NHS Devon Integrated Care Board

Scheme of Reservation and Delegation

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1. Introduction

1.1 Background

NHS England has set out the following as the four core purposes of Integrated Care Systems:

a) improve outcomes in population health and healthcare
b) tackle inequalities in outcomes, experience and access
c) enhance productivity and value for money
d) help the NHS support broader social and economic development.

The Integrated Care Board will use its resources and powers to achieve demonstrable progress on these aims, collaborating to tackle complex challenges, including:

- improving the health of children and young people
- supporting people to stay well and independent
- acting sooner to help those with preventable conditions
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources so people get care as quickly as possible.

ICBs are statutory bodies and as such their powers, functions and duties are conferred, in the main, by legislation. Additional responsibilities for other functions may be conferred through delegation to the ICB from other bodies (such as NHS England and NHS Improvement).

ICBs are able to delegate to a committee or sub-committee of the board, or to an individual member of the board or an employee. The legislation gives the ICB board flexibility to appoint to ICB committees and sub-committees members who are neither ICB employees nor board members. In addition, ICBS' have the power 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 Scheme of Reservation and Delegation (SoRD) sets out those decisions that are reserved to the ICB Board and those decisions that have been delegated to ICB Committees, individuals, joint committees and other statutory organisations.

2. **Decisions and functions reserved to NHSE/I**	**Reference**
2.1 The power to establish ICB	2006 Health Service Act
2.2 The power to obtain information from the ICB and intervene where NHS England is satisfied that the ICB is failing, or has failed, to discharge any of its functions or that there is a significant risk that it will fail to do so	S 14Z58 of NHS Act 2006 Constitution 1.4.8
2.3 Appointment of the ICB Chair	Constitution 3.3
2.4 Removal of the ICB Chair	Constitution 3.13.5
2.5 Terminate the appointment of the Chief Executive and direct the Chair as to the appointment of a replacement where NHSE is satisfied that the ICB is failing or has failed to discharge any of its functions or there is a significant risk that the ICB will fail to do so	Constitution 3.13.6
2.6 Approval of the ICB Constitution and any changes made to it	Constitution 1.5.2 and 1.5.3
2.7 Variation of the ICB Constitution other than on application by the ICB a) where the ICB applies to NHS England in accordance with NHS England's published procedure and that application is approved; and b) where NHS England varies the Constitution of its own initiative, (other than on application by the ICB).	Para 15 Schedule 1B NHS Act 2006 Constitution 1.6.1b
2.8 Remuneration of ICB Chair	Constitution 3.14.2

3. **Decisions and functions reserved to the ICB Board**	**Reference**
3.1 Determines the governance arrangements which allow decisions to be delegated to provider collaboratives, joint committees and/or other statutory bodies	65Z5 of the 2006 Act
3.2 Determines the governing arrangements of the ICB, ensuring meetings are held in public (except where the ICB considers it would not be in the public interest in relation to all or part of a meeting).	SO 4.11
3.3 ICB and each responsible local authority will establish an integrated care partnership (ICP) which includes members appointed by the ICB and each relevant authority, ensuring meetings are held in public in accordance with standing orders	Constitution 9.1.4 and SO 4.3.1
3.4 Consideration and approval of applications to NHS England on any matter concerning changes to the ICB's Constitution, including the Standing Orders	s14Z25 (5) and s1B NHS Act (2006) Constitution 1.6.1, and SO 2.3
3.5 Require and receive the declaration of interests from members of the ICB Board	s14Z30 NHS Act (2006) Constitution s6.3
3.6 Receive reports from committees that the ICB is required by statute or other regulation to establish and take action upon those reports as necessary	Constitution 4.6.4
3.7 Approve any urgent decisions taken by the chair of the ICB Board for ratification in public session	SO 4.9.4 – 4.9.6

