

**Standing Financial Instructions**

Agreed and approved by the

NHSBSA Board on 18 September 2025

Due for review in January 2026

**Issue Sheet**

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| Document reference | GRA 007 |
| Document location | Governance, Risk and Assurance (My Hub)  NHSBSA Governance Framework (Website) |
| Title | Standing Financial Instructions (SFIs) |
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| Owner | M Brodie |
| Issued to | The Hub / NHSBSA Staff / NHSBSA Website |
| Reason issued | For action |
| Last reviewed | 18/09/2025 |
| Date of Wellbeing and Inclusion Analysis | 03/10/2024 |
| Date of Accessibility Review | 26/08/2025 |

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| --- | --- | --- | --- | --- |
| **Version** | **Date** | **Amended by** | **Approved by** | **Details of amendments** |
| 1 | 29/09/2022 | A Maving, S Sunderland | NHSBSA Board | Annual review and addition of corporate cover sheet. Minor changes including: defined terms, credit card process and approval of asset sale and disposal. |
| 2 | 14/09/2023 | T Neal, S Sunderland | NHSBSA Board | Annual review. Responsibility for credit card process amended to be Executive Director of Finance and Commercial Services. Appendix 1 altered to have higher approval thresholds with Main Board threshold changed to £3m from £1m. |
| 3 | 17/09/2024 | A Maving, S Sunderland | NHSBSA Board | Annual review. Minor changes including reference to Procurement Legislation, and clarification of the MOU approval threshold for Board. |
| 4 | 18/09/2025 | T Neal, H Hughes, K Wilkie | NHSBSA Board | Annual review. Minor amendments to phrasing and titles to reflect changing roles in Leadership Team. Role of the Remuneration and Nominations Committee in senior appointments and redundancies included in new paragraphs 9.2.3 and 9.3.7. New section added (13.9) to cover Estates. Amendments to section 16 and new paragraphs 16.1.6 and 16.1.7. |

Contents

[1. Defined Terms 5](#_Toc206055449)

[2. Introduction 7](#_Toc206055450)

[3. Preparation, approval and control of the business plan, budgets and estimates 11](#_Toc206055453)

[4. Annual Report and Accounts 13](#_Toc206055454)

[5. Banking arrangements 13](#_Toc206055455)

[6. Capital investment, asset registers and security of assets 14](#_Toc206055456)

[7. Stock control 17](#_Toc206055460)

[8. Security of cash, cheques, credit cards and other negotiable instruments 17](#_Toc206055461)

[9. Payment of staff 18](#_Toc206055463)

[10. Payment of accounts 21](#_Toc206055468)

[11. Income 22](#_Toc206055469)

[12. Disposal or sale of assets/inventory items 22](#_Toc206055474)

[13. Buying supplies, works, leases and services 23](#_Toc206055475)

[14. Internal Audit 28](#_Toc206055486)

[15. Losses and special payments 29](#_Toc206055487)

[16. Counter Fraud and Security Management 31](#_Toc206055488)

[17. Standards of business conduct 32](#_Toc206055490)

[18. External audit 32](#_Toc206055491)

[Appendix 1- NHSBSA Scheme of Delegation from Standing Financial Instructions 33](#_Toc206055492)

# Defined Terms

1. Any expression to which a meaning is given in the National Health Service Act 2006 (the Act) or in any NHSBSA Directions shall have the same meaning in these instructions; and:
2. “Accounting Officer” means the NHS officer responsible and accountable for funds entrusted to the NHS Business Authority (NHSBSA). They shall be responsible for ensuring the proper stewardship of public funds and assets. The Accounting Officer for the NHSBSA is the Chief Executive.
3. “Accounting Officer Assessment” is as defined by government guidance  [([Accounting officer assessments: guidance (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645068/Accounting_officer_assessments_guidance.pdf))](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645068/Accounting_officer_assessments_guidance.pdf)"
4. “ARC” means the Audit and Risk Management Committee which is a non-executive committee of the Board that provides an independent and objective review of the adequacy and effectiveness of the NHSBSA’s Assurance Framework.
5. “Asset Owner” refers to a person who is responsible or accountable as part of their role for an asset or group of assets, such as but not limited to the end-user device technology estate. This person may be different from the Budget Holder or Budget Manager.
6. “Board” means the Chair, Non-Executive Directors and Executive Directors of the NHSBSA collectively as a body.
7. "Budget" means an amount of resources expressed in financial terms proposed by the NHSBSA for the purpose of carrying out ‘over a specific period’ all or part of the functions of the NHSBSA.
8. "Budget Holder" means an officer to whom the Accounting Officer has delegated a budget.
9. "Budget manager" refers to an officer to whom a budget holder has delegated responsibility for management of a budget.
10. “Business Asset Register” refers to a register or record of assets used by the business such as a property lease register or technology infrastructure or system register.
11. “Contract Award Report” means the report required by Commercial Services for new contracts to be awarded in line with agreed procurement processes.
12. "Chief Executive" means the Chief Officer of the NHSBSA (who is directly accountable to the NHSBSA).
13. “DHSC” means the Department of Health and Social Care.
14. “Directed Functions” means those services that the NHSBSA is directed to reimburse by DHSC including, but not limited to, dispensing contractors, dentists, NHS pensioners and students.
15. “EL (94) 40” means the accountable officer memorandum for Chief Executive Officers in the NHS.
16. “Chief People Officer means the officer charged with responsibility for the NHSBSA’s governance, compliance and assurance.
17. “Finance Procedure Notes” means the written, working documents that set out the processes to be followed in relation to financial matters in NHSBSA.
18. “Fixed Asset Register” refers to the record of all the business’ financial fixed assets and is used to support financial reporting requirements such as the Annual Report and Accounts. This would typically include the original cost of the asset, its current value, its location, the Asset Owner and anything else the business feels is relevant.
19. “FReM” means the Financial Reporting Manual issued by HM Treasury.
20. “GBS” means the Government Banking Service.
21. “Leadership Team” is the senior management team comprising the Chief Executive, Directors, Chief Officers and other designated senior managers of the NHSBSA.
22. “LSMS” means the Local Security Management Specialist employed by NHSBSA.
23. “NAO” means National Audit Office, the body that scrutinises public spending for Parliament.
24. “NHS Finance Manual” means the current DHSC Group Accounting Manual.
25. "Officer" means employee of the NHSBSA or any other person holding a paid appointment or office with the NHSBSA.
26. “Procurement Legislation” means the prevailing legislation, Public Contracts Regulations (2015) and/or the Procurement Act 2023.
27. “Policies and Procedures” means the operational processes in place within the NHSBSA at any point in time.
28. “Procurement Operating Procedures” means the operating procedures put in place by the Chief Finance Officerfrom time to time.
29. “Register of Business Interests” means the register maintained by NHSBSA HR which details standards of Business Conduct returns, interest in other businesses (including additional employment) and gifts and hospitality.
30. “Schedule of Delegation” means the authority delegated by the DHSC to Arm’s Length Bodies.
31. “Scheme of Delegation” means the authority delegated by the Board to the Chief Executive and officers of NHSBSA, set out in Appendix 1.
32. “SOs” means the NHSBSA’s official standing orders as defined by the Board.
33. “MOUs”, or “Memorandums of Understanding”, mean the documents that record the common intent and agreement between two parties. They define the working relationships and guidelines between collaborating groups or parties. This includes Provision of Services Agreements (POSA) and Service Level Agreements (SLA).
34. ‘Delegated Officer’ means the relevant Chief Officer and/or their direct reports only.

