

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	✓
Official: Sensitive Commercial		Provides assurance	
Official: Sensitive Personal		For information only	

BOARD MEETING	
1 JULY 2022	
Report Title:	Scheme of Reservation and Delegation
Purpose of report	
To provide the Board with the Scheme of Reservation and Delegation for NHS North East and North Cumbria Integrated Care Board (the ICB).	
Key points	
<p>The NHS Act 2006 (as amended by the Health and Care 2022 Act) provides NHS North East and North Cumbria Integrated Care Board (NENC ICB) with powers to delegate the responsibility for the exercise of its powers and functions to certain bodies (such as committees) and certain persons (such as the Chief Executive and other officers).</p> <p>The 2022 Act also gives the ICB Board flexibility to appoint to ICB committees and sub-committees' members who are neither ICB employees nor board members, e.g., a sub-committee could be entirely composed of external members.</p> <p>In addition, the Act gives the power to ICBs to agree with specified other statutory organisations (NHS trusts/foundation trusts, local authorities) that they will exercise their functions on behalf of the ICB or jointly with the ICB. This new power for ICBs will be governed by secondary legislation and by NHS England statutory guidance.</p> <p>The ICB remains accountable for all its functions, including those that it has delegated.</p> <p>The arrangements made by NENC ICB for the reservation and delegation of decisions are set out in the attached Scheme of Reservation and Delegation. The Scheme is intended to support good governance and clear, transparent decision-making while allowing flexibility for local adaption.</p> <p>The Scheme sets out which functions and powers of the ICB which are as follows:</p> <ul style="list-style-type: none"> • reserved to the Board itself, so that only the board may make those decisions • delegated to individuals (board members or employees) • delegated to committees and sub-committees of the organisation that have been established by the board 	

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- delegated to other statutory bodies using the boards legal powers (to become section 65z5 and 65z6 of the 2006 Act) to delegate functions to another organisation or to a joint committee with another organisation
- any functions that have been delegated to the ICB by other bodies, e.g., NHS England's functions relating to the commissioning of primary medical services

The Scheme has been developed with key partners across the Integrated Care System in North East and North Cumbria and in line with current legislation and NHS England guidance.

The Scheme will continue to be regularly reviewed as the ICB's governance arrangements and ways of working embed and evolve.

The NENC ICB's financial delegations and limits are covered as a separate item on the agenda.

Risks and issues

It is a risk that levels of delegation may not support local decision-making initially and will require further review throughout the remainder of the year as part of the transition from the former clinical commissioning groups to the new ways of working across the Integrated Care System.

Assurances

The Scheme has been reviewed and confirmed as being in line with the requirements of the Health and Care Act 2022 and all other required statutory guidance.

Recommendation/Action Required

The Board is asked to approve the Scheme of Reservation and Delegation

Sponsor/approving director	C Riley, Executive Director of Corporate Governance, Communications and Involvement (Designate)
Report authors	I Walker, Head of Governance, North Tyneside CCG

Link to ICB corporate aims (please tick all that apply)

CA1: Improve outcomes in population health and healthcare	✓
CA2: tackle inequalities in outcomes, experience and access	
CA3: Enhance productivity and value for money	✓
CA4: Help the NHS support broader social and economic development	✓

Relevant legal/statutory issues

Health and Care Act 2022

Any potential/actual conflicts of interest associated with the paper? (please tick)	Yes		No		N/A	✓
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If yes, please specify

Equality analysis completed (please tick)	Yes		No		N/A	✓
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If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken? (please tick)	Yes		No		N/A	<input checked="" type="checkbox"/>
Key implications						
Are additional resources required?	None noted.					
Has there been/does there need to be appropriate clinical involvement?	Yes, as a part of the Scheme development.					
Has there been/does there need to be any patient and public involvement?	Not applicable.					
Has there been/does there need to be partner and/or other stakeholder engagement?	Yes, as part of the Scheme development.					

NHS North East and North Cumbria Integrated Care Board

Scheme of Reservation and Delegation

Version 1-0, approved 01/07/2022 (TBC)

**Schedule of Matter Reserved to the North East and North Cumbria
Integrated Care Board and Scheme of Delegation**

1. Introduction

The arrangements made by the North East and North Cumbria Integrated Care Board (NENC ICB) for the reservation and delegation of decisions are set out in this scheme of reservation and delegation.

The NENC ICB remains accountable for all its functions, including those that it has delegated.

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Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
REGULATION AND CONTROL	Constitution 1.6	Consideration and approval of applications to NHS England on any matter concerning changes to the ICB's constitution, including arrangements for taking urgent decisions, and standing orders	✓ Approval of proposed changes		✓ Chair and/or Chief Executive may periodically propose amendments to the constitution		
REGULATION AND CONTROL	Constitution 1.6.2	Approve Constitution (including Standing Orders)	✓ Approves (subject to NHSE approval)			✓ NHSE	
REGULATION AND CONTROL	Constitution 4.4.2	Approve the ICB scheme of reservation and delegation (SoRD) and amendments to the SoRD	✓ Approves		✓ Chief Executive (recommends)		