3. **Decisions and functions reserved to the ICB Board**	**Reference**
3.8 Approve the ICBs overarching scheme of reservation and delegation, which sets out those decisions of the ICB reserved to the IBC Board and those delegated to the • committees and any joint committees of the ICB, or • its employees	Constitution 4.4
3.9 Approve Standing Financial Instructions (SFIs)	Constitution 5.2
3.10 Approve Functions and Decisions Map	Constitution 4.5
3.11 Appoint and dismiss committees of the ICB that are directly responsible to the Board	Constitution 4.6.1
3.12 Establish Terms of Reference and reporting arrangements for all of the committees of the Board	Constitution 4.6.3
3.13 Receive reports from committees of the ICB including those which the ICB is required by its Constitution, or by NHS England, or the Secretary of State or by any other legislation, regulations, directions or guidance to establish and to take appropriate action	Constitution 4.6.4
3.14 Confirm the recommendations of committees where committees do not have executive powers	Constitution 4.6.4
3.15 Delegate executive powers to be exercised by any of its members or employees	Constitution 4.3.1
3.16 Approval of the ICB Plan and annual operational plan, including financial duties	Constitution 7.3.8 14Z34 to 14Z45 and 223GB and 223M
3.17 Approval of the ICB's Annual Report and Accounts	Constitution 7.5

3. **Decisions and functions reserved to the ICB Board**	**Reference**
3.18 Approval of the arrangements for discharging the ICB's statutory financial duties.	Constitution 5.2
3.19 Approve arrangements, including supporting policies, to minimise clinical risk, maximise patient safety and to secure continuous improvement in quality and patient outcomes.	s14Z34 NHS Act (2006) Constitution 1.4.5, 1.4.7, 4.2.1, 4.2.2
3.20 Approval of the arrangements for discharging the ICB's statutory duties associated with its commissioning functions, including but not limited to promoting the involvement of each patient, patient choice, reducing inequalities, improvement in the quality of services, obtaining appropriate advice and public engagement and consultation.	Constitution 1.4.3, 1.4.5, 1.4.7,4.2.1, 4.2.2 Sections 3 3A of the Act 2006
3.21 Approval of the ICB's arrangements for the management of risk	Constitution 4.2.2
3.22 Approval of a comprehensive system of internal control, including budgetary control, that underpins the effective, efficient and economic operation of the ICB.	Recommendation by Audit & Risk Committee
3.23 Approval of the ICB's corporate budgets that meet the ICB's financial duties	Constitution 4.2.2
3.24 Approve arrangements 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.	Constitution 4.3.2
3.25 Approve arrangements for the functions to be exercised by a joint committee and/or for the establishment of a pooled fund to fund those functions (section 65Z6).	Constitution 4.3.2, 4.3.3

3. **Decisions and functions reserved to the ICB Board**	**Reference**
3.26 The exercise of Delegated Functions to empower the ICB to commission a range of primary care services, including dental (and prescribed dental), ophthalmic and pharmaceutical (and local pharmaceutical) services for the people of Devon as described in the Delegation Agreement and delegated by NHS England to the ICB	Recommendation by Primary Care Commissioning Committee Constitution 4.4.3 S65Z5 and S65Z6 NHS Act 2006
3.27 Establish effective, safe, efficient, and economic arrangements for the discharge of Delegated Functions as described in 3.26 above.	Recommendation by Primary Care Commissioning Committee Constitution 4.6.4 S65Z5 NHS Act 2006
3.28 Approving arrangements for handling complaints and ensuring publication of the process	Constitution 7.3.4
3.29 Approving arrangements for handling Freedom of Information requests.	Constitution 7.3.5
3.30 Approve the arrangements for discharging the ICB's statutory duties as an employer, including Human Resource and employment policies	Constitution 8
3.31 Endorse the ICB internal audit charter and annual audit plan on the recommendation of the ICB Accountable Officer and audit and risk committee	Recommendation from Audit Committee

3. **Decisions and functions reserved to the ICB Board**	**Reference**
3.33 Ensure that all the conditions and circumstances set out in ICB Standing Financial Instructions have been fully complied with	SFIs
3.34 Approve the ICB's arrangements for business continuity, and for emergency planning.	Civil Contingencies Act 2004

4. **Decisions and functions reserved to the ICB Chair**	**Reference**
4.1 Appointment of the Chief Executive (subject to approval of NHS England in accordance with any procedure published by NHS England)	Constitution 3.4
4.2 Approval of appointment of partner members of the ICB Board	Constitution 3.5 - 3.7 inc
4.3 Appointment of Independent Non-Executive members of the ICB Board	Constitution 3.11
4.4 Approval of appointment of Chief Medical Officer (Medical Director)	Constitution 3.8
4.5 Approval of appointment of Chief Nursing Officer (Director of Nursing)	Constitution 3.9
4.6 Approval of appointment of Chief Finance Officer (Director of Finance	Constitution 3.10
4.7 Approval of appointment of Mental Health Ordinary Member	Constitution 3.12.1
4.8 Ensure that the members of the Board possess the skills, knowledge and experience necessary for the Board to effectively carry out its functions	NHSE guidance

