

Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions

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**Standing Orders, Reservation and Delegation of Powers
and Standing Financial Instructions
Version Control Sheet**

Version	Section/Para/ Appendix	Version/Description of Amendments	Date	Author/Amended by
1	New Policy	Based on archived P_oG_02	9 October 2018	Interim trust board business manager/ director finance and business intelligence

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Governance Manual – Introduction, Interpretation and Definitions

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Lincolnshire Community Health Services

Governance Manual

Introduction and Policy Statement

Background

The Trust's Governance Manual comprises the Standing Orders, the Schedule of Matters Reserved to the Board & Scheme of Delegation and the Standing Financial Instructions. Together these provide a regulatory framework for the business conduct of the Trust. They fulfill the dual role of protecting the interests of both the Trust and its staff.

Statement

The Standing Orders, Schedule of Matters Reserved to the Board & Scheme of Delegation and Standing Financial Instructions provide a comprehensive business framework for Lincolnshire Community Health Services NHS Trust and shall apply, irrespective of the source of funding.

Responsibilities

All executive and non-executive directors, and all members of staff, should be aware of the existence of these documents and, where necessary, be familiar with the detailed provisions. Failure to comply is a disciplinary matter which could result in dismissal.

Training

Directors and service leads are responsible for ensuring that all staff are aware of requirements outlined within these documents and receive any training which may be deemed necessary for them to reasonably carry out the provisions contained within.

Dissemination

Website.

Resource implication

It is expected that this policy will be delivered within the existing resources of Lincolnshire Community Health NHS Trust.

Consultation

It is expected that all local operating procedures be deployed following consultation with relevant professional and service leads.

1. INTERPRETATION AND DEFINITIONS FOR GOVERNANCE MANUAL

- 1.1 Save as otherwise permitted by law, at any meeting the Chair of the Trust shall be the final authority on the interpretation of Standing Orders (on which they should be advised by the Chief Executive or Secretary to the Board).
- 1.2 Any expression to which a meaning is given in the National Health Service Act 2006 or in any other Acts of Parliament relating to the National Health Service or in any Regulations made under such Acts shall have the same meaning in these Standing Orders and Standing Financial Instructions and in addition:
- 1.2.1 **"Accountable Officer"** means the NHS Officer responsible and accountable for funds entrusted to the Trust. The officer shall be responsible for ensuring the proper stewardship of public funds and assets. For this Trust it shall be the Chief Executive.
- 1.2.2 **"Trust"** means the Lincolnshire Community Health Services NHS Trust.
- 1.2.3 **"Board or Trust Board"** means the Chair, Executive Directors and Non-Executive Directors of the Trust collectively as a body.
- 1.2.4 **"Budget"** means 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 Trust.
- 1.2.5 **"Budget holder"** means the director or employee with delegated authority to manage finances (Income and Expenditure) for a specific area of the organisation.
- 1.2.6 **"Chair of the Board (or Trust)"** is the person appointed by NHS Improvement on behalf of the Secretary of State for Health to lead the Board and to ensure that it successfully discharges its overall responsibility for the Trust as a whole. The expression "the Chair of the Trust" shall be deemed to include the Vice-Chair of the Trust if the Chair is absent from the meeting or is otherwise unavailable.
- 1.2.7 **"Chief Executive"** means the chief officer of the Trust.
- 1.2.8 **"Quality and Risk Committee"** means a committee whose functions are concerned with the arrangements for the purpose of monitoring and improving the quality of healthcare for which the Lincolnshire Community Health Services NHS Trust has responsibility.
- "Finance, Performance and Investment Committee"** means a committee whose functions are concerned with the arrangements for the purpose of reviewing, monitoring and challenging the financial and operational performance and investments for which Lincolnshire Community Health Services NHS Trust has responsibility.
- 1.2.9 **"Commissioning"** means the process for determining the need for and for obtaining the supply of healthcare and related services by the Trust within available resources.
- 1.2.10 **"Committee"** means a committee or sub-committee created and appointed by the Trust.

- 1.2.11 **"Committee members"** means persons formally appointed by the Board to sit on or to chair specific committees.
- 1.2.12 **"Contracting and procuring"** means 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.
- 1.2.13 **"Director of Finance & Business Intelligence"** means the Director of Finance and Business Intelligence of the Trust.
- 1.2.14 **"Funds held on trust"** shall mean those funds which the Trust holds on date of incorporation, receives on distribution by statutory instrument or chooses subsequently to accept under powers derived under paragraph 14(2)(c) of Schedule 4 to the 2006 Act. Such funds may or may not be charitable.
- 1.2.15 **"Member"** means Executive Director or Non-Executive Director of the Board as the context permits. Member in relation to the Board does not include its Chair.
- 1.2.16 **"Associate Member"** means a person appointed to perform specific statutory and non-statutory duties which have been delegated by the Trust Board for them to perform and these duties have been recorded in an appropriate Trust Board minute or other suitable record.
- 1.2.17 **"Membership and Procedure Regulations"** means the National Health Service Trusts (Membership and Procedure) Regulations (SI 1990/2024) as amended from time to time.
- 1.2.18 **"NHS Improvement"** means the operational name for the organisation that brings together Monitor and the NHS Trust Development Authority.
- 1.2.19 **"Nominated officer"** means an officer charged with the responsibility for discharging specific tasks within Standing Orders and Standing Financial Instructions.
- 1.2.20 **"Non-Executive Director"** means a member of the Trust who is not an officer of the Trust and is not to be treated as an officer by virtue of regulation 5 of the Membership and Procedure Regulations.
- 1.2.21 **"Officer"** means employee of the Trust or any other person holding a paid appointment or office with the Trust.
- 1.2.22 **"Executive Director"** means a member of the Trust who is either an officer of the Trust or is to be treated as an officer by virtue of regulation 5 of the Membership and Procedure Regulations (i.e. the Chair of the Trust or any person nominated by such a Committee for appointment as a Trust member).
- 1.2.23 **"Secretary"** means 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 Trust's compliance with the law, Standing Orders, and Department of Health and NHS Improvement guidance. This role is currently performed by the Trust Board Business Manager.
- 1.2.24 **"SFIs"** means Standing Financial Instructions.

- 1.2.25 **"SOs"** means Standing Orders.
- 1.2.26 **"Vice-Chair"** means the Non-Executive Director appointed by the Board to take on the Chair's duties if the Chair is absent for any reason.
- 1.2.27 **"2006 Act"** means The National Health Service Act 2006, as amended from time to time.
- 1.2.28 **"Bailee"** refers to a person or organisation in possession (but not ownership) of another person's or organisation's property. In reference to the Scheme of Delegation, the Trust is the bailee of patient property and as such, has a duty to take reasonable care of this and return it in accordance with any express or implied contract of bailment.