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REGULATION AND CONTROL	Constitution Appendix 2, Section 5	Suspension of Standing Orders			<p style="text-align: center;">✓</p> <p style="text-align: center;">Chair in discussion with at least two other members</p>		
REGULATION AND CONTROL	Constitution Appendix 2, 4.9.4	Urgent Decisions			<p style="text-align: center;">✓</p> <p style="text-align: center;">Chair and Chief Executive (or relevant lead director in the case of committees)</p>		<p>In the first instance, every attempt will be made for the Board to meet virtually. Where this is not possible, the delegation to the Chair and Chief Executive (or relevant lead director in the case of committees) applies.</p> <p>The exercise of such powers shall be reported to the next formal meeting of the board for formal ratification and the Audit Committee for oversight</p>

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REGULATION AND CONTROL		Establish governance arrangements to support collective accountability between partner organisations for whole-system delivery and performance, underpinned by the statutory and contractual accountabilities of individual organisations.	✓				
REGULATION AND CONTROL	Constitution 4.6	Approve terms of reference and membership for ICB Committees & Sub Committees	✓				Definition: A <u>Committee</u> is established by and accountable to the ICB Board. A <u>Sub-Committee</u> is accountable to its parent Committee. <u>Parent Committees</u> Audit Committee; Finance, Performance & Investment Committee; Quality & Safety Committee; Remuneration Committee; and Executive Committee

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REGULATION AND CONTROL		Approve the ICB operating framework	✓ (Approves)		✓ Chief Executive (Recommends)		
REGULATION AND CONTROL		Approve the ICB operating structure	✓ (Approves)		✓ Chief Executive (Recommends)		
REGULATION AND CONTROL	Constitution 1.4 Health & Care Act 14Z32 to 14Z44 & 14Z49	Approve the arrangements for discharging the ICB's functions including but not limited to: a) Having regard to and acting in a way that promotes the NHS Constitution (14Z32) b) Exercising its functions effectively, efficiently, and economically (14Z33)	✓				

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		c) Securing continuous improvement in the quality of services (14Z34) d) Reducing inequalities (14Z35) e) Promote involvement of each patient (14Z36) f) Patient choice (14Z37) g) Obtaining appropriate advice (14Z38) h) Promote innovation (14Z39) j) Research (14Z40) k) Education & training (14Z41) l) Promote integration (14Z42)					

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		<p>m) Duty to have regard to effect of decisions (14Z43)</p> <p>n) Duties as to climate change etc (14Z44)</p> <p>o) Duty to keep experience of members under review (14Z49)</p>					
REGULATION AND CONTROL	Constitution 3.3.1	Appointment of ICB Chair				<p>✓</p> <p>NHSE, with the approval of the Secretary of State</p>	
REGULATION AND CONTROL	Constitution 3.4.1 & 3.4.2	Appointment of ICB Chief Executive			<p>✓</p> <p>Appointed by ICB Chair in accordance with any guidance issued by NHS England*</p>		<p>*Appointment subject to approval of NHSE in accordance with any procedure published by NHS England</p>

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REGULATION AND CONTROL		Exercise or delegation of those functions of the ICB which have not been retained as reserved by the ICB Board, delegated to a committee or sub-committee or specified individual			✓ ICB Chief Executive		
REGULATION AND CONTROL	Constitution 3.5.4, 3.6.5, 3.7.4	Appointment of Partner Member/s: <ul style="list-style-type: none"> • Trusts • Primary Medical Services • Eligible Local Authorities 			✓ Approval ICB Chair*		*Supported by an Appointment Panel

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REGULATION AND CONTROL	Constitution 3.8.3, 3.9.3, 3.10.3, 3.12.3	Appointment of: <ul style="list-style-type: none"> Executive Medical Director Executive Chief Nurse Executive Director of Finance Other Executive Board Members 			<p>✓</p> <p>Appointed by ICB Chief Executive*</p> <p>✓</p> <p>Approval ICB Chair</p>		*Supported by an Appointment Panel
REGULATION AND CONTROL	Constitution 3.11.2	Appointment of Independent Non-Executive Member/s			<p>✓</p> <p>Approved by ICB Chair*</p>		*Supported by an Appointment Panel
REGULATION AND CONTROL		Approve the System Collaboration and Financial Management Agreement	<p>✓</p> <p>(Approves)</p>	<p>✓</p> <p>Finance, Performance & Investment Committee</p>			In consultation with partners

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				(Recommends)			
REGULATION AND CONTROL	Constitution 1.7.3 (c)	Approve Standing Financial Instructions (SFIs)	✓ (Approves)	✓ Finance, Performance & Investment Committee (Recommends)	✓ Executive Director of Finance (Prepares)		
REGULATION AND CONTROL		Approve arrangements for managing individual funding requests	✓ (Approves)				Note the Executive Committee oversees the application of commissioning policies including those relating to individual funding requests (IFR)
REGULATION AND CONTROL	Standing Orders, Section 6	Set out who can execute a document by signature / use of the seal	✓ In approving Standing Orders		✓ Authorised to authenticate the use of the seal by their signature: - ICB Chair - Chief Executive		

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					- Executive Director of Finance		
REGULATION AND CONTROL		Determine governance arrangements at Place (taking into account any requirement from ICB Board Committees)			✓ Executive Director of Place Based Delivery		
REGULATION AND CONTROL	Constitution 4.7	Propose terms of reference for place based partnership arrangements for approval by the ICB Board and Partners	✓ Approval ICB Board and Partners		✓ Proposed by Executive Director of Place Based Delivery		
REGULATION AND CONTROL		Appoint ICB Caldicott Guardian			✓ ICB Chief Executive		
REGULATION AND CONTROL		Appoint ICB Conflicts of Interest Guardian			✓ ICB Chief Executive		
REGULATION AND CONTROL		Appoint ICB Senior Information Risk Officer			✓ ICB Chief Executive		

