
| Direction 6(g)(i) to (iii), (v) and (viii) | Regional Directors Chief Operating Officer Director of Provider Transformation | Oversee, develop and support NHS trusts to assist those trusts to become sustainable organisations, including by: supporting them to comply with duty to exercise functions effectively, efficiently and effectively, supporting trusts to ensure they are in a position to apply for FT status; exercising Secretary of State's function as to whether to support an NHS trust's application for FT status; preparing a report to Secretary of State as to whether to support an application to be authorised as an FT; |

⁵ See also Section 9 (functions relating to pricing)

| Reference: | Delegated To: | Functions: |
|--|---|---|
| | | e. taking such other steps as appropriate |
| Direction 6(g)(iv) and Transactions Guidance | Regional Directors Director of Provider Transformation | Assess (including consideration of appropriate risk rating) proposals of NHS trusts to— a. dissolve and transfer property and liabilities to other NHS trusts or FTs; b. make an application to Monitor for merge with an FT; c. make an application to Monitor to be acquired by an FT; or d. be a receiver of property and liabilities arising from dissolutions, mergers or acquisitions of NHS trusts or FTs or separations of FTs, and make recommendations to Regional Support Group or Provider Oversight Committee, as appropriate, on those proposals |
| Direction 6(g)(vi) and (vii) | Regional Directors | Make recommendations to NHS trusts that such trusts should: dissolve and transfer property and liabilities to other NHS trusts or FTs; make an application to Monitor for merge with an FT; make an application to Monitor to be acquired by an FT; or be a receiver of property and liabilities arising from dissolutions, mergers or acquisitions of NHS trusts or FTs or separations of FTs. Negotiate and liaise with other NHS trusts or FTs in order to make such recommendations and facilitating such dissolutions, transfer, acquisitions and mergers |
| Direction 6(h) to (j) | Regional Directors | Consider whether it is appropriate for Secretary of State to make an order under section 66 (intervention powers) or section 68 (default powers) in respect of an NHS trust and making appropriate recommendations to the Provider Oversight Committee or the Board Carry out inquiries and draft reports as referred to in direction 6(1)(h) to (i), for approval as appropriate by Provider Oversight Committee or the Board |
| Direction 6(k) and Capital Guidance | Regional Directors | Assess NHS trust proposals involving capital investment or significant commercial transactions Where proposals do not exceed financial limits and are not novel, contentious or repercussive, to determine whether proposals require approval of NHS TDA Where proposals require approval of NHS TDA or Secretary of State, make recommendations to Chief Financial Officer, relevant NHS Improvement committee or the Board |
| Direction 6(I) | Regional Directors | Request information, which NHS TDA requires in order to carry out its functions, from NHS trusts |
| Direction 7(1) and (2) | Chief Operating Officer Director of Provider Transformation Regional Directors | Produce reports, carry out assessment and make recommendations to Provider Oversight Committee or the Board in relation to Monitor's functions in relation to trust special administration of an NHS trust |
| Direction 7(3) | Regional Directors | Inform CQC if aware that there has been or may be a serious failure by an NHS trust to provide services that are of a sufficient quality to be provided under the NHS Act 2006 |

