



Shropshire Community Health NHS Trust

Policies, Procedures, Guidelines and Protocols

Document Details		
Title	Code of Business Conduct- Managing Conflicts of Interest Policy	
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Local Ref (optional)		
Main points the document covers	<p>The Policy sets out the standards of business conduct expected of all Trust staff and gives guidance on:</p> <ul style="list-style-type: none"> • conflicts of interest, bribery, transparency and probity before accepting external position or accepting gifts and hospitality • declaring all interests, gifts and hospitality • the Nolan Principles of Public Life 	
Who is the document aimed at?	All Trust Members of staff	
Lead Author	Stanley Mukwenya, Head of Governance & Risk	
Additional Authors	Alun Gordon, Lead Local Counter Fraud Specialist	
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Who the policy will be distributed to	Distributed to all Trust staff	
Method	<p>Electronically by datix circulation to Board Members and Executive Directors, Line Managers and available via the Trust staff-zone to all staff.</p> <p>The launch of the policy will have executive support and will be promoted by Head Governance and Risk with support from the Lead LCFS in the weekly noticeboard to ensure all staff are made aware of the policy.</p> <p>At corporate induction a guidance webpage on staff-zone has been set up for new starters. At the virtual induction staff will be signposted to the location policy and to the online declaration of interest form on datix.</p> <p>An evaluation awareness quiz/ survey will take place annually to test staff knowledge of the policy and staff understanding of how to declare interests, gifts and hospitality.</p>	
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No	Date	Amendment
1	October 2021	New Policy to bring in best practice from across the NHS and management of conflicts of interest guidance issued by NHS England

Contents

Section	Page
Who should read this document	3
Key Messages	3
Introduction	3
Key Terms	3
Staff	4
Decision Making Staff	5
Identification, declaration and review of interests	5
How to make a declaration	5
Proactive review of interests	6
Maintenance	6
Publication	7
Wider transparency initiatives	7
Management of Interests Common situations	7
- Gifts	8
- Hospitality	9
- Clinical private practice	10
- Outside employment (including self-employment)	11
- Shareholdings and other ownership issues	12
- Patients	12
- Loyalty interests	12
- Donations	13
- Sponsored events	14
- Sponsored research	14
- Sponsored posts	14
Strategic Decision Groups	15
Procurement	15
Dealing with breaches	16
Appendix 1- Seven Principles of Public Life (Nolan Principles)	18
Appendix 2- Potential sanctions for Breaches of this Policy	19
Appendix 3 - Code of Business Conduct Guidance on Staff-zone- How to declare interests, gifts and hospitality.	21

Who should read this document?

All employees, including volunteers, as well as Executive and Non-Executive members (including co-opted members) and honorary members.

Key Messages

The Managing Conflicts of Interest Policy describes the public service values which underpin the work of the NHS and reflects guidance and best practice to which all staff are expected to have regard to.

In addition, all staff must abide by the Seven Principles of Public Life, the 'Nolan Principles' set out in Appendix 1 of this policy.

This policy will help staff manage conflicts of interest risks effectively. It:

- introduces consistent principles and rules,
- provides simple advice about what to do in common situations,
- supports good judgement about how to approach and manage interests
- gives guidance on conflicts of interest, bribery, transparency and probity before accepting external position or accepting gifts and hospitality
- gives guidance on declaring all interests, gifts and hospitality
- explains the Nolan Principles of Public Life

Policy/ Guideline/ Protocol

1. Preface

Shropshire Community Health (the 'organisation'), and the people who work with and for us, collaborate closely with other organisations, delivering high quality care for our patients.

These partnerships have many benefits and should help ensure that public money is spent efficiently and wisely. But there is a risk that conflicts of interest may arise.

2. Introduction

Providing best value for taxpayers and ensuring that decisions are taken transparently and clearly, are both key principles in the NHS Constitution. We are committed to maximising our resources for the benefit of the whole community.

The organisation is committed to maximising resources for the benefit of all the communities it serves. The people who work for the organisation collaborate closely with other companies and suppliers to deliver high quality care for our patients and service users. These partnerships have many benefits and should help ensure that public money is spent efficiently and wisely. But there is a risk that conflicts of interest may arise. As an organisation, and as individuals, we have a duty to ensure that all our dealings are conducted to the highest standards of integrity and that NHS

monies are used wisely so that we are using our finite resources in the best interests of patients and service users.

Staff need to be both aware of, and follow, standards of conduct which both meet the requirements of NHS guidance, and the expectations of the Trust, patients and the general public. This code sets out the principles that are required.

3. Key Terms

3.1 A 'conflict of interest' is:

"A set of circumstances by which a reasonable person would consider that an individual's ability to apply judgement or act, in the context of delivering, commissioning, or assuring taxpayer funded health and care services is, or could be, impaired or influenced by another interest they hold."

