



AP0700 – SIGNING AUTHORITY

1.0 PURPOSE

- To provide a sound control framework to guide signing authorities throughout Interior Health (IH) that is designed to balance the needs of operational effectiveness and risk management.
- To communicate the framework used for the solicitation of competitive bids within IH.

2.0 DEFINITIONS

TERM	DEFINITION
Client Services	Any type of clinical program where services are delivered directly to patients/clients, excluding physician services.
Commitment	Commitment values and limits are assumed to be total costs including taxes (net of expected rebates).
Cost Centre Manager	An individual with budgetary accountability for a particular business unit (cost centre).
Direct Award	A contract that is signed without going through either an open or a restricted procurement process.
Departmental Revenues	Miscellaneous revenue generally invoiced by Billing & Accounts Receivable Department on behalf of a department for non-clinical services including but not limited to billing services, rental charges, or inter-entity charges.
Employee	A person in the service of IH under any contract of hire or employment, expressed or implied, oral or written, where IH is the employer with the power or right to control and direct the material details of how work is to be performed.
Emergency Purchase	A circumstance in which an immediate purchase or procurement decision is necessary to prevent a serious delay, which delay reasonably could result in a danger to life, damage to property, or suspension of the provision of an essential service.
Sales of Goods or Services	Arrangements made to sell goods (eg. supplies or drugs) or services not considered “client services” (eg. subcontracting a service to a third party organization).
Signing Authority	The authority granted to an individual by virtue of their position in the organization to approve or commit the expenditure of funds on behalf of IH, which includes: <ol style="list-style-type: none"> Spending Authority - the authority granted to commit funds from a specific cost centre budget within IH towards a particular purposes; Contracting Authority - the authority granted to commit IH as an organization to fulfilling specific contractual obligations, including, but not limited to, financial obligations; and Payment Authority - the authority to actually release specific amounts of money (from bank accounts) in fulfillment of various contractual obligations.



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3.0 POLICY

- The Chief Executive Officer has been granted certain Signing Authority under the Board approved *Limits of Spending Authority* Policy ([see Table A](#)) and delegates this authority within defined limits to appropriate staff, including external authorized agents who manage IH Employees or processes, in order to facilitate day-to-day operations.
- IH shall ensure clear and transparent processes for persons authorized to make decisions on behalf of the organization.
- All individuals with Signing Authority shall comply with the intent of this Policy. The application of contracting and spending authority levels in accordance with limits described in Tables A, B, and C may not be adjusted by artificial means such as altering or sub-dividing payments, invoices, or contracts into smaller amounts, or other mechanisms.
- This policy assumes that those with signing authority comply with Interior Health's Standards of Conduct (Policy AU0100) and understand that an individual should not approve a transaction that will confer a benefit on that same individual or that individual's family members or related parties. See Section 2.7, Conflict of Interest in Interior Health's Standards of Conduct for further clarification.

3.1 Signing Authority

- Signing Authority is the authority granted to an individual by virtue of their position in the organization to approve or commit the expenditure of funds on behalf of IH. The three types of Signing Authority are Spending Authority, Contracting Authority, and Payment Authority.
- Signing authorities will be established to match, to the extent possible, decision making and accountability at the level of the organization closest to the operational impact of those decisions.
- Each Signing Authority may have a designated alternate who, at the discretion of the Signing Authority, may act on their behalf. The Signing Authority may specify the circumstances under which the alternate may act, and the actions of the designate are the responsibility of the Signing Authority. The Signing Authority can designate an alternate as primary or secondary. Primary alternates have the same spending authority as the Signing Authority, whereas secondary alternates spending authority can be no greater than \$25,000 for operating departments. In the absence of an alternate, Signing Authority reverts to the individual's next available manager with oversight of the individual. A designated alternate may not exercise Signing Authority beyond the specific position for which they are designated.
- The scope of authority for each individual will be kept and maintained by Financial Services and the PHSA Supply Chain (SC) Department. Master listings and updates of Signing Authority parameters will be reviewed periodically by the Financial Services Department to verify Signing Authority for specific functions. Individual changes in signing authorities are to be enacted immediately by communicating this information to the Financial Services Department.



