

DECLARATIONS OF INTERESTS, GIFTS, SPONSORSHIP AND HOSPITALITY (Including Standards of Business Conduct)

Policy Number	PO-000249
New or Revised Policy	Revised Policy
Version:	V3.5
Published:	
Review Date:	January 2025
Expiry Date:	April 2025
Policy Executive Owner:	Chief Finance Officer
Policy Owner	Company Secretary
Policy Author/s	Company Secretary
Ratification Committee	Policy Ratification Group
Date ratified:	
Approval Committee:	Audit Committee
Date approved:	14/03/2022
Target Audience:	All staff
Linked Policies:	<ul style="list-style-type: none"> • Anti-Fraud and Bribery Policy • Disciplinary Policy and Procedures • Fit and Proper Persons Policy • Information Governance Management Framework Policy • Whistleblowing (raising concerns) Policy • Standing Orders
Key Words:	Conflict of interest, openness, standards in public life, fraud, corruption, bribery.
Name of other committees & meetings consulted	Executive Team Meeting
Designation of Individual Staff Members or staff groups consulted	Director of HR and OD Chief Finance Officer Deputy Director of Finance Local Counter Fraud Specialist

This is a Controlled Document. Staff must refer to the Intranet version of this document to confirm the most up to date version of this policy. If older versions are in circulation, they must be either returned to the author above or destroyed.

Key Facts sheet

The North Middlesex University Hospital Trust (the 'Trust') has a duty to ensure that all its dealings are conducted to the highest standards of integrity and probity and that all staff, including those who are employed, seconded, contracted, prospective and agency employed staff, meet these standards.

This Policy sets out how the Trust will manage declarations of interests, gifts, sponsorship and hospitality. Adhering to this Policy will help to ensure that we use NHS money wisely, providing best value for taxpayers and accountability to our patients for the decisions we take.

The Trust's general requirements relating to the declaration of interests, gifts, sponsorship and hospitality state the following:

- All staff at 'Agenda for Change' Band 8b or above, and all consultants, are required to make an annual declaration regarding any 'relevant and material' interests (directorships, interests in companies and organisations with involvement in health and social care, etc.) Staff in all other Bands are required to make a declaration if they have any declarations to make. See Appendix 4 - Staff Declaration of Interests Form.
- All Board members are required to make an annual declaration regarding any 'relevant and material' interests (directorships, interests in companies and organisations with involvement in health and social care, etc.). See Appendix 5 – Board Member Declaration of Interests Form.
- All Trust staff are required to declare any offers of gifts, hospitality and sponsorship over the value of £50, whether refused or accepted, as they arise (See Appendix 6 - Declaration of Gift / Hospitality / Sponsorship Form).

As a member of staff you should ...

- Ensure that you understand the guidelines and consult your line manager or the Company Secretary if unsure.
- Use your common sense and judgement to consider whether the interests you have could affect the way taxpayers' money is spent.
- Declare to the Trust any relevant interest, using the Staff Declaration of Interests Form at Appendix 4. If in doubt, staff are asked to consider the following questions:
 - (i) am I, or might I be, in a position where I (or my family/friends) could gain from the connection between my private interests and my employment?
 - (ii) do I have access to information, which could influence purchasing decisions?
 - (iii) could my outside interest be in any way detrimental to the NHS or to patients' interests?
 - (iv) do I have any other reason to think I may be risking a conflict of interest?

If there is any doubt, staff are required to declare the interest.

- Adhere to the Professional Code of Ethics relevant to your profession.
- Seek the Trust's permission before taking on outside work, if there is any question of it adversely affecting your NHS duties (Special guidance applies to doctors);
- Obtain the Trust's permission before accepting any commercial sponsorship;

As a member of staff you should ...

- Ensure that any offer or receipt of a gift, hospitality or sponsorship that has been approved is recorded in the Register of Gifts, Hospitality and Sponsorship (the “Register”);
- Ensure that money should only ever be accepted on behalf of a ward/Clinical Service and can only be used for the benefit of that ward/Clinical Service.
- Raise any concern you may have in relation to fraud or potential bribery offences.

As a member of staff you should not ...