# Introduction

## **2.1 General**

* + 1. These Standing Financial Instructions (SFIs) are issued in accordance with the Financial Directions issued by the Secretary of State for Health and Social Care under the National Health Service Act 2006 for the regulation of the conduct of the NHSBSA in relation to all financial matters. They shall have effect as if incorporated in the SOs of the NHSBSA. These SFIs refer to the financial transactions for the administration of the NHSBSA only.
    2. These SFIs detail the financial responsibilities adopted by the NHSBSA and are supported by the NHSBSA’s policies and procedures. They are designed to ensure that the NHSBSA’s financial transactions are carried out in accordance with the law and Government policy, (including Managing Public Money), in order to achieve probity, accuracy, economy, efficiency and effectiveness. They should be used in conjunction with the Scheme of Delegation and SOs of the NHSBSA.
    3. These SFIs identify the financial responsibilities that apply to everyone working for the NHSBSA. They do not provide detailed procedural advice and should be read in conjunction with the NHSBSA’s policies and procedures which are available on the NHSBSA intranet. The user of these SFIs must also take into account relevant prevailing DHSC and/or Treasury instructions. The Chief Finance Officeris accountable for all financial procedures.
    4. Should any difficulties arise regarding the interpretation or application of any of the SFIs, the advice of the Chief Finance Officer must be sought before acting. The user of these SFIs should also be familiar with and comply with the NHSBSA’s SOs.
    5. Failure to comply with SFIs and SOs can, in certain circumstances, be regarded as a disciplinary matter that could result in dismissal.
    6. If for any reason these SFIs are not complied with, full details of the non- compliance and any justification for non-compliance shall be reported to the next formal meeting of the ARC for referring action or ratification. All members of the Board, and all colleagues, have a duty to disclose any non-compliance with these SFIs to the Chief Finance Officer as soon as possible.
    7. Wherever the title Chief Finance Officer, or other nominated officer is used in these instructions, it shall be deemed to include such other directors or employees who have been duly authorised to represent them (as per their Directorate Scheme of Delegation), except in respect of Banking Arrangements (See Section 5).

## **2.2 Responsibilities and delegation**

**2.2.1 The Board**

1. The Board exercises financial supervision and control by:
2. approving the Business Plan
3. requiring the submission and approval of budgets within allocations
4. defining and approving essential features of financial arrangements in respect of important procedures and financial systems, including the need to obtain value for money
5. defining specific responsibilities placed on members of the Board and officers as indicated in the Scheme of Delegation.
6. The NHSBSA has resolved that certain powers and decisions may only be exercised by the Board. These are set out in the Matters Reserved to the Board (Board Terms of Reference).
7. The Board shall delegate executive responsibility for the performance of its functions to the Chief Executive who shall retain overall responsibility for all its activities.

**2.2.2 The Chief Executive**

1. Within the SFIs it is acknowledged that the Chief Executive, as Accounting Officer, will have ultimate responsibility for ensuring that the NHSBSA meets its obligation to perform its functions within the financial resources made available to it. The Chief Executive has overall executive responsibility for the NHSBSA's activities and is responsible to the Board for ensuring that it stays within its resource and cash limits.
2. The Chief Executive will delegate detailed responsibility for financial activities and controls to the Chief Finance Officer but retain overall accountability. The extent of such delegation will be determined in the NHSBSA’s Scheme of Delegation and should be kept under review by the Board.
3. The Chief Executive, through the Chief Finance Officer, shall be responsible for the implementation of the NHSBSA's financial policies and for coordinating any corrective action necessary to further these policies.
4. It shall be the responsibility of the Chief Executive through the Chief Finance Officer to ensure that existing officers and all new employees are notified of their responsibilities within these instructions.
5. In addition to the above, budget holders, budget managers and officers who are involved in dealing directly with contractors/suppliers are required to confirm that they have read and understood the SFIs and SOs.

**2.2.3 The Chief Finance Officer**

1. The Chief Finance Officer is responsible for:
2. implementing the NHSBSA’s financial policies and for coordinating any corrective action necessary to further these policies.
3. maintaining an effective system of financial control including ensuring that detailed financial procedures and systems incorporating the principles of separation of duties and internal checks are prepared, documented and maintained to supplement these instructions.
4. ensuring that sufficient records are maintained to show and explain the NHSBSA’s transactions, in order to disclose, with reasonable accuracy, the financial position of the NHSBSA at any time.
5. managing the NHSBSA’s approach to fraud and physical security.
6. the provision of advice on the financial position of the NHSBSA to the Board and relevant officers, including Accounting Officer Assessments, and key external stakeholders (DHSC);
7. the design, implementation and supervision of systems of internal financial control; and
8. the preparation and maintenance of such accounts, certificates, estimates, records and reports as the NHSBSA may require for the purpose of carrying out its statutory duties.
9. Ensuring an adequate process is in place to support use of the NHSBSA’s credit card.

**2.2.3.3** The Chief Finance Officer shall require, in relation to any officer who carries out a financial function, that the form in which the records are kept and the manner in which the officers discharge their duties shall be to their satisfaction.

**2.2.3.4** The Chief Finance Officer will ensure money drawn from the DHSC against cash limited and non-cash limited funds is required for approved expenditure only, and is drawn only at the time of need.

**2.2.4 The Chief People Officer**

1. The Chief People Officer is responsible for:
2. an annual review of these SFIs as part of the NHSBSA’s wider corporate governance framework
3. production of the NHSBSA’s Annual Report
4. supporting the Chief Finance Officer as required with procurement processes
5. maintaining a register of interests, gifts and hospitality for NHSBSA Board members
6. maintaining a register of interests, employment, gifts and hospitality for NHSBSA employees
7. overseeing the internal and external audit arrangements; and
8. overseeing information governance and security as Senior Information Risk Officer (SIRO).

**2.2.5 Board Members, Leadership Team and all colleagues**

All members of the Board, Leadership Team and colleagues, individually and collectively, are responsible for:

1. the security of the property of the NHSBSA
2. avoiding loss
3. exercising economy, efficacy and efficiency in the use of resources
4. conforming with the requirements of the NHSBSA’s SOs, SFIs, Scheme of Delegation and financial procedures. It shall be the duty of any officer having evidence of, or reason to, suspect financial or other irregularities or impropriety in relation to these regulations to report these suspicions directly to the NHSBSA Loss and Fraud Prevention (LFP) team for investigation or via the NHSBSA Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy. You should not conduct a detailed investigation yourself as this may compromise any investigation by the NHSBSA LFP Team.