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3.1.1 Spending Authority

- An individual with spending authority has full authority to commit funds within their budget (subject to limitation outlined in [Table B](#)) and will be held fully accountable for those commitments. Spending Authority is restricted to the Cost Centre Manager (and his/her superiors), who is accountable for the budget of a particular department or division within IH. It is the responsibility of Cost Centre Managers with spending authority to ensure that sufficient funds exist within a budget to cover a particular expenditure as well as all known obligations.
- It is expected that each individual's ability to exercise spending authority wisely will be a significant component in their performance evaluation. To this end, individuals are expected to discuss unusual amounts, multi-year commitments or expenditures in excess of budget with their superiors before making such spending commitments.
- Staff with assigned spending authority may not authorize their own compensation or business expenses. These expenses must be approved by their immediate superior or, in the absence of this person, by someone at a more senior level in the organization.
- [Table B](#) describes limitations placed on the spending authority of the Cost Centre Manager by outlining:
 - specific required "prior approvals" before commitments are made; and
 - specific "contracting authorities" that must be engaged before commitments are made.
- From time to time, spending authority may be restricted to assist with achievement of organizational mandates such as a balanced budget.

3.1.2 Contracting Authority

- Contracting authorities are permitted to sign legal documentation giving effect to contracts. Contracting authority is limited to a select number of individuals who, by virtue of their position and background, have the ability to examine fully the implications of a particular contractual obligation. Examples of areas that would have specific contracting authorities designated include, but are not limited to:
 - goods and services;
 - physician or service provider contracts;
 - capital asset acquisition, disposal and upgrades; and
 - leases.
- Cost Centre Managers must engage contracting authorities as specified in [Table B](#). Contracting authorities must ensure that prior approvals and specific spending authority is obtained to commit funds from a particular cost centre budget prior to entering into a contractual obligation. The ability of each contracting authority to negotiate and execute contracts which are in the best interests of IH and meet the needs of the relevant spending authority will be a significant component in their performance evaluation. All individuals reviewing and awarding contracts must sign a conflict of interest declaration.



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- IH receives support services from PHSA for the purpose of finding opportunities where the Health Authorities can improve cost effectiveness by working collaboratively on common services. Contracts resulting from PHSA Supply Chain Request for Proposals (RFP's) will be between the supplier and PHSA. PHSA authority to sign contracts as the Health Authorities' agent, on behalf of the Health Authorities, is specified in [Table C](#).
- IH will recognize any contract established on its behalf by an authorized agent and will take disciplinary action against individuals that contravene authority levels.

3.1.3 Payment Authority

Payment Authority is restricted to the Financial Services, PHSA Accounts Payable, and Contracted Services (CS) Departments. Payment Authority is the function of releasing payment for authorized operating and capital expenditures or for authorized investment purposes from IH bank accounts. Payment Authority is tightly controlled given the high-risk nature of this function.

3.2 Purchasing Methods

- To establish a fair and reasonable framework for the solicitation of competitive bids within IH, specific purchasing methods are outlined for the PHSA Supply Chain, Contracted Services, Facilities Management & Operations and Capital Planning Departments.
- IH **will not be responsible** for, or make settlement for, any commitment that has not been authorized by the PHSA Supply Chain, Contracted Services, Facilities Management & Operations or Capital Planning Departments.

3.2.1 PHSA Supply Chain Purchasing Methods

- For commitments specified in [Table C](#), the PHSA Supply Chain Departments are responsible for adhering to the ethics and business policies as described in PHSA's *Fair & Competitive Bidding Policy*, which outlines the following competitive bid requirements:

Commitments under \$50,000:

No competitive process is required, however the PHSA Buyer and/or IH end user will endeavour to use reasonable means to ensure best value to IH.

Commitments over \$50,000 and under \$75,000:

Minimum of three (3) written quotations must be obtained by the appropriate buyer and retained.

Commitments over \$75,000:

A public competitive procurement process, such as request for proposal (RFP) will be issued using PHSA SC Standard RFP Documentation. Exceptions to public bidding must be in compliance with the PHSA Fair & Competitive Bidding Policy.

- Similar or related transactions should be counted as one transaction for the purposes of determining contract value.