| Reference: | Delegated To: | Functions: | | |
|--|--|--|--|--|
| Standard licence c | Standard licence conditions (or equivalent for NHS trusts) and guidance (Monitor functions, but * indicates also NHS TDA function) | | | |
| Guidance on special measures and Single Oversight Framework* | Regional Directors | Make recommendations to Provider Oversight Committee on whether an NHS trust or FT should be placed in or exited from special measures (segment 4) Ensure arrangements are made to provide support to special measures trusts | | |
| Licence condition G1* | Regional Directors Director of Provider Transformation (in relation to licence holder other than FT) | Require licence holder (or NHS trust) to furnish information and documents, or prepare or procure and furnish reports, in such form, at such place and at such times as NHS Improvement may require | | |
| Licence condition G2* | Regional Directors Director of Provider Transformation | Direct licence holder (or NHS trust) to publish information about NHS health care services and as to the manner in which such information should be published | | |
| Licence condition G5* | National Directors | Issue (or make recommendations to Provider Oversight Committee or the Board as to the issue of) guidance for any of purposes set out in section 96(2) of the 2012 Act | | |
| Licence condition CoS1 | Regional Directors | Make recommendation to Provider Oversight Committee as to whether to give direction to licence holder to continue to provide Commissioner Requested Services | | |
| Licence condition CoS2(5) | Regional Directors | Make recommendation to Provider Oversight Committee as to whether to give consent in writing to FT or other licensee disposing any relevant assets (assets without which the licensee's ability to meet its obligation to provide Commissioner Requested Services would reasonably be regarded as materially prejudiced) | | |
| Licence condition CoS6 | Regional Directors | Make recommendations to Provider Oversight Committee as to whether to: a. Notify licensee that Monitor is considered about ability of License to carry on as a going concern b. Direct licensee to provide information to commissioners and others c. Appoint persons to enter & inspect premises and assist in the management of the licensee's affairs, business and property | | |
| Licence condition FT1(5) | Director of Provider Transformation | Issue, or make recommendations to Provider Oversight Committee as to issue of, directions as to the format in which electronic copies of documents are to be made to Monitor under condition FT 1 (information to update FT register) | | |
| Licence condition FT2 | Director of Provider Transformation | Notify licensees that required to pay fees (where the Board has decided that fees are to be payable) | | |
| Single Oversight Framework* | Regional Directors | Consider support needs of NHS trusts and FTs, determine detail of support packages for such trusts and make appropriate recommendations relating to segmentation to Regional Support Group or Provider Oversight Committee | | |

| | Reference: | Delegated To: | Functions: |
|---|----------------|--------------------|--|
| [| Guidance on FT | Regional Directors | Make recommendations to Provider Oversight Committee in relation to individual requests for accreditation as an FT |
| | Groups | | group |

6 Scheme of Delegation - Functions relating to appointments and leadership

| Reference: | Delegated To: | Functions: |
|--|--|--|
| Directions to the T | DA and guidance (NHS TDA | A functions) |
| Direction 3(1)(a) TDA Directions | Chief People Officer | Take such steps as considered necessary and appropriate to design methods to be used by NHS TDA, and develop & publish guidance to NHS trusts, special trustees and trustees for NHS trusts and FTs, in connection with NHS TDA making appointments of non-executive directors of NHS trusts, special trustees and trustees for NHS trusts and FTs (subject to methods and guidance being approved by People Committee) |
| Direction 4(1)(a) TDA Directions | Chief People Officer | Make recommendations to People Committee (or relevant sub-committee) for the appointment of chairs of NHS trusts, special trustees and trustees for NHS trusts and FTs (and NEDs of companies appointed as trustees) Develop role descriptions and criteria for appointment (subject to approval of People Committee) Manage procedures for appointment and ensure they are open, transparent and comply Government's Code for Appointments Consult chairs in relation to appointment of trustees |
| | Chief People Officer Regional Directors | Make recommendations to People Committee (or relevant sub-committee) for the appointment of NEDs of NHS trusts Develop role descriptions and criteria for appointment (subject to approval of People Committee) |
| Direction 4(1)(b) TDA Directions | Chief People Officer | Make recommendations to the People Committee (or relevant sub-committee) for the exercise of other Secretary of State's functions relating to appointment of chairs of NHS trusts, including decisions on suspension, termination and disqualification |
| | Chief People Officer Regional Directors | Make recommendations to the People Committee (or relevant sub-committee) for the exercise of other Secretary of State's functions relating to appointments of NEDs of NHS trusts, including decisions on suspension, termination and disqualification |
| Direction 4(1)(c) and (d) TDA Directions | Chief People Officer | Make recommendations to People Committee (or relevant sub-committee) in relation to the termination of trustee's tenure of office and requests to company trustee to remove a NED |
| Direction 4(1)(e) TDA Directions | Chief People Officer | Record, update and keep information about appointments and applications |
| Direction 4(1)(f) and (g) TDA Directions | Chief People Officer Regional Directors | Advise chairs and NEDs of NHS trusts, and trustees, on development of their roles Secure that chairs, NEDs and trustees receive training in relation to their roles |
| Direction 4(1)(h) and (i) TDA Directions | Chief People Officer Regional Directors | Develop procedures for, and carry out, appraisals for chairs and NEDs of NHS trusts and trustees (procedures subject to approval of People Committee) |