5. Decisions and functions delegated by the Board to the ICB Committees	
5.1 Decisions and functions delegated by the Board to the ICB Audit and Risk Committee	**Reference**
5.1a Establish an auditor panel as a sub group to ensure the contract arrangements, including the procurement and selection, with the External Auditors is appropriate	Committee Terms of Reference
5.1b Approve the appointment and removal of the ICBs Internal Auditors, the level of remuneration and terms of engagement	Committee Terms of Reference
5.1c Endorse and recommend the ICB internal audit charter and annual audit plan, to the ICB board	Committee Terms of Reference
5.1d Review the adequacy and effectiveness of the ICB's system of integrated governance, risk management and internal control across the whole of the ICB's activities	Committee Terms of Reference
5.1e Ensure there is an effective internal audit function including; costs of audit services, performance of service, review and approval of the annual internal audit plan, the findings of audit work including the Head of Internal Audit Opinion and management responses to these, adequate resourcing of the function.	Committee Terms of Reference
5.1f Review the work and findings of the External Auditor and management responses	Committee Terms of Reference
5.1g Review schedules of losses and compensations and make recommendations to the Board	Committee Terms of Reference
5.1h Review the annual report and financial statements prior to submission to the Board	Committee Terms of Reference

5.1i To be assured that the ICB has adequate arrangements in place for the counter fraud, bribery and corruption (including cyber security) that meet NHS Counter Fraud Authority's (NHSCFA) standards and shall review the outcomes of work in these areas.	Committee Terms of Reference
5.1j To be assured that the ICB has adequate arrangements in place for Freedom to Speak Up	Committee Terms of Reference
5.1k To be assured that the ICB has adequate arrangements in place for Information Governance, including appropriate safekeeping and confidentiality of records and storage, management and transfer of information and data	Committee Terms of Reference
5.1l To monitor the integrity of financial statements of the ICB and any formal announcements relating to its financial performance, ensure systems for financial reporting to the Board are subject to review	Committee Terms of Reference
5.1m To be assured that the ICB has adequate arrangements for the management of declared interests and conflicts of interest, including gifts and hospitality	Committee Terms of Reference
5.1n To approve the operational scheme of reservation and delegation	Committee Terms of Reference

5.2 Decisions and functions delegated by the Board to the ICB Remuneration and Internal ICB Workforce Committee	**Reference**
5.2a Determine all aspects of remuneration for the Chief Executive, Directors and other Very Senior Managers including but not limited to salary, (including any performance-related elements) bonuses, pensions and cars	17 to 19 of Schedule 1B NHS Act 2006 s3.14.1 Constitution Committee Terms of Reference

5.2b Determine arrangements for termination of employment and other contractual terms and non-contractual terms for the Chief Executive, Directors and other Very Senior Managers	17 to 19 of Schedule 1B NHS Act 2006 Constitution 3.13 and 3.14 Committee Terms of Reference
5.2c Agree terms of appointment for ICB Board members	Constitution 3.14 Committee Terms of Reference
5.2d Determine the ICB pay policy for all staff	17 to 19 of Schedule 1B NHS Act 2006 Committee Terms of Reference
5.2e Oversee contractual arrangements for all staff including approval of policies relating to contractual Terms and Conditions.	17 to 19 of Schedule 1B NHS Act 2006 Committee Terms of Reference
5.2f Determine arrangements for termination payments and any special payments for all staff	17 to 19 of Schedule 1B NHS Act 2006 Committee Terms of Reference
5.2 g Ensure that the ICB is meetings its obligations in relation to reporting on workforce issues including (but not limited to) senior pay and equality and diversity (including gender equality) and WRES reporting.	Committee Terms of Reference