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- Goods and service contracts or arrangements whose term is longer than one year shall be valued based on the total contractual amount for the duration of the contract or commitment.
- Exclusions to the above competitive bid requirements are outlined in PHSA's *Fair & Competitive Bidding Policy*.
- The user department in conjunction with PHSA Supply Chain Department has the responsibility to ensure that the quality and quantity selected will fulfill the requirements.
- Standardization will be put into effect where practical.
- The quality of supplies to be purchased will be continually assessed as samples of new products are brought in for evaluation as coordinated by PHSA Supply Chain with the user department.

3.2.2 Interior Health Contracted Services Purchasing Methods

- Interior Health Contracted Services is accountable to the organization to ensure contracts for Client Services are appropriately procured, renewed, monitored, and terminated.
- A formal procurement process is required prior to engaging a contractor to provide Client Services unless the conditions for Direct Award have been met (see Reference #9: *Client Services Procurement and Termination Policy* [for exclusions](#)). All procurement of Client Services including provision for Direct Award will follow practices established in the IH *Client Services Procurement and Termination Policy* (Interior Health Contracted Services Departmental policy) and the *Ministry of Finance Core Policy and Procedures Manual* (Chapter 6 - Procurement).

3.2.3 Capital Planning & Projects/Facilities Management & Operations Purchasing Methods

- The Capital Planning & Projects and Facilities Management & Operations Departments are responsible for construction and renovation contracts (including equipment and leases) covered by the following competitive bid requirements:

Commitments up to \$25,000:

No competitive process is required however a written quote from the selected vendor shall be received prior to IH's commitment to proceed.

Commitments over \$25,000 and up to \$75,000:

Minimum of three (3) written quotations/proposals must be requested and responses shall be obtained by the appropriate Project Assistant prior to IH's commitment to proceed.

Commitments over \$75,000:

A request for proposal (RFP) or invitation to bid will be issued using IH standard documentation.



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- All RFPs or invitations to bid greater than \$75,000 are to be posted on the British Columbia (BC) Bid website.
- Exclusions (e.g. Direct Awards and P3 site procurement <\$50,000) for construction/renovation purchasing methods may be authorized:
 - by the Corporate Director, Facilities Management & Operations or the Corporate Director, Capital Planning for commitments up to \$50,000; or
 - by the Chief Financial Officer (CFO) for commitments greater than or equal to \$50,000 in specific circumstances as defined in the IH's Capital Planning & Projects Procurement & Fair Business Practices guidelines and the following trade agreements:
 1. [Canadian Free Trade Agreement \(CFTA\), Article 513: Limited Tendering](#)
 2. [New West Partnership Trade Agreement \(NWPTA\), Part V, Exceptions](#)
 3. [Canadian-European Union Comprehensive Economic and Trade Agreement \(CETA\), Article 19.12: Limited Tendering](#)

4.0 REFERENCES

1. *Ministry of Finance Core Policy and Procedures Manual*
2. *PHSA Fair & Competitive Procurement Policy*:
<http://pod/hssbc/supplychain/AboutUs/Policies/Documents/SC011%20Fair%20and%20Competitive%20Procurement%20Policy.pdf>
3. [Limits of Spending Authority Policy](#), Board Guidelines and Policies Section 3.04
4. [Acquisition & Disposition of Property Assets Policy](#), Board Guidelines and Policies Section 3.09
5. [AP0500 – Leased Space, Management of](#)
6. [AQ0100 – Architects, Engineers, and Quantity Surveyors, Use of](#)
7. [AU0100 – Standards of Conduct for Interior Health Employees](#)
8. [AU3000 – Conferences – Approval and Funding of](#)
9. [Client Services Procurement and Termination Policy, Contracted Services policy](#)



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TABLE A - BOARD LIMITATIONS ON SPENDING AUTHORITY

(see *Limits of Spending Authority Policy*, Board Governance Manual Section 3.04)