- Misuse your position to further your own interests or those close to you.
- Be influenced, or give the impression that you have been influenced by outside interests.
- Allow outside interests you have to inappropriately affect the decisions you make when using taxpayers’ money.
- Enter into relationships/dealings with Pharmaceutical companies, before bringing this to the attention of the Medical Director in advance (See section 8.3 – Commercial Sponsorship for Collaborative Partnerships).
- Abuse your past or present official position to obtain preferential rates for private deals.
- Unfairly advantage one competitor over another or show favouritism in awarding contracts.
- Misuse or make available official “commercial in confidence” information.
- Undertake private work during NHS working hours.
- Engage in outside employment which may conflict with your NHS work.

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VERSION CONTROL SHEET

Version	Date	Author	Status	Comment
1.2	September 2015	Board Secretary	Agreed	Approved by the Audit Committee
2.1	March 2019	Company Secretary	Draft	Policy re-written in line with NHS England's guidance entitled 'Managing Conflicts of Interest in the NHS'
2.1	April 2019	Company Secretary	Agreed	Approved by the Senior Leadership Group
3.1	February 2022	Company Secretary	Draft	Scheduled 3-year review

CHANGES & ALTERATIONS TO CURRENT POLICY (For revised policies only)

- Updates made to job titles, policy titles and web links.
- Inclusion of reference to the publication of a list of decision-making staff that have not made any declaration.
- Minor amendments to tighten up procedures as recommended by the Local Counter Fraud Specialist.
- Threshold for declaring the acceptance of gifts and hospitality raised from £25 to £50 in line with neighbouring Trusts.

1. Introduction

- 1.1 The North Middlesex University Hospital Trust (the 'Trust') has a duty to ensure that all its dealings are conducted to the highest standards of integrity and probity and that all staff, including those who are employed, seconded, contracted, prospective and agency employed staff (as detailed in section 5), meet these standards.
- 1.2 This Policy seeks to describe the business conduct standards and public service values which underpin the work of the NHS, and reflects current guidance and best practice which all individuals within the Trust must follow. In particular, this Policy sets out specific guidance on the declarations of gifts, sponsorship and hospitality.
- 1.3 Adhering to this Policy will help to ensure that we use NHS money wisely, providing best value for taxpayers and accountability to our patients for the decisions we take.

2. Background

- 2.1 This Policy aims to ensure that the guidelines embodied within Health Service Guidance HSG (93)5: Standards of Business Conduct for NHS Staff 1993, and the outcomes arising from the Committee on Standards in Public Life ("the Nolan Committee"), are brought to the attention of all Trust employees and to give managers and staff a useful reference document when issues of integrity, accountability, openness and honesty are being confronted.
- 2.2 The Code of Conduct for NHS Managers was published in October 2002 and compliance with this is required of all directors, consultants, and all staff. The Trust will identify other managerial posts to which we consider the Code should apply. A copy of the Code can be downloaded from: http://www.nhsemployers.org/~media/Employers/Documents/Recruit/Code_of_conduct_for_NHS_managers_2002.pdf
- 2.3 There are three fundamental public service values (*Code of Conduct and Accountability for NHS Boards: Department of Health, 2004) which underpin the work of the NHS:
 - **Accountability** - Everything done by staff who work in the Trust must be able to stand the test of Parliamentary scrutiny, public judgements on propriety and professional codes of conduct.
 - **Probity** - There must be an absolute standard of honesty in dealing with the assets of the Trust: integrity should be the hallmark of all personal conduct in decisions affecting patients, colleagues and suppliers, and in the use of information acquired in the course of discharging Trust duties.
 - **Openness** - There must be sufficient transparency about the business of the Trust to promote confidence between the Trust and its staff, patients and the public.
- 2.4 In addition, staff are expected to uphold the seven principles of public life known as the "Nolan Principles": Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty, and Leadership (See Appendix 3).

3. Purpose

- 3.1 This Policy is intended to lay down guidelines which will help staff maintain the values of accountability, probity, and openness. It aims to:
 - Introduce consistent principles and rules;
 - Provide simple advice about what to do in common situations; and
 - Support good judgement about how to approach and manage interests.

