



Quality Care - for you, with you

TRUST BOARD SCHEME OF DELEGATION TO COMMITTEES

DECISIONS/DUTIES DELEGATED BY THE BOARD TO COMMITTEES

COMMITTEE	DECISIONS/DUTIES DELEGATED BY THE BOARD TO COMMITTEES, WITH CLEAR REPORTING LINES AND ACCOUNTABILITY
<p>AUDIT AND RISK ASSURANCE COMMITTEE</p>	<p>The Committee will:</p> <ul style="list-style-type: none"> • Oversee the maintenance of an effective system of integrated governance, risk management and internal control. • Review the adequacy of all risk and control related disclosure statements in particular the Mid-Year Assurance Statement and the Governance Statement, together with any accompanying Head of Internal Audit statement, external audit opinion or other appropriate independent assurances, prior to endorsement by the Board. • Review the adequacy of the policies for ensuring compliance with relevant regularity, legal and code of conduct requirements, including revised versions of the Trust’s Standing Orders and Standing Financial Instructions. • Review and approval of the policies and procedures for all work related to bribery, fraud and corruption as required by the Counter Fraud and Probity Service at the Business Services Organisation for onward submission to the Trust’s Policy Scrutiny Committee for ratification. • Review the annual schedule of losses and compensation payments and make recommendations to the Board regarding their approval. • Review a summary of Post Project Evaluations on capital and revenue proposals greater than £300k. • Review the Trust Procurement Board Annual report including all approved Direct Award Contracts. • Receive regular updates in relation to fraud cases under investigation.

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	<ul style="list-style-type: none"> • Oversee the adequacy and effectiveness of the risk management framework in the Trust, through receiving regular updates in relation to the Corporate Risk Register. <p>In addition, the Committee will:</p> <ul style="list-style-type: none"> • Complete the National Audit Office Effectiveness Tool on an annual basis and develop an action plan if necessary. <p>The Committee will work closely with the Governance Committee whose work will provide comprehensive assurance to the Audit and Risk Assurance Committee. Each Committee will remain within its own scope of work.</p> <p>Internal Audit</p> <ul style="list-style-type: none"> • Ensure there is an effective internal audit function established by management that meets the Public Sector Internal Audit Standards (PSIAS) and provides appropriate independent assurance to the Committee, Accounting Officer and Board. <i>This will be achieved by:</i> • Consideration of the provision of the Internal Audit service, the cost of the audit and any questions of resignation and dismissal. • Review and approval of the Internal Audit strategy, operational plan and more detailed programme of work, ensuring that this is consistent with the audit needs of the organization. • Consideration of the Head of Internal Audit’s mid-year assurance and annual report, major findings of internal audit work (and management’s response), and ensure co-ordination between the Internal and External Auditors to optimise audit resources. • Ensuring that the Internal Audit function is adequately resourced and has appropriate standing within the organization. • Annual review of the effectiveness of internal audit.

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	<ul style="list-style-type: none"> • Assure itself that Trust management has implemented the agreed recommendations of Internal Audit reports in a timely and effective way by reviewing at each meeting the on-going progress of the Internal Audit Forum. <p>External Audit</p> <ul style="list-style-type: none"> • Review the work and findings of the External Auditor and consider the implications of, and management’s responses to, their work. <i>This will be achieved by:</i> • Consideration of the performance of the External Auditor. • Discussion and agreement with the External Auditor, before the audit commences, of the nature and scope of the audit as set out in the External Audit Strategy. • Discussion with the External Auditors of their local evaluation of audit risks and assessment of the Trust. • Review of all External Audit reports, including consideration of the Report to those charged with Governance before submission to the Board and any work carried out outside the annual audit plan, together with the appropriateness of management responses. <p>HSC Business Services Organisation Shared Services</p> <ul style="list-style-type: none"> • Obtain assurance annually of the governance arrangements in operation across the HSC Business Services Organisation. • Give consideration to the performance of the HSC Business Services Organisation. <p>Financial Reporting</p> <ul style="list-style-type: none"> • Monitor the integrity of the Trust’s Financial Statements. • Review the Trust’s Annual Report, Governance Statement and the Financial Statements before submission to the Board in order to determine their completeness, integrity and accuracy. This includes Public Funds, Residents and Patients’ Monies and Charitable Trust Funds.

