



Blood and Transplant

NHS BLOOD AND TRANSPLANT SCHEME OF DELEGATION

Reservation of Powers to the Authority

and

Delegation of Powers

~~April 2025~~2026

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1. INTRODUCTION

1.1 Objectives

NHSBT Standing Orders paragraph 4.1 provides that “subject to such directions as may be given by the Secretary of State, the Authority may ~~decide make arrangements~~ for the exercise, on behalf of the Authority, of any of its functions by a committee, sub-committee, or joint committee, or by ~~the Chair or a member or by an~~ officer of the Authority, in each case subject to such restrictions and conditions as the Authority thinks fit.”

The purpose of this document is to describe:

- the powers that are reserved to the Authority
- the powers that are delegated to the Authority’s Committees
- the powers delegated to officers of the Authority
- the responsibilities of officers for the application of policies and procedures.

NHS Blood and Transplant (NHSBT) holds funds in trust. These delegations of powers are to be deemed to cover the exercise of these powers in relation to the responsibility of the Authority as a corporate trustee.

1.2 Role of the Chief Executive

The Chief Executive, as NHSBT Accounting Officer, is responsible to Parliament for the stewardship of the resources provided to the Authority.

The Chief Executive shall exercise the powers of the Authority that have not been retained as reserved by the Authority or delegated to a sub-committee or joint committee on behalf of the Authority. The Chief Executive shall prepare a Scheme of Delegation identifying which functions they shall perform personally and which functions have been delegated to other officers. The term ‘Officer’ includes officer members, executive directors, and any other employees of the Authority to whom powers have been delegated.

All powers delegated to officers by the Chief Executive can be re-assumed by the Chief Executive should the need arise.

1.3 Caution over the use of delegated powers

Powers are delegated to officers on the understanding that they would not exercise delegated powers in a matter that, in their judgement, was likely to be a cause for public concern.

1.4 Directors ability to delegate their delegated powers

The Scheme of Delegation shows only the “first level” of delegation within the Authority. The Scheme is to be used in conjunction with the system of budgetary control and other established procedures within the Authority.

1.5 Absence of an officer to whom powers have been delegated

In the absence of an officer to whom powers have been delegated, the powers shall be exercised by the officer’s superior unless temporary alternative arrangements have been formally delegated and the Chief Financial Officer notified of this temporary delegation.

2. OVERALL ACCOUNTABILITY

- 2.1** The NHSBT Board is responsible for establishing and delivering NHSBT's strategic objectives and for ensuring the effectiveness of the Authority's internal controls and risk management processes.
- 2.2** The Chief Executive of NHSBT is responsible for executing the statutory and strategic objectives of the Authority and for delivering the relevant objectives and targets that apply to each of the organisational units within the Authority. The Chief Executive of NHSBT is responsible for monitoring performance against those objectives and targets and taking corrective action as necessary.
- 2.3** The Chief Executive of NHSBT is accountable for preparing an annual business plan and budget that are presented to the Board for approval. Once agreed, officers have the authority to implement the proposals contained in the Business Plan that relate to their area of accountability, subject to any limits imposed by the Scheme of Delegation.
- 2.4** The submission of the annual budget to the Department of Health and Social Care (DHSC), which encompasses requests for capital and programme funding, is the responsibility of the Authority. Once agreed the final capital and programme funding allocations are applied to the organisational units of the Authority in accord with its annual business plan.
- 2.5** NHSBT is subject to expenditure controls and delegated limits determined by the Cabinet Office and deployed by the DHSC. These are described in detailed expenditure rules and delegations provided by the DHSC. They are captured within Section 10 as a high-level summary, particularly with regard to expenditure on professional services, marketing, ICT and estates. Further guidance can be found in the detailed guidance and interpretation of Departmental controls issued by the Chief Financial Officer.