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REGULATION AND CONTROL		Appoint ICB Data Protection Officer			✓ ICB Chief Executive		
REGULATION AND CONTROL		Appoint ICB Chief Information Officer			✓ ICB Chief Executive		
REGULATION AND CONTROL		Appoint ICB EPRR Accountable Emergency Officer			✓ ICB Chief Executive		
REGULATION AND CONTROL		Approve Patient Group Directions			✓ ICB Medical Director, following review by the Quality & Safety Committee		
STRATEGY AND PLANNING		Agree the vision, values, and overall strategic direction of the ICB	✓				
STRATEGY AND PLANNING		Approving the strategy for improving population health and reducing health inequalities	✓				Having regard to the Integrated Care Partnership

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							integrated care strategy
STRATEGY AND PLANNING		Approve the Commissioning Strategy	✓ (Approves)	✓ Executive Committee (Recommends)			
STRATEGY AND PLANNING	Health & Social Care Act 2022, 14Z52	Agree a system plan [with partner trusts] to meet the health and healthcare needs of the population within the North East and North Cumbria	✓ (Approves)	✓ Executive Committee* (Recommends)			*The Executive Committee will consult the Finance, Performance & Investment Committee in the development of the plan
STRATEGY AND PLANNING		Complementary to the System Plan, agree a plan to meet the health and healthcare needs of the population within each place	✓ (Approves)		✓ Executive Director of Place Based Delivery		

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STRATEGY AND PLANNING		Approval of the ICB's non-programme budgets	✓ (Approves)	✓ Finance, Performance & Investment Committee (Recommends)			
STRATEGY AND PLANNING		Approval of the ICB's programme budgets	✓ (Approves)	✓ Executive Committee (Recommends)			
STRATEGY AND PLANNING		Develop an approach to distribute ICB resources through commissioning and direct allocation to drive agreed change based on the ICB strategy	✓ Approve	✓ Finance, Performance & Investment Committee (Recommends)	✓ Executive Director (Implementation of agreed resource allocation)		

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STRATEGY AND PLANNING		Approve all ICB programme costs	<p style="text-align: center;">✓</p> <p>Approved by the Board or as delegated in accordance with financial delegations and financial limits</p>	<p style="text-align: center;">✓</p> <p>Executive Committee*</p>	<p style="text-align: center;">✓</p> <p>Refer to financial delegations*</p>		*Contracts will be approved by either the ICB Board, Executive Committee, or relevant individual in accordance with the financial delegations and financial limits
STRATEGY AND PLANNING		Approve all ICB non programme costs	<p style="text-align: center;">✓</p> <p>Approved by the Board or as delegated in accordance with financial delegations and financial limits</p>	<p style="text-align: center;">✓</p> <p>Finance, Performance & Investment Committee*</p>	<p style="text-align: center;">✓</p> <p>Refer to financial delegations*</p>		* Non-programme contracts will be approved by either the ICB Board, Finance, Performance & Investment Committee, or relevant individual in accordance with the financial delegations and financial limits

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STRATEGY AND PLANNING		Approve the strategic financial framework of the ICB, and manage overall resources, manage financial risk, monitor system financial performance and report material exceptions to the Board	✓ (Approves the strategic financial framework)	✓ Finance, Performance & Investment Committee (Recommends)			
STRATEGY AND PLANNING		Approve a Performance and Outcomes Framework for Providers	✓ (Approves)	✓ Executive Committee (Recommends)			
STRATEGY AND PLANNING		Monitor provider performance against contract and report material exceptions to the Board		✓ Executive Committee			
STRATEGY AND PLANNING		Agree arrangements regarding the System Oversight Framework		✓ Executive Committee			

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STRATEGY AND PLANNING		Approval of variations to annual planned budgets	<p style="text-align: center;">✓</p> Approved by the Board or as delegated in accordance with financial delegations and financial limits	<p style="text-align: center;">✓</p> Finance, Performance & Investment Committee*	<p style="text-align: center;">✓</p> Refer to financial delegations*		*Variations to budgets will be approved by the Board, or Finance, Performance & Investment Committee, or an individual, in accordance with financial delegations and financial limits
STRATEGY AND PLANNING		Approval of variations to <u>non-programme</u> contracts	<p style="text-align: center;">✓</p> Approved by the Board or as delegated in accordance with financial delegations & limits	<p style="text-align: center;">✓</p> Finance, Performance & Investment Committee*	<p style="text-align: center;">✓</p> Executive Director*		*Variations to non-programme contracts will be approved by the Board, or Finance, Performance & Investment Committee, or an Executive Director, in accordance with financial delegations and financial limits

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STRATEGY AND PLANNING		Approval of variations to <u>programme</u> contracts	✓ Approved by the Board or as delegated in accordance with financial delegations & limits	✓ Executive Committee*	✓ Executive Director*		*Variations to programme contracts will be approved by the Board, or Executive Committee, or an Executive Director, in accordance with financial delegations and financial limits
STRATEGY AND PLANNING		In accordance with ICB policy, lead significant service reconfiguration programmes to achieve agreed outcomes	✓ (Approves)	✓ Executive Committee (Assurance)	✓ Executive Director (Recommends)		In leading service reconfiguration, the ICB will work with providers at scale and place
STRATEGY AND PLANNING		Planning and commissioning of services (to include Procurement & Evaluation Strategies and Recommended Bidder Reports).	✓ Approved by the Board or as delegated in accordance with financial	✓ Executive Committee*	✓ Executive Director*		* Approval by the Board, or Executive Committee, or an Executive Director. in accordance with financial