A conflict of interest may be:

- Actual - there is a material conflict between one or more interests
- Potential – there is the possibility of a material conflict between one or more interests in the future

Staff may hold interests for which they cannot see potential conflict. However, caution is always advisable because others may see it differently and perceived conflicts of interest can be damaging. All interests should be declared where there is a risk of perceived improper conduct.

3.2 Interests fall into the following categories:

- **Financial interests:**

Where an individual may get direct financial benefit¹ from the consequences of a decision they are involved in making.

- **Non-financial professional interests:**

Where an individual may obtain a non-financial professional benefit from the consequences of a decision they are involved in making, such as increasing their professional reputation or promoting their professional career.

- **Non-financial personal interests:**

Where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit, because of decisions they are involved in making in their professional career.

- **Indirect interests:**

Where an individual has a close association² with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest and could stand to benefit from a decision they are involved in making.

¹ This may be a financial gain, or avoidance of a loss.

² A common sense approach should be applied to the term 'close association'. Such an association might arise, depending on the circumstances, through relationships with close family members and relatives, close friends and associates, and business partners.

4. Staff

The organisation utilises the skills of many different people, all of whom are vital to our work. This includes people on differing employment terms, who for the purposes of this policy we refer to as 'staff' and include:

- All salaried employees
- All prospective employees – who are part-way through recruitment
- Contractors and sub-contractors; and
- Agency staff

In addition, volunteers, as well as governors/ Non- executive Directors/ Lay Members, are for the purposes of this policy, considered as 'staff'.

5. Decision Making Staff

5.1 Some staff are more likely than others to have a decision making influence on the use of taxpayers' money, because of the requirements of their role. For the purposes of this guidance these people are referred to as 'decision making staff.'

Decision making staff in this organisation are:

- Executive and Non-Executive Directors (or equivalent roles) who have decision making roles which involve the spending of taxpayers' money
- Medical and Dental Staff with decision making responsibilities who are on non- Agenda for Change bandings (or maybe on Agenda for Change bandings) This could be for example, Consultants, Associate Specialists, GPs, Dentists or Specialty Doctors (e.g. clinical decision making prescribers, cremation forms completion, DVLA forms etc. etc.)
- Those at Agenda for Change Band 7 and above
- Administrative and clinical staff (of any band) who have the power to enter into employment or procurement contracts on behalf of their organisation
- Administrative and clinical staff (of any band) involved in decision making concerning the commissioning of service, purchasing of goods, medicines, medical devices or equipment, and formulary decisions.

6. Identification, declaration and review of interests

6.1 All staff should identify and declare material interests at the earliest opportunity (**and in any event within 28 days**). If staff are in any doubt as to whether an interest is material then they should declare it, so that it can be considered.

Declarations should be made:

- On appointment with the organisation
- When staff move to a new role or their responsibilities change significantly.
- As soon as circumstances change and new interests arise (for instance, in a meeting when interests staff hold are relevant to the matters in discussion).

6.2 How to make a declaration

The Declaration of Interest(s) form is available on datix allowing declarations to be added at any time. The link to the datix form is here:

https://web.datix.thirdparty.nhs.uk/Shropshire/live/index.php?form_id=3&module=RAM

Further clarity about what you should declare and where you can make these declarations can be sought from the Head Governance and Risk or the Lead Local Counter Fraud Specialist, if staff are uncertain about what is acceptable.

6.3 Proactive Review of Interests

6.3.1 All staff will be made aware of the requirement to make a declaration on appointment, as part of the recruitment and corporate induction process and/ or by their employment contract.

6.3.2 A dedicated section on staff-zone provides all staff with access to the Policy at any time and guidance of how to declare an interest, gift or hospitality. The organisation will utilise its internal communication channels to make staff aware of the requirement to declare interests, including gifts and hospitality. In addition, we will for:

- **Decision making Staff (Band 7 or above, or staff involved with procurement, including all medical and dental banded staff)**

Prompt decision making staff at corporate induction and there-after once yearly by an annual communication, or as part of their annual appraisal, to complete an annual on-line declaration on datix **to declare any actual or potential material interests or confirm that they have nothing to declare.**

- **Remaining Staff**

Prompt all staff at corporate induction and there-after at least once yearly by an annual communication, or as part of their annual appraisal to declare any actual or potential material interests.

6.3.3 All declarations on datix will be reviewed by the Line Manager in liaison with the Trust the Head Governance and Risk at least every 6 months, and any actual or potential material interests may require further discussion with the member of staff where appropriate.

6.4 Maintenance

The Director of People and Trust Secretary will maintain the Registers of Interests and a Registers of Gifts and Hospitality for the organisation as follows:

Register of Interests

- Outside employment/ self-employment (paid or unpaid work)
- Shareholding and other ownership interests
- Patents
- Loyalty interests
- Sponsored research
- Sponsored posts
- Clinical private practice

Register of Gifts and Hospitality

- Gifts
- Hospitality
- Donations
- Sponsored events

6.5 Publication

The organisation will publish, and make available to the public on its website, its Register of Interests and Register of Gifts and Hospitality (including decision making staff and staff) on a twice-yearly basis. Historic Registers of Interests and Registers of Gifts and Hospitality will be maintained for 6 years.