3. RESERVATION OF POWERS TO THE AUTHORITY

- 3.1.** The Code of Accountability which has been adopted by the Authority requires the Authority to determine those matters on which decisions are reserved to itself. These reserved matters are set out below.
- 3.2. General Enabling Provision**
- The Authority may determine any matter it wishes in full session within its statutory powers.
- 3.3. Regulations and Control**
- 3.3.1** Requiring and receiving the declaration of members' interests and determining the extent to which a member with any conflict of interest may remain involved with a matter under consideration.
- 3.3.2** Requiring and receiving the declaration of interests from officers.
- 3.3.3** Disciplining members who are in breach of statutory requirements or Standing Orders.

- 3.3.4 Approval of the disciplinary procedure for officers of the Authority.
- 3.3.5 The adoption of the high level corporate organisational structure, processes and policies necessary to facilitate the discharge of the strategy of the Authority and to agree modifications thereto.
- 3.3.6 To receive reports from committees, which the Authority is required by the Secretary of State or other regulation to establish, and to take appropriate action thereon.
- 3.3.7 To confirm the recommendations of the Authority's Committees, where the committees do not have executive powers to establish terms of reference, and reporting arrangements of all sub-committees (and other committees if required).
- 3.3.8 Ratification of any urgent decisions taken by the Chair in accordance with SO 4.2 (Discretionary Powers).

3.4 Appointments

- 3.4.1 The appointment and dismissal of committees, sub-committees or joint committees.
- 3.4.2 The processes by which the approval of the appointment, appraisal, disciplining and dismissal of the officer members is conducted.
- 3.4.3 The processes for the appointment of officers who report to the Chief Executive and which of the officers are appointed as Officer Members.

3.5 Corporate & Business Plans, and Budgets

- 3.5.1 Definition of the strategic aims and objectives of the Authority.
- 3.5.2 Approval of the rolling 5-year NHSBT Business Plan.
- 3.5.3 Approval of the Annual Budget.

3.6 Direct Operational Decisions

- 3.6.1 Approval of significant business cases and projects, including the acquisition, disposal or change of use of land and/or buildings, consistent with the financial limits in Section 10.
- 3.6.2 To agree action on serious litigation, against or on behalf of the Authority, as described in the Scheme of Delegation.

3.7 Financial and Performance Reporting Arrangements

- 3.7.1 Approve the distribution of the Authority's financial allocation.
- 3.7.2 Continuous appraisal of the affairs of the Authority by means of the receipt of reports as it sees fit from members, committees, associate members and officers of the Authority as set out in management policy statements.
- 3.7.3 Approval of the opening or closing of any bank or investment account.

3.8 Audit Arrangements

- 3.8.1 To receive reports from the Audit, Risk and Governance Committee (ARGC) meetings on audit matters and to take appropriate action.

3.9 Governance and Assurance

- 3.10.1 To receive reports on other governance and assurance matters from the Audit, Risk and Governance Committee (ARGC) and Clinical Governance Committee (CGC) meetings and take appropriate action.

3.10 Approval of Annual Report and Accounts

- 3.10.1 Adoption of the Authority's Annual Report and Accounts following their approval by the ARGC.

3.11 Financial Limits

- 3.11.1 The financial limits reserved by the Board as set out in Section 10.

4 DELEGATION OF POWERS

4.1 Delegation to Committees

The Authority may determine that certain of its powers shall be exercised by its committees. The composition and terms of reference of such committees shall be determined by the Authority. The Authority shall determine the reporting requirements in respect of these committees. In accordance with SO 5.6 committees may not delegate executive powers to sub-committees unless expressly authorised by the Authority. The full delegations are in Appendix 1.

4.2 Powers Delegated to the ~~Trust Fund~~NHSBT Charity Committee

- 4.2.1 Overall responsibility for managing the funds held on trust in accordance with the Terms of Reference agreed by the Authority.
- 4.2.2 Preparation of the Annual Report and Accounts of the ~~Trust Fund~~NHSBT Charity.

