

# **NHS BLOOD AND TRANSPLANT**

## **SCHEME OF DELEGATION**

**Reservation of Powers to the Authority**

**and**

**Delegation of Powers**

**March 2017**

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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 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 Chairman 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.

NHSBT holds funds in trust. These delegation 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 he/she 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 Finance Director notified or 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 Executive 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 DoH, which encompasses requests for capital and revenue cash limits, is the responsibility of the Authority. Once agreed the final capital and revenue cash limits 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 the DoH. These are described in detailed expenditure rules and delegations provided by the DoH. They are captured in 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 Finance Director.

## **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 SOs.
- 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 Chairman 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.

### **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 Strategy.
- 3.5.3 Approval of the Annual Business Plan.

### **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 approve audit arrangements based on the recommendation of the Governance and Audit Committee.
- 3.8.2 To receive reports from the Governance and Audit Committee 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 Governance and Audit Committee 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 Governance and Audit Committee.

### **3.11 Financial Limits**

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

## **4 DELEGATION OF POWERS**

### **4.1.1 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 that determined by the Authority from time to time save only that required by the Secretary of State and or the Charity Commissioners (including the need to appoint a Governance and Audit Committee and a Remuneration Committee). 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.

### **4.2 Powers Delegated to the Trust Fund 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.

### **4.3 Powers Delegated to the Governance and Audit Committee**

- 4.3.1 Overall responsibility for managing governance and audit matters in accordance with the Terms of Reference agreed by the Authority.
- 4.3.2 Approval of the Annual Report and Accounts of the Authority, on behalf of the Board, is delegated to the Governance and Audit Committee, 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 Remuneration 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 Chairman (in respect of the Chief Executive) and the Chairman 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 Chairman**

- 4.5.1 Final authority in the interpretation of Standing Orders.
- 4.5.2 Calling meetings.
- 4.5.3 To act as the Chair in all Board meetings.
- 4.5.4 Discretionary powers as described under Section 4.2 of NHSBT Standing Orders.
- 4.5.5 Approval of the Annual Report and Accounts of the Trust Fund.

### **5 SCHEME OF DELEGATION TO OFFICERS**

- 5.1 Standing Orders and Standing Financial Instructions set out the financial responsibilities of the Chief Executive, the Finance Director 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 his/her jurisdiction.
- 5.3 The Scheme of Delegation should be read in conjunction with the NHSBT Governance Framework 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 and Standing Financial Instructions.
- 6.1.2 To act as a signatory for the Authority on legal documents and contracts above the EU 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 an officer 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 Associate Director of Procurement (as nominated by the Finance Director) and the Director of Workforce.
- 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 Finance Director).

### **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 gradings of all staff who report to officers having a direct reporting line to the Chief Executive.
- 6.3.3 Approval of all new posts appointed to Senior Manager Pay scales above AfC Band 8a or equivalent.



## **7. POWERS DELEGATED TO THE NHSBT FINANCE DIRECTOR**

### **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 DoH 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.
  - 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 fixed 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 Director of Workforce.

### **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 Finance Director.
- 9.2. A project manager specifically appointed to manage a major capital project may have specific powers delegated to him 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, 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 NHSLA Schemes have the power to authorise losses and special payments and DoH check lists, subject to the limits set out for Finance and Executive Directors and in accordance with DH and Treasury guidelines.