**2.2.6 Audit and Risk Management Committee (ARC)**

1. In accordance with SOs (and as set out in guidance issued by the DHSC under EL (94) 40), the NHSBSA shall establish an ARC. The terms of reference of the ARC shall be reviewed and approved by the Board annually and are incorporated in the SOs. The ARC will provide an independent and objective view of internal control by overseeing internal and external audit services; reviewing financial systems, ensuring compliance with SOs and SFIs; reviewing schedules of losses and compensations and making recommendations to the Board.
2. Where the ARC considers there is evidence that something was done outside of the organisation’s legal powers, that something improper has taken place, or if there are other important matters that the Committee wish to raise, the Chair of the ARC should raise the matter in the first instance with the Chief Finance Officer and the Chief Executive. If the matter has still not been resolved to the ARC's satisfaction, then the matter will be raised at a full meeting of the Board.

# Preparation, approval and control of the business plan, budgets and estimates

1. The NHSBSA has a responsibility to prepare and submit financial plans in accordance with the requirements of the DHSC or appropriate body. It shall perform its functions within the total of funds allocated or approved by the Secretary of State for Health and Social Care allowing for any planned changes in working balances during the year. All plans, financial approvals and control systems shall be designed to meet this obligation.
2. The Chief Finance Officer shall ensure that the financial details contained within the service agreements of contracts and MOUs entered into by the NHSBSA are consistent with the requirement to balance income and expenditure; and they shall ensure that adequate statistical and financial systems are in place to facilitate the compilation of estimates, forecasts and investigations as may be required from time to time.
3. The Chief Executive will compile and submit to the NHSBSA Board an annual business plan which considers financial targets and forecast limits of available resources. The annual business plan will contain a statement of the significant assumptions and risks on which the plan is based and details of major changes in workload, delivery of services or resources required to achieve the plan.
4. The Chief Finance Officer shall, in consultation with budget holders and budget managers, compile such financial estimates and forecasts, on both revenue and capital accounts, as may be required from time to time by the NHSBSA.
5. The Chief Finance Officer will ensure that money drawn from the DHSC against the resource and cash limit is required for approved expenditure only and is drawn only at the time of need in line with the DHSC’s timetable.
6. The Chief Finance Officer shall, on behalf of the Chief Executive, prepare and submit budgets within the limits of available funds to the NHSBSA for its approval prior to the commencement of each financial year.
7. The Chief Finance Officer must review the basis and assumptions used to prepare the budget and advise the NHSBSA that, to the best of their knowledge and understanding, they are realistic. In order to be able to fulfill this responsibility, the Chief Finance Officer shall have right of access to all budget holders on budgetary related matters. Such budgets should relate to income and expenditure in that year and shall have supporting statements in order to explain any matter material to the understanding of those budgets, covering all revenue and capital items. Alterations to budgets may be requested in line with guidance issued by the Chief Finance Officer.
8. The Chief Finance Officer shall monitor financial performance against budgets and business plans, periodically review them and report to the NHSBSA on the NHSBSA’s position against these targets. All budget holders and managers must provide information as required by the Chief Finance Officer to enable budgets to be compiled and monitoring reports to be prepared.
9. The Chief Finance Officer shall be responsible for ensuring that an adequate system of monitoring financial performance is in place to enable the NHSBSA to fulfill its statutory responsibility to meet its annual Revenue and Capital Resource Limits.
10. The Chief Finance Officer will devise and maintain systems of budgetary control. These will include:
11. regular financial reports to the Board in a form approved by the Board
12. the issue of timely, accurate and comprehensible advice and financial reports to each budget holder, covering the areas for which they are responsible
13. investigation and reporting of variances from financial, workload and workforce budgets
14. monitoring of management action to correct variances; and
15. arrangements for the authorisation of budget transfers.
16. The Chief Executive may, in line with the Scheme of Delegation, delegate responsibility for a budget or part of a budget to operational managers to permit the performance of defined activities. The terms of delegation shall include a clear definition of individual and group responsibilities for control of expenditure, achievement of planned levels of service and the provision of regular reports upon the discharge of these delegated functions to the Chief Executive.
17. Each budget holder is responsible for ensuring that:
18. spending remains within the sum of their delegated budget, by monitoring the budget and taking appropriate corrective action to address over/underspending
19. any likely overspending or reduction of income is not incurred without the prior consent of the Chief Executive
20. contracts for goods, supplies and services are awarded in accordance with the Procurement Legislation and these SFIs.
21. Except where otherwise approved by the Chief Executive, taking account of advice from the Chief Finance Officer, budgets shall be used only for the purpose for which they were provided and any budgeted funds not required for their designated purposes shall revert to the immediate control of the Chief Executive.
22. Expenditure for which no provision has been made in an approved budget shall be incurred only after authorisation by the Chief Executive.
23. The Chief Finance Officer shall keep the Chief Executive informed of the financial consequences of changes in policy, pay awards and other events and trends affecting budgets and shall advise on the financial and economic aspects of future plans and projects.
24. By virtue of subsection 7(a) of Section 97A of the Act any sums received on behalf of the Secretary of State for Health and Social Care in respect of:
25. charges payable by or under any enactment (other than those arising under part II of the Act); and
26. any other income, including rents and profits from land and from sales of land, are specified for the purposes of this section as sums received by NHSBSA under the Act in the appropriate financial year.
27. The Chief Executive is responsible for ensuring that the appropriate financial monitoring forms are submitted to the requisite monitoring organisation.

# Annual Report and Accounts

1. The Chief Finance Officer and the Chief People Officer , on behalf of the Chief Executive and the NHSBSA, shall prepare, and submit the Annual Report and Accounts, certified by the Accounting Officer, to the Secretary of State for Health and Social Care in respect of each financial year in such a form as the Secretary of State for Health and Social Care directs.
2. The Annual Report and Accounts and financial returns shall be prepared in accordance with the guidance given by the DHSC, the Treasury, and the NHSBSA’s accounting policies. The Annual Report and Accounts shall be laid before parliament, in accordance with the Accounts Directions and the timetable prescribed by the DHSC.

# Banking arrangements

1. The Chief Finance Officer is responsible for managing the NHSBSA’s banking arrangements and for advising the Board on the provision of banking services and operation of accounts. This advice will take into account guidance issued by DHSC and Managing Public Money published by HM Treasury. This guidance recommends only using commercial accounts where the required services are not provided by the GBS or where better value for money for the Exchequer overall can be demonstrated.
2. The ARC, on behalf of the Board, shall approve the banking arrangements as required.
3. The Chief Finance Officer is responsible for:
4. commercial and GBS accounts
5. establishing separate bank accounts
6. ensuring payments made from commercial and GBS accounts do not exceed the amount credited to the account except where arrangements have been made
7. monitoring compliance with DHSC guidance on the level of cleared funds in commercial accounts.
8. The Chief Finance Officer will prepare detailed instructions on the operation of commercial bank and GBS accounts which must include:
9. the conditions under which each account is operated, and
10. those allowed to authorise both manual and electronic banking transactions and instructions.
11. The Chief Finance Officer must advise the NHSBSA’s bankers in writing of the conditions under which each account will be operated.
12. The Chief Finance Officer should review the banking needs of the NHSBSA at regular intervals to ensure that they reflect current business patterns and represent best value for money.