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	<p>This review will cover but is not limited to:</p> <ol style="list-style-type: none"> i. the adequacy and completeness of the Governance Statement and other disclosures relevant to the Terms of Reference of the Committee. ii. the Schedule of Losses and Special Payments. iii. the Letter of Representation to the Comptroller and Auditor General iv. the meaning and significance of the figures, notes and significant changes v. changes in, and compliance with, accounting policies and practices vi. explanation of estimates or provisions having material effect vii. areas where judgement has been exercised viii. significant adjustments resulting from the audit ix. any reservations and disagreements between the external auditors and management which have not been satisfactorily resolved <ul style="list-style-type: none"> • Recommend to the Board that the Annual Report, Governance Statement and Financial Statements are approved • Review all accounting and reporting systems for reporting to the Board including in respect of budgetary control
REMUNERATION AND TERMS OF SERVICE COMMITTEE	<p>The Committee will:</p> <ul style="list-style-type: none"> • Advise and make recommendations in writing to the Board on performance, development, succession planning and appropriate remuneration and terms of service for the Chief Executive, Executive Directors and all other Directors who operate at Board level within the Trust, guided by Department of Health policy and best practice. Advice to the Board on remuneration includes all aspects of salary, allowances and expenses, as well as arrangements for termination of employment and other contractual terms.

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	<ul style="list-style-type: none"> • Ensure that in advance of recruitment to Chief Executive, Executive Director and all other Director roles which operate at Board level, terms of service have been agreed before the posts are advertised. • Ensure robust objectives, performance measures and evaluation processes are in place within the Trust in respect of the Chief Executive, Executive Directors and all other Directors. At mid and end year (May and October), the Committee will review the performance of the Chief Executive on the advice of the Chair, and the performance of the Executive Directors and all other Directors, on the advice of the Chief Executive. This will include an appraisal of their performance in relation to their role as a Board member. • Advise the Board and oversee appropriate contractual arrangements for the Chief Executive, Executive Directors and all other Directors including secondment requests and the proper calculation and scrutiny of termination payments taking account of relevant guidance as appropriate. • To ensure compliance with HM Revenue and Customs' requirements concerning payments, including expenses.
GOVERNANCE COMMITTEE	<p>The Committee will:</p> <ul style="list-style-type: none"> • Hold the Trust to account for the quality of care it provides and ensure that the systems of control and impact measurement are robust and reliable. • Provide the Trust with a clear strategic direction and leadership for good Governance that will assist the Trust to meet its quality improvement challenges. • Foster a culture at every level of the Trust which is focused on enabling staff (and subcontractors) to learn from past experiences and mistakes.

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	<ul style="list-style-type: none"> • Ensure that the Trust possesses the necessary capability to identify learning and its implementation. • Oversee all aspects of integrated governance (excluding finance and performance) and to ensure that a robust Integrated Governance and Assurance Framework is maintained. • Ensure that there are effective structures in place to support the effective implementation and continued development of integrated governance across the Trust ensuring that there is sufficient assurance as to the robustness of key processes across all areas of governance. • Receive a report and assurances from the Chief Executive as Chair of the Senior Leadership Team Risk and Assurance (SLTRA) Group whose work provides relevant assurance to the Committee's remit. • Receive assurances from the following Steering Groups via reports by the Chair as a standing agenda item: <ul style="list-style-type: none"> - Organisational Governance Steering Group - Safety and Quality Steering Group - Standards, Compliance and Regulation Steering Group • Receive the Corporate Risk Register at each meeting and receive assurance via the summary report from the Chair of the SLTRA that the risks listed are appropriate for inclusion on the Corporate Risk Register. • The Committee will work closely with the Audit and Risk Assurance Committee (ARAC) whose work will provide comprehensive assurance to the Governance Committee. There will be a standing item on the Governance Committee agenda during which the Chair of the ARAC can raise any area where the Committee requires further assurance, particularly in relation to those governance domains concerning clinical and social care governance, safety and quality.