If staff have substantial grounds for believing that publication of their interests should not take place, then they should contact Trust Secretary/Governance Team to explain why. In exceptional circumstances, for instance where publication of information might put a member of staff **at risk of harm**, information **may be withheld or redacted** on public registers. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.

5.6 Wider transparency initiatives

The organisation fully supports wider transparency initiatives in healthcare, and we encourage staff to engage actively with these.

Relevant staff are strongly encouraged to give their consent for payments they receive from the pharmaceutical industry to be disclosed as part of the Association of British Pharmaceutical Industry (ABPI) Disclosure UK initiative. These “transfers of value” include payments relating to:

- Speaking at and chairing meetings
- Training services
- Advisory board meetings
- Fees and expenses paid to healthcare professionals
- Sponsorship of attendance at meetings, which includes registration fees and the costs of accommodation and travel, both inside and outside the UK
- Donations, grants and benefits in kind provided to healthcare organisations

Further information about the scheme can be found on the ABPI website:
<http://www.abpi.org.uk/our-work/disclosure/about/Pages/default.aspx>

Staff must also disclose the above information on the relevant Register of Interest or Register of Gifts and Hospitality.

Staff should be aware that the Lead Local Counter Fraud Specialist (Lead LCFS) regularly checks the Pharmaceutical Industry (ABPI) Disclosure register and the Companies House Register and staff that fail to disclose interests will be followed up with the Head Governance and Risk.

6. Management of Interests – General

- 6.1 If an interest is declared but there is no risk of a conflict arising then no action is warranted. However, if a material interest is declared then the general management actions that could be applied include:
- restricting staff involvement in associated discussions and excluding them from decision making
 - removing staff from the whole decision-making process
 - removing staff responsibility for an entire area of work
 - removing staff from their role altogether if they are unable to operate effectively in it because the conflict is so significant

Each case will be different and context-specific, and the Head Governance and Risk will always clarify the circumstances and issues with the individuals involved and may refer to the Director of People or Lead LCFS, as appropriate. Staff should maintain a written audit trail of information considered and actions taken.

Staff who declare material interests should also make their line manager or the person(s) they are working to aware of their existence.

7. Management of Interests – Common Situations

This section sets out the principles and rules to be adopted by staff in common situations, and what information should be declared.

7.1 Gifts

- Staff should not accept gifts that may affect, or be seen to affect, their professional judgement.
- Gifts from suppliers or contractors:
- Gifts from suppliers or contractors doing business (or likely to do business) with the organisation should be declined, whatever their value.
- Low cost branded promotional aids such as pens or post-it notes may, however, be accepted where they are under the value of £6³ in total, and need not be declared.

Gifts from other sources (e.g. patients, families, service users):

- Gifts of cash and vouchers to individuals should always be declined.
- Staff should not ask for any gifts.
- Gifts valued at over £50 should be treated with caution and only be accepted on behalf of the Trust, wherever possible not in a personal capacity. These should be declared by staff.
- Modest gifts accepted under a value of £50 do not need to be declared but should be shared with team colleagues where practical e.g. box of chocolates or biscuits
- A common sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value).
- Multiple gifts from the same source over a 12-month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.

7.1.2 What should be declared

- Staff name and their role with the organisation.

³ The £6 value has been selected with reference to existing industry guidance issued by the ABPI:
<http://www.pmcpa.org.uk/thecode/Pages/default.aspx>

- A description of the nature and value of the gift, including its source.
- Date of receipt.
- Any other relevant information (e.g. circumstances surrounding the gift, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

7.2 Hospitality

- Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.
- Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event.
- Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. This can be accepted, and must be declared, if modest and reasonable. Senior approval must be obtained.

7.2.1 Meals and refreshments:

- Under a value of £25 - may be accepted and need not be declared.
- Of a value between £25 and £75⁴ - may be accepted and must be declared.
- Over a value of £75 - should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on datix under Gifts and Hospitality as to why it was permissible to accept.
- A common sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or a reasonable estimate).

7.2.2 Travel and accommodation:

- Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared.
- Offers which go beyond modest, or are of a type that the organisation itself might not usually offer, need approval by senior staff, (e.g. By the responsible Executive Director, Corporate or Divisional Head of Service or Site Manager) should only be accepted in exceptional circumstances, and must be declared. A clear reason should be recorded on datix under Gifts and Hospitality as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
 - offers of business class or first class travel and accommodation (including domestic travel)
 - offers of foreign travel and accommodation.

7.2.3 What should be declared

- Staff name and their role with the organisation.
- The nature and value of the hospitality including the circumstances.
- Date of receipt.
- Any other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

7.3 Clinical Private Practice

⁴ The £75 value has been selected with reference to existing industry guidance issued by the ABPI
<http://www.pmcpa.org.uk/thecode/Pages/default.aspx>

It is not the policy of the Trust for Medical and Dental staff to use Trust Premises for Private Practice. Should any clinician be considering private practice they should read the guidance below and will require an authorisation from the Medical Director and Director of People before they can commence private practice on Trust premises.