## 10. SUMMARY OF FINANCIAL DELEGATED LIMITS

	DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Material change of activities / outsourcing</b> The introduction or discontinuance of any significant activity or operation not already approved within the Business Plan. This includes outsourcing projects.		Over £500,000	Up to £500,000	Up to £100,000 within own budget	Up to £100,000 within own budget	Up to £100,000 within own budget	
<p><i>Financial limits are measured in the terms of the gross annual income or expenditure in respect of the new/changed or discontinued activity. The approval provided is for the change of activity only and hence the estimated recurring impact (cost and revenue) that the change in activity will drive versus the original plan. The business case should also identify any non recurring expenditure required to facilitate the change in activity or any resulting non recurring costs (e.g. redundancy). Approval of the business cases provides approval of such costs "in principle". However, specific costs (e.g. capital, consultants, severance etc) may need approval in line with SFIs before any formal commitment is entered into.</i></p> <p><i>Business cases of any size that are likely to generate a materially adverse public reaction, with the potential for significant reputational impact on NHSBT, should always be approved by the Board.</i></p>							
<b>Change projects</b> Intended to cover complex projects that introduce material changes to processes, systems, ways of working and which require significant facilitating expenditure (consultants, programme / project resource, IT development).		Over £1,000,000	Up to £1,000,000	Up to £100,000 within own budget	Up to £100,000 within own budget	Up to £100,000 within own budget	
<p><i>The financial limit relates to the total implementation cost, including external facilitation and any subsequent redundancies.</i></p> <p><i>Approval of the business case indicates recognition of the impact of the project on the organisation and enables the project to proceed "in principle". However, specific elements (e.g. IT projects, consultants etc) may need approval in line with SFIs before any formal commitment is entered into.</i></p> <p><i>With regard to Board approval, change projects in excess of £500k requires the support of two non executive members of the NHSBT Board. Such support will be captured in the minutes of NHSBT Board meetings. Expenditure in excess of £1m requires formal approval of the Board</i></p>							

	<b>DoH</b>	<b>NHSBT Board</b>	<b>Chief Executive</b>	<b>Finance Director</b>	<b>Medical Director</b>	<b>Executive Directors</b>	
<b>IT systems and services</b>	Over £100,000	Over £1,000,000	Up to £1,000,000			Chief Digital Officer up to £100,000	
<p><i>All IT projects within NHSBT require the approval of the Chief Digital Officer, whether a stand alone project or part of a broader change initiative. Procurement of new systems/services should not be commenced without such approval.</i></p> <p><i>The DoH requires that all IT business cases &gt; £100k are submitted to DH IS for review and advice. This includes change controls or new orders to modify or extend existing ICT or ICT based services. Maintain and run activity is not affected except where new OJEU contracts are proposed. These would then also be subject to DoH review.</i></p> <p><i>The NHSBT limits apply whether or not the expenditure is classified as capital or revenue. Hence any substantive IT project with a new cash funding need in excess of £1m requires Board approval. Approval limits relate to whole life costs. The project shall be discussed with Finance to determine the appropriate accounting treatment.</i></p> <p><i>With regard to Board approval, acquisition of new IT systems/services in excess of £500k requires the support of two non executive members of the NHSBT Board. Such support will be captured in the minutes of NHSBT Board meetings. Expenditure in excess of £1m requires formal approval of the Board.</i></p>							
<b>Management Consultancy</b>	Over £100,000	Over £250,000	Up to £250,000				
<p><i>There are strict controls imposed by the Cabinet Office over spending on Professional Services (all categories) and especially management consultancy.</i></p> <p><i>All requests for management consultancy services must therefore be submitted by the NHSBT Finance Director to ensure that they are handled in line with Cabinet Office controls and any related DH requirements. The limits described here only dictate the level at which formal Board approval is required in support of any business case that is made to Cabinet Office.</i></p> <p><i>Irrespective of the above this area, at all times, remains subject to NHSBT (and any emerging DH) tendering and procurement regulation.</i></p>							

	DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Professional Services - Advertising</b>	Cabinet Office approval >£100,000	Over £500,000 (ODT campaigns)	Recruitment marketing activity up to £40,000			Director of Comms up to £20,000	
<p><i>As part of the Cabinet Office restrictions on "Paid for advertising" NHSBT has no authority to spend without Cabinet Office approval. All requests for spend in this category must be submitted via the NHSBT Director of Communications.</i></p> <p><i>NHSBT spend on marketing for blood donation is an operational matter that would normally not require Board approval except in respect of committed contractual obligations. Nonetheless the NHSBT annual marketing plan in support of Blood Donation requires Cabinet Office approval. Spend on Organ Donation campaigning requires NHSBT Board approval (if in excess of £500k). All campaign spending, of whatever value, requires Cabinet Office approval.</i></p>							
<b>Professional Services – Other (subject to DH guidance – below)</b>							
<p><i>There are strict controls imposed by the Cabinet Office over spending on Professional Services (all categories). Spending on professional services that is funded by non-programme sources (i.e. prices) are subject to relaxed controls that, in lieu of Cabinet Office or DoH approval, require approval of an NHSBT Expenditure Controls Committee (ECC). As such requests should be submitted to the ECC via the Finance Director. NHSBT has been further granted an exemption for "professional services in support of front line operational activities". This therefore provides a potential exemption for expenditure from programme funded sources so long as it is front line related. In this case such expenditure should also be submitted to the Finance Director for submission to the ECC as necessary.</i></p> <p><i>All other requests for expenditure (i.e. programme funded and not front line related) must be submitted via the Finance Director for approval by DoH/Cabinet Office as necessary.</i></p> <p><i>Irrespective of the above this area remains subject to NHSBT (and any emerging DoH) tendering and procurement regulation at all times.</i></p> <p>Interim contractors, related to business transformation delivery, at a cost to NHSBT of &gt;£220 per day (excluding VAT and Agency fees) require approval by the Transformation Programme Board. Any contractor of any sort paid more that £900 per day (including agency fees, excl vat) requires Ministerial approval via DH Sponsor.</p> <p>No individuals can be contracted with via a personal service company without prior approval by the Director of Workforce. Agency contractors should not be paid via a personal service company without prior approval by the Director of Workforce.</p>							

	DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Capital Projects</b>							
Approval of capital projects	Over £1,000,000	£1,000,000 (see note below)	Up to £500,000	Up to £250,000	Up to £50,000	Up to £50,000	
Sale of assets (including write offs)	Over £500,000	Over £500,000	Up to £500,000	Up to £50,000			
<p><i>Finance Director to be copied on all projects with approval needed for all capital projects &gt; £50,000. All capital projects require approval of the relevant Director before sending onward for further approval. Projects in excess of £5m additionally require approval of the DH Capital Investment Branch. Overspends on projects &gt; 10% require the project to be re-approved at the same authority level, or higher, if the total spend on the project is then lifted into the next authority band.</i></p> <p><i>*With regard to Board approval projects in excess of £500k requires the support of two non executive members of the NHSBT Board. Such support will be captured in the minutes of NHSBT Board meetings. Expenditure in excess of £1m requires formal approval of the Board.</i></p> <p><i>Supporting professional services require approval in line with Cabinet Office /DH controls as described above.</i></p>							
<b>Revenue projects</b> i.e. projects with material non recurring costs that do not qualify as capital (these generally relate to fitting out, refurbishments and maintenance projects)	N/A	£1,000,000 (see note above)	Up to £500,000	Up to £250,000	Up to £50,000 within own budget	Up to £50,000 within own budget	
<p><i>Intended to cover other discrete projects, with non recurring costs, that are similar to capital in nature. The only differentiator is that the accounting treatment of the project as revenue rather than capital. The requirements described above for capital also apply to revenue projects.</i></p> <p><i>As with capital, authority for items &gt; £50k is required irrespective of whether the project is included in the annual budget or not.</i></p> <p><i>Supporting professional services require approval in line with Cabinet Office /DH controls as described above.</i></p>							

	DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Contracts for goods and services</b>							
Contract award (applies to the commitment established by the initial contract term. It also applies separately to any new commitment that is then established as a result of any contractual extensions that are subsequently taken up.)_	Unlimited within budget	NED scrutiny over £1,000,000  Board approval over £3,000,000	Up to £1,000,000	Up to £500,000  AD Procurement up to £200,000	Up to £500,000 within own budget	Up to £500,000 within own budget	
<p><i>Financial limits include VAT and are measured in terms of the anticipated financial commitment that the contract would establish over the initial contract period (i.e. before any permitted extension). The same limits then apply to any contractual extensions that are taken up and the financial commitment that is thereby created.</i></p> <p><i>In principle procurement frameworks also require authorisation to the same level based on the potential spend that could reasonably be incurred under the framework. Although such frameworks do not generally establish any contractual commitment the purpose behind Board approval is to provide assurance regarding the procurement methodology and process that has been undertaken. This only applies to frameworks established by NHSBT. It does not apply to established government frameworks that are subsequently utilised by NHSBT.</i></p> <p><i>With regard to Board approval, commitments in excess of £1m requires the support of two non executive members of the NHSBT Board. Such support will be captured in the minutes of NHSBT Board meetings. Commitments in excess of £3m requires formal approval of the Board.</i></p> <p><i>Compliance with tendering procedures described within the SFIs is required at all times, for any type of goods and services contract. Waivers to tendering procedures must be authorised as described in the SFIs.</i></p> <p><i>It is not possible to waiver breaches of OJEU. As such all breaches must be reported to GAC along with a description of root cause, risk, remedies and corrective action.</i></p>							

	<b>DoH</b>	<b>NHSBT Board</b>	<b>Chief Executive</b>	<b>Finance Director</b>	<b>Medical Director</b>	<b>Executive Directors</b>	
Accommodation (whole life costs)	See below	Over £1,000,000	Up to £1,000,000	Up to £500,000			
Lease agreements (whole life costs)	See below	Over £1,000,000	Up to £1,000,000	Up to £500,000			

*All lease agreements (including property, fleet and equipment leases) must be approved by the Finance Director. This excludes employee car leases which are covered by the NHSBT car leasing policy.*

*Extensive property controls are now in place, enforced by the Government Property Unit (GPU) and DH. These controls cover applications for new leases, extensions to leases and also waivers to lease break opportunities. As such all accommodation business cases must be approved in line with these requirements. In the first instance the Finance Director will describe the controls as they apply at any time and will be the route through to GPU/DH approval.*

*Accommodation business cases with £1m - £5m whole life costs require will require support from DH sponsor, for cases in excess of £5m whole life costs, further approval will be required from the DH Capital Investment Branch (CIB).*



	Treasury DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Losses</b>							
<b>Cash losses/book keeping losses/exchange rate fluctuations/overpayment of pay and allowances</b> (overpayments and unauthorised issues)	Over £75,000	Over £75,000	Up to £75,000	Up to £10,000		HR Director Up to £10,000 Pay/allows	
<b>Losses of stores</b> <i>Deliberate (e.g. fraud) or other (e.g. out of date)</i>	Over £75,000	Over £75,000	Up to £75,000	Up to £10,000		Up to £10,000	
<b>Fruitless Payments</b>	Over £75,000	Over £75,000	Up to £75,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Constructive Losses</b> <i>Goods services ordered and paid for but later proved to be not needed.</i>	Over £75,000	Over £75,000	Up to £75,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Losses of pay/allowances arising from other causes</b> (e.g. non disclosure of facts, short of proven fraud)	Over £50,000	Over £50,000	Up to £50,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Losses arising from failure to make charges for use of public property/services</b>	Over £50,000	Over £50,000	Up to £50,000	Up to £10,000		Up to £10,000	
<b>Claims waived or abandoned</b> <i>i.e. a valid claim that is not pursued or where settlement is agreed at a reduced amount Treasury pre-approval is required.</i>	Over £50,000	Over £50,000	Up to £50,000	Up to £10,000			
<p><i>All special payments above £20,000, all severance payments and all novel, contentious and repercussive payments must be referred to DH/Treasury for <b>pre-</b>approval</i></p> <p><i>Approval by the NHSBT Board is generally actioned through formal reporting of losses and special payments to the GAC with material items (&gt;£200k) subject to a formal approval process.</i></p>							