| Reference: | Delegated To: | Functions: |
|--|------------------------------|--|
| Direction 6(m) | Chief People Officer (if not | Designate chief executive of each NHS trust as its Chief Accountable Officer |
| TDA Directions | Chief Executive) | |
| Direction 8(a) TDA Directions | Chief People Officer | Furnish to the Commissioner for Public Appointments such information relating to the appointments for which NHS TDA is responsible (chairs and NEDs of NHS trusts, special trustees and trustees of NHS trusts and FTs) as the Commissioner may from time to time require |
| NHS TDA (Leadership Academy) Directions 2019 | Chief People Officer | Provide for the operation of the Leadership Academy, including ensuring that the Academy takes such steps as considered necessary and appropriate to ensure that the persons providing and commissioning services as part of the health service in England have leaders with the necessary knowledge, skills, attitudes and behaviours |
| Guidance on senior appointments in NHS trusts | Regional Directors | Decide whether candidates for chief executive or other executive directors of NHS trusts are suitable |

NHS Act 2006, 2012 Act and licence conditions (Monitor functions)

| Section 39A of NHS Act 2006 | Chief People Officer | Appoint panel for advising FT governors Pay panel expenses and provide administrative support, if panel appointed |
|--------------------------------|----------------------|---|
| Section 50 of NHS Act 2006 | Chief People Officer | Determine fees for maintaining panel for advising FT governors |
| Licence condition G4 | Chief People Officer | Decide whether to approve appointment of director of FT or other licence holder if the individual is unfit for the purposes of that licence condition |

7 Scheme of Delegation - Functions relating to finance and resources (other than pricing)

| Reference: | Delegated To: | Functions: |
|------------------|-------------------------|--|
| NHS Act 2006 (Mo | onitor functions) | |
| Paragraph 24 of | Chief Financial Officer | Give directions as to the form and content of FT accounts |
| Schedule 7 | | |
| Paragraph 25 of | Chief Financial Officer | Give directions as to form and content of FT annual accounts, and methods/principles of account to be used |
| Schedule 7 | | Receipt of FT annual accounts and auditor reports |
| Paragraph 26 of | Chief Financial Officer | Receipt of FT annual reports |
| Schedule 7 | | Specify information to be included in FT annual reports (consulting where necessary) |
| | | Determine the form of annual reports, periods to which they relate and timing of submission |
| Paragraph 27 of | Chief Financial Officer | Receipt of forward planning information |
| Schedule 7 | Regional Directors | |

2012 Act and related instruments (Monitor functions, but * indicates also TDA function)

| Paragraph 13 of | Chief Financial Officer | Approve Monitor's borrowing money by way of overdraft |
|-------------------|-------------------------|--|
| Schedule 8 | | |
| Paragraph 17 of | Chief Financial Officer | Prepare and submit consolidation of FT accounts |
| Schedule 8 | | |
| Paragraph 18 of | Chief Financial Officer | Ensuring Monitor keeps proper accounts and proper records in relation to the accounts |
| Schedule 8 | | |
| Paragraph 19 of | Chief Financial Officer | Prepare and submit Monitor's annual accounts (subject to approval of the Board) |
| Schedule 8 | Chief Executive | Accounting Officer duties in relation to Monitor's annual accounts |
| Paragraph 20 of | Chief Financial Officer | Prepare and submit Monitor's interim accounts (subject to approval of the Board), if directed by Secretary of State |
| Schedule 8 | Chief Executive | Accounting Officer duties in relation to Monitor's interim accounts |
| Chapter 3 of Part | Chief Financial Officer | Assess and advise on FT proposals involving capital investment or property transactions |
| 3 and Capital | | Decide whether to approve business cases between £15 million and £30 million |
| Guidance | | Make recommendations to relevant NHS Improvement committee or the Board on cases above £30 million |
| Standard | Chief Financial Officer | Require a statement from the auditors of an FT or NHS trust in relation to whether the trust has taken all the actions |
| conditions of the | | set out in its corporate governance statement |
| licence, | | |
| Condition | | |
| FT6(8)(b)* | | |