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	<ul style="list-style-type: none"> • Receive the findings of other significant assurance functions, (regulatory, professional and judicial) external to the organisation, and consider the implications for the governance of the organisation. Where appropriate, seek assurance that action plans developed as a result of external reviews/progress reports are being progressed and implemented. • Seek assurance that where concerns have arisen that relate to the committee's remit that appropriate measures have been taken, any agreed actions delivered, and any appropriate learning has been identified and shared. • Ensure robust and formal independent oversight of 'Whistleblowing' cases activity within the Trust. • Receive the minutes of the Trust's Mid-Year and End-Year Ground Clearing meetings for information. • Escalate any risks or other areas of concern identified through the above responsibilities that require Trust Board scrutiny and/or decision making. <p>In fulfilling its remit, the committee will utilise information from a range of governance systems and other areas as it deems necessary.</p>
CHARITABLE TRUST FUNDS COMMITTEE	<p>The Committee will:</p> <ul style="list-style-type: none"> • Assist the Board and the Accounting Officer in exercising its key functions of ensuring Charitable Trust Funds are administered by the Trust Board as Trustees under the Health and Personal Social Services (NI) Order 1972, as amended by Article 16 of the Health and Personal Social Services (NI) Order 1991 • Satisfy itself that Charitable Trust Funds are managed in line with guidance in the Trust's Standing Financial Instructions, Departmental guidance and legislation.

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	<ul style="list-style-type: none"> • Ratify the creation of a new fund by the Executive Director of Finance, Procurement and Estates where funds and/or other assets are received from donors in circumstances where the wishes of the donor cannot be accommodated within the scope of an existing fund. • Make recommendations on the potential for rationalisation of funds within statutory guidelines. • Seek assurance that assets in ownership of, or used by, the Charitable Trust Funds will be maintained with the Trust's general estate and inventory of assets. • Seek assurance that funds are not unduly or unnecessarily accumulated. • Ensure that a Trustees Report is produced as part of the production of annual accounts for Charitable Trust Funds. • Seek assurance that expenditure from Charitable Trust Funds is subject to appropriate value for money considerations including proper procurement procedures where applicable. • Ensure that Annual Accounts are prepared in accordance with Department of Health (DoH) guidelines and submitted to the Board within agreed timescales. • On behalf of the Board, and on the advice of the Senior Leadership Team, the Committee will authorize appropriate policies and procedures in relation to Charitable Trust Funds.
PATIENT AND SERVICE USER EXPERIENCE COMMITTEE	<p>The Committee will:</p> <ul style="list-style-type: none"> • Provide assurance to the Trust Board that the Trust's services, systems and processes provide effective measures of patient, service user and carer experience and involvement. • Identify gaps and areas of opportunity for development to ensure continuous, positive improvement to the patient, service user and carer experience.

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	<ul style="list-style-type: none"> • Ensure that patient, service user and carer experience improvement initiatives are in place to address identified shortcomings and that these are monitored. • Provide oversight of the Trust’s Working Together Strategy. • Review in detail the associated action plan and key performance indicators to seek assurance that the Trust has effective and regularly reviewed mechanisms and systems in place to capture the views and experiences of patients, service users and carers and is continuously improving on these. <p>In carrying out its work, the Committee will utilise information from the following four strands of work which underpin the Working Together Strategy:</p> <ol style="list-style-type: none"> a) Patient and Service User Experience - Review and analyse trends emerging from users’ feedback on their experience of care. Reviews and analysis of trends will focus on themes, service areas and professional matters. b) Quality Improvement - Assess the evidence that effective learning and Quality Improvement approaches are occurring in relation to the user and carer experience. c) Personal and Public Involvement - To ensure service users and carers inform and drive change. d) Clinical and social care governance - Review data on incidents and complaints and identify areas for changes. <ul style="list-style-type: none"> • Review progress of the Trust’s Carers Action Plan • Receive update from the Patient and Client Council • Agree service improvement/learning from staff and service user experience item for Trust Board meetings • Make recommendations to Trust Board for consideration.

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<p style="text-align: center;">FINANCE, PERFORMANCE AND WORKFORCE COMMITTEE</p>	<p>The Committee will:</p> <p>Assist the Board and the Accounting Officer in exercising its key functions of:</p> <ul style="list-style-type: none"> • overseeing the delivery of planned results by monitoring performance against objectives and ensuring corrective actions are taken when necessary within agreed timelines. • the achievement of financial targets (break-even) and oversight of financial plans through the provision of accurate and timely financial analysis, effective budget management and leadership <p>Finance</p> <ul style="list-style-type: none"> • To review in detail the financial strategy, so as to be able to confirm to the Trust Board the basis of acceptance. • To review the financial monitoring process and reporting in sufficient detail to advise the Trust Board, with confidence, concerning the financial performance of the Trust. • To be assured that Directors are effectively carrying out duties as Budget Holders and are well informed regarding the financial outlook for the Trust, and monitoring their achievement of financial targets • To review achievement of cost improvements and income generation activities in line with the Trust Delivery Plan and holding budget holders to account for financial performance. • To review financial reporting (ongoing on a regular basis). • To receive regular updates on actions taken by SLT to improve the financial position within the Trust. • To ensure the Director of Finance and Estates provides assurance that adequate training is delivered on an ongoing basis to budget holders to enable them to manage their responsibilities.