# Capital investment, asset registers and security of assets

## Capital Investment

1. The Chief Executive shall ensure that there is an adequate appraisal process in place for determining capital expenditure priorities and the effect of each proposal on strategic plans. The Chief Executive is responsible for the management of all stages of capital schemes and for ensuring that schemes are delivered on time and to cost. The Chief Executive shall ensure that capital investment is not undertaken without confirmation of the availability of resources to finance both the capital spend and any revenue consequences including capital charges.
2. For all capital expenditure proposals the Chief Executive shall ensure that a Business Case (or an appropriately agreed equivalent business justification) is produced in line with NHSBSA guidance issued by the Chief Portfolio Officer. The Chief Finance Officer shall certify the costs and revenue and commercial consequences of each business case.
3. The Chief Executive shall ensure that all Business Cases (or an appropriately agreed equivalent business justification) for capital expenditure are approved in line with the DHSC delegated limits, set out in the DHSC Schedule of Delegation.
4. The Chief Finance Officer shall issue procedures for the regular reporting of expenditure and commitment against authorised expenditure.
5. The Chief Finance Officer shall issue procedures governing the financial management of capital investment projects and valuation for accounting purposes.

## Asset Registers

1. The Chief Executive is responsible for the maintenance of both the Register of Assets and the Register of Inventory Items, taking account of the advice of the Chief Finance Officer concerning the form and the method of updating the registers.
2. Each colleague has a responsibility to exercise a duty of care over the assets of the NHSBSA and it shall be the responsibility of senior colleagues in all directorates to apply appropriate routine security practices in relation to NHS assets. A substantial or persistent breach of agreed security practices shall be reported to the Chief Finance Officer, who will determine the necessary action, including referral to the LSMS for investigation.
3. The Chief Executive shall approve the items of equipment which shall be recorded on either the Fixed Asset Register or the Inventory Register and Business Asset Registers. The NHS Finance Manual, as issued by the DHSC, will be considered when determining the minimum data set for the Capital Asset Register.
4. Additions to the Fixed Asset Register must be clearly identified to an appropriate budget holder and be validated by reference to properly authorised and approved agreements, architects’ certificates, suppliers’ invoices and other documentary evidence in respect of purchases from third parties; requisitions and wages records for own materials and labour including appropriate overheads.
5. Where capital assets are sold, scrapped, lost or otherwise disposed of, their value must be removed from the Fixed Asset Register and supporting Business Asset Registers and each disposal must be validated by reference to authorisation documents and invoices by the appropriate Business Asset Register owner.
6. The Chief Finance Officer, in conjunction with the Chief Digital, Data and Technology Officer shall approve procedures for reconciling balances on fixed asset accounts in ledgers against balances on Fixed Asset Registers and Business Asset Registers.
7. Budget holders will ensure that the respective Asset Register for their areas will be physically checked as a minimum at end of Month 9 and Month 12 and that this reconciles with the Asset Register held by Finance.
8. The Asset Register and the Inventory Register shall also record items which are transferred from one part of the NHSBSA to another. It is the responsibility of the budget managers to inform the Chief Finance Officer of these changes.
9. The Chief Finance Officer shall maintain an up to date register of properties owned or leased by the NHSBSA in accordance with the DHSC Group Accounting Manual (GAM). This should include details of location, tenancy (where appropriate), and custody of the deeds and lease documents.

## Security of assets

1. Asset control procedures (including fixed assets, cash, cheques and negotiable instruments, and also including donated assets) must be approved by the Chief Finance Officer. This procedure shall make provision for:
2. recording managerial responsibility for each asset
3. identification of additions and disposals
4. identification of all repairs and maintenance expenses
5. physical security of assets
6. periodic verification of the existence of, condition of, and title to, assets recorded
7. identification and reporting of all costs associated with the retention of an asset
8. reporting, recording and safekeeping of cash, cheques, and negotiable instruments.
9. All discrepancies revealed by verification of physical assets to the Fixed Asset Register shall be notified to the Chief Finance Officer.
10. Whilst each employee and officer has a responsibility for the security of property of the NHSBSA, it is the responsibility of Board members and senior employees in all directorates to apply such appropriate routine security practices in relation to NHS property as may be determined by the Board. Any breach of agreed security practices must be reported in accordance with agreed procedures.
11. Any damage to the NHSBSA's premises, vehicles and equipment or any loss of equipment or supplies shall be reported by colleagues in accordance with the agreed procedure for reporting losses set out in the Finance Procedure Notes.
12. Where practical, assets should be marked as NHS Business Services Authority property.

# Stock control

**7.1** NHSBSA does not currently hold stock and therefore procedure notes are not required.

# Security of cash, cheques, credit cards and other negotiable instruments

1. All receipt books, tickets, agreement forms, or other means of officially acknowledging or recording amounts received or receivable, shall be in a form approved by the Chief Finance Officer. Such stationery shall be ordered and controlled by the Chief Finance Officer and subject to the same precautions as are applied to cash.
2. All officers whose duty it is to collect or hold cash shall be provided with a lockable cash box which will normally be deposited in a safe.
3. All accepted forms of payment received by an officer shall be entered immediately in an approved form of register.
4. The Chief Finance Officer shall prescribe the system for the transporting of cash and where practicable a specialist security company employed.
5. Official money shall not under any circumstances be used for the encashment of private cheques.
6. The holders of safe keys shall not accept unofficial funds for depositing in their safes unless such deposits are in special sealed envelopes or locked containers. It shall be made clear to the depositors that the NHSBSA is not to be held liable for any loss, and written indemnities must be obtained from the organisation or individuals absolving the NHSBSA from responsibility for any loss.
7. During absence (e.g. annual leave) of the holder of a safe or cash box key, the acting officer shall be subject to the same controls as the normal holder of the key. There shall be written discharge for the safe and/or cash box contents on the transfer of responsibilities and the discharge document must be retained for inspection.
8. All unused cheques and other orders shall be subject to the same security precautions as are applied to cash; bulk stocks of cheques shall normally be retained by the NHSBSA's bankers and released by them only against a requisition signed by the Chief Finance Officer.
9. A cheque register shall be kept in which all cheque stocks ordered, received and issued shall be recorded and signed for by nominated officer(s). A separate register is to be kept of payable orders.
10. The Chief Finance Officer shall ensure that all relevant colleagues are informed in writing on appointment, of their responsibilities and duties for the collection, handling or disbursement of cash, cheques and other monies.
11. Any loss or shortfall of cash, cheques, or other negotiable instruments, however occasioned, shall be reported immediately in accordance with the agreed procedure for reporting losses. (See Section 15 - Losses and Special Payments).

## 8.12 Use of NHSBSA credit card

1. The NHSBSA’s credit card is solely for use in connection with NHSBSA business.
2. The credit card is only to be used in exceptional circumstances and where the standard means of purchasing / payment are unavailable (i.e. only method of payment).
3. The Chief Finance Officer or appropriate delegated officer, will consider each use of the credit card and where appropriate approve the request prior to use. The details of each transaction will be entered into a register which will be maintained by the Finance, Commercial and Estates Directorate. The register will record the name of the person requesting the transaction, total cost, date and signatories of requestor, budget manager and approver (Chief Finance Officer). The register should also include a receipt relating to each transaction, where possible.

The credit card will be stored in a locked safe.

The use of the NHSBSA credit card should be in strict adherence with the instructions set out in section 13. Where approval to spend on the credit card is sought the Chief Finance Officer is responsible for determining if the spend is compliant with SFIs and where necessary deferring requests to the Head of Commercial Services.