4.3 Powers Delegated to the Audit Risk and Governance Committee

- 4.3.1 Overall responsibility for managing governance and audit matters in accordance with the Terms of Reference agreed by the Authority. This includes the implementation of an appropriate and independent internal audit service.
- 4.3.2 Approval of the Annual Report and Accounts of the Authority, on behalf of the Board, is delegated to the ARGC, and
- 4.3.3 Approval of:
- a. Standing Orders (SOs)
 - b. Standing Financial Instructions (SFIs) for the regulation of its proceedings and business
 - c. The Scheme of Delegation (SoD), describing the matters reserved to the Authority and the powers delegated to officers of the Authority.

4.4 Powers Delegated to the People Committee

- 4.4.1 Overall responsibility for the remuneration and contractual arrangements of the Chief Executive and Executives of NHSBT in accordance with the Terms of Reference agreed by the Authority. This includes the power to decide matters which cannot, for reasons of confidentiality, be reported in detail to the Board for ratification.
- 4.4.2 Notwithstanding the above, the power, via the Chair (in respect of the Chief Executive) and the Chair and the Chief Executive (in respect of Officers) to monitor and evaluate the performance of the Chief Executive and Officers of NHSBT. The Committee will also oversee and advise the Board on termination and severance arrangements and, on request of the Board, will undertake duties relevant to ensuring that a stable, experienced and viable team is in place at executive level.

4.5 Powers Delegated to the Clinical Governance Committee

- 4.5.1 The Clinical Governance Committee's purpose is to provide assurance to the Board that the NHSBT has a robust framework for the management of all critical clinical systems and processes and in delivering patient safety. This is a framework through which NHSBT is accountable for continuously improving the quality of services and safe-guarding high standards of care by creating an environment in which excellence in clinical care will flourish. It sets the tone and direction for patient/donor safety, clinical effectiveness, patient outcomes and patient/donor experience. It supports the operating directorates in the development, implementation and monitoring of a robust framework for clinical governance, meeting donors' and patients' needs.

4.6 Powers Delegated to the Chair

- 4.6.1 Final authority in the interpretation of Standing Orders.
- 4.6.2 Calling meetings.
- 4.6.3 To act as the Chair in all Board meetings.
- 4.6.4 Discretionary powers as described under Section 4.2 of NHSBT Standing Orders.
- 4.6.5 Approval of the Annual Report and Accounts of the ~~Trust Fund~~ [NHSBT Charity](#).

5 SCHEME OF DELEGATION TO OFFICERS

- 5.1 Standing Orders and Standing Financial Instructions set out the financial responsibilities of the Chief Executive, the Chief Financial Officer and other Directors.
- 5.2 This Scheme of Delegation covers only matters delegated by the Authority to Directors and certain other specific matters referred to in SFIs. Each Director is responsible for the delegation within their jurisdiction.
- 5.3 The Scheme of Delegation should be read in conjunction with the DHSC/NHSBT Framework Agreement which further describes the accountabilities of Directors for delivery of strategic and operational plans, management of risk and compliance (with law and regulatory matters).

6. POWERS DELEGATED TO THE NHSBT CHIEF EXECUTIVE

6.1. Administration

- 6.1.1 Ensure existing Directors and employees and all new appointees are notified of and understand their responsibilities within Standing Orders, this Scheme of Delegations and Standing Financial Instructions.
- 6.1.2 To act as a signatory for the Authority on legal documents and contracts above the regulatory tender limits including leases and agreements under seal.

6.2. Finance

- 6.2.1 To approve any changes of Directorate/departmental budgets within overall agreed cash limits.
- 6.2.2 Demonstrate that the use of private finance represents best value for money and transfers risk to the private sector where Public/Private Partnership contracts are being considered.
- 6.2.3 Nominate the ~~Director of Legal Services~~Head of Contracting to maintain an up-to-date Register of Contracts (non-Procurement and employee contracts) which the Authority has signed. Procurement and employee contracts are held and maintained by the ~~Commercial Director~~Associate Director of Procurement (as nominated by the Chief Financial Officer) and the Chief People Officer respectively.
- 6.2.4 Authority to approve items under the financial limits set out in Section 10.
- 6.2.5 Authority to release monies from any agreed Transition Fund (in consultation with the Chief Financial Officer).

