

COVID-19 RESPONSE INTERIM FINANCIAL GOVERNANCE ARRANGEMENTS

INTRODUCTION

The unprecedented nature of the current situation means individuals will be required to take urgent actions that are potentially outside of our normal governance arrangements.

From a financial perspective, the UK Government has been explicit in its support for the NHS with the Chancellor confirming that the NHS will get “whatever it needs; whatever it costs” to deal with the coronavirus outbreak.

In this context, a strong but agile governance process for all COVID-19 expenditure is required. This document sets out the interim financial governance arrangements for all such expenditure.

EXPECTATIONS

Existing financial governance procedures should be followed wherever possible, however as a minimum, the following **interim arrangements must be followed for all COVID-19 related expenditure**.

All other financial decisions must continue to follow existing financial governance arrangements unless explicitly agreed by the Director or Assistant Director of Finance (Operations or Strategy).

INTERIM ARRANGEMENTS

Wherever possible, financial decisions should be agreed through the daily CCG Covid Huddle Meeting to ensure appropriate input from this multi-disciplinary team. Existing resources should be reprioritised to support the CCGs response, with additional expenditure agreed only when all alternative options have been explored and discounted.

Expenditure Decision Record:

Given the rapidly changing situation and guidance, decisions will need to be made based on the information available at the time. Decisions therefore need to be appropriately documented such that as the position evolves and changes, decisions can be justified if subsequently challenged through hindsight.

The Expenditure Decision Record (EDR) must therefore be completed for all revenue commitments above £1,000. Expenditure below £1,000 must still be recorded and justifiable but does not necessitate specific documentation.

It is expected that the EDR will be completed by finance colleagues following discussion and dialogue with relevant clinical and operational colleagues. It is acceptable for this to be completed retrospectively where urgent purchases are required to avoid risks to patient safety or operational preparedness.

Authorisation Levels:

The following authorisation levels must be adhered to for all COVID-19 related expenditure:

Role	Authorisation Limit
Senior Manager	£20,000
Silver Commander / Deputy Director	£30,000
Gold Commander / Director (non-finance)	£75,000
Accountable Officer / Chief Finance Officer/ Assistant Director of Finance	Over £75,000

In most cases approval will be documented in advance either by email or through completion of the EDR. However, in extremis; authorisation can be verbal so as not to delay essential purchases. This must subsequently be documented as soon as is practicable.

Personal Health Commissioning:

For PHC packages of care the existing limits as per the CCG Standing Financial Instructions continue to apply for individual packages.

Authority Delegated to:	Limit for PHC commissioning – packages of care – learning disability patients	Limit for PHC commissioning – packages of care – patients other than learning disability patients
Weekly costs of packages of care		
Band 6	<£1,000	
Band 7	<£1,350	
Band 8a	<£2,350	<£2,000
Band 8b	<£3,000	<£2,000
Band 8c	<£3,500	<£2,500
Director of Nursing and Quality / Deputy Director of PHC / Chief Finance Officer	≥£3,500	≥£2,500

For other arrangements, including block booking of beds, the above general authorisation levels apply, as does the point below regarding agreement of contracts.

Sourcing and Procurement:

All purchases should be routed through the respective commercial services teams to ensure consistency of approach and compliance with legislation and CCG Standing Financial Instructions. Where urgent purchases are required to avoid risks to patient safety or operational preparedness, and these are appropriately justified SFI Waivers will be supported.

Agreement of contracts:

Any new contracts between the CCG and service providers, whether new or existing providers, must only be agreed by the Accountable Officer or Chief Finance Officer. The only exception will be in an emergency situation where neither are available, in which case the on-call Director or Gold Commander may agree a contract. In these circumstances retrospective approval must be sought through usual governance routes.

FUNDING AND COST REIMBURSEMENT

All COVID-19 costs will be coded to a dedicated analysis code (43056 CORONAVIRUS). Itemised costs will be reported monthly to NHSEI by the respective finance teams as required. Capital and revenue reimbursement is expected on a monthly basis directly from NHSEI.

FINANCIAL REPORTING

COVID-19 costs will be specifically reported on a monthly basis as part of the monthly financial reporting. Regular updates will be provided to the daily Covid Huddle meeting as appropriate.

APPROVAL

These interim financial governance arrangements have been developed by the Chief Finance Officer and approved by the Accountable Officer.

REVIEW

Recognising that the position continues to develop day by day, this guidance will be kept under continuous review with any amendments communicated through the daily Covid Huddle meeting.