# Payment of staff

## 9.1 Funded establishment

1. The workforce plans incorporated within the annual budget will form the funded establishment. The funded establishment of any budget holder may not be varied without the approval of the Chief Executive.

## 9.2 Staff appointments

1. No Director or employee may engage, re-engage or re-grade employees, either on a permanent or temporary nature, or hire agency staff, or agree to changes in any aspect of remuneration unless:
2. authorised to do so by the Chief People Officer and/or the appropriate budget holder as appropriate; and is
3. within the limit of the Director's approved budget, funded establishment, and agreed staffing numbers; and
4. appropriate assurance has taken place to confirm the headcount is required, and
5. in line with the processes set out by Corporate HR.
6. The Chief People Officer will ensure that appropriate arrangements for the determination of commencing pay rates, conditions of service etc. for employees are in place.
7. The NHSBSA Remuneration and Nominations Committee Terms of Reference detail the appointment governance for all Executive Senior Management (ESM) roles, seeking approvals through the DHSC Reward Team as appropriate.

## 9.3 Processing payroll

1. The Chief Finance Officer is responsible for:
2. specifying timetables for submission of properly authorised time records and other notifications
3. final determination of pay
4. making payment on agreed dates
5. agreeing methods of payment.
6. The Chief Finance Officer will issue instructions to relevant officers regarding:
7. verification and documentation of data
8. timetable for receipt and preparation of payroll data and the payment of employees
9. maintenance of subsidiary records for superannuation, income tax, social security and other authorised deductions from pay
10. security and confidentiality of payroll information
11. checks to be applied to completed payroll before and after payment
12. NHSBSA releasing payroll data under the provisions of the Data Protection Act (DPA) 2018
13. procedures for payment by bank credit
14. procedures for the recall of bank credits
15. pay advances and their recovery
16. maintenance of regular and independent reconciliation of pay control accounts
17. separation of duties of preparing records and inputs and verifying outputs and payments
18. system to ensure the recovery from leavers of sums of money and property due by them to the NHSBSA.
19. Appropriately nominated managers have delegated responsibility for:
20. submitting time records, and other notifications in accordance with agreed timetables
21. completing time records and other notifications in accordance with the Chief People Officer instructions.
22. submitting termination forms in the prescribed form immediately upon knowing the effective date of an employee’s resignation, termination or retirement. Where an employee fails to report for duty in circumstances that suggest they have left without notice, the Corporate HR department must be notified immediately. The Corporate HR department will inform the Chief People Officer as appropriate.
23. Regardless of the arrangements for providing the payroll service, the Chief Finance Officer shall ensure that the chosen method is supported by appropriate (contracted) terms and conditions, adequate internal controls and audit and review procedures, and that suitable arrangements are made for the collection of payroll deductions and payment of these to appropriate bodies.
24. All employees shall be paid by bank credit transfer, unless otherwise agreed by the Chief Finance Officer.
25. No payment outside of an employee’s terms and conditions will be made unless authorised by the Chief People Officer and relevant Directorate Chief Officer, ensuring approvals are sought through NHSBSA Remuneration and Nominations Committee and DHSC, as appropriate - this includes novel, contentious or repercussive payments.
26. The NHSBSA Remuneration and Nominations Committee Terms of Reference detail the governance arrangements regarding redundancy and associated payments, seeking approvals through the DHSC Reward team as appropriate.

## 9.4 Contracts of employment

1. The Chief Executive may delegate responsibility to the Chief People Officer for ensuring that all employees are issued with a Contract of Employment in a form approved by the NHSBSA and which complies with employment legislation and dealing with variations to or termination of contracts of employment.

# Payment of accounts

1. The Chief Finance Officer shall be responsible for the prompt payment of accounts and claims. The term "payment" includes any arrangements established to settle payments upon a non-cash basis. Payment of contract invoices shall be in accordance with contract terms. All payments shall comply with the Government's policy on prompt payment.
2. All authorised officers shall inform the Chief Finance Officer or appropriate delegated officer promptly of all money payable by the NHSBSA arising from transactions which they initiate, including contracts, leases, tenancy agreements and other transactions.
3. The Chief Finance Officer shall be responsible for maintaining a system for the verification, recording and payment of all accounts payable by the NHSBSA. This system will incorporate an approved officers’ signatory list of the budget holders, budget managers and their deputies who are authorised to certify as per the Finance Procedure Notes
4. Subject to the NHSBSA Scheme of Delegation, appropriate prepayments will be permitted for instances relating to payments for rent, maintenance contracts and in those instances, where, as standard business practice demands, nominal prepayments are required (i.e. training, publications).
5. Prepayments which fall outside the above categories are only permitted where exceptional circumstances apply. In such instances:
6. the appropriate Director or Chief Officer must provide, in the form of a written report, a case setting out all relevant circumstances of the purchase. The report must set out the effects on the NHSBSA if the supplier is at some time during the course of the prepayment agreement unable to meet their commitments
7. the Chief Finance Officer will need to be satisfied with the proposed arrangements before contractual arrangements proceed, and
8. the budget holder is responsible for ensuring that all items due under a prepayment contract are received and must immediately inform the Chief Finance Officer or Chief Executive if problems are encountered.
9. The Chief Finance Officer shall ensure that payment for goods and services is made only when the goods and services have been properly received.
10. The Chief Finance Officer will be responsible for the prompt payment of directed functions in accordance with the Directions and with the appropriate approval from third parties as may be necessary.

# Income

## 11.1 Income systems

1. The Chief Finance Officer is responsible for designing and maintaining systems for the proper recording, invoicing and collection of all monies due which shall incorporate the principles of internal checking and separation of duties.
2. The Chief Finance Officer is responsible for the prompt banking of all monies received.
3. All officers shall inform the Chief Finance Officer or appropriate delegated officer of money due to the NHSBSA arising from transactions which they initiate.

## 11.2 Fees and charges

1. The Chief Finance Officer is responsible for approving and regularly reviewing the level of all fees and charges other than those determined by the DHSC or statute.
2. In respect of pricing the NHSBSA’s goods and services, margins will be determined according to national guidelines approved by the Chief Executive on the advice of the Chief Finance Officer.

## 11.3 Debt recovery

1. The Chief Finance Officer shall ensure that appropriate systems exist for the recovery of outstanding debts.
2. Income not recovered shall be dealt with in accordance with Section 15 (Losses and Special Payments).

## 11.4 Income from NHSBSA as a provider of services

1. The scheme of delegation set out in Appendix 1, shall apply when the NHSBSA is tendering, entering into contracts and/or MOUs as a supplier of services, works or supplies to third parties.