5.3 **Decisions and functions delegated by the Board to the ICB Finance** and Performance Committee	**Reference**
5.3a Develop and recommend to the ICB Board a medium and long term ICB and ICS financial plan	Committee Terms of Reference
5.3b Develop and recommend to the ICB the strategic financial framework of the ICB and the ICS.	Committee Terms of Reference
5.3c Develop and recommend to the ICB Board non-programme budgets.	Committee Terms of Reference
5.3d Develop and recommend to the ICB Board resource allocation approach	Committee Terms of Reference
5.3e Consider business cases for major investments / disinvestments for material service change or efficiency schemes and make recommendations to the ICB Board.	Committee Terms of Reference
5.3f Recommend the Digital Strategy to the ICB Board for approval.	Committee Terms of Reference
5.3g Recommend the Green Plan to the ICB Board for approval.	Committee Terms of Reference
5.3h Approve recommendation for the deployment of improvement support across the One Devon system.	Committee Terms of Reference
5.3i Make recommendations to the ICB Board on the application of strategic and operational capital funding.	Committee Terms of Reference

5.3j Report system capital programme performance to the ICB Board, highlighting areas of concern.	Committee Terms of Reference
5.3k Report ICB and ICS financial performance to the ICB Board, highlighting areas of concern.	Committee Terms of Reference

5.4 Decisions and functions delegated by the Board to the ICB Quality and Patient Experience Committee	**Reference**
5.4a Provide assurance that there are robust processes in place for the effective management of all elements of quality (safety, effectiveness, positive experience, well-led and sustainable, and equitable).	Committee Terms of Reference
5.4b Develop and recommend to the ICB Board the key outcomes, quality and performance priorities to be included within the ICB strategy/ annual plan, including priorities to address variation/ inequalities in care	Committee Terms of Reference
5.4c Have oversight of and approve the Terms of Reference and work programmes for the groups reporting into the Quality Committee (eg System Quality Groups, Infection Prevention and Control, Safeguarding Boards / Hubs etc)	Committee Terms of Reference

5.5 Decisions and functions delegated by the Board to the ICB People and Culture Committee	**Reference**
5.5a Develop and recommend to the ICB Board approval of the workforce strategy	Committee Terms of Reference
5.5b Approve annual people plan priorities	Committee Terms of Reference

5.5c Recommend approval to the ICB Board of the annual workforce and education plans	Committee Terms of Reference
5.5d Provide assurance and identify areas of risk and mitigation in regards people and culture	Committee Terms of Reference
5.5e Provide assurance that the ICB and wider system are taking appropriate and sufficient action to recruit and maintain a diverse workforce	Committee Terms of Reference
5.6 Decisions and functions delegated by the Board to the ICB Primary Care Commissioning Transition Committee	**Reference**
5.6a Oversee transition of all types of primary care commissioning, including dental (and prescribed dental), ophthalmic and pharmaceutical (and local pharmaceutical) services, such that is integrated with other ICB systems and processes	Committee Terms of Reference
5.6b Primary Care commissioning expenditure: All services, including business cases; final service specifications; procurement recommendations; contract award (CARRs) to be approved by Primary Care Commissioning Transition Committee in accordance with Standing Financial Instructions and Operational Scheme of Delegation.	Committee Terms of Reference
5.6c Decisions in relation to the commissioning, procurement, management, planning (including carrying out needs assessments), and undertaking reviews, of Primary Medical Services, including dental (and prescribed dental), ophthalmic and pharmaceutical (and local pharmaceutical) services, and other ancillary activities that are necessary to exercise the delegated functions	Committee Terms of Reference
5.6e Co-ordinating a common approach to the commissioning and delivery of Primary Medical Services, including dental (and prescribed dental), ophthalmic and pharmaceutical (and local pharmaceutical) services, with other health and social care bodies	Committee Terms of Reference
5.6f Design and commission Enhanced Services, including re-commissioning of services (in line with the ICB SFIs (put in reference)	Committee Terms of Reference

5.6g Design and offer Local Enhanced Schemes for Primary Medical Services providers including those for dental (and prescribed dental), ophthalmic and pharmaceutical (and local pharmaceutical) services	Committee Terms of Reference
5.6h Make decisions on discretionary payments or support in accordance with Standing Financial Instructions and Operational Scheme of Delegation.	Committee Terms of Reference
5.6j Approve Primary Medical Services provider mergers and closures	Committee Terms of Reference
5.6k Make decisions in relation to the management of Poorly Performing Medical Services Providers	Committee Terms of Reference
5.6l Make decisions in relation to the Premises Costs Directions Function	Committee Terms of Reference
5.6s Prepare a Primary Care Strategy and make recommendation to the Board for approval.	