	Type of Commitment	Conditions for Board Approval
1	Capital	Prior approval needed for items in excess of \$2,000,000 (new or substitution) and the annual Capital Budget Plan.
2	Emergency Capital Purchases	Items in excess of \$2,000,000 will be submitted to next regularly scheduled Board meeting after the commitment is made.
3	Increases in Approved Capital Budget	Board prior approval required for increases of more than \$2,000,000
4	Submissions to Government	Board prior approval for specified reporting submissions as required by the Ministry of Health including but not limited to: annual Health Service Plan, annual Budget Management Plan, quarterly Appendix C reporting.
5	Submissions to Regional Hospital Districts	Board prior approval needed for specific Regional Hospital District decisions (e.g. capital items > \$2,000,000)
6	Business Ventures, Service/Program Changes	CEO recommends to the Board any business ventures/services/programs which are an extension of or partial permanent curtailment of existing Regional services. CEO recommends to the Board for approval any new business ventures/services/programs or total permanent curtailment of existing business ventures/programs.
7	Debt Acquisition	Board prior approval needed for mortgages, lines of credit and other debt instruments including capital leases.
8	Acquisition or Disposal of Real Property < \$150,000 (see <i>Acquisitions & Dispositions of Property Assets Policy</i> , Board Guidelines and Policies Section 3.9)	May be presented to the Board for approval at the first scheduled meeting following the completion of the transaction.
9	Acquisition or Disposal of Real Property > \$150,000 (see <i>Acquisitions & Dispositions of Property Assets Policy</i> , Board Guidelines and Policies Section 3.9)	Board prior approval required
10	Contracts (Operating)	Board prior approval required for contracts greater than 10 years in length OR representing a commitment of more than \$5,000,000 per annum.
11	Client Services Contracts	Board prior approval required for contracts longer than 10 years OR new, termination, significant amendments representing a commitment of more than \$5,000,000 per annum.
12	Operating Leases	Board pre-approval required for contracts greater than 10 years OR representing a commitment of more than \$1,000,000 per annum.
13	Benefit Plans	Board prior approval required to implement changes to employee benefit plans as recommended by the Health Employers Association of BC (HEABC).
14	External Auditors	All
15	Write-off of Bad Debt	Board prior approval required for write-offs of greater than \$2,000,000



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TABLE B - LIMITATIONS ON SIGNING AUTHORITY

Conditions when spending authorities must seek “prior approval” **and** work with specific “contracting authorities” before making commitments.

Type of Commitment		Prior Approval	Contracting Authority	Spending Authority
OPERATIONS				
1.0	Time Card and Business Expenses Related to Yourself	IS	n/a	CCM
2.0	Out-of-Country Travel	VP	n/a	CCM
3.0	Digital Health Hardware¹			
3.1	Purchase Cell Phone or Smart Phone	VP & MMC	SC	CCM
3.2	Purchase Site Telephone Switch or Nurse Call/Vocera <\$5,000	VP & MMC	SC	CCM
3.3	Purchase PC/Laptop/Tablet <\$5,000	MTR	SC	CCM
3.4	Purchase Fax/Printer/Copier < \$5,000	D & MTR	SC	CCM
4.0	Digital Health Software & Other¹			
4.1	Access to Systems for External Organizations	CTO	n/a	CCM
4.2	Purchase “Non-IH standard” Departmental Software < \$10,000	CIO	SC	CCM
4.3	Purchase Enterprise Software > \$10,000	CIO	SC	CCM
4.4	Purchase Network Connection to New Site	CTO	SC	CCM
4.5	Purchase Wireless Service to a Site/Department	CTO	SC	CCM
4.6	Purchase Subscription Software	CIO	SC	CCM
5.0	Human Resources			
5.1	Enter into Employment Service Contracts >\$10,000	VPHR & VP	HR	CCM
5.2	Exemption from Competition for Excluded Positions	VPHR & VP	HR	CCM
5.3	Commencement Salary outside of Assessed Range	VPHR ⁸	HR	CCM
5.4	Compensation Equity Adjustment	VPHR & VP	HR	CCM
5.5	General Economic Compensation Adjustments	CEO	HR	CCM
5.6	Create New Included Position (temporary or permanent)	HRBP & BC & D	n/a	CCM
5.7	Create New Excluded Position (temporary or permanent)	VP	n/a	CCM
5.8	Split a Position or Change a Rotation	HRBP & BC	n/a	CCM
5.9	Extension of Temporary Position	ERA & BC & D	HR	CCM
5.10	Conversion of Non-salary Dollars to Salary Funding	D & BC	n/a	CCM
5.11	Paid Extended Leave of Absence	D	HR	CCM
5.12	Vacation Payouts > \$10,000	VP	HR	CCM
5.13	Severances < \$100,000 outside the Union Contract Terms	VP	HR	CDLR
5.14	Severances > \$100,000	CEO & VP	HR	VPHR
5.15	Collective Agreement Letters/Memorandum of Understanding	n/a	HR	HR
5.16	Sign Collective Agreement	CEO	HR	VPHR
5.17	Education Affiliation Agreements	CNO	n/a	n/a
5.18	Benefit Plans	Board	n/a	VPHR
5.19	Secondments of IH Employees to External Organizations	VPHR & BC & D	HR	CCM
5.20	Secondments of IH Employees within IH for terms of one year or less	VP	HR	CCM
5.21	Secondments of IH Employees within IH for terms of greater than one year	VPHR	HR	CCM
6.0	Revenues and Revenue Contracts			
6.1	Departmental Revenues <\$100,000	BARM & DBO & D	BOS	ED
6.2	Departmental Revenues ≥\$100,000	BARM & CDBO & D	BOS	ED
6.3	Client Service Revenues	BARM & CDBO & D	CS	ED
6.4	Sales of Goods or Services < \$100,000 (See Table C, 2.0)	DBO	BOS	CDBO
6.5	Sales of Goods or Services > \$100,000 (See Table C, 2.0)	CFO	BOS	CDBO
6.6	Schedule of Fees and Charges	CFO	n/a	CON
6.7	Parking Rates	CEO	n/a	CDFMO
6.8	Operating Lease Revenue	BARM & CDBO	CDFMO	CSD
7.0	Bad Debts/ Write Offs			
7.1	< \$1,000	BARS	n/a	BAR
7.2	> \$1,000 and < \$5,000	BARC	n/a	BAR
7.3	≥ \$5,000 and < \$10,000	BARM	n/a	BAR
7.4	≥ \$10,000 and < \$300,000	CON	n/a	BAR
7.5	> \$300,000 and < \$2,000,000	CFO	n/a	CON
7.6	≥ \$2,000,000	Board	n/a	CFO