# Disposal or sale of assets/inventory items

1. The Chief Finance Officer shall prepare detailed procedures for the disposal or sale of assets and inventory items.
2. Disposal or sale of all property must be authorised by the DHSC Property Asset Management Board (DHSC PAMB) and the Cabinet Office where disposal or sale is above £100,000. Delegated limits for recommending disposal or sale of property are:
3. the Chief Executive for land and/or building assets up to **£1,000,000 (excluding VAT),** and
4. the Board for land and/or building assets over **£1,000,000(excluding VAT).**
5. Disposal or sale of all other assets shall be authorised as follows:
6. the Chief Finance Officer shall authorise the disposal or sale of assets up to **£500,000 (excluding VAT)**
7. the Chief Executive shall authorise the disposal or sale of assets over **£500,000** up to the value of **£1,000,000 (excluding VAT)**
8. the Board shall authorise the disposal or sale of assets over **£1,000,000 (excluding VAT)**.
9. **the Department of Health and Social Care shall authorise the disposal or sale of assets over £5,000,000 (excluding VAT).**
10. All assets and inventory items which are considered to be surplus to the

NHSBSA's requirements or are considered to be beyond economical repair,

should be disposed of in line with the appropriate procedures and should be listed on the appropriate documentation, authorised by the Asset Owner and forwarded to the Chief Finance Officer who will update the NHSBSA’s Asset Register where appropriate.

1. All unserviceable articles shall be condemned or otherwise disposed of by an employee authorised for that purpose by the Chief Finance Officer. Prior to disposal it should be determined whether the article is recorded within the Register of Assets. A record in a form approved by the Chief Finance Officer shall be kept of all articles submitted for condemnation and the condemning officer shall indicate whether the articles are to be converted, destroyed or otherwise disposed of. All entries shall be confirmed by the counter-signature of a second officer authorised for the purpose by the Chief Finance Officer.
2. The condemning officer shall satisfy themselves as to whether or not there is evidence of negligence in use and shall report any such evidence to the Chief Finance Officer.
3. The Chief Finance Officer will determine whether such condemned items should be recorded in the Losses and Special Payments Register, as set out in Section 15 of these SFIs.

# Buying supplies, works, leases and services

## 13.1 Introduction and guiding principles

1. As a Public Sector body, the NHSBSA must ensure that all procurement and contracting activity meets the requirements of the Procurement Legislation and policy - and DHSC and Cabinet Office guidance as defined in the ALB Schedule of Delegations. The NHSBSA must also ensure that goods, works and/or services are procured to deliver value for money for the taxpayer.
2. Officers must follow these SFIs and the NHSBSA’s Procurement Operating Procedures to ensure that they comply with legislation, policy and these SFIs. The Chief Finance Officer is responsible for maintaining Procurement Operating Procedures across the NHSBSA.
3. Officers should consult with Commercial Services for procurement guidance as required.

## 13.2 Aggregation

1. Under the Procurement Legislation, the value of a contract must be estimated by reference to the contractually committed spend over the life of the contract. This is the total annual value of the contract multiplied by the number of years in the contract, including, but not limited to, all extensions, options, variations and start-up costs (this is Total Contract Value), excluding VAT.
2. A proposed contract may not be divided into smaller contracts in order to avoid the provisions of these SFIs, Procurement Legislation or any other relevant policy. However, officers should be mindful of Regulation 46 of the PCRs 2015 and Regulation 18 of the Procurement Act 2023 that requires contracting authorities to divide contracts into lots, where possible.
3. Deliberate disaggregation to avoid the intended application of these SFIs is a disciplinary offence.
4. The Chief Finance Officer is responsible for ensuring that aggregation rules are effective across the NHSBSA. Where officers believe that aggregation rules are not operating effectively, they should refer this to the Chief Finance Officer.

## 13.3 Quotations

1. Subject to SFI 13.3.4 below, for contractual commitments to suppliers of **up to £5,000 (excluding VAT),** officers may use their discretion to achieve value for money. These contractual commitments will be audited from time to time by the Chief Finance Officer or their nominated representative.
2. Subject to SFI 13.3.4 below, for contractual commitments to suppliers between £5,000 and £10,000 (Total Contract Value, excluding VAT), officers must seek a minimum of three written quotations from potential suppliers and complete the necessary purchasing documentation. This procedure applies in order to ensure the NHSBSA complies with legal and government wide policy obligations that require us to be open, transparent, objective and consistent in respect of even this limited level of spend. These contractual commitments will be audited from time to time by the Chief Finance Officer or their nominated representative.
3. Officers must maintain confidentiality of quotations pending their evaluation. Following evaluation, confidentiality shall be maintained subject to Freedom of Information Act (FOIA) 2000.
4. Where a proposed contractual commitment falls within a goods or services category which is covered by a central Government procurement strategy, officers must use centrally-agreed contracting routes unless there is a clear value for money justification for using another route (this should be clarified in advance with the Head of Commercial Services). Details of centrally controlled categories are set out in the procurement operating procedures for purchases below £10,000.

## 13.4 Tendering

1. Subject to 13.6 for all contractual commitments to suppliers above £10,000 (Total Contract Value excluding VAT),officers must agree an appropriate commercial process and effective evaluation criteria with the Head of Commercial Services or their nominated representative (usually a member of the NHSBSA’s Commercial Services team). In addition to the above instruction, any commitments to suppliers for ICT infrastructure and/or software applications in excess of £10,000 must be approved by the Head of DDaT Governance prior to procurement.
2. Officers must maintain confidentiality of tenders pending their evaluation. Following evaluation, confidentiality shall be maintained subject to FOIA 2000 and the DPA 2018.

## 13.5 MOUs

1. Where the NHSBSA is unable to enter into a formal contract to procure or provide services, for instance with another health body, a MoU should be agreed between parties which clearly sets out the obligations and consideration for each party.  Any MoUs must be approved and signed in accordance with section 13.9 and Appendix 1.

## 13.6 Non-competitive offers

1. In exceptional circumstances it may be permissible not to apply the above quotation/competitive tender processes, and instead award directly to a given supplier by way of a ‘single tender action’, as described at 13.6.2 and 13.6.4.
2. There must be robust legal and financial justifications for any contract award without competition. Appropriate legal justifications are:

* There is only one possible supplier because of exclusive rights or technical reasons;
* Extreme urgency that was unforeseeable (e.g. natural disaster); and
* Absence of tenders or suitable tenders to a tender exercise.

1. Subject to 13.6.5 below, in such instances referred to in 13.6.2 above where the anticipated spend with the supplier is between £5,000 and £10,000 (excluding VAT) and always prior to such a non-competitive offer from a supplier being accepted verbally or in writing, officers must consult with their appropriate Leadership Team member or their nominated representative to confirm if the proposed single tender action is required or permissible.  Written approval to accept the offer must be obtained from the Leadership Team member (or their nominated representative) prior to accepting any offer.
2. Subject to 13.6.5 below, in such instances referred to in 13.6.2 above where the anticipated spend with the supplier is above £10,000 (excluding VAT) and always prior to such a non-competitive offer from a supplier being accepted verbally or in writing, officers must consult with the Head of Commercial Services or their nominated representative to confirm if the proposed single tender action is required or permissible.  Written approval to accept the offer must be obtained from the Chief Executive or the Chief Finance Officer (or their nominated representative) prior to accepting any offer.
3. An approved list of categories of supplier where a single tender action is deemed appropriate (so that it is not necessary to consult with the Head of Commercial Services nor obtain the written approval of the Leadership Team member, Chief Executive or the Chief Finance Officer (as referred to at 13.6.3 and 13.6.4), shall be maintained by the Head of Financial Operations. This list is set out in the NHSBSA’s Requisitioner’s Guide. Where the contractual commitment to a supplier is above £10,000 (Total Contract Value excluding VAT), officers must still consult with a member of the Commercial Services team prior to awarding the contract to ensure the NHSBSA observes its transparency obligations and publishes the outcome appropriately, but this does not need to be the Head of Commercial Services (as referred to at 13.6.3).