Consultants and associate specialists employed under the Terms and Conditions of Service of Hospital Medical and Dental Staff may be permitted to carry out private practice or other work for the private sector, providing they do not do so within the time they are contracted to by the Trust. Specific queries relating to individual contracts of employment should be clarified with the Medical Director and Director of People. Any work should be subject to the conditions outlined in **“A Guide to the Management of Private Practice in the NHS.”** Consultants who have signed new contracts with the Trust will be subject to the terms applied to private practice in those contracts.

In Summary, if private practice has been authorised Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises⁵ including:

- Where they practise (name of private facility).
- What they practise (specialty, major procedures).
- When they practise (identified sessions/time commitment).

Clinical staff should (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):

- Seek prior approval of their organisation before taking up private practice **and seek agreement for their NHS Medical Secretary or any other NHS support staff who support their private practice by disclosing details of NHS staff they pay to support their clinical private practice**
- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.⁶
- Not accept direct or indirect financial incentives from private providers other than those allowed by Competition and Markets Authority guidelines:

https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf

Hospital Consultants should not initiate discussions about providing their Private Professional Services for NHS patients, nor should they ask other staff to initiate such discussions on their behalf.

What should be declared

- Staff name and their role with the organisation.
- A description of the nature of the private practice (e.g. what, where and when staff practise, sessional activity, etc.).

⁵ Hospital Consultants are already required to provide their employer with this information by virtue of Para.3 Sch. 9 of the Terms and Conditions – Consultants (England) 2003: https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf

⁶ These provisions already apply to Hospital Consultants by virtue of Paras.5 and 20, Sch. 9 of the Terms and Conditions – Consultants (England) 2003: https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf

- Relevant dates.
- Any other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Outside Employment and self-employment- Paid and Unpaid work

- Staff must declare any existing outside employment on appointment and any new outside employment when it arises. This includes setting up a business at home, self-employment and running or assistance in private practice e.g. Consultant medical secretaries or voluntary work whether paid or unpaid.
- For clarity, the position on staff working elsewhere in either paid or unpaid work (e.g. volunteers) such as for another employer, being self-employed or working as agency or a contractor or sub-contractor or a volunteer, is that this work must be declared, as soon as it becomes known.
- If you do hold a secondary role anywhere else, (whether paid or unpaid) you must ensure that you do not carry out work for your other employer during your NHS Shropcom work time or while on sickness absence.
- Where a risk of conflict of interest arises, the general management actions outlined in this policy should be considered and applied to mitigate risks.
- Where contracts of employment or terms and conditions of engagement permit, staff may be required to seek prior approval from the organisation to engage in outside employment or self-employment whether the work is Paid and Unpaid work.

The organisation may also have legitimate reasons within employment law for knowing about outside employment of staff (paid or unpaid work), even when this does not give rise to risk of a conflict. For example, work that has been completed in your annual leave or a roster day off or non-working day should also be disclosed

Staff are advised that working for a secondary employer or in self-employment, Voluntary work (paid or unpaid work) whilst absent from work due to being medically certified unfit is not permitted, unless under the direction of medical advice and with agreement from the Occupational Health Department and the Line Manager. Where an employee is suspected of secondary employment or self-employment working whilst absent due to sickness these matters will be investigated in accordance with the Trust's Anti-Fraud, Bribery and Corruption Response Plan Policy & Strategy and the Disciplinary Policy.

7.3.1 What should be declared

- Staff name and their role with the secondary organisation or trading name if self-employed or voluntary work.
- The nature of the outside employment or self-employment or voluntary work (e.g. who it is with, a description of duties, time commitment).
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

7.4 Shareholdings and other ownership issues

- Staff should declare, as a minimum, any shareholdings and other ownership interests in any publicly listed, private or not-for-profit company, business,

partnership or consultancy which is doing, or might be reasonably expected to do, business with the organisation.

- Where shareholdings or other ownership interests are declared and give rise to risk of conflicts of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.
- There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

7.4.1 What should be declared

- Staff name and their role with the organisation.
- Nature of the shareholdings/other ownership interest.
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

7.5 Patents

- Staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are ongoing, which are, or might be reasonably expected to be, related to items to be procured or used by the organisation.
- Staff should seek prior permission from the organisation before entering into any agreement with bodies regarding product development, research, work on pathways etc., where this impacts on the organisation's own time, or uses its equipment, resources or intellectual property.
- Where holding of patents and other intellectual property rights give rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

7.5.1 What should be declared

- Staff name and their role with the organisation.
- A description of the patent.
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)

7.6 Loyalty interests

Loyalty interests should be declared by staff involved in decision making where they:

- Hold a position of authority in another NHS organisation or commercial, charity, voluntary, professional, statutory or other body which could be seen to influence decisions they take in their NHS role.
- Sit on advisory groups or other paid or unpaid decision making forums that can influence how an organisation spends taxpayers' money.
- **Are, or could be, involved in the recruitment or management of close family members and relatives, close friends and associates, and business partners.**
- **Are aware that their organisation does business with an organisation in which close family members and relatives, close friends and associates, and business partners have decision making responsibilities.**

7.6.1 What should be declared

- Staff name and their role with the organisation.
- Nature of the loyalty interest.
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

7.7 Donations

- Donations made by suppliers or bodies seeking to do business with the organisation should be treated with caution and not routinely accepted. In exceptional circumstances they may be accepted but should always be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value.
- Staff should **not actively solicit charitable donations as personal gifts** under any circumstances. Donations collected as part of staff duties for the organisation must be banked into the Trust Charitable fund bank account and must not be kept for staff personal gain.
- Staff must obtain permission from the organisation if in their professional role they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign for a charity other than the organisation's own.
- Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued.
- Staff wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

7.7.1 What should be declared

- The organisation will maintain records in line with the above principles and rules and relevant obligations under charity law.

7.8 Sponsored events

- Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in clear benefit for the NHS Trust.
- During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.
- No information should be supplied to the sponsor from whom they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.
- At the organisation's discretion, sponsors or their representatives may attend or take part in the event but they should not have a dominant influence over the content or the main purpose of the event.
- The involvement of a sponsor in an event should always be clearly identified.
- Staff within the Trust, and its constituent organisations, involved in securing sponsorship of events should make it clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event.
- Staff arranging sponsored events must declare this.

7.8.1 What should be declared

- The organisation will maintain records regarding sponsored events in line with the above principles and rules.

7.9 Sponsored research

- Funding sources for research purposes must be transparent.
- Any proposed research must go through the relevant health research authority or other approvals process.
- There must be a written protocol and written contract between staff, the organisation, and/or institutes at which the study will take place and the sponsoring organisation, which specifies the nature of the services to be provided and the payment for those services.
- The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.
- Staff should declare involvement with sponsored research to the organisation.

7.9.1 What should be declared

- The organisation will retain written records of sponsorship of research, in line with the above principles and rules.
- Staff should declare:
 - their name and their role with the organisation.
 - Nature of their involvement in the sponsored research.
 - relevant dates.
 - Other relevant information (e.g. what, if any, benefit the sponsor derives from the sponsorship, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

7.10 Sponsored posts

- External sponsorship of a post requires prior approval from the organisation.
- Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate.
- Sponsorship of a post should only happen where there is written confirmation that the arrangements will have no effect on purchasing decisions or prescribing and dispensing habits. This should be audited for the duration of the sponsorship. Written agreements should detail the circumstances under which organisations have the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise.
- Sponsored post holders must not promote or favour the sponsor's products, and information about alternative products and suppliers should be provided.
- Sponsors should not have any undue influence over the duties of the post or have any preferential access to services, materials or intellectual property relating to or developed in connection with the sponsored posts.

7.10.1 What should be declared

- The organisation will retain written records of sponsorship of posts, in line with the above principles and rules.
- Staff should declare any other interests arising as a result of their association with the sponsor, in line with the content in the rest of this policy.

8. Strategic Decision Making Groups

8.1 The organisation utilises a robust assurance framework and committee structure, to make key strategic decisions about things such as:

- Entering into (or renewing) large scale contracts
- Awarding grants
- Making procurement decisions
- Selection of medicines, equipment, and devices

The interests of those who are involved in these committees should be well known so that they can be managed effectively.

8.2 These committees should adopt the following principles:

- Chairs should consider any known interests of members in advance, and begin each meeting by asking for declaration of relevant material interests.
- Members should take personal responsibility for declaring material interests at the beginning of each meeting and as they arise.
- Any new interests identified should be added to the organisation's register(s).
- The vice chair (or other non-conflicted member) should chair all or part of the meeting if the chair has an interest that may prejudice their judgement.

8.3 If a member has an actual or potential interest the chair should consider the following approaches and ensure that the reason for the chosen action is documented in minutes or records:

- Requiring the member to not attend the meeting.
- Excluding the member from receiving meeting papers relating to their interest.
- Excluding the member from all or part of the relevant discussion and decision.
- Noting the nature and extent of the interest, but judging it appropriate to allow the member to remain and participate.
- Removing the member from the group or process altogether.

The default response should not always be to exclude members with interests, as this may have a detrimental effect on the quality of the decision being made. Good judgement is required to ensure proportionate management of risk.

9. Procurement

9.1 Procurement should be managed in an open and transparent manner, compliant with procurement and other relevant law, to ensure there is no discrimination against or in favour of any provider. Procurement processes should be conducted in a manner that does not constitute anti-competitive behaviour - which is against the interest of patients, service users and the public.

Those involved in procurement exercises for and on behalf of the organisation should keep records that show a clear audit trail of how conflicts of interest have been identified and managed as part of procurement processes. At every stage of procurement steps should be taken to identify and manage conflicts of interest to ensure and to protect the integrity of the process.