NHS Act 2006 (NHS TDA functions)

| Reference: | Delegated To: | Functions: |
|------------------|-------------------------|--|
| Sections 226 and | Chief Financial Officer | Ensuring NHS TDA complies with financial duties under section 226 and resource limits under section 227 |
| to 227 | Chief Executive (as | |
| | Accounting Officer) | |
| Paragraph 7 of | Chief Financial Officer | Approving subscriptions to funds of bodies |
| Schedule 6 | | |
| Paragraph 8 of | Chief Financial Officer | Accept gifts of property to NHS TDA |
| Schedule 6 | | |
| Paragraph 2 of | Chief Financial Officer | Ensuring NHS TDA keeps proper accounts |
| Schedule 15 | | |
| Paragraph 3, | Chief Financial Officer | Prepare and submit NHS TDA's annual accounts (subject to approval of the Board), and lay before Parliament |
| 5(3) and 6(3) of | | |
| Schedule 15 | Chief Executive | Accounting Officer duties in relation to NHS TDA's accounts |

Directions (NHS TDA functions)

| Direction 6(e) | Chief Financial Officer | • Provide general advice to NHS trusts to assist those trusts to prepare plans for each financial year as to how those trusts will exercise their functions |
|---|-------------------------|--|
| Direction 6(g)(i) of TDA Directions | Chief Financial Officer | Oversee, develop and support NHS trusts to assist those trusts to become sustainable organisations by supporting them to comply with duty to exercise functions effectively, efficiently and effectively |
| Direction 6(k) of TDA Directions and Capital Guidance | Chief Financial Officer | Assess and advise on NHS trust proposals involving capital investment or significant property or commercial transactions Decide whether to approve business cases between £15 million and £30 million Make recommendations to relevant NHS Improvement committee or the Board on cases above £30 million |
| Directions to TDA in respect of the Accounts and Annual Reports of NHS Trusts | Chief Financial Officer | Receive annual reports and accounts of NHS trusts Give directions to NHS trusts specifying the date by which accounts must be submitted |
| The Consolidated Provider Accounts Directions | Chief Financial Officer | Prepare consolidated provider accounts (NHS trusts and FTs) |

Local Audit and Accountability Act 2014

| Reference: | Delegated To: | Functions: |
|-------------------|-------------------------|--|
| Section 30(2) (as | Chief Financial Officer | Receive NHS trust auditor reports of unlawful expenditure or activity |
| modified by | | |
| paragraph 13 of | | |
| Schedule 13) | | |
| Paragraphs 2 | Chief Financial Officer | Receive NHS trust auditor written recommendations and public interest reports |
| and 3 of | | |
| Schedule 7 (as | | |
| modified by | | |
| paragraph 12 of | | |
| Schedule 13) | | |
| Paragraph 9 of | Chair of Audit and Risk | Duty to inform the Secretary of State if an NHS trust has failed to appoint an auditor by 25 March each year |
| Schedule 13 | Committee | • If directed by Secretary of State, to take the steps under paragraph 9(4) of Schedule 13 to the Act as NHS TDA |
| | | considers appropriate |
| | | Inform and consider representations as required by paragraph 9(6) |

8 Scheme of Delegation - Functions relating to medical and nursing matters

| Reference: | Delegated To: | Functions: |
|-------------------|-----------------------|---|
| | | |
| 2012 Act (Monitor | functions) | |
| Section 62(7) | Chief Nursing Officer | Make arrangements to ensure that patients and public are involved to an appropriate degree in Monitor's decisions |
| | , C | |
| | | |

| Section 62(8) | National Medical Director | • | Provide, and oversee arrangements for obtaining, health professional advice appropriate for enabling Monitor to |
|---------------|---------------------------|---|---|
| | Chief Nursing Officer | | effectively discharge its functions |
| | | | |