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			delegations & limits				delegations and financial limits
STRATEGY AND PLANNING	Delegation agreement	<u>Specialist Commissioning delegation from NHSE</u> Approve decisions on the review, planning and procurement of specialist commissioned services (consistent with the terms of the delegation agreement with NHSE)		✓ Executive Committee			
STRATEGY AND PLANNING	Delegation agreement	<u>Primary Medical Services delegation from NHSE</u> Approve decisions on the review, planning and procurement of primary medical services (consistent with the terms of the delegation agreement with NHSE)		✓ Executive Committee (Except for those items delegated to the Executive Director of Place Based Delivery as shown in Appendix 2)	✓ Executive Director of Place Based Delivery (Except for those items delegated to the Executive Committee, or other ICB Committee, as shown in Appendix 2)		

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STRATEGY AND PLANNING		Workforce planning		✓ Executive Committee			
STRATEGY AND PLANNING		Agree <u>system</u> implementation of people priorities including delivery of the People Plan and People Promise by aligning partners across the ICS to develop and support 'one workforce' including through closer collaboration across the health and care sector, with local government, the Voluntary and Community Sector (VCS) and volunteers	✓ (Approves strategy)	✓ Executive Committee (Monitors)	✓ Executive Chief People Officer (System leadership)		

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STRATEGY AND PLANNING		Agree system-wide strategy and action on data and digital: working with partners across the NHS and with local authorities to put in place smart digital and data foundations to connect health and care services	✓ (Approves strategy)	✓ Executive Committee (Monitors)	✓ Executive Chief Digital and Information Officer (System leadership)		
STRATEGY AND PLANNING		Agree joint work on estates, procurement, supply chain and commercial strategies to maximise value for money across the system and support wider goals of development and sustainability	✓ (Approves strategy)	✓ Finance Committee	✓ Executive Director (System leadership)		
ANNUAL REPORTS AND ACCOUNTS		Approval of the ICB's annual report and annual accounts	✓ (Approves)	✓ Audit Committee (Assurance)			

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HUMAN RESOURCES		Code of Conduct for staff (title: Standards of Business Conduct Policy/Conflicts of interest policy and procedures)	✓ Approves	✓ Executive Management Committee (Recommends)			
HUMAN RESOURCES	Constitution 3.14	Approve the <u>arrangements</u> for determining the terms and conditions, remuneration and travelling or other allowances for Board members, employees and others who provide services to the ICB, including pensions and gratuities	✓ In approving Terms of reference of Remuneration Committee			✓ NHSEI (Terms of appointment of the Chair will be determined by NHS England)	
HUMAN RESOURCES	Constitution 3.14	Approve the terms and conditions, remuneration and travelling or other allowances for <u>Board</u> members, including pensions and gratuities (subject to Prime Minister limit)	✓ (The Panel of the Board determines Remuneration for Non-Executive Members)	✓ ICB Remuneration Committee (Approves all except those delegated to the		✓ NHSEI (Remuneration for the Chair will be set by NHS England)	The Panel of the Board comprises the Chair, Chief Executive and Executive Chief People Officer

Official

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
				Panel of the Board or NHSEI)			
HUMAN RESOURCES		Approve the terms and conditions, remuneration and travelling or other allowances for <u>employees</u> of the ICB and to <u>other</u> persons providing services to the ICB		✓ ICB Remuneration Committee			
HUMAN RESOURCES		Approve arrangements for staff appointments		✓ Executive Committee	✓ Executive Chief People Officer (Prepares)		
QUALITY AND SAFETY		Approve arrangements to minimise clinical risk, maximise patient safety and to secure continuous improvement in quality and patient outcomes		✓ Quality and Safety Committee			

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
QUALITY AND SAFETY		Provide the ICB with assurance that it is delivering its functions in a way that delivers high quality safe patient care in commissioned services and secures continuous improvement in the quality of services		✓ Quality and Safety Committee (assures the Board)			Local Quality Groups will review quality & safety issues and escalate any concerns or issues to the Quality and Safety Committee
OPERATIONAL AND RISK MANAGEMENT		Approve the appointment of Internal Auditors	✓ (Approves)	✓ Audit Committee (Consulted on recommendation)	✓ Executive Director of Finance (Recommends)		
OPERATIONAL AND RISK MANAGEMENT		Approve the appointment of External Auditors	✓ (Approves)	✓ Auditor Panel (Recommends)			Note the Auditor Panel is made up wholly of Audit Committee members (see Audit Committee Terms of Reference)

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
OPERATIONAL AND RISK MANAGEMENT		Approve the ICB's counter fraud and security management arrangements	✓ (Approves)	✓ Audit Committee (Recommends)			
OPERATIONAL AND RISK MANAGEMENT		Approve the ICB's risk management arrangements	✓ (Approves)	✓ Executive Committee (Recommends)			
OPERATIONAL AND RISK MANAGEMENT		Approve the ICB's arrangements for managing conflicts of interest	✓				In proposing ICB Constitution to NHSE
OPERATIONAL AND RISK MANAGEMENT		Establish a comprehensive system of internal control across the ICB		✓ Executive Committee			
OPERATIONAL AND RISK MANAGEMENT		Approve arrangements for action on litigation against or on behalf of the ICB		✓ Executive Committee			