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TABLE B (continued) - LIMITATIONS ON SIGNING AUTHORITY

Type of Commitment		Prior Approval	Contracting Authority	Spending Authority
OPERATIONS (continued)				
8.0	Operating Leases or Rental Expenses			
8.1	Equipment < \$100,000 per annum	CDBO	SC	CCM
8.2	Equipment > \$100,000 per annum	CFO	SC	VP
8.3	Property < \$1,000,000 per annum	CFO	CDFMO	VPCCS
8.4	Property ≥ \$1,000,000 per annum OR extending 10 years	Board	CFO	VPCCS
8.5	Renewal for Space or Property (<10% increase)	CDFMO	CSD	CDFMO
8.6	Renewal for Space or Property (≥10% increase)	CFO	CDFMO	VPCCS
8.7	Space < \$1,000,000 per annum	VP	CDFMO	VPCCS
8.8	Space ≥ \$1,000,000 per annum OR extending 10 years	Board	CFO	VPCCS
9.0	Legal	D	n/a	CCM
10.0	External Auditors	Board	SC	CON
11.0	Mortgages/Debt Instruments (new/renewals)	Board & MoHS	n/a	CFO & CON
12.0	Physician Clinical Service Contracts (amounts are annual commitments)³			
New Contracts (internally or externally funded):				
12.1	< \$50,000	VPM & BC	MA	EDMA
12.2	≥ \$50,000 < \$250,000	VPM & DBO	MA	EDMA & S/EMD
12.3	≥ \$250,000 < \$5,000,000	VPM & VP	MA	VPM & CFO
12.4	≥ \$5,000,000	Board & CEO	MA	VPM & CFO
12.5	External Funding Contract	As per above	MA	EDMA
Amendments/Renewals (amounts are the value of the amendment, not total underlying contract value):				
12.6	< \$50,000	EDMA & BC	MA	EDMA
12.7	≥ \$50,000 < \$250,000	S/EMD & DBO	MA	EDMA & S/EMD
12.8	> \$250,000 < \$1,000,000	VPM & D & CDBO	MA	VP & S/EMD
12.9	≥ \$1,000,000 < \$5,000,000	VP & CDBO	MA	VPM & CFO
12.10	≥ \$5,000,000	Board & VP	MA	VPM & CFO
Terminations:				
12.11	< \$15,000	D	MA	EDMA
12.12	> \$15,000 < \$250,000	VP & DBO	MA	EDMA
12.13	> \$250,000 < \$5,000,000	VPM & CFO	MA	EDMA
12.14	> \$5,000,000	Board & VP	MA	VPM & CFO
13.0	Physician Administrative Service Contracts (amounts are annual commitments)^{2,3}			
13.1	New Contracts < \$50,000	BC	MA	EDMA & S/EMD or EDMA & EDCO
13.2	New Contracts ≥ \$50,000	DBO	MA	EDMA & S/EMD or EDMA & EDCO
13.3	New Contracts ≥ \$250,000	VPM & VPHR & CDBO	MA	VPM or VP
13.4	Renewals	EDMA	MA	EDMA & S/EMD or EDMA & EDCO
13.5	Amendments < 3% per annum	EDMA	MA	EDMA & S/EMD or EDMA & EDCO
13.6	Amendments ≥ 3% per annum	VPM & DBO	MA	EDMA & S/EMD or EDMA & EDCO
13.7	Amendments ≥ \$100,000 per annum	VPM & VPHR & DBO	MA	VPM or VP