## 13.7 Contract extension and variation

1. Any proposal to extend or vary an existing contract which would result in the addition of more than £10,000 to the existing Total Contract Value (excluding VAT) must be referred to the Head of Commercial Services or their nominated representative who will advise if this is possible under the existing contract terms and/or the Procurement Legislation.

## 13.8 Making commitments to suppliers through Purchase Orders

1. All commitments to suppliers for supplies, works and/or services must be made on an official purchase order (Purchase Order) and in line with the Finance Procedure Notes, unless the Chief Finance Officer, or their nominated delegate, has provided alternative written instructions. Such written instructions may be requested where it is not possible to generate a purchase order.

## Making Lease or other Property Commitments

* + 1. No officer or employee of the NHSBSA shall enter into, vary, or terminate any lease, license, or other legal agreement relating to the occupation or use of property (including land or buildings) without prior written approval in accordance with the NHSBSA Scheme of Delegation and SFIs.
    2. All proposed property lease arrangements must be supported by a business case that includes:
  + Strategic justification and alignment with NHSBSA objectives;
  + Financial appraisal, including total lifecycle cost and funding source;
  + Legal advice from external legal counsel
  + Risk assessment and mitigation plan where leases are contracted out of The Landlord and Tenant Act 1954 or where NHSBSA are entering into a MOTO, licence or non-lease agreement.
    1. All proposed lease agreements must be assessed for applicability under the Cabinet Office Property Controls (PCAR).
    2. Where the lease falls within the scope of PCAR, NHSBSA must submit the proposal for Cabinet Office approval via the Department of Health & Social Care.
    3. Where Cabinet Office Property Controls apply, the NHSBSA’s internal delegated authority cannot be exercised independently until external approval has been granted.
    4. Lease agreements with a total commitment (including rent, service charges, and other liabilities) exceeding thresholds defined in the Scheme of Delegation must be approved by the NHSBSA Board.
    5. The Chief Executive must be consulted on any lease that may expose the NHSBSA to significant financial, reputational, or operational risk, as defined in section 7.5 of the Matters Reserved to the Board.
    6. The Board retains authority to approve any lease or property transaction that exceeds the financial thresholds or strategic significance outlined in the Matters Reserved to the Board
    7. All lease commitments must be reported to the Board as part of regular financial and estates reporting.
    8. All active lease agreements must be recorded in the NHSBSA Lease Register and reviewed annually to ensure continued value for money and compliance with terms.

## 13.10 System of delegated authority

1. The delegation of authority within the NHSBSA to enter into contractual commitments and to sign contracts including call off contracts and MOUs is set out at Appendix 1. Only officers with the appropriate delegated authority may authorise commitments to and sign contracts with suppliers.
2. Each budget holder is responsible for ensuring that spending remains within the sum of their delegated budget as per 2.13 of these SFIs. This will be assured by Finance through the normal monthly budget monitoring process.
3. An officer with delegated authority has the following responsibilities:

* To ensure that all the necessary approvals are present prior to making a commitment to a supplier.
* To maintain complete records and an audit trail of all of their commitments to suppliers.

1. An officer with delegated authority for contract signature must be aware of their responsibility for contract assurance.  In addition to the financial commitment that is being made, delegated officers must fully understand the nature of the commitments and responsibilities being entered into by the NHSBSA under the contract.
2. Main Board approval threshold as noted in Appendix 1 is for the award of contracts over £3m there are agreed exceptions to this threshold where contracts below £3m may also be subject to approval. These exceptions are;
   1. Any Gold contracts irrespective of value;
   2. Any contracts identified by the Chief Finance Officer as being novel or contentious;
   3. Any contracts identified by Main Board pursuant to a quarterly Commercial pipeline assurance report.
      1. Main Board approval threshold, as noted in Appendix 1, for the approval and signature of MOUs is £1m. MOUs below £1m may also be subject to approval where they are novel or contentious, as deemed necessary by the Chief Executive Officer or other delegated officer.

# Internal Audit

1. The Chief People Officer shall be responsible for ensuring that there are arrangements to measure, evaluate and report on the adequacy and effectiveness of internal control and efficient use of resources via appropriate internal audit service.
2. The NHSBSA shall appoint a Head of Internal Audit who will have overall responsibility for the internal audit function.
3. Management's responsibility is to establish systems of internal control for all operations, both system driven, automated and manual, to ensure that these are properly run.
4. Internal Audit shall be entitled, without necessarily giving prior notice, to require and receive:
5. access to all records, documents and correspondence relating to any financial or other relevant transactions, including documents of a confidential nature (in which case, the Chief People Officer shall have a duty to safeguard the confidentiality)
6. access at all reasonable times to any land, premises or employee of the NHSBSA
7. the production or identification by any employee of any NHSBSA cash, stores or other property under the employee's control
8. explanations concerning any matter under investigation or review.
9. Where a matter arises which involves, or is thought to involve, irregularities concerning cash, stores or other property of the NHSBSA, or any suspected irregularity in the exercise of any function of a pecuniary nature, the Chief Finance Officer shall be notified immediately and a referral made to the LFP team.
10. The NHSBSA LFP team shall investigate cases within the NHSBSA of misappropriation or other irregularities with relevant managers and in consultation with the Police where appropriate.
11. The Chief People Officer shall report directly to the Chief Executive and shall refer audit reports to the appropriate designated officers. Failure to take remedial action within a reasonable period shall be reported to the responsible manager. Where, in exceptional circumstances, the use of normal reporting channels could be seen as a possible limitation on the objectivity of the audit, Internal Audit shall have access to report directly to the Chief Executive, the Chair of the NHSBSA or the Chair of the ARC.

# Losses and special payments

1. The Chief Financial Officer shall prepare procedural instructions in accordance with the Scheme of Delegation on the recording of and accounting for losses and special payments.
2. Special payments are:
   1. extra-contractual payments (which, though not legally due under contract, appear to place an obligation on NHSBSA which the courts might uphold)
   2. extra-statutory and extra-regulatory payments (are within the broad intention of the statute or regulation, respectively, but go beyond a strict interpretation of its terms)
   3. compensation payments (paid to redress personal injuries)
   4. special severance payments (paid outside of normal statutory or contractual requirements on leaving employment). Section 15.7 details the additional approvals required.
   5. ex gratia payments (paid outside of statutory cover, legal liability or administrative rules, for example, out of court settlements). Section 15.7 details the additional approvals required if in relation to employment tribunal out of court settlements.
3. Any colleague discovering or suspecting a loss of any kind must immediately inform their respective Leadership Team member, who must immediately inform the Chief Executive and the Chief Finance Officer. Where a criminal offence is suspected, the Chief Finance Officer must immediately inform the police. In cases of suspected bribery and corruption or anomalies which may indicate bribery or corruption, the Chief Finance Officer must inform the NHSBSA LFP Team who will notify both Internal and External Auditors.
4. For losses apparently caused by theft, arson, neglect of duty or gross carelessness, except those which are of a trivial nature, the Chief Executive will immediately notify:
5. the Board, and
6. the External Auditor.
7. Within the limits delegated to it by the DHSC, the NHSBSA shall delegate its responsibility to approve losses and authorise special payments as follows (with the exceptions detailed in section 15.7):

|  |  |  |
| --- | --- | --- |
| **Losses** | **Special Payments** |  |
| Value | Value | Delegated Authority |
|  |  |  |
| Up to £100,000 | Up to £75,000 | Director of Finance |
| Up to £300,000 | Up to £95,000 | Chief Finance Officer |
| Above £300,000 | Above £95,000 | Chief Executive,  Chief Finance Officer  and DHSC Finance |