NHS Act 2006, regulations and directions (NHS TDA functions)

| - | | |
|------------------|---------------------------|--|
| Section 13R and | | |
| regulation 2 of | National Medical Director | Patient safety functions: |
| the National | | |
| Health Service | | a. Establish systems for collecting and analysing NHS patient safety information (e.g. National Reporting |
| Trust | | and Learning System) |
| Development | | |
| Authority | | b. Make such information available |
| (Directions and | | |
| Miscellaneous | | c. Give advice and guidance for purpose of maintaining and improving safety |
| Amendments | | |
| etc) Regulations | | |
| 2016 | | |
| The NHS TDA | National Medical Director | Oversight of HSIB in accordance with the directions, including: |
| (Healthcare | | provide for operation of the HSIB and ensure it exercises certain functions listed in directions |
| Safety | | impose requirements on Chief Investigator and HSIB as set out in directions |
| Investigation | | take reasonable steps to protect independence of HSIB |
| Branch) | | ensure HSIB report is published |
| Directions 2016 | National Medical Director | Authority's duties in relation to the funding of HSIB (direction 11): |
| | Chief Financial Officer | pay entirety of HSIB annual allocation and any extraordinary payment |
| | | ensure, with HSIB, that extraordinary payment spent only on investigation to which it relates |
| | | seek instructions from Secretary of State as to disposal of surpluses |
| | | - Sock instructions norm decretary of clate as to disposal of sulpidses |

9 Scheme of Delegation - Functions relating to pricing

| Reference: | Delegated To: | Functions: |
|------------|---------------|------------|
| | | |

| Section 69 | Director of Pricing and Costing | Prepare impact assessment of, and consult on, proposals for the national tariff |
|---|--|---|
| Section 104 | Director of Pricing and Costing | Require a person mentioned in s.104(2) to provide information, documents, records or other items considered necessary or expedient for purposes of Monitor's functions under Chapter 4 of Part 3 of the 2012 Act (pricing) |
| Sections 105, 106 and Schedule 11 | Director of Pricing and Costing | Make recommendations to the Regional Support Group or Provider Oversight Committee as to accepting enforcemen undertakings, imposing discretionary requirements, imposing additional licence conditions, taking action for breach of such a condition and issuing/revoking compliance certificates and statements of compliance, in relation to compliance by FTs or other licence holders with pricing/costing requirements Ensuring publication of pricing enforcement action in relation to FTs and other licence holders |
| Section 116 | Director of Pricing and Costing | Publish national tariff in accordance with section 116, as approved by the Board as necessary |
| Section 117(4) and (5) | Director of Pricing and Costing Director of Provider Transformation | Subject to approval of the Board, direct CCGs in relation to cases where CCG has (a) agreed a price other than price payable by virtue of Chapter 4 of Part 3 of the 2012 Act or (b) failed to comply with rules provided for under section 116(2), (4) or (6) (including local variation and local pricing rules) |
| | Director of Provider Transformation | Subject to approval of the Board, direct NHS England in relation to cases where NHS England has (a) agreed a price other than price payable by virtue of Chapter 4 of Part 3 of the 2012 Act or (b) failed to comply with rules provided for under section 116(2), (4) or (6) (including local variation and local pricing rules) |
| Section 118 | Director of Pricing and Costing | Prepare proposals for the national tariff Publish consultation notice on the national tariff, as approved by the Board as necessary |
| | Director of Provider Transformation | Agree proposals for the national tariff with NHS England, in accordance with section 118 |
| Section 120 and Schedule 12 | Director of Pricing and Costing | Refer method for determining national prices to the CMA if objection threshold reached and related functions |
| | Director of Provider Transformation | Agree that a reference should be made, subject to approval of the Board as necessary |
| Section 122 | Director of Provider Transformation | Determine (proposed and final) changes to the method where CMA remits a matter under section 121(6), subject to approval of the Board as necessary |