6.3 Workforce

- 6.3.1 Approve organisational re-structuring proposals of a significant and fundamental nature to Directorates/departments.
- 6.3.2 Approval of appointment and grading of all staff who report to officers having a direct reporting line to the Chief Executive. This can be delegated to the People and Culture Partners in conjunction with Executive Directors.
- 6.3.3 Approval of all new posts appointed to Senior Manager Pay scales above Agenda for Change Band 8a or equivalent. This can be delegated to the People and Culture Partners in conjunction with Executive Directors.

7. POWERS DELEGATED TO THE NHSBT CHIEF FINANCIAL OFFICER

7.1. Administration

- 7.1.1 To keep the Seal of the Authority in a secure place and maintain a register of sealings.
- 7.1.2. To act as a signatory for the Authority on legal documents, contracts above the EU tender limits, including leases and agreements under seal.

7.2. Finance

- 7.2.1. Presentation of finance plans and budgets to the Board for approval and providing monthly reports to identify key variances.
- 7.2.2. Submitting the Authority's Statutory Annual Accounts to the Board.
- 7.2.3. To investigate any suspected cases of irregularity related to fraud or corruption in accordance with Secretary of State Directions.
- 7.2.4. To control the annual cash limits of the Authority and to agree with the DHSC any brokerage arrangements.
- 7.2.5. Authority to approve items under the financial limits set out in Section 10.
- 7.2.6. Authority to release monies from any agreed Transition Fund, having the agreement of the Chief Executive.

7.3. Personnel

- 7.3.1. Approval of overseas travel outside of Europe for all Group Directors in the absence of the Chief Executive.
- 7.3.2. Approval of overseas travel outside of the UK for all Finance staff and for all other Authority staff in the absence of the relevant Executive Director.

8. POWERS DELEGATED TO DIRECTORS WITHIN THE NHSBT EXECUTIVE

8.1. The following powers are delegated to officers who are part of the NHSBT Executive within their own area of responsibility:

- To carry out the detailed proposals in the agreed annual Business Plan, subject to any restrictions on delegations of power as detailed in Section 10.
- To determine policies and procedures providing that they are in line with overall Authority Policies and Guidelines.

8.2. Assets

8.2.1 Overall responsibility for all physical and information assets, and other assets under their control.

8.3. Personnel

- 8.3.1 Approval of overseas travel outside the UK for relevant staff in their Directorate.
- 8.3.2 Approval of confidentiality and non-disclosure agreements for staff, in consultation with the Chief People Officer.

8.4. Finance

8.4.1 Authority to approve items under the financial limits set out in Section 10, relevant to their own Directorate/Department.

9. POWERS DELEGATED TO INDIVIDUAL EMPLOYEES OF NHS BLOOD AND TRANSPLANT

- 9.1** In general, but subject to the financial limits described in Section 10, budget holders have delegated powers to spend up to the limit of their approved annual budget. However, all budget holders have a responsibility to improve cost effectiveness and to advise their relevant Executive Team Director of any significant under-spends as soon as possible. Where increases in expenditure budgets are deemed necessary, due to additional activity, these must be approved by the Chief Executive.
- 9.2.** A project manager specifically appointed to manage a major capital project may have specific powers delegated to them which shall be approved in advance by the Chief Executive.
- 9.3.** All employees are responsible for security of the Authority's property, avoiding loss, exercising economy and efficiency in using resources and conforming to Standing Orders, this Scheme of Delegations and Standing Financial Instructions and financial procedures.
- 9.4.** All employees are responsible for reporting losses to their line manager in accordance with Authority procedure.
- 9.5.** All employees are responsible for abiding by the policies and procedures of the Authority which have been agreed by the NHSBT Executive Team and NHSBT Board.
- 9.6.** The NHSBT National Claims Managers nominated to administer the NHS Resolution insurance schemes have the power to authorise losses and special payments and DHSC check lists, subject to the limits set out for Finance and Executive Directors and in accordance with DHSC and Treasury guidelines.