3.2 This ~~This~~ policy should be considered alongside these other organisational policies:

- Anti-Fraud and Bribery Policy
- Disciplinary Policy and Procedures
- Fit and Proper Persons Policy
- Information Governance Management Framework Policy
- Raising Concerns Policy (Whistleblowing)
- Standing Orders

4. Scope

4.1 This Policy applies to all staff, including those who are employed, seconded, contracted, prospective and agency employed staff. In particular, this Policy applies to all staff who are engaged directly or indirectly in procurement decisions, the awarding of contracts, recruitment of staff or decision-making staff. These staff have an obligation to act in the best interests of the Trust and in accordance with this Policy.

4.2 This Policy also applies to all Board members including Non-Executive and Executive Directors.

5. Duties and Responsibilities

5.1 The Chief Executive

5.1.1 The Chief Executive is accountable for the implementation of the Declarations of Interests, Gifts, Sponsorship and Hospitality Policy.

5.2 The Chief Finance Officer

5.2.1 The Chief Finance Officer is responsible for adjudicating as to whether an interest should be considered as 'material'.

5.2.2 The Chief Finance Officer will consider whether any declarations of staff interests are so significant or material as regards the conduct of the Trust's business and the awarding of contracts that it should be formally brought to the attention of the Trust Board (e.g. for the purposes of ratification).

5.3 Medical Director

5.3.1 The Medical Director is responsible for reviewing any proposed commercial sponsorship for collaborative partnership arrangements with pharmaceutical companies prior to agreement.

5.4 The Company Secretary

5.4.1 The Company Secretary is responsible for:

- Administering and maintaining the registers of interests.
- Providing advice, training and support for staff on how interests should be managed.
- Undertaking a review of this Policy at least every three years.

5.5 Managers

5.5.1 Managers are responsible for ensuring that this Policy is brought to the attention of all employees; also that machinery is put in place for ensuring that it is implemented.

5.6 Staff

5.6.1 At the Trust we use 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 are listed below:

- All salaried employees, including Executive Directors.
- Non-Executive Directors (and any associate Non-Executive Directors that may be appointed from time to time but who may not be directly employed by the Trust).
- All prospective employees – who are part-way through recruitment.
- Contractors and sub-contractors.
- Agency staff.
- Students/Trainees.
- Volunteers.
- Secondees and other staff on placement with the Trust.
- Other staff on placement with the Trust.
- Staff of partner organisations with approved access.
- Committee, sub-committee and advisory group members (who may not be directly employed or engaged by the Trust).

5.6.2 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.' All decision-making staff are required to make an annual declaration. Decision-making staff in this Trust are:

- Executive and Non-Executive Directors (and any Associate Non-Executive Directors).
- All staff at 'Agenda for Change' Band 8b and above.
- Administrative and clinical staff who have the power to enter into contracts on behalf of the Trust.
- Administrative and clinical staff involved in decision-making concerning the commissioning of services, purchasing of goods, medicines, medical devices or equipment, and formulary decisions (particularly in procurement, pharmacy, IT, and Estates and Facilities).

5.6.3 All staff at 'Agenda for Change' Band 8b or above, and all consultants are required to make an annual declaration regarding any 'relevant and material' interests, and will be reminded by the Company Secretary. The Company Secretary will also publicise the need for all staff to make a submission where they have any declaration to make.

5.6.4 Any abuse or non-compliance with this Policy will be subject to a full investigation and appropriate disciplinary action, and instances of failure to comply which constitute criminal offences may be subject to criminal investigation.

6. Identification, Declaration and Review of Interests

6.1 Identification and declaration of interests (including Gifts, Hospitality and Sponsorship)

6.1.1 A 'conflict of interest' is:

"A set of circumstances by which a reasonable person would consider that an individual's ability to apply judgment 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."

6.1.2 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 a 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.

6.1.3 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, such as where someone involved has significant shareholdings or voting rights in a company or partnership.
- **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.

6.1.4 Staff must ensure that their private or personal interests do not influence their decisions, and that they do not use their positions to obtain personal gain of any sort, either for themselves directly, or their families, friends or associates.

6.1.5 All staff should identify and declare material or potential 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 Trust.
- When staff move to a new role or their responsibilities change significantly.
- At the beginning of a new project/piece of work.
- 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).

6.1.6 All decision-making staff are required to complete a declaration form annually. Where decision-making staff believe there is no declaration to be made, a nil declaration return will be required and to be also be updated annually. The Company Secretary is responsible for ensuring all decision-making staff submit annual returns and may escalate to the Chief Finance Officer for further investigation if there is any failure to comply.