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
OPERATIONAL AND RISK MANAGEMENT		Approve arrangements for planning, responding to and leading recovery from incidents (EPRR), to ensure NHS and partner organisations are joined up at times of greatest need, including taking on incident coordination responsibilities as delegated by NHS England and NHS Improvement		<p style="text-align: center;">✓</p> <p style="text-align: center;">Executive Committee</p>			
OPERATIONAL AND RISK MANAGEMENT		Approve the ICB's arrangements for handling complaints		<p style="text-align: center;">✓</p> <p style="text-align: center;">Executive Committee</p>			
OPERATIONAL AND RISK MANAGEMENT		Approve arrangements for ensuring the ICB has an integrated approach to the management standards of health and safety and has appropriate strategy and policies in place		<p style="text-align: center;">✓</p> <p style="text-align: center;">Executive Committee</p>			

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
OPERATIONAL AND RISK MANAGEMENT		Approve arrangements for complying with the NHS Provider Selection Regime		✓ Executive Committee			See Footnote 2
OPERATIONAL AND RISK MANAGEMENT		Approve Communications and Engagement Strategy	✓ (Approves)	✓ Executive Committee (recommends)			
OPERATIONAL AND RISK MANAGEMENT		Approve and implement the ICB's information governance policies, including handling Freedom of Information requests, ensuring appropriate and safekeeping and confidentiality of records and for the storage, management and transfer of information and data		✓ Executive Committee			

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
POLICIES		Approval of policies <u>not</u> specified elsewhere in this scheme of reservation and delegation	✓				
POLICIES		Approve human resources policies for employees and for other persons working on behalf of the ICB	✓ (Approves)	✓ Executive Committee (Recommends)	✓ Executive Chief People Officer (Prepares)		
POLICIES		Approve clinical, quality and safety policies		✓ Quality and Safety Committee			
POLICIES		Approve ICB Corporate Policies (unless specified elsewhere)		✓ Executive Committee			
POLICIES		Approve ICB Standard Operating Procedures (SOPs)		✓ Executive Committee			

Official

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
POLICIES		Approve the ICB's risk management policy		✓ Executive Committee			
POLICIES		Determine the ICB pay policy (including the adoption of pay frameworks such as Agenda for Change)		✓ Remuneration Committee			
POLICIES		Approve the ICB's complaint's policy		✓ Executive Committee			
POLICIES		Approve health and safety policies		✓ Executive Committee			
POLICIES		Approve information governance policies		✓ Executive Committee			

Policy Area	Reference	Decision	Reserved to the ICB Board	Delegated to a Committee or Sub-Committee	Delegated to an Individual (Subject to the Financial Delegations/ Financial Limits)	Delegated to Others (Subject to the Financial Delegations/ Financial Limits)	Supporting Notes
PARTNERSHIP WORKING	Integrated Care Boards Guide to developing a SoRD, page 9	Approve arrangements for coordinating supra* commissioning arrangements with other ICBs or with local authorities, where appropriate	✓ (Approves)	✓ Executive Committee (Recommends)			*Where one service provider spans more than one ICB
PARTNERSHIP WORKING	Constitution 4.3.2 – 4.3.3 and 4.7	Authorisation of arrangements made under section 65Z5 or section 75 of the 2006 Act	✓ Approved by the Board or as delegated in accordance with financial delegations and financial limits	✓ Executive Committee*	✓ Refer to financial delegations*		*Arrangements will be approved by either the ICB Board, Executive Committee, or relevant individual in accordance with the financial delegations and financial limits See Foot Note 1
PARTNERSHIP WORKING		Approve decisions that individual members or employees of the ICB participating in joint arrangements on behalf of the ICB can make	✓				Such delegated decisions must be disclosed in this scheme of reservation and delegation

FOOT NOTES

1. Under section 65Z5 of the 2006 Act, the ICB may arrange with another ICB, an NHS trust, NHS foundation trust, NHS England, a local authority, combined authority, or any other body prescribed in Regulations, for the ICB's functions to be exercised by or jointly with that other body or for the functions of that other body to be exercised by or jointly with the ICB. Where the ICB and other body enters such arrangements, they may also arrange for the functions in question to be exercised by a joint committee of theirs and/or for the establishment of a pooled fund to fund those functions (section 65Z6). In addition, under section 75 of the 2006 Act, the ICB may enter partnership arrangements with a local authority under which the local authority exercises specified ICB functions or the ICB exercises specified local authority functions, or the ICB and local authority establish a pooled fund. Where arrangements are made under section 65Z5 or section 75 of the 2006 Act the board must authorise the arrangement, which must be described as appropriate in the SoRD.
2. The Health and Care Bill currently before Parliament proposes that new regulations may make provisions in relation to the arrangement of healthcare services in England. This is known as the Provider Selection Regime. The Provider Selection Regime will be a new set of rules for arranging healthcare services, which is intended to give decision makers a flexible, proportionate decision-making process for selecting providers to deliver healthcare services to the public. It will be introduced via the forthcoming Health and Care Bill currently before Parliament (subject to Parliament passing the bill, and any changes that may arise from that process).