2012 Act (Monitor functions)

| Reference: | Delegated To: | Functions: |
|-------------|--|---|
| | Director of Pricing and | Notify CMA and NHS England of proposed changes |
| | Costing | Make changes to the method as determined/agreed by Director of Provider Transformation or the Board |
| Section 123 | Director of Pricing and Costing | Comply with a direction from the CMA under section 123 |
| Section 124 | Director of Pricing and | Assess and make recommendations on whether to approve a local modification agreement |
| | Costing | Determine evidence Monitor requires to be submitted with a local modification agreement |
| | | Send and publish notice under section 124(6) to (8) |
| | Director of Provider Transformation | Decide whether to approve a local modification agreement, subject to approval of the Board as necessary |
| Section 125 | Director of Pricing and | Assess and make recommendations on whether to grant a local modification application |
| | Costing | Determine evidence Monitor requires to be submitted with a local modification application |
| | | Send and publish notice under section 125(6) to (8) |
| | Director of Provider Transformation | Decide whether to grant a local modification application, subject to approval of the Board as necessary |
| Section 126 | Director of Pricing and | Notify commissioners that continued provision of commissioner requested services is put at risk by configuration of |
| | Costing | certain health care services |
| | | Ensure list of notifications is published by Monitor |
| Section 127 | Director of Pricing and | Send and publish notice relating to correct of mistakes in national tariff |
| | Costing | |

Standard licence conditions (or equivalent for NHS trusts) and TDA directions

| Licence condition | Director of Pricing and | • | Require licence holders and NHS trusts to record costing information in compliance with condition P1 and Monitor's |
|-------------------|-------------------------|---|---|
| P1 | Costing | | Approved Costing Guidance |
| | | • | Determine the content of, and publishing, the Approved Costing Guidance |
| Licence condition | Director of Pricing and | • | Require licence holders and NHS trusts to furnish Monitor with information and documents, and prepare or procure |
| P2 | Costing | | and furnish Monitor with reports for the purposes of Monitor's pricing functions |
| | | • | Determine information and reports to be required |
| Licence condition | Director of Pricing and | • | Require licence holders and NHS trusts to obtain and submit assurance reports on costing submissions |
| P3 | Costing | | |
| Direction 6(a) | Director of Pricing and | • | Make recommendations to the Regional Support Group or Provider Oversight Committee as to accepting enforcement |
| and (c) of the | Costing | | undertaking, giving directions and issuing/revoking compliance certificates or statements of compliance, in relation to |
| TDA Directions | | | compliance by NHS trusts with pricing/costing requirements |

| Reference: | Delegated To: | Functions: |
|-------------------|-------------------------|--|
| Direction 6(I) of | Director of Pricing and | Request information from NHS trusts, which NHS TDA requires in order to carry out its functions in relation to pricing |
| the TDA | Costing | enforcement, from NHS trusts |
| Directions | | |

10 Scheme of Delegation – Functions relating to commercial matters

| Reference: | Delegated To: | Functions: |
|--|---|--|
| NHS TDA function | S | |
| Directions under section 7(2) of the Health and Medicines Act 1988 | Chief Commercial Officer Chief Financial Officer Regional Directors | Decisions on proposals for NHS TDA income generation schemes (subject to Board approval and compliance with internal finance controls) |
| Direction 6(g)(i) of TDA Directions | Chief Commercial Officer | Oversee, develop and support NHS trusts to assist those trusts to become sustainable organisations by supporting them to comply with their duty to exercise functions effectively, efficiently and effectively, in particular by providing advice and support in respect of the efficient management of their estates including the achievement of efficiency savings and reduced running costs and the identification and disposal of surplus land (NHS TDA function) |

Monitor and NHS TDA functions

| Public | Chief Commercial Officer | • | Make arrangements to comply with requirements of Public Contracts Regulations 2015 |
|------------------|--------------------------|---|--|
| Procurement | | | |
| Regulations 2015 | | | |
| Section 1 of the | Chief Commercial Officer | • | Duty to consider how, in the context of procuring services, economic, social and environmental well-being may be |
| Public Services | | | enhanced |
| (Social Value) | | | |
| Act 2012 | | | |