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TABLE B (continued) - LIMITATIONS ON SIGNING AUTHORITY

	Type of Commitment	Prior Approval	Contracting Authority	Spending Authority
OPERATIONS (continued)				
14.0	Physician Administrators/Clinicians on Salary	VPM & VPHR	HR & MA	CCM
15.0	Consultant Contracts and Non-Client Service Contracts			
15.1	< \$25,000	VP	SC, CP, FMO, BOS or MA	CCM
15.2	≥ \$25,000 and < \$100,000	CEO or CFO	SC, CP, FMO, BOS or MA	VP
15.3	≥ \$100,000	SET	SC, CP, FMO, BOS or MA	VP
15.4	Related to Digital Health initiatives	VPDH & the above	See above (15.1 to 15.3)	See above (15.1 to 15.3)
15.5	≥ \$25,000 Related to HR organizational/Employee development	VPHR & the above	See above (15.1 to 15.3)	See above (15.1 to 15.3)
15.6	≥ \$5,000 Related to communications and marketing	VPC & the above	See above (15.1 to 15.3)	See above (15.1 to 15.3)
15.7	Related to Capital Projects (see Table B, section 19.0)			
15.8	Letters of Intent or Participation Agreements for Provincially negotiated initiatives <\$2,000,000	CFO	PHSA	VP
15.9	Letters of Intent or Participation Agreements for Provincially negotiated initiatives >\$2,000,000	SET	PHSA	VP
16.0	Service Contracts (Signing Authority Limits are based on the annual commitment. For multi-year contracts, use the highest annual value within the contract to assess signing authority requirements. For contracts with <1 year term, use the actual contract value.)			
	Client Service Contracts - New Contracts or Amendments or Renewals where change is >10% difference from prior version of contract:			
16.1	< \$100,000	BC & CCM & D	CS	ED
16.2	≥ \$100,000 < \$250,000	VP & DBO & CCM & D	CS	ED
16.3	> \$250,000 < \$5,000,000	VP & CDBO & CCM & ED	CS	CFO
16.4	≥ \$5,000,000	Board & VP & CCM	CS	CFO
	Client Service Contract Amendments or Renewals where change is <10% from prior version of contract:			
16.5	< \$100,000	BC & CCM	CS	D
16.6	≥ \$100,000 < \$250,000	DBO & CCM & D	CS	ED
16.7	≥ \$250,000 < \$1,000,000	CDBO & CCM & ED	CS	VP
16.8	≥ \$1,000,000 < \$5,000,000	VP & CDBO & CCM	CS	CFO
16.9	≥ \$5,000,000	Board & VP & CCM	CS	CFO
	Client Service Contract Terminations:			
16.10	< \$15,000	D	CS	DCS
16.11	≥ \$15,000 < \$250,000	VP	CS	DCS
16.12	≥ \$250,000 < \$5,000,000	CFO	CS	DCS
16.13	> \$5,000,000	Board & VP	CS	CFO
17.0	Maintenance Improvement Projects			
17.1	Program priority	CDFMO & AD or DBO	FMO	FMO
17.2	Infrastructure priority	CDFMO	FMO	FMO
18.0	Inventory Write Down/Write Off			
18.1	< \$10,000	SC	SC	CCM
18.2	≥ \$10,000 and ≤ \$100,000	CON	SC	CCM
18.3	≥ \$100,000 and ≤ \$1,000,000	CFO	SCD	CCM
18.4	≥ \$1,000,000	Board	SCD	CCM