Management who request a new supplier is added to the procurement system will be required to complete the a declaration of interest form as required by the SATH Procurement Team.

10. Dealing with breaches

10.1 There may be situations when interests will not be identified, declared or managed appropriately and effectively. This may happen innocently, accidentally, or because of the deliberate actions of staff or other organisations. For the purposes of this policy these situations are referred to as ‘breaches’.

10.2 Identifying and reporting breaches

To ensure that interests are effectively managed staff are encouraged to speak up about actual or suspected breaches. Every individual has a responsibility to do this.

Staff who are aware about actual breaches of this policy, or who are concerned that there has been, or may be, a breach, should follow the procedure highlighted in the:-

- Anti-Fraud, Bribery and Corruption Response Plan Policy & Strategy
- Whistleblowing (Freedom to Speak Up) Policy

The organisation will investigate each reported breach according to its own specific facts and merits, and give relevant parties the opportunity to explain and clarify any relevant circumstances.

Following investigation the organisation will:

- Decide if there has been or is potential for a breach and if so the what severity of the breach is.
- Assess whether further action is required in response – this is likely to involve any staff member involved and their line manager, as a minimum.
- Consider who else inside and outside the organisation should be made aware
- Take appropriate action as set out in the next section.

10.3 Taking action in response to breaches

Action taken in response to breaches of this policy will be in accordance with the procedures of the organisation and could involve organisational leads for staff support (e.g. Human Resources), fraud (e.g. Lead Local Counter Fraud Specialist), members of the management or executive teams and organisational auditors.

Breaches could require action in one or more of the following ways:

- Clarification or strengthening of existing policy, process and procedures.
- Consideration as to whether HR/employment law/contractual action should be taken against staff or others.
- Consideration being given to escalation to external parties. This might include referral of matters to the external auditors, NHS Counter Fraud Authority, the Police, statutory health bodies (such as NHS England, NHS Improvement or the CQC), and/or health professional regulatory bodies.

Inappropriate or ineffective management of interests can have serious implications for the organisation. There will be occasions where it is necessary to consider the imposition of sanctions for breaches.

Sanctions should not be considered until the circumstances surrounding breaches have been properly investigated. However, if such investigations establish wrong-doing or fault then the organisation can and will consider the range of possible sanctions that are available, in a manner which is proportionate to the breach. This includes:

- Employment law action against staff, which might include
 - Informal action (such as reprimand, or signposting to training and/or guidance).
 - Formal disciplinary action (such as formal warning, the requirement for additional training, re-arrangement of duties, re-deployment, demotion, or dismissal).
- Reporting incidents to the external parties described above for them to consider what further investigations or sanctions might be.
- Contractual action, such as exercise of remedies or sanctions against the body or staff which caused the breach.
- Legal action, such as investigation and prosecution under fraud, bribery and corruption legislation or for any other criminal offence.

Further advice and information on the consequences of breaches and the range of potential sanctions is shown at Appendix 2

10.4 Learning and transparency concerning breaches

Reports on breaches, the impact of these, and action taken will be considered by the Audit Committee, as part of the annual review of ways in which staff can raise issues about possible improprieties in matters of financial reporting and control, clinical quality, patient safety or other matters.

To ensure that lessons are learnt and management of interests can continually improve, anonymised information on breaches, the impact of these, and action taken will be made available for inspection by the public upon request.

Appendix 1- The seven principles of public - the 'Nolan Principles'

Selflessness Holders of public office should take decision solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family or their friends

Integrity Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties

Objectivity In carrying out public business, including making public appointments, awarding contracts or recommending individuals for awards or benefits, holders of public office should make choices on merit

Accountability Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office

Openness Holders of public office should be as open as possible about all decisions and actions they take. They should give reasons for their decisions, and restrict information only when the wider public interest clearly demands

Honesty Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest

Leadership Holders of public office should promote and support these principles by leadership and example

Appendix 2 – Potential sanctions

Disciplinary sanctions

Staff who fail to disclose any relevant interests or who otherwise breach the Trust rules and policies relating to the management of conflicts of interest are subject to investigation and, where appropriate, to disciplinary action. This may include:

- Employment law action which might include:
- Informal action – such as reprimand or signposting to training and/or guidance.
- Formal action – such as formal warning, the requirement for additional training, re-arrangement of duties, re-deployment, demotion or dismissal.
- Referring incidents to regulators.
- Contractual action against organisations or staff.

Professional regulatory sanctions

Statutorily regulated healthcare professionals who work for, or are engaged by, the Trust are under professional duties imposed by their relevant regulator to act appropriately with regard to conflicts of interest. The Trust will consider reporting statutorily regulated healthcare professionals to their regulator if they believe that they have acted improperly, so that these concerns can be investigated. These healthcare professionals should be made aware that the consequences for inappropriate action could include fitness to practise proceedings being brought against them, and that they could, if appropriate be struck off by their professional regulator as a result.