Due to timing constraints, the Provider Selection Regime will not be established at the same time as Integrated Care Boards (ICBs), which we are working to implement from July 2022 subject to the Parliamentary passage of the Health and Care Bill. DHSC is continuing to work to ensure that the Provider Selection Regime is established as soon as possible after the establishment of ICBs, subject to Parliamentary approvals and scheduling.

The Provider Selection Regime would replace the existing procurement rules for healthcare services.

[Extracts taken from: <https://www.gov.uk/government/consultations/provider-selection-regime-supplementary-consultation-on-the-detail-of-proposals-for-regulations/preview-of-proposals-for-the-provider-selection-regime>]

**Committee and Sub Committees of NHS North East and
North Cumbria Integrated Care Board (ICB)**

1. Committees

The ICB has determined to establish the following Committees

- Audit Committee
- Remuneration Committee
- Finance, Performance, and Investment Committee
- Quality and Safety Committee
- Executive Committee

2. Sub-Committees

The ICB has determined to establish the following Sub-Committees:

To be determined

Primary Medical Services:
Allocation of Roles & Responsibilities within the ICB

In accordance with its statutory powers under section 65Z5 of the NHS Act, NHS England hereby delegates the exercise of the Delegated Functions to the ICB to empower it to commission a range of services for the people of the Area, as described in the Delegation Agreement relating to Primary Medical Services.

The ICB Board has determined the following delegations within this Scheme of Reservation & Delegation.

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
1	Decisions in relation to the commissioning and management of Primary Medical Services, unless delegated to the Executive Director of Place Based Delivery		
2	Planning Primary Medical Services for the NE&NC, including carrying out needs assessments		Carrying out primary care needs assessments at place and making recommendations to the Executive Management Committee
3	Undertaking reviews of Primary Medical Services across the NE&NC		Undertaking reviews of Primary Medical Services at Place and escalating any material issues to the Executive Management Committee for consideration/action
4	Management of the Delegated Funds in relation to Primary Medical Services (See ICB Financial Limits for authorisation limits)		Management of delegated funds where these are delegated to the Executive Director of Place Based, within the limits shown in the ICB's Financial Limits.
5	Co-ordinating a common approach to the commissioning and delivery of Primary Medical Services with other health and social care bodies in respect of the NE&NC, where appropriate		

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
6	Identifying and implementing changes to meet any unmet needs across the NE&NC which may be met through the delivery of Primary Medical Services		The Executive Director of Place Based Delivery, identifies and recommends to the Executive Management Committee any changes to meet any unmet needs at place which may be met through the delivery of Primary Medical Services
7	To manage the Primary Medical Services Contracts and perform all of NHS England's obligations under each of the Primary Medical Services Contracts in accordance with the terms of the Primary Medical Services Contracts as if it were named in the contract in place of NHS England		
8	Actively manage the performance of the Primary Medical Services Providers across the NE&NC in order to secure the needs of people who use the services, improve the quality of services, and improve efficiency in the provision of the services including by taking timely action to enforce contractual breaches, serve notices or provide discretionary support	Actively manage the performance of the Primary Medical Services Provider at place Non-material performance lapses may be managed at place by the Executive Director of Place Based Delivery	Actively manage the performance of the Primary Medical Services Provider at place Escalate to the Executive Management Committee any material performance issues for action
9	Ensure that the ICB obtains value for money on behalf of NHS England, and avoids making any double payments under any Primary Medical Services Contracts		
10	Notify NHS England immediately (or in any event within two (2) Operational Days) of any breach by the ICB of its obligations to perform any of NHS England's		

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
	obligations under the Primary Medical Services Contracts		
11	Undertake any investigations relating (among other things) to whistleblowing claims, infection control and patient complaints		
12	Keep a record of all the Primary Medical Services Contracts that the ICB manages setting out the details shown in Schedule 2A of the para 2.4.6 of the delegation agreement		
13	Reviewing the performance of the relevant Primary Medical Services Contract, including in respect of quality standards, incentives and the QOF, observance of service specifications, and monitoring of activity and finance	Reviewing the performance of the relevant Primary Medical Services Contract, at place including in respect of quality standards, incentives and the QOF, observance of service specifications, and monitoring of activity and finance Non-material performance lapses may be managed at place by the Executive Director of Place Based Delivery	Reviewing the performance of the relevant Primary Medical Services Contract, at place including in respect of quality standards, incentives and the QOF, observance of service specifications, and monitoring of activity and finance Escalate to the Executive Management Committee any material performance issues for action
14	<u>Delegated to ICB Quality & Safety Committee</u> Assessing quality and outcomes (including clinical effectiveness, patient experience, patient safety and addressing inequalities)	Assessing quality and outcomes (including clinical effectiveness, patient experience, patient safety and addressing inequalities) Non-material performance issues relating to accessing quality and outcomes may be managed at place by the Executive Director of Place Based Delivery	Assessing quality and outcomes (including clinical effectiveness, patient experience, patient safety and addressing inequalities) Escalate to the ICB Quality & Safety Committee any material performance issues for action
15	Managing variations to the relevant Primary Medical		