1. No losses or special payments exceeding the delegated limits shall be made without prior DHSC approval.
2. This is with the exception of all special severance payments and out of court settlements that are proposed to be made to NHSBSA’s colleagues, which must be approved by the Chief People Officer and Chief Executive Officer, prior to approval by the DHSC Governance Assurance Committee (GAC) and HMT – this is regardless of value, there are no delegated responsibilities to the NHSBSA to approve such payments.
3. The Chief Finance Officer shall be authorised to take any necessary steps to safeguard the NHSBSA's interest in bankruptcies and company liquidations.
4. For any loss, the Chief Finance Officer will consider whether any insurance claim can be made.
5. The Chief Finance Officer shall maintain a losses and special payments register in which write off action is recorded.
6. All losses and special payments must be reported to the ARC on a regular basis.

# Counter Fraud and Security Management

## 16.1 Counter fraud investigation

1. All NHS bodies are required to take necessary steps to counter fraud in the NHS in accordance with the Secretary of State’s Directions in respect of Counter Fraud 2017, Government Functional Standards GovS 013 Counter Fraud and in line with guidance provided by Public Sector Fraud Authority (PSFA), NHS Counter Fraud Authority (NHSCFA) and other agencies.
2. The NHSBSA will undertake all necessary steps to reduce the risk of fraud, bribery and corruption. The Chief Executive and Chief Finance Officer monitor and ensure compliance as per the Secretary of State’s Directions and GovS 013.
3. All NHSBSA colleagues (including agency and contract staff) are required to complete the mandatory fraud, bribery, and corruption eLearning module and are encouraged to raise their concerns either internally with the NHSBSA LFP Team or via the NHSBSA Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy or externally to NHSCFA or with a prescribed person or body.
4. The NHSBSA will not tolerate acts of bribery and will treat the giving or receiving of bribes as gross misconduct and may result in disciplinary action and/or criminal proceedings. Employees who have concerns should raise them via LFP Team or NHSBSA Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy.
5. The LFP Team will record all incidents of fraud, bribery, and corruption allegations on the NHSCFA case management system. Referrals will be investigated in accordance with legislation and guidance.
6. The NHSBSA Counter Fraud Manager (CFM) is responsible for notifying the Leadership Team and the relevant Head of Service of incidents of fraud, bribery, and corruption with a high potential fraud value (over £50k) or where there is potential for significant reputational damage. These will be escalated by the NHSBSA CFM within two working days following the notification of the allegation and a briefing will be produced and shared within five working days. This information will also be reported to NHSBSA ARC. In the absence of the NHSBSA CFM, the Lead Fraud Specialist (LFS) - Reactive will complete the notification. The [NHSBSA Fraud, Bribery and Corruption Policy and Response Plan](https://nhsbsauk.sharepoint.com/teams/FinancialGovernanceAndAssurance2088/Shared%20Documents/General/005.%20Corporate%20Governance%20Framework/SFI%20Annual%20Review/2025-26/Fraud,%20Bribery%20and%20Corruption%20Policy%20and%20Response%20Plan) provides more detail on our approach to fraud, bribery and corruption.
7. The NHSBSA undertake Initial Fraud Impact Assessments (IFIAs) for all areas of spend relating to Government Major Projects Portfolio (GMPP). The NHSBSA Enterprise Fraud Risk Assessent (EFRA) is regularly reviewed to monitor and mitigate the fraud, bribery and corruption risks facing the organisation.

# Standards of business conduct

1. The NHS circular ’Managing Conflicts of Interest in the NHS’ sets out the principles for standards of business conduct for NHS colleagues.

**17.2** NHSBSA colleagues must follow the NHSBSA Conflicts of Interest Policy available on [My Hub](https://nhsbsauk.sharepoint.com/sites/Governance/SitePages/Conflicts-of-Interest.aspx).

# External audit

**18.1** The external audit of the NHSBSA is undertaken by the National Audit Office, whose powers are conferred under the National Health Service Act 1977.

**18.2** The National Audit Office’s powers to obtain documents and information were consolidated in the NAO Act 1983. This legislation provides that the Comptroller and Auditor General shall have a right of access at all reasonable times to all such documents as they may reasonably require for carrying out examination and shall be entitled to require from any person holding or accountable for any such document such information and explanation as are reasonably necessary for that purpose.

**18.3** These rights of access extend to the annual audit of all systems, establishments and processes associated with the NHSBSA’s functions.

# Appendix 1- NHSBSA Scheme of Delegation from Standing Financial Instructions

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Anticipated expenditure** **or income**  (Total contract value excluding VAT) | **Required Budget Holder approval**  (via Contract Award Report or a Lease / Property Commitment Report) | **Required Finance approval**  (via Contract Award report or a Lease / Property Commitment Report)) | **Required Commercial Services approval**  (via Contract Award Report or a Lease / Property Commitment Report)) | **Required Chief Executive approval**  (via Contract Award Report or a Lease / Property Commitment Report)) | **Required Board approval**  (via minuted Board decision) | **STA Approval** | **Authorised Contract/MOU/Lease Signatory** |
| **Up to £10,000** | Budget Holder / Manager | Not required | Not required | Not required | Not required | Relevant Director/Chief Officer | Budget Holder |
| **Up to £100,000** | Relevant Head of Service /  Budget Holder | Head of Financial Operations  Head of Financial Strategy, Management and Reporting | Head of Commercial Services | Not required | Not required | Head of Commercial Services | Head of Commercial Services |
| **Up to £250,000** | Relevant Director/Chief Officer | Head of Financial Operations  Head of Financial Strategy, Management and Reporting | Head of Commercial Services | Not required | Not required | Chief Finance Officer | Head of Commercial Services |
| **Up to £1,000,000** | Relevant Director/  Chief Officer | Chief Finance Officer | Chief Finance Officer | Not required | Not required | Chief Finance Officer | Chief Finance Officer |
| **Up to £3,000,000 \*\*subject to exceptions set out in 13.9.6 for MOUs above £1m.** | Relevant Director/Chief Officer | Chief Finance Officer | Chief Finance Officer | CEO | Not required  (Full Board approval required for MOUs above £1m). | CEO | CEO |
| **Over £3,000,000\*\***  **\*\*subject to exceptions set out in 13.9.5** | Relevant Director/  Chief Officer | Chief Finance Officer | Chief Finance Officer | CEO | Full Board | Full Board | CEO or as otherwise delegated by the Board |

Each of the officers referred to in the above table shall produce a Directorate Scheme of Delegation in relation to commercial approvals such as procurement options analysis and contract award reports within their own Directorates or teams under which they shall delegate the relevant level of responsibility to their direct reports, as appropriate.