5.7 Decisions and functions delegated by the Board to the Clinical and Professional Cabinet	**Reference**
As a principle, ICS Devon will ensure that key items for consideration at the Board will have already been presented to the CPC who will provide assurance on firstly whether sufficient clinical and professional input has occurred in the planning and design process and secondly give a senior clinical and professional opinion on the decisions the Board is required to make	Committee Terms of Reference

6. Decisions and functions delegated to individual board members and employees

Chief Medical Officer (as per constitution Medical Director)
Chief Finance Officer (as per constitution Finance Director)
Chief Nursing Officer (as per constitution Director of Nursing)

Individual	Decisions and functions delegated to the individual	Reference
Chief Executive Officer	Convening a panel to advise on the appointment of ICB Board ordinary members	Constitution 3.5 - 3.12 inc
Chief Executive Officer	Endorse and recommend the ICB internal audit charter and annual audit plan to the audit and risk committee and the ICB Board.	SFIs
Chief Executive Officer	Exercise of those functions of the ICB which have not been retained or reserved by the Board or delegated to its Committees or to any other named individual set out in the document	N/A
Chief Executive Officer	Approve arrangements for complying with the NHS Provider Selection Regime	Constitution 7.4.3
Chief Executive Officer and Chief Finance Officer	Ensuring all the conditions and circumstances set out in ICB Standing Financial Instructions have been fully complied with	SFIs

7. Decisions and functions delegated to be exercised jointly

Joint Committee	Decisions and functions delegated to the joint committee	Reference
Ambulance Joint Commissioning Committee	Approval of commissioning decisions relating to Ambulance Services in accordance with its powers under section 14Z3 and 14Z4 of the National Health Service Act 2006 (as amended) ("NHS Act") NHS Devon CCG ("the CCG") has approved the establishment of the Ambulance Joint Commissioning Committee ("AJCC") and has delegated the exercise of the emergency ambulance functions as specified in the Delegation to the AJCC	Ambulance Joint Commissioning Committee (AJCC) Terms of Reference

OPERATIONAL SCHEME OF DELEGATION

This schedule of matters delegated to officers (operational scheme of delegation) has been developed in conjunction with the organisation's Standing Financial Instructions and will provide guidance for the ICB. This document should be used in conjunction with the ICB Scheme of Reservation and Delegation, the difference being that this document lays down operational financial limits to the authority of the ICB and others to commit or approve expenditure on behalf of the ICB. Delegated matters in respect of decisions which may have a far-reaching effect must be reported to the Chief Executive Officer.

The delegation shown below is the lowest level to which authority is delegated. Authority can be delegated upwards with no further action being required. However, delegation to lower levels is only permitted with written approval of the Chief Executive Officer. Decision making with a financial impact must be carried out in accordance with the ICB's Standing Orders, Prime Financial Policies and detailed financial procedures. All financial limits in this schedule of matters delegated to officers are subject to sufficient budget being available.

The Standing Financial Instructions set out the financial responsibilities of the Chief Executive the Chief Finance Officer (CFO) and other Executive Directors of the ICB.

The Scheme of Delegation covers only matters delegated by NHSE/I to the ICB and those matters reserved for the ICB Board its committees, Executive officers and/or Partners.

Further delegation may be approved:

a) by the ICB Board in approving specific management policies
b) by the ICB Chief Executive
c) as part of Financial Procedures approved by the Chief Finance Officer (CFO)

Each Executive Director will need to consider the arrangements for authorisation of expenditure against delegated budgets and further delegation of management/professional responsibilities.

In accordance with The Scheme of Delegation the ICB Board exercises financial supervision and control by:

a) Authorising the operational plan;
b) Requiring the submission and approval of budgets within approved allocations / overall income;
c) Defining and approving essential features in respect of important procedures and financial systems (including the need to obtain value for money); and

d) Defining specific responsibilities placed on members of the ICB Board, its Committees, Partners and employees as indicated in the Scheme of Delegation.

Once the ICB Board, has reviewed and approved the Operating Plan and any supporting financial plan / budget, the Board, will delegate approval to the Chief Executive; the Chief Finance Officer and other Executive Directors and employees to commit these resources for the purpose set out in the plan subject to the financial thresholds set out in this operational scheme of delegation.