6.1.7 Staff must declare any interests or gifts, hospitality or sponsorship received in writing, using one of the following forms attached as appendices to this Policy:

- Staff Declaration of Interests Form (Appendix 4)
- Declaration of Gift / Hospitality / Sponsorship Form (Appendix 6)

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.

6.1.8 Executive and Non-Executive Directors of the Trust must declare any interests or gifts, hospitality or sponsorship received in writing, using one of the following forms attached as appendices to this Policy:

- Board Member Declaration of Interests Form (Appendix 5)
- Declaration of Gift / Hospitality / Sponsorship Form (Appendix 6)

6.2 Records and publication

6.2.1 Maintenance

Completed declaration forms should be sent to the Company Secretary (northmid.declarations@nhs.net) who will enter the notification in the relevant Register. The Company Secretary will ensure that all material interests are promptly transferred to one of the following Registers:

- Trust Board Members Register of Interests
- Register of Staff Interests
- Register of Gifts, Hospitality and Sponsorship

An interest will remain on the relevant Register for a minimum of 6 months and a private record of historic interests will be retained for a minimum of 6 years. The Company Secretary will prompt staff annually to review declarations they have made and, as appropriate, update them or make a nil return.

If staff have any questions or concerns relating to conflicts of interest, they should contact the Company Secretary who can provide guidance on what should be declared and how to manage potential or actual conflicts.

6.2.2 Publication

The Company Secretary will:

- Publish the interests declared by members of the Board of Directors in the Trust Board Members Register of Interests
- Publish the interests declared by decision-making staff and other staff in the Register of Staff Interests.
- Publish a list of decision-making staff that have declared that they have no interests to declare in the Register of Staff Declaring No Interests.
- Publish a list of decision-making staff that have not made any declaration.
- Publish any gifts, hospitality or sponsorship declared by any member of staff in the Register of Gifts, Hospitality and Sponsorship.
- Refresh this information at least annually.
- Make this information available to all Executive Directors, Divisional Directors and the Deputy Director of Procurement for awareness in relation to any procurement decisions.
- Make this information available in a prominent place in the 'About Us' pages of the Trust's website.
- Make this information available on request.

If decision-making staff have substantial grounds for believing that publication of their interests should not take place, then they should contact the Company Secretary 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 the public register(s). However, this would be the exception and information will not be withheld or redacted merely because of a personal preference. The Trust 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. Consenting to share information in this capacity does not negate the requirement to make the appropriate declaration to the Trust. “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 (<https://www.abpi.org.uk/>).

6.3 Management of interests – general management actions

- 6.3.1 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.
- 6.3.2 Each case will be different and context-specific, and the Trust will always clarify the circumstances and issues with the individuals involved. Staff should maintain a written audit trail of information considered and actions taken.
- 6.3.3 Staff who declare material interests should make their line manager, or the person(s) they are working to, aware of their existence.
- 6.3.4 Adjudication as to whether an interest should be considered as ‘material’ will be determined by the Chief Finance Officer. Any declarations of staff interests which are considered to have significant, or material implications as regards the conduct of the Trust’s business and the awarding of contracts will be considered by the Chief Finance Officer who will consider whether the interest is so significant that it should be formally brought to the attention of the Trust Board (e.g. for the purposes of ratification).
- 6.3.5 It is not expected that a declaration will be made where an interest is purely personal, or relating to family issues that are unconnected to work duties. However, if the individual is a formal member of a campaign group, it may be prudent to consider recording a declaration.
- 6.3.6 If a member of staff is present at a Trust Board, Committee or Sub-Committee or Group meeting which is discussing an item which poses a conflict of interest for them, they should declare their interest and consider whether or not they should continue to play any further part in the relevant discussions or decision. Any interests so declared will be recorded in the minutes of the meeting.

7. Management of Interests – Common Situations

All staff must declare all gifts, hospitality and interests unless there is a direct link to working arrangements and a genuine business reason can be demonstrated. 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

7.1.1 A 'gift' is defined as "any item of cash or goods, or any service, which is provided for personal benefit, free of charge, or at less than its commercial value. Staff should be aware of the risk that gifts, hospitality and expenses can be used by corrupt individuals as a cover for bribery. Staff should not accept gifts that may affect, or be seen to affect, their professional judgement, or whenever they could be perceived to affect the outcome of a business transaction. This is because gifts may give the appearance of bribery which is prohibited by Trust policy and by the Bribery Act 2010.