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	<ul style="list-style-type: none"> • To provide assurance to the Board that the Trust operates under a sound performance management framework, and that performance risks are understood and mitigated. • To review in detail any areas of Trust financial performance that are appropriate for further Board scrutiny, as agreed by Committee members. • To consider Trust financial performance in a regional context and identify areas for additional scrutiny. • To review financial and estates benchmarking data as it relates to Trust services. <p>Value for Money</p> <ul style="list-style-type: none"> • Oversee the adequacy of the Trust’s arrangements for ensuring that value for money is obtained in the expenditure of all public funds entrusted to its care. This will include a review of the findings from, and management’s response to, all value for money audit reports issued to the Trust from the Comptroller and Auditor General (C&AG). <p>Operational Performance</p> <ul style="list-style-type: none"> • Provide oversight of the Trust’s Performance Management Framework ensuring that there are effective and regularly reviewed structures in place to support the effective implementation and continued development of integrated performance management arrangements across the Trust. • Ensure there is sufficient independent and objective assurance as to the robustness of key processes across all areas of performance. • Identify risks and gaps in control and assurance and seek assurance that risks are mitigated and being managed effectively. • Review the monitoring information in sufficient detail to advise the Trust Board, with confidence, concerning the performance of the Trust.

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	<ul style="list-style-type: none"> • Receive internal and external reports on performance improvement initiatives, including efficiency and benchmarking and review progress • Ensure timely reports are made to the Trust Board, including recommendations and remedial action taken or proposed with timeframes, if there is an internal failing in systems or services. • Ensure recommendations considered appropriate by the Committee are made to the Trust Board <p>Planning</p> <ul style="list-style-type: none"> • To provide oversight to the corporate planning process, development of business cases and post project evaluations for revenue and capital, including review of assurance/test drilling etc. • To review business cases process for capital spend over £300k and the annual allocation of capital. • Highlight potential risks that could impact on the Trust’s ability to deliver on its strategic direction and bring these to the attention of the Trust Board and the Strategic Planning and Performance Group and PHA. <p>Workforce</p> <ul style="list-style-type: none"> • Monitor an agreed set of workforce related metrics (Workforce Dashboard) to ensure that expected standards/targets are being achieved. • Identify risks and gaps in compliance and assurance, and seek assurance that risks are mitigated and being managed effectively.

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STRATEGY AND TRANSFORMATION COMMITTEE	<p>The Committee will:</p> <p>Assist the Board and the Accounting Officer in exercising its key function of:</p> <ul style="list-style-type: none"> • Establishing the overall strategic direction of the Trust within the policy and resources framework determined by the Department/Minister. <p>Strategy</p> <ul style="list-style-type: none"> • Review and when satisfied recommend the Trust’s vision and strategy for approval to Trust Board • Review Trust-wide strategic objectives prior to discussion by the Board. • Identify strategic opportunities whilst ensuring transformation schemes are developed and delivered to support sustainability not only within the Trust but in the local and regional integrated health and social care system. • Receive regular updates from the Trust’s Strategic Implementation Programme Board on the implementation of strategic programmes and system wide developments. • Review the Trust’s Capital Plan to ensure alignment with key Trust strategies, plans and sustainable development principles. • Monitor progress against major projects such as redevelopment of sites and large scale digital change projects. • Review Trust developments involving significant investment or modernisation. <p>Transformation</p> <ul style="list-style-type: none"> • Monitor progress against the Transformation Priorities in line with the Regional Transformation programmes applicable to this Trust. <p>Organisation Development</p> <ul style="list-style-type: none"> • Ensure the Trust has in place an Organisational Development Plan to support the implementation of the Strategic Plan.

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	<ul style="list-style-type: none"> • Receive regular updates from the People and Culture Steering Group <p>To fulfil its duties, the Committee’s programme of work will be designed to provide assurance that:</p> <ul style="list-style-type: none"> • Risks to achievement of strategy and transformation are identified and monitored through the Trust’s Board Assurance Framework and /or corporate risk register. • The Trust communicates and engages effectively with internal and external stakeholders regarding its strategic priorities and programmes. • Clarity is provided regarding those areas that are commercially sensitive. • There is clear, consistent strategic direction, strong leadership and transparent lines of accountability.