11 Scheme of Delegation - Functions relating to competition, procurement and patient choice

| Reference: | Delegated To: | Functions: | | |
|--|--|--|--|--|
| 2012 Act and regulations made under s.75 of that Act (Monitor functions) | | | | |
| Section 72 | Director of Provider Transformation | Decide whether to investigate potential infringements of Competition Act 1998 and on scope of investigation | | |
| Section 73 | Director of Provider Transformation | Make recommendations to Provider Oversight Committee or the Board on whether to institute market investigation the Enterprise Act 2002 and on scope of potential investigation | | |
| Regulation 13 of PPCCR | Director of Provider Transformation | Decide whether to formally investigate complaint that CCG or NHS England has failed to comply with a requirement imposed by regulations 2 to 12 of the PPCCR (procurement, patient choice and competition) or requirements of the Standing Rules regulations relating to patient choice, and decide scope of investigation Decide whether to formally investigate failure to comply with regulation 10 of PPCCR (anti-competitive behaviour) and decide scope of investigation Decide whether to require CCG or NHS England to provide information (reg 13(5)) | | |
| Regulations 14 to 16 of PPCCR | Director of Provider Transformation | Make recommendations to Provider Oversight Committee or the Board on enforcement action (declaration of ineffectiveness, directions or undertakings) in relation to a failure to comply with a requirement imposed by regulations 2 to 12 of the PPCCR (procurement, patient choice and competition) | | |
| Schedule 9 (section 77 undertakings) | Director of Provider Transformation | Make recommendations to Provider Oversight Committee or the Board on whether to vary undertakings, or issue or revoke compliance certificates Deciding what information to redact from enforcement undertakings pursuant to paragraph 2(2) of Schedule 9 | | |
| Section 78 | Director of Provider Transformation | Making recommendations to Provider Oversight Committee or the Board about publishing and revising guidance about compliance with PPCCR and the exercise of powers under those regulations | | |
| Section 79 | Director of Provider Transformation | • Formal decisions relating to preliminary advice to trusts and liaison with CMA, before formal advice to CMA on patient benefits under section 79 (mergers involving FTs) | | |
| Section 80 | Director of Provider Transformation | Ensuring arrangements are in place for effective co-operation with CMA | | |

12 Scheme of Delegation – delegation derived from Rules of Procedure

| Rules of | Delegated To: | Functions: |
|-----------------|------------------------|--|
| Procedure | | |
| Reference: | | |
| 5.7.6 | Chair | Cast second and deciding vote in the case of equality of votes |
| 5.7.9 | Chair | Take decisions on agenda items as delegated by the Board |
| 5.7.10 | Secretary | Circulate board papers for approval by correspondence |
| 5.9.2 and 5.9.3 | Secretary or nominated | Record the minutes of every meeting or nominate a deputy to do so |
| | deputy | Submit draft minutes to the Board in advance of next meeting |
| 5.10.1 | Chair | Exercise functions of the Board in an emergency, subject to reporting to the Board and ratification |
| 5.11.7 | Committees | • Each committee of NHS Improvement is delegated from the Board the discharge of those functions that fall within their |
| | | respective terms of reference other than any matter reserved to the Board. |
| 5.11.9 | Chief Executive | • All powers of NHS Improvement which have not been reserved to the Board, or delegated to a committee, sub-committee |
| | | or employee (including in the Standing Financial Instructions and Rules of Procedure) |
| 5.11.13 | Secretary | Keep a record of the powers, authorities and discretions delegated by the Board. |
| 5.11.15 | Deputy Chair | Functions of the Chair in relation to the Board, if Chair is absent. |
| 5.12.1 | Chief Executive | Act as accounting officer |
| 5.13.8 and 9 | Secretary | Ensure that a register of interests is established to record formally declarations of interests |
| 6.1.7 | Chief Executive | • Determine powers and functions of a committee and exercise certain of the Board's responsibilities in relation to such a |
| | | committee |
| 6.7.2 | Secretary or nominated | Record the minutes of every committee meeting |
| | deputy | |