7.1.2 'Gifts' can refer to a wide range of activities, but can be considered as:

- Gifts of money, goods or services, or combinations of these.
- A loan of money, goods or services, or combinations of these.
- The receipt of beneficial terms that are not generally available regarding the purchase or lease of goods or services.
- Receipt of goods including any type of equipment, including vehicles.
- Work carried out for the member of staff's benefit.

7.1.3 Gifts from suppliers or contractors doing business, likely to do business, actively involved in a tender process or likely to be involved in a tender process with the Trust should be declined and declared, whatever their value.

7.1.4 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.

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

- Gifts of cash and vouchers to individuals should always be declined.
- Staff should not ask for any gifts.
- 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 accepted under a value of £50 do not need to be declared.
- Gifts valued over £50 can be accepted but should be treated with caution and must be declared.
- 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.

7.1.6 All gifts valued at over £50 that are declined must also be declared.

7.1.7 Approval to depart from the above terms of this Policy must be made in writing by an Executive Director, stating the reason for the departure. Any departure from the Policy will be reported to the Audit Committee.

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>

7.1.8 What should be declared:

- Staff name and their role with the Trust.
- 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 (see section 5.3), details of any approvals given to depart from the terms of this Policy).
- Details of previous gifts and hospitality offered by this individual or supplier.
- Whether the offer was accepted or not.
- Reasons for accepting or declining the offer.

7.1.9 Gifts provided by the Trust to third parties should be limited to a value of £50, except in exceptional circumstances and only with approval in writing by an Executive Director.

7.2 Hospitality

7.2.1 'Hospitality' can refer to a wide range of activities, but can be considered as:

- Invitations to events, travel, meals and refreshments, or provision of accommodation.

7.2.2 Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.

7.2.3 Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event. Hospitality must be secondary to the purpose of the meeting / conference. The level of hospitality offered must be appropriate and not out of proportion to the occasion. It should not extend beyond those whose role makes it appropriate for them to attend the meeting.

7.2.4 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 (under £75⁴) and reasonable.

7.2.5 Hospitality provided by the Trust to third parties should only be provided in exceptional circumstances and only with approval in writing by an Executive Director.

7.2.6 Meals and refreshments:

- Under a value of £50 - may be accepted and need not be declared.
- Of a value between £50 and £75 - may be accepted. There is a need to declare whether this was accepted or declined.
- Over a value of £75 - should be refused unless (in exceptional circumstances) prior approval is given in writing by an Executive Director. A clear reason should be recorded on the Trust's Register of Gifts, Hospitality and Sponsorship 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 an estimate that a reasonable person would make as to its value).

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>

7.2.7 **Travel and accommodation:**

- Offers to pay some or all of the travel and accommodation costs related to attendance at events under a value of £50 may be accepted and need not be declared.
- Offers to pay some or all of the travel and accommodation costs related to attendance at events (between £50 and £75) may be accepted and must be declared.
- Offers to pay for travel and accommodation above £75, or are of a type that the Trust itself might not usually offer, should only be accepted in exceptional circumstances following prior approval in writing by an Executive Director, and must be declared. A clear reason should be recorded on the Trust's Register of Gifts, Hospitality and Sponsorship 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.

7.2.8 **Provision of Hospitality by the Trust**

- Provision of hospitality by the Trust to employees of the Trust or others would not normally be appropriate except in the case of working breakfasts or lunches in the course of meetings or workshops.
- Provision of working lunches should be by exception rather than the rule and only offered if the duration of the meeting is such that people are unable to purchase their own refreshments.
- The use of NHS monies for hospitality and entertainment at conferences and seminars should be carefully considered. The Trust must be able to demonstrate good value in incurring public expenditure.

7.2.9 All hospitality over the value of £50 that is declined should be declared.

7.2.10 What should be declared:

- Staff name and their role with the Trust.
- 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 (see section 5.3), details of any approvals given to depart from the terms of this Policy).
- Details of previous gifts and hospitality offered by this individual or supplier.
- Whether the offer was accepted or not.
- Reasons for accepting or declining the offer.

7.3 **Shareholdings and Other Ownership Issues**

7.3.1 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 be expected to do, business with the Trust.