Information and contact details for the healthcare professional regulators are accessible from the Professional Standard Authority website:

<http://www.professionalstandards.org.uk/what-we-do/our-work-with-regulators/find-a-regulator>

Civil sanctions

If conflicts of interest are not effectively managed, this organisation Group may face civil challenges to decisions it makes – for instance if interests were not disclosed that were relevant to the bidding for, or performance of contracts. In extreme cases, staff and other individuals could face personal civil liability, for example a claim for misfeasance in public office.

Criminal sanctions, including Fraud, Bribery and Corruption

Failure to manage conflicts of interest could lead to criminal proceedings including for offences such as fraud, bribery and corruption. This could have implications for the

organisation Group concerned and linked organisations, and the individuals who are engaged by them.

Fraud

The Fraud Act 2006 created a criminal offence of fraud and defines three ways of committing it:

- Fraud by false representation
- Fraud by failing to disclose information and
- Fraud by abuse of position.

In these cases an offender's conduct must be dishonest and their intention must be to make a gain, or a cause a loss (or the risk of a loss) to another. Fraud carries a maximum sentence of 10 years imprisonment and/or a fine and can be committed by a body corporate.

Bribery

The Bribery Act 2010 makes it easier to tackle this offence in public and private sectors. Bribery is generally defined as giving or offering someone a financial or other advantage to encourage a person to perform certain activities and can be committed by a body corporate.

Commercial organisations (including NHS bodies) will be exposed to criminal liability, punishable by an unlimited fine, for failing to prevent bribery.

The offences of bribing another person or being bribed carries a maximum sentence of 10 years imprisonment and/or a fine. In relation to a body corporate the penalty for these offences is a fine.

This Trust does not, and will not, pay bribes or offer improper inducements to anyone for any purpose; nor will it accept bribes or improper inducements. It is important that all employees, contractors and agents are aware of the standards of behaviour expected of them contained in this policy.

Appendix 3 - Code of Business Conduct Guidance on Staff-zone- How to declare interests, gifts and hospitality.

Guidance for existing staff and New Starters

Code of Business Conduct (Managing conflicts of interest)

How to declare interests, gifts and hospitality.

Board Members, Managers and Staff, as appropriate, should be familiar with the detail of the **Standards of Code of Business Conduct, including Managing Conflicts of Interest Policy** which can be found [here \(link required\)](#)

A brief summary is provided below but please download the full document from staff-zone on the link above.

Responsibility of NHS staff

It is the responsibility of all staff to ensure that they are not placed in a position which risks, or appears to risk, conflict between their private interests and their NHS duties.

This primary responsibility applies to all NHS Staff: for example

- Those who commit NHS resources directly - ordering of goods
- Those who do so indirectly - prescribing of medicines
- Staff who may have an interest in a private nursing home and who are involved with the discharge of patients to residential facilities.

Principles of conduct in the NHS

NHS staff are expected to:

- Ensure that the interest of patients remains paramount at all times
- Be impartial and honest in the conduct of their official business
- Use the public funds entrusted to them to the best advantage of the service, always ensuring value for money.

Staff should not:

- Abuse their official position for personal gain or to benefit their family or friends
- Seek to advantage or further private business or other interests, in the course of their official duties.

Bribery Act 2010

Commercial organisations (including NHS bodies) will be exposed to criminal liability, punishable by an unlimited fine, for failing to prevent bribery.

This Trust does not, and will not, pay bribes or offer improper inducements to anyone for any purpose; nor will it accept bribes or improper inducements. It is important that all employees, contractors and agents are aware of the standards of behaviour expected of them contained in this policy.

All staff should be aware that the Trust will seek to discipline and prosecute any employee of the Trust who:

- Accept or receive bribes
- Obtain or retain business from the NHS Trust
- Accept any inducement or reward for doing, or refraining from doing anything, in his or her official capacity
- Obtain or retain an advantage in the conduct of business from the Trust for financial advantage or to cause the NHS Trust a financial loss.

Any staff who commits a criminal offence renders themselves liable to loss of employment and criminal prosecution.

Declare an Interest

This register is provided for all staff within the NHS Trust which includes a register for the Board of Directors

Staff must comply with the national guidance contained within the Standards of Code of Business Conduct, including Managing Conflicts of Interest Policy which can be found [here \(link required\)](#)

Decision making Staff (Band 7 or above, or staff involved with procurement, including all medical and dental banded staff)

Senior Staff are expected to complete an annual entry on the Trust's Register of Interests on datix to either make a declaration *or* confirm that they have nothing to declare. An annual reminder will be emailed to all staff at Band 7 and above and to staff involved with procurement. However, it is your responsibility to make sure your record is kept up to date throughout the year if there are any changes to your interests following your annual declaration.

Senior staff should declare any personal interest that may affect or might reasonably be deemed by others to impact on their impartiality in any matter relevant to their duties. Senior staff should declare clinical private practice, outside employment (including self-employment, voluntary work whether paid or unpaid), shareholdings and other ownership, patents, loyalty interests, sponsored research and posts.