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
	Services Contract or services in accordance with national policy, service user needs and clinical developments		
16	Agreeing information and reporting requirements and managing information breaches (which will include use of the NHS Digital Data Security and Protection Toolkit)		
17	<p><u>Delegated to the Finance, Performance & Investment Committee</u></p> <p>Agreeing local prices, managing agreements or proposals for local variations and local modifications</p>		
18	Conducting review meetings and undertaking contract management including the issuing of contract queries and agreeing any remedial action plan or related contract management processes		
19	Compliance with and implementing any relevant Mandated Guidance issued from time to time		
20	<p>Information, Planning and Reporting</p> <p>Compliance with Delegation agreement Schedule 2A, Section 2.6 as it relates to Information, Planning and Reporting</p>		
21	<p>Primary Medical Services Contract Management</p> <p>Compliance with any future national Mandated</p>		

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
	Guidance on equitable funding as may apply from time to time		
22	<p>Enhanced Services</p> <p>Compliance with actions in Delegation agreement Schedule 2A, Section 5 as it relates to Enhanced Services)</p>		
23		<p>Local Enhanced Services</p> <p>The Executive Director of Place Based Delivery may consider any local enhanced services entered into with Primary Medical Services Providers at place using NHS Standard Contracts. Where these would continue to be beneficial to the place, the ICB (at place) may manage the ongoing design and commissioning (including re-commissioning) of these services via a Local Incentives Scheme. This is to be in conjunction and coordination with the other Executive Director of Place Based Delivery to ensure a consistent approach is taken across the ICB</p>	
24		<p>Local Enhanced Services design</p> <p>The Executive Director of Place Based Delivery may design and offer Local Incentive Schemes for Primary Medical Services Providers and comply with the Delegation agreement Schedule 2A, Section 6 as it relates to Local Incentive Schemes. This is to be done in conjunction and coordination with the other Executive Director of Place</p>	

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
		Based Delivery to ensure a consistent approach is taken across the ICB	
25		<p>Discretionary Payments</p> <p>The Executive Director of Place Based Delivery may make decisions on Discretionary Payments or Support (subject to available budget) and comply with the Delegation agreement Schedule 2A, Section 7 as it relates to discretionary payments. This is to be done in conjunction and coordination with the other Executive Director of Place Based Delivery to ensure a consistent approach is taken across the ICB</p>	
26		<p>Making Decisions about Commissioning Urgent Care for Out of Area Registered Patients</p> <p>Design and commissioning of urgent care services (including home visits as required) for its patients registered out of area (including re-commissioning these services annually where appropriate) and compliance with the Delegation agreement Schedule 2A, Section 8. This to be done in conjunction and coordination with the other Executive Director of Place Based Delivery to ensure a consistent approach is taken across the ICB</p>	
27	<p>Transparency and freedom of information</p> <p>Compliance with the Delegation agreement</p>		

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
	Schedule 2A, Section 9 as it relates to transparency and freedom of information		
28	<p>Planning the Provider Landscape</p> <p>The ICB must plan the primary medical services provider landscape in the Area, including considering and taking decisions in relation to:</p> <p>Establishing new Primary Medical Services Providers in the NE&NC;</p> <p>The procurement or award of new Primary Medical Services Contracts (in accordance with any procurement protocol or Guidance issued by NHS England from time to time);</p> <p>Compliance with the Delegation agreement Schedule 2A, Section 10.2</p>	<p>Planning the Provider Landscape</p> <p>Manage Primary Medical Services Providers providing inadequate standards of patient care at place</p> <p>Take decisions relating to closure of practices and branch surgeries at place</p> <p>Take decisions relating to dispersing the patient lists of Primary Medical Services Providers at place</p> <p>Take decisions relating to agreeing variations to the boundaries of Primary Medical Services Providers at place.</p>	
29	<p>Primary Care Networks</p> <p>Compliance with the Delegation agreement, Schedule 2A, Section 11</p>	Supporting Primary Care Networks at place, subject to any budget allocation, in conjunction and coordination with the other Executive Director of Place Based Delivery to ensure a consistent approach is taken across the ICB	
30		<p>Approving Primary Medical Services Provider Mergers and Closures</p> <p>Compliance with the Delegation agreement, Schedule 2A, Section 12</p>	
31	<p>Making Decisions in relation to Management of Poorly Performing Primary Medical Services Providers</p>		

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
	Compliance with Delegation Agreement Schedule 2A, Section 13		
32	<p><u>Delegated to Finance Performance & Investment Committee</u></p> <p>Premises Costs Directions Functions</p> <p>Compliance with Delegation Agreement, Schedule 2A, Section 14</p>		
33	<p>Maintaining the Performers List</p> <p>Compliance with Delegation Agreement, Schedule 2A, Section 15</p>		
34	<p>Procurement and New Contracts</p> <p>Compliance with Delegation Agreement, Schedule 2A, Section 16</p>		
35	<p>Complaints</p> <p>Handle complaints made in respect of Primary Medical Services in accordance with the Complaints Regulations (Delegation agreement, Schedule 2A, Section 17)</p>		
36	<p>Commissioning ancillary support services</p> <p>Compliance with Delegation Agreement, Schedule 2A, Section 18.</p>		
37	<p>Finance</p> <p>Further requirements in respect of finance will be</p>		

Official

Number	Responsibility and Decision Making Delegated to the Executive Management Committee (or other ICB Committee where stated)	Responsibility and Decision Making Delegated to the Executive Director of Place Based Delivery	Recommendation by the Executive Director of Place Based Delivery to the Executive Committee for Action/Decision
	specified in Mandated Guidance		
38	<p>Workforce</p> <p>Compliance with Delegation Agreement, Schedule 2A, Section 20</p>		