7.3.2 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 (see section 5.3) should be considered and applied to mitigate risks.

7.3.3 There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

7.3.4 What should be declared:

- Staff name and their role with the Trust.
- 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).

7.4 Patents

7.4.1 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 Trust.

7.4.2 Staff should seek prior permission from the Trust before entering into any agreement with bodies regarding product development, research, work on pathways, etc., where this impacts on the Trust's time, or uses its equipment, resources or intellectual property.

7.4.3 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.

7.4.4 What should be declared:

- Staff name and their role with the Trust.
- 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)

7.5 Loyalty Interests

7.5.1 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 the Trust does business with an organisation in which close family members and relatives, close friends and associates, and business partners have decision-making responsibilities.

7.5.2 What should be declared:

- Staff name and their role with the Trust.
- 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).

7.6 Donations

- 7.6.1 Donations made by suppliers or bodies seeking to do business with the Trust should be treated with caution and not routinely accepted. In exceptional circumstances if an individual believes that it is appropriate or necessary to accept a donation advance approval in writing should be sought from an Executive Director and must be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value.
- 7.6.2 Staff should not actively solicit charitable donations unless this is a prescribed or an expected part of their duties for the Trust or is being pursued on behalf of the Trust's own charitable fund or other charitable body, and is not for their own personal gain.
- 7.6.3 Staff must obtain permission from the Trust 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 Trust's own.
- 7.6.4 Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued.
- 7.6.5 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.
- 7.6.6 What should be declared:
- The Trust will maintain records in line with the above principles and rules and relevant obligations under charity law.

7.7 Sponsored Events

- 7.7.1 Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in a clear benefit to the Trust and / or the NHS. Sponsorship should not be accepted from organisations whose major interests are detrimental to the aims of the Trust.
- 7.7.2 The acceptance of commercial sponsorship should not in any way compromise any purchasing decisions or be dependent on the purchase or supply of goods or services.
- 7.7.3 During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.
- 7.7.4 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.
- 7.7.5 At the Trust'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.
- 7.7.6 Staff within the Trust 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.
- 7.7.7 Staff arranging sponsored events must declare this to the Trust.
- 7.7.8 What should be declared:

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

7.8 **Commercial Sponsorship for Collaborative Partnerships**

7.8.1 Where collaborative partnerships involve a pharmaceutical company, staff should also be aware of the requirements of the Medical (Advertising) Regulations Act 1994: (regulation 21 'Inducements and Hospitality').

7.8.2 Specific issues may arise where there are opportunities for the Trust or individual employees to enter into co-operative arrangements with pharmaceutical companies. The following guidelines should be observed:

- the partnership activity should support the overall objectives and priorities of the Trust,
- these activities should show tangible benefits to individual patient management,
- the work should support the activities and decisions of the Trust,
- the overall aim of the partnership should be considered and take account of the need for probity and transparency,
- the agreement should take account of the programme's clinical effectiveness and of the strict requirements regarding patient confidentiality,
- any benefits offered or obtained should be documented in the Register

7.8.3 Proposed arrangements with pharmaceutical companies must be brought to the attention of the Medical Director for review prior to agreement.

7.8.4 If publications are sponsored by a commercial organisation they should have no influence over the content of the publication.

- The company logo can be displayed on the publication, but no advertising or promotional information should be displayed.
- The publication should contain a disclaimer which states that sponsorship of the publication does not imply that the Trust endorses any of the company's products or services.

7.8.5 What should be declared:

- The Trust will maintain records regarding Commercial Sponsorship for Collaborative Partnerships in line with the above principles and rules.

7.9 **Commercial Sponsorship for Attendance at Courses and Conferences**

7.9.1 Acceptance by staff of commercial sponsorship for attendance at relevant conferences and courses is acceptable, but only where the employee seeks permission in advance from their Line Manager, who must be satisfied that acceptance will not compromise purchasing decisions in any way, or if a presentation is being given by the Trust employee, the sponsoring company has had no influence over the presentation's content. Any payment that is received for speaking at conferences taking place in Trust time should be paid to the Trust.

7.9.2 It is acknowledged that there is a requirement upon clinical staff in particular to engage in continuous professional development, for the purposes of maintaining their re-validation.