These 'related party' dealings could include, for example, Trust dealings with a company you do work for, or hold a directorship of, or one that a close family relative holds a key management position in. The definition of a 'close family relative' can only be made by you, but would certainly mean husbands or wives (or equivalent), mothers, fathers, sons, daughters, brothers and sisters.

Staff (Band 6 or below)

Staff are expected to complete an annual entry on the Register of Interests only if they have an **actual or potential conflict of interest to declare**, there is no necessity to make a nil return. Staff should declare outside employment (including self-employment, voluntary work whether paid or unpaid), any personal interest that may impinge or might reasonably be deemed by others to impinge on their impartiality in any matter relevant to their duties, business interests and directorships, positions of authority in a charity, public or voluntary body in the field of health and social care, and any connection with a voluntary or other body contracting for NHS services.

What do I need to do?

After reading the above information and the Trust Policy, please complete the Declaration Form on datix, if required. Please report problems that prevent your completion of the online form to the Governance and Risk department.

Click here to go straight to the online form at https://web.datix.thirdparty.nhs.uk/Shropshire/live/index.php?form_id=3&module=RAM

To add an item, click on the text '**Declarations**' '+ Add new item' which you will find at the bottom of the list and complete the on line form.

If your circumstances change during the course of the year you will need to resubmit the online declaration form within four weeks of the known change.

Please note the information you submit will be published, in full, on the external website as part of the up-to-date Declaration of Interest register.

Gifts and Hospitality (Including Sponsorship)

All staff who are offered a gift or hospitality should exercise caution. Staff should not accept gifts that may affect, or be seen to affect, their professional judgement such as gifts or hospitality offered by potential suppliers. This includes any gifts or hospitality associated with study leave, conferences (in or out of the country) and internal events being held in Trust premises. If gifts are accepted and require a declaration to be made, then this should be done within 28 days of receipt.

Additional guidance is provided below in relation to common scenarios.

Remember; if in doubt declare it

Advice can be sought from your Line Manager, Service Manager, HR Manager, Lead Local Counter Fraud Specialist or the Governance and Risk department.

Hospitality

Modest hospitality can be accepted provided it is normal and reasonable in the circumstances e.g. lunches in the course of working visits. Caution should be exercised when hospitality is offered by potential suppliers or contractors.

It is not necessary to record refreshments such as tea and coffee or for course participants to record meals provided as part of the event. However, if the hospitality offered is between the value of **£25 and £75 then this must be declared; hospitality that exceeds £75 should be declined** unless authorised by the Head of Service or an Executive Director.

Travel and accommodation

Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted but **must be declared**. Offers which go beyond modest, or are of a type that the organisation itself might not usually offer, require authorisation authorised by the Head of Service or an Executive Director and should only be accepted in exceptional circumstances and **must be declared**. In this instance a **clear reason should be recorded on Register of Gifts and Hospitality** as to why it was permissible to accept travel and accommodation of this type, e.g. Offers of business class or first class travel and accommodation (including domestic travel), offers of foreign travel and accommodation.

Gifts

Gifts offered by contractors, companies or others should always be declined. Exceptions to this include articles of low intrinsic value i.e. Diaries, pens or post-it **notes that do not exceed the value of £6**. Small tokens of gratitude from patients or their relatives can be accepted but **should not exceed the value of £ 50** and do not need to be declared but should be shared with team colleagues where practical e.g. box of chocolates or biscuits

A common sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value).

Gifts that exceed the value of £50 should only be accepted on behalf of the NHS Trust and should be declared by staff. These gifts will be paid into the relevant charitable fund and should be declared by staff as paid into charitable funds.

Multiple gifts from the same source over a 12-month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.

In cases of doubt staff should either consult their line manager/ Head of Service or politely decline acceptance.

Donations

Cash (or cash equivalent) must not be accepted directly by staff. Wherever possible, staff should advise patients if they wish to donate cash to a particular ward/department this should be done at one of the community hospital on-site Cashiers Office, confirming the ward/department they wish it to go to. If in any circumstance, cash has been given to a staff member or ward/department, this should be processed at the on-site Cashiers Office or taken to the finance department at Trust Headquarters, noting the ward/department to which it was donated.

Sponsorship

Staff may accept commercial sponsorship associated with study leave, courses, conferences (in or out of the country) and internal events if reasonably justifiable and in accordance with the principles set out in the **Code of Business Conduct, including Managing Conflicts of Interest Policy**

What do I need to do?

If you are offered and/or accept a gift or hospitality, a declaration is required on datix to cover the Gift or Hospitality. This includes any gifts or hospitality associated with commercial sponsorship as described above.

Click here to go straight to the online form at https://web.datix.thirdparty.nhs.uk/Shropshire/live/index.php?form_id=3&module=RAM

To add an item, click on the text 'Gifts' '+ Add new item' which you will find at the bottom of the list and complete the on line form.

Please note the information you submit will be published, in full, on the external website as part of the up-to-date Gifts and Hospitality (Including Sponsorships) register