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TABLE B (continued) - LIMITATIONS ON SIGNING AUTHORITY

Type of Commitment	Prior Approval	Contracting Authority	Spending Authority
CAPITAL^{4, 5}			
19.0	Within Annual Board-Approved Capital Budget (Construction/Renovation projects, Leasehold improvements, Digital Health projects, & Equipment and necessary consultant contracts)		
19.1	< \$100,000	n/a	CDFMO or SC
19.2	≥ \$100,000 and < \$500,000	n/a	CPP or CDFMO or SC
19.3	≥ \$500,000 and < \$2,000,000	n/a	CPO or CDFMO or SC
19.4	≥ \$2,000,000	Board	CPP or SC
19.5	To Commence Planning for Projects > \$2,000,000	VP & CFO	CPP
20.0	Outside of Annual Board-Approved Capital Budget (using equity and/or other funding sources)		
20.1	< \$100,000 (3 rd Party funding)	ED & AD or CDBO or DFMO or CIO	CDFMO or SC
20.2	< \$100,000 (Equity funding)	CDBO	CDFMO or SC
20.3	≥ \$100,000 and < \$500,000	CFO	CPP or CDFMO or SC
20.4	≥ \$500,000 and < \$2,000,000	SET	CPO or CDFMO or SC
20.5	≥ \$2,000,000	Board	CPP or SC
20.6	To Commence Planning for Projects > \$2,000,000	VPCCS & CFO	CPP
21.0	Emergency Purchases (using equity and other funding sources)		
21.1	< \$100,000 (Other funding sources)	ED & AD or CDBO or CDFMO or CIO	CDFMO or SC
21.2	< \$100,000 (Equity funding)	CDBO	CDFMO or SC
21.3	≥ \$100,000 and < \$500,000	CDBO	CPP or CDFMO or SC
21.4	≥ \$500,000 and < \$2,000,000	CFO	CPO or CDFMO or SC
21.5	≥ \$2,000,000	Board	CPO or SC
22.0	Increases in Approved Capital Budget		
22.1	< \$100,000	CDBO	CPP or CDFMO or SC
22.2	≥ \$100,000 and < \$500,000	CFO	CPP or CDFMO or SC
22.3	≥ \$500,000 and < \$2,000,000	SET	CPP or CDFMO or SC
22.4	≥ \$2,000,000	Board	CPP or CDFMO or SC
23.0	Substitution of Previously Approved Capital Acquisition		
23.1	< \$100,000	ED & AD or CDBO or CDFMO or CIO	CDFMO or SC
23.2	≥ \$100,000 and < \$2,000,000	CFO	FMO or SC
23.3	≥ \$2,000,000	Board	FMO or SC
24.0	Sale/Disposal of Capital Asset⁷ (excluding real property)		
24.1	< \$50,000 (proceeds on disposition)	CCM	SC & CA or FMO & CA
24.2	≥ \$50,000 and < \$300,000 (proceeds on disposition)	VP	SC & CA
24.3	> \$300,000 (proceeds on disposition)	CFO	SC & CA
24.4	≥ \$1,000,000 (historical cost)	CFO	SC & CA
25.0	Acquisition or Disposal of Real Property⁷		
25.0	Board	FMO	CFO
26.0	Asset Write Down		
26.1	< \$100,000	CON	CA
26.2	> \$100,000	CFO	CA



TABLE B (continued)

Notes:

1. No direct purchases by Cost Centre Managers (user departments) are authorized, including purchase with an IH credit card. All purchases must be reviewed by authorized Digital Health staff who will forward approved requests to Supply Chain for purchase. Items >\$5,000 follow the Capital limitations in sections 18 through 25 of this table.
2. Physician Administrative Service Contracts include contracts for Clinical Department Heads, Chiefs of Staff, etc. Clinical Department Head contracts will be subsequently endorsed by the Board on recommendations from the site Medical Advisory Committee (MAC).
3. S/EMD – Senior/Executive Medical Director authority includes both salaried and contracted roles.
4. Capital Accounting makes the determination whether an item is a capital expenditure or an operating expenditure. The \$5,000 threshold for equipment, \$50,000 for facilities projects and \$10,000 for Digital Health projects is general guidance for defining an asset as capital and is not the only determining factor. Please consult with Capital Accounting to determine whether an item is in fact capital or operating in nature.
5. For the purposes of capital projects, the Project Manager designated to the 1.800 project number is deemed to be the CCM for that project, and would sign invoices (within approved project budget).
6. Spending authority in these specific cases is restricted to CDFMO for facility maintenance projects, CPO for CPP projects, or CIO for Digital Health projects.
7. Proceeds from the disposition of a capital asset will be processed by Capital Accounting and will be used by the Interior Health Board and Senior Executive Team in future funding allocation decisions.
8. CEO will approve commencement salary outside of assessed range within HR portfolio.