7.9.3 On occasions, it may be considered necessary for staff advising on the purchase of equipment to inspect such equipment in operation in other parts of the country (or, exceptionally, overseas). The Trust will want to consider meeting the cost, so as to avoid putting in jeopardy the integrity of purchasing decisions. Staff and their managers should seek advice in advance on such matters from the Chief Finance Officer.

7.9.4 What should be declared:

- Staff name and their role with the Trust.
- 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).

7.10 **Sponsored Research**

7.10.1 Funding sources for research purposes must be transparent.

7.10.2 Any proposed research must go through the relevant health research authority or other approvals process.

7.10.3 There must be a written protocol and written contract between staff, the Trust, 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.

7.10.4 The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.

7.10.5 Staff should declare involvement with sponsored research to the Trust.

7.10.6 What should be declared:

- The Trust 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 Trust.
 - 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).

7.11 **Sponsored Posts**

7.11.1 External sponsorship of a post requires prior approval from the Trust.

7.11.2 Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate.

7.11.3 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.

7.11.4 Sponsored post holders must not promote or favour the sponsor's products, and information about alternative products and suppliers should be provided.

7.11.5 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.

7.11.6 What should be declared:

- The Trust 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.

7.12 **Outside Employment**

7.12.1 No private work should be carried out during NHS working hours. Work undertaken in a person's own time, i.e. not as part of their employment with the Trust, will need to be declared (staff need to be aware that personal indemnity cover may be required, as such work will not be indemnified by the Trust).

7.12.2 Staff should declare any existing outside employment on appointment.

7.12.3 Staff who wish to engage in outside employment after appointment must obtain written consent, by writing to their line manager, before taking up that employment. Provided that any other employment is outside their normal working hours, and does not conflict with their duties with the Trust, this request will not be unreasonably refused. Failure to inform their manager in writing may be treated as a breach of this Policy.

7.12.4 Where staff wish to or are asked to undertake lectures or prepare articles / publications outside of their employment with the Trust, the additional question of individuals receiving fees, allowances or royalties may arise. If an individual has made a contribution to a lecture / publication in his / her own time without recourse to using the Trust's resources (for example, stationery, typing, photocopying) then the Trust would view the retention of such fees by the individual as legitimate. In such circumstances, the individual would, of course, be responsible for making an appropriate declaration to the HM Revenue and Customs.

7.12.5 Where a member of staff has contributed to a lecture / publication as a by-product of his / her normal working activities and / or undertaken the work during office hours utilising the Trust's facilities, the fee would normally fall payable to the Trust.

7.12.6 Staff should not use letterheads or business cards using the Trust's addresses, telephone or email addresses, or advertise their services using these.

7.12.7 Where a risk of conflict of interest arises, the general management actions outlined in this Policy should be considered and applied to mitigate risks.

7.12.8 The Trust may have legitimate reasons within employment law for knowing about outside employment of staff, even when this does not give rise to risk of a conflict.

7.12.9 What should be declared:

- Staff name and their role with the Trust.
- The nature of the outside employment (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).

7.12.10 Failure to declare any secondary employment will be dealt with under the Trust's Disciplinary Policy and Procedures and may result in a referral to the Local Counter Fraud Specialist and disciplinary or legal action may follow.

7.13 Clinical Private Practice

- 7.13.1 Clinical staff should be aware of their Terms and Conditions of Service in relation to private practice, which set out the standards of best practice governing the relationship between NHS work, private practice and fee-paying services.
- 7.13.2 Clinical staff should inform their line manager of any regular commitments in respect of private professional services or fee paying services and should disclose this information at least annually as part of the Job Plan Review, and declare this using the Staff Declaration of Interests Form attached as Appendix 4.
- 7.13.3 The declaration must include:
- Where they practise (name of private facility).
 - What they practise (specialty).
 - When they practise (identified sessions / time commitment).

Note: Hospital consultants are already required to provide their employer with this information by virtue of paragraph 3, schedule 9 of the Terms and Conditions – Consultants (England) 2003 (further information can be at: https://www.bma.org.uk/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf).

- 7.13.4 Clinical staff should (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):
- Seek prior approval of their Trust before taking up private practice.
 - Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.⁵
 - Not accept direct or indirect financial incentives from private providers other than those allowed by the Competition and Markets Authority guidelines: https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf.
- 7.13.5 Clinical staff 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.
- 7.13.6 What should be declared:
- Staff name and their role with the Trust.
 - A description of the nature of the private practice (e.g. what, where and when staff practise, sessional activity, etc.).
 - 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).