	Treasury DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Special Payments</b>							
<b>Donor claims</b> <i>Treasury pre- approval required for all claims over £20,000</i>	DoH Over £20,000		Up to £20,000	Up to £10,000	Up to £10,000	Manufacturing & Logistics /Blood Donation Up to £10,000	
<b>Extra contractual payments</b> <i>Non contractual payments but where there is an obligation that may be held up in court. Typically arising from action or inaction with regard to a contract. Includes payments where a settlement is reached without arbitration</i>	Over £20,000	Over £20,000	Up to £20,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Compensation payments (non donor related)</b> <i>Personal injury, traffic accidents, damage to property.</i>	Over £20,000	Over £20,000	Up to £20,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Ex-gratia payments</b> <i>E.g. payments to meet hardship, out of court settlements to avoid legal action</i>	Over £20,000	Over £20,000	Up to £20,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Special severance payments</b> <i>Payments above statutory or contractual requirements and always require Treasury pre-approval.</i>	Treasury All	Over £20,000	Up to £20,000	Up to £10,000	Up to £10,000	Up to £10,000	
<b>Extra statutory, extra-regulatory payments</b> <i>Payments within the broad intention of statute or regulation but go beyond a strict interpretation of terms</i>	Over £20,000	Over £20,000	Up to £20,000	Up to £10,000	Up to £10,000	Up to £10,000	
<p><i>All special payments above £20,000, all severance payments and all novel, contentious and repercussive payments must be referred to DH/Treasury for <b>pre-approval</b>.</i></p> <p><i>The National Clinical Claims Manager can approve donor claims up to £10,000</i></p>							

	Treasury DoH	NHSBT Board	Chief Executive	Finance Director	Medical Director	Executive Directors	
<b>Severance Payments</b>							
Redundancies including capitalised costs	ALB – GAC Over £100,000		Up to £100,000			Workforce Director Up to £50,000	
Compensation in lieu of notice	ALB – GAC Over £50,000		Up to £50,000			Workforce Director Up to £50,000	
Ex gratia payments (in excess of, or outside of, statutory or contractual entitlements)	ALB – GAC Over £20,000		Up to £20,000				
Financial incentive/retention payments	ALB – GAC All						
<p><i>All payments beyond normal contractual requirements require Treasury pre-approval.</i></p> <p><i>All such payments made to executive members of the Board and other Group Directors reporting to the Chief Executive shall be approved by the Remuneration and Audit Committee.</i></p>							
<b>Judgements, fines arising from legal proceedings</b>		Over £50,000	Up to £50,000	Up to £50,000			
<b>Approval of donations to outside bodies (per case per annum).</b>		Over £50,000	Up to £50,000	Up to £1,000	Up to £1,000	Up to £1,000	

	<b>Treasury DoH</b>	<b>NHSBT Board</b>	<b>Chief Executive</b>	<b>Finance Director</b>	<b>Medical Director</b>	<b>Executive Directors</b>	
<b>Approval of sponsorship agreements per annum.</b>		Over £50,000	Up to £50,000	Up to £1,000	Up to £1,000	Up to £1,000	
<i>All sponsorship agreement need to conform with NHSBT policy</i>  <i>Excludes funding to external bodies that are in support of business activity and approved in the budget (e.g. marketing activities within the Communications budget).</i>							
<b>Items to be purchased from Petty Cash</b>			Up to £200	Up to £100	Up to £100	Up to £100	
<b>Imprests to staff in advance of travel expenses</b>	Over £50,000	Over £50,000	Up to £50,000	Up to £5,000			
<b>Loans to staff</b>	Over £50,000	Over £50,000	Up to £50,000	Up to £5,000			
<b>Overseas Travel Staff and External contractors</b>			Over £2k	Up to £2k	Up to £2k	Up to £2k	
<b>Honorariums</b> (to be generally avoided due to income tax implications)				Over £2k	Up to £2k	Up to £2k	