GLOSSARY

2006 Act	National Health Service Act 2006
2012 Act	Health and Social Care Act 2012 (this Act amends the 2006 Act)
Chief Executive	<p>An individual, as defined under paragraph 12 of Schedule 1A of the 2006 Act (as inserted by Schedule 2 of the 2012 Act), appointed by the NHS Commissioning Board, with responsibility for ensuring the ICB:</p> <ul style="list-style-type: none"> • complies with its obligations under: <ul style="list-style-type: none"> ○ sections 14Q and 14R of the 2006 Act (as inserted by section 26 of the 2012 Act), ○ sections 223H to 223J of the 2006 Act (as inserted by section 27 of the 2012 Act), ○ paragraphs 17 to 19 of Schedule 1A of the NHS Act 2006 (as inserted by Schedule 2 of the 2012 Act), and ○ any other provision of the 2006 Act (as amended by the 2012 Act) specified in a document published by the Board for that purpose. • exercises its functions in a way which provides good value for money.
Area	The geographical area that the ICB has responsibility for, as defined in Chapter 2 of the Constitution
Audit Committee	A committee of the Board
Board	<p>The body appointed under section 14L of the NHS Act 2006 (as inserted by section 25 of the 2012 Act), with the main function of ensuring that an ICB has made appropriate arrangements for ensuring that it complies with:</p> <ul style="list-style-type: none"> • its obligations under section 14Q under the NHS Act 2006 (as inserted by section 26 of the 2012 Act), and • such generally accepted principles of good governance as are relevant to it.
Board Member	Any member appointed to the Board of the ICB
Budget	A resource, expressed in financial terms, proposed by the Board for the purpose of carrying out, for a specific period, any, or all of the functions of the ICB.
Budget Holder	The director or employee with delegated authority to manage finances (Income and Expenditure) for a specific area of the organisation.
Chair of the Board	The individual appointed by the ICB to act as chair of the Board

Official

<i>Executive Director of Finance</i>	The qualified accountant employed by the ICB with responsibility for financial strategy, financial management and financial governance
<i>Commissioning</i>	The process for determining the need for and for obtaining the supply of healthcare and related services by the ICB within available resources.
<i>Committee</i>	A committee created and approved by the ICB Board
<i>Sub-Committee</i>	A sub-committee created by ICB Board or a committee of the ICB Board, and approved by the Board
<i>Committee Members</i>	Persons formally appointed by the Board to sit on or specific committees.
<i>Constitution</i>	A Constitution is the set of principles and rules by which an organisation is governed and managed.
<i>Board Secretary</i>	A person appointed to act independently of the Board to provide advice on corporate governance issues to the Board and the Chair and monitor the ICB's compliance with the law, Standing Orders, and Department of Health guidance.
<i>Contracting and Procurement</i>	The systems for obtaining the supply of goods, materials, manufactured items, services, building and engineering services, works of construction and maintenance and for disposal of surplus and obsolete assets.
<i>Director of Public Health</i>	A health care professional who is a specialist in Public Health or a Consultant in Public Health medicine who may hold the post of Director of Public Health.
<i>Financial Directions</i>	Any and all Directions made by the Secretary of State from time to time which relate to financial entitlements and or requirements.
<i>Financial Year</i>	This usually runs from 1 April to 31 March, but under paragraph 17 of Schedule 1A of the 2006 Act (inserted by Schedule 2 of the 2012 Act), it can for the purposes of audit and accounts run from when an ICB is established until the following 31 March.
<i>Health and Wellbeing Board</i>	The role of the Health and Wellbeing Board is to bring together the Local Authority, Voluntary Sector, Local Healthwatch, NHS and Public health to work together to improve the health and wellbeing of local people.
<i>Health and Wellbeing Strategy</i>	A strategy developed with Local Authorities for the purpose of purpose of advancing the health and wellbeing of the people in its area and implemented by the Health and Wellbeing Board

Official

Healthcare Professional	An individual who is a member of a profession regulated by a body mentioned in section 25(3) of the National Health Service Reform and Health Care Professions Act 2002.
Integrated Care System (ICS)	The ICS is a geographical partnership that brings together providers and commissioners of NHS services across the North East and North Cumbria.
Non – Executive Members	Independent members of the Board.
NHS England	NHS England (operating as the National Health Service Commissioning Board Authority prior to its formal establishment as a non-departmental public body).
Officer	Employee of the ICB or any other person holding a paid appointment or office with the ICB.
Officer Member	A member of the ICB who is either an officer of the ICB or is to be treated as an officer (i.e., the Chair of the ICB, or any person nominated by such a committee for appointment as an ICB member).
Registers of Interests	Registers an ICB is required to maintain and make publicly available under section 140 of the 2006 Act (as inserted by section 25 of the 2012 Act), of the interests of: <ul style="list-style-type: none"> • the members of the ICB. • the members of its Board. • the members of its committees or sub-committees and committees or sub-committees of its Board; and • its employees.
Remuneration Committee	A Committee of the Board
Scheme of Reservation and Delegation	Delegates powers and authority to the various elements of the ICB.
Standing Orders	The standing orders of the ICB
Standing Financial Instructions	They are part of the ICB’s control environment for managing the organisation’s financial affairs as they are designed to ensure regularity and propriety of financial transactions. They define the purpose, responsibilities, legal framework, and operating environment of the ICB.
Vice-Chair	The non-officer member appointed by the Board to take on the Chair’s duties if the Chair is absent for any reason.