Ref	Matters delegated	Delegated to
1	**Bank accounts** (a) Opening bank accounts or procuring banking services in accordance with mandates approved by the Governing Body (b) Addition or removal of signatories to bank accounts	(a) CFO (b) CFO or authorised signatory to the bank accounts (in accordance with the bank account mandated authorities)
2	**Business cases – new commitments outside of delegated budgets** (a) up to £250,000 (b) up to £500,000 (c) £500,001 and above	(a) Senior Executive Team (SET) member and Associate Director of Finance (ADOF) (b) Senior Executive Team (SET) (c) Full business case for ICB approval
3	**Commissioning expenditure in line with delegated budgets for the commissioning of services –** (a) up to £250,000 (b) up to £500,000 (c) £500,001 and above	(a) Delegated budget holder (b) SET member or Associate Director of Finance (ADOF)

		(c) CFO, or, CEO or Director with responsibility for Commissioning of services
4	**Administrative Spend on Goods and Services (Non Commissioning Spend) – Limits for Requisition and/or Invoice approval of delegated budget** (a) up to £500 (b) up to £15,000 (c) up to £50,000 (d) up to £250,000 (e) from £250,001	(a) Designated personal assistants (b) Designated business manager (c) Delegated budget holder (d) SET member (e) Senior Executive Team
5	**Capital schemes including finance leases** (a) up to £500,000 (b) from £500,001 to £2,000,000 (c) over £2,000,000	(a) CFO (b) Finance Committee (c) ICB
6	**All Legal Costs**	Approval through legal advice request form and approved by a relevant Executive. These requests are administered by the governance team

7	**Condemning and disposal** (a) Condemning or disposal of unserviceable items (other than IT equipment) with an estimated replacement cost: (i) up to £100 (ii) £101 to £5,000 (iii) £5,001 and above (b) Condemning or disposal of all unserviceable IT equipment	(a)(i) Designated budget holder (a)(ii) ADOF (a)(iii) CFO (b) Senior Executive Team member responsible for IT
8	**Petty Cash** Petty cash float replenishment up to £500 per week	ADOF
9	**Losses, write-offs and compensation** (a) Losses of cash due to theft, fraud, overpayment etc. – up to £50,000 (b) Fruitless payments (including abandoned capital schemes) – up to £250,000 (c) Write-off or bad debts up to £10,000 (d) Claims abandoned and other – up to £50,000 (e) Damage to buildings, fittings, furniture and equipment, loss of property and equipment in stores or in use due to culpable causes (fraud, theft, arson etc.) – up to £50,000	(a) to (e) CFO or CEO/AO

10	(f) Compensation payments made under legal obligation (excluding clinical negligence) – up to £50,000 (g) Extra contractual payments to contractors – up to £50,000 (h) Ex-gratia payments to staff for loss of personal effects: (i) up to £100 (ii) £101-£500 (iii) above £501 (i) Ex gratia payments for personal injury claims involving negligence where legal advice obtained and followed (j) Other ex gratia payments except cases of maladministration where there was no financial loss to the claimant (k) Any of the above (a) – (j) limits exceeded	(f) to (g) CFO or CEO (h)(i) Designated budget holder (h)(ii) Senior Executive Team member (h)(iii) CFO or CEO (i) CFO or CEO (j) CFO or CEO (k) ICB Board
11	**Verification and High Cost Panel Decisions regarding individual packages of care** (a) Up to £1,000 per week (b) Up to £1,600 per week (c) From £2,000 per week (d) Up to £2,200 (e) Up to £2,500 per week	(a) Quality Assurance Practitioner/ CHC lead Nurse (b) Quality Assurance Lead Nurse or Senior Commissioning Manager individually per week (c) With two band 8a staff of the same or a higher banding (d) Band 8b with one band 8a or higher (e) Head of Quality Assurance

	(f) Up to £6,000 per week (g) Above £6,001 per week **Urgent placements:** Crisis Response Requests (48hr period) until information gathered – (b) above with update and review by (c) and full panel application if required.	(f) Individual Package of Care (IPOC) Panel (g) CNO **and** CFO or CEO or Director of Commissioning

AUTHORISATION OF INVOICES

Individual officers within the ICB have the authority to authorise invoices in the Oracle Finance system in line with the financial scheme of delegation detailed above

(a) up to £500 (band 3-4)

(b) up to £15,000 (band 5-6)

(c) up to £50,000 (band 7-8)

(d) over £50,000 (band 9 or VSM)