Legend:

A	Administrator	EDCO	Executive Director, Clinical Operations
AD	Acute Health Service Director (including Tertiary Administrators)	EDMA	Executive Director, Medical Affairs
BARC	Billings & Accounts Receivable Coordinator	ERA	Employee Relations Advisor
BARS	Billings & Accounts Receivable Supervisor	FMO	Facilities Management & Operations Department
BARM	Billings & Accounts Receivable Manager	HRBP	Human Resources Business Partner
BC	Business Consultant		
CA	Capital Accounting Department Manager		
CCM	Cost Centre Manager	IS	Immediate Supervisor or their delegate in their absence.
CDBO	Corporate Director, Business Operations	MA	Medical Affairs Department
CDFMO	Corporate Director, Facilities Management & Operations	MMC	Manager, Mobility & Conferencing (IMIT)
CDLR	Corporate Director, Employee & Labour Relations	MTR	Manager, Technology Refresh (IMIT)
CEO	Chief Executive Officer	MoHS	Ministry of Health Services
CFO	Chief Financial Officer	PS	Plant Services Department
CIO	Chief Information Officer	SC	PHSA Supply Chain Department
CNO	Chief Nursing Officer	SCD	Supply Chain Director PHSA
CON	Controller	S/EMD	Senior/Executive Medical Director
CPO	Chief Project Officer	SET	Senior Executive Team
CPP	Capital Planning & Projects Department	VP	Vice President of portfolio
CS	Contracted Services Department	VPCCS	VP, Clinical & Corporate Services
CSD	Commercial Services, Director	VPC	VP, Communications & Culture
CTO	Chief Technology Officer	VPHR	VP, Human Resources
D	Director	VPM	VP, Medicine & Quality
DBO	Director, Business Operations	VPDH	VP, Digital Health
DCS	Director, Contracted Services		



AP0700 – SIGNING AUTHORITY

TABLE C - CONTRACTING AUTHORITY OF PHSA

(an excerpt from PHSA Procurement Contracting Authority Policy as of March 31, 2016) Refer to [PHSA Procurement Contracting Authority](#) for updated policy.)

	Commitment for In Scope SC Services	Procurement Contracting Authority by position value representing Commitment
1.0	Supplies, materials, services, capital and supply contract procurement.	<ul style="list-style-type: none"> • Supply Chain Purchasing Clerk less than \$15K (purchase order only, no contract signing authority) • Supply Chain Buyer less than \$100K; • Supply Chain Team Lead less than \$250K; • Supply Chain Lead or Manager less than \$1M; • Supply Chain Director less than \$2M; • Supply Chain Provincial Director less than \$10M; • PHSA VP & CFO <\$20M; • PHSA CEO <\$40M; • PHSA Board more than \$40M.
2.0	Inventory write-down (per instance)	<ul style="list-style-type: none"> • Provincial Director, Warehouse & Logistics less than \$10K; • Supply Chain VP with disclosure to Client Services Committee more than \$10K
3.0	Sale or disposal of surplus assets forming part of a new supply chain contract or otherwise (value per asset).	<ul style="list-style-type: none"> • VP Supply Chain less than \$100K; • Minister of Health Services more than \$100K
4.0	Strategic Partnerships with any Group Purchasing Organization (GPO) or any organization outside British Columbia.	<ul style="list-style-type: none"> • PHSA Board.
5.0	Contract by contract participation in any GPO or Joint/collaborative venture (JV) (once GPO or JV agreed by Board).	<ul style="list-style-type: none"> • Supply Chain VP less than \$5M • Executive Lead, Support Services less than \$10M; • PHSA Board more than \$10M.