7.14 Legacies

- 7.14.1 An employee must notify their line manager if they receive a legacy connected in any way with their employment.

⁵ 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

8. Management of interests – Advice in Specific Contexts

8.1 Strategic decision-making groups

8.1.1 In common with other NHS bodies the Trust uses a variety of different groups to make key strategic decisions about things such as:

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

8.1.2 The interests of those who are involved in these groups should be well known so that they can be managed effectively. For this Trust these groups are:

- Drugs and Therapeutics Committee
- Medicines Management Committee

8.1.3 These groups should adopt the following principles:

- Chairs should consider any known interests of members in advance, and begin each meeting by asking for declarations 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 Trust's register.
- 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.

8.1.4 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.

8.1.5 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.

8.2 Procurement

8.2.1 Staff involvement

8.2.2 Staff involved in the areas of tendering and purchasing are more vulnerable than other colleagues to accusations of impropriety. Even the appearance of impropriety can be highly damaging to the employee and to the Trust. It is vital that all purchasing decisions are made on an objective basis, and seen to be so.

8.2.3 It is a criminal offence for any person to offer gifts, pecuniary advantages or benefits in kind as an inducement to prescribe or supply their medicines. Only inexpensive items relevant to the practice of pharmacy or medicine are allowed. It is also an offence for any person prescribing or supplying medicines for human use to solicit or accept any such inducement.

8.2.4 All staff who are in contact with suppliers and contractors, and in particular those who are authorised to sign purchase orders, or place contracts for goods, materials or services, must adhere to the Trust's rules on tendering and contracting set out in the Trust's Standing Orders, Standing Financial Instructions, and Scheme of Delegation.

8.3 Fair and open competition

8.3.1 Fair and open competition between prospective contractors or suppliers for NHS contracts is a requirement of NHS Standing Orders and of EC Directives on Public Purchasing for Works and Supplies. This means that:

- no private, public or voluntary organisation or company which may bid for Trust business should be given any advantage over its competitors, such as advance notice. This applies to all potential contractors, whether or not there is a relationship between them and the Trust, such as a long-running series of previous contracts.
- each new contract should be awarded on an objective basis, and seen to be so, taking into account the requirements of the Trust and the ability of the contractor to fulfil them.
- scrupulous care must be taken to ensure that the selection of contractors is conducted impartially, and that staff who are known to have a relevant interest play no part in the selection.
- staff must not show any special favour to any business with which they or their family have some personal or professional connection. The same applies to any business connected with current or recent former employees or their partners, close relatives or associates. For example, under no circumstances should staff agree to "linked deals" whereby sponsorship is linked to the purchase of particular products, or to supply from particular sources.

8.3.2 No special favour will be shown to current or former employees or their close relatives or associates in awarding contracts to private or other businesses run by them or employing them in a senior or relevant managerial capacity. Contracts may be awarded to such businesses where they are won in fair competition against other tenders, but scrupulous care must be taken to ensure that the selection process is conducted impartially, and that staff who are known to have a relevant interest play no part in the selection.

8.4 Preferential Treatment in Private Transactions

8.4.1 Staff must not seek or accept preferential rates or benefits in kind for private transactions carried out with companies with which they have had, or may have, official dealings on behalf of the Trust (this does not apply to concessionary agreements negotiated with companies by NHS management, or by recognised staff interests, on behalf of all staff – for example, NHS staff benefits schemes).

9. Dealing with Breaches

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'.

9.1 Identifying and Reporting Breaches

9.1.1 Staff who are aware of actual breaches of this Policy, or who are concerned that there has been, or may be, a breach, should report these concerns to the Company Secretary.

9.1.2 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. For further information about how concerns should be raised please see the Trust's Whistleblowing (raising concerns) Policy.

9.1.3 The Trust 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.

9.1.4 Following investigation the Trust will:

- Decide if there has been or is potential for a breach and if so what the 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 the Trust (and outside, e.g. the CQC, GMC, NMC, etc.) should be made aware.
- Take appropriate action as set out in the next section.

9.1.5 Failing to respond to a request for information from the Company Secretary, including a request to submit a declaration form, will also be considered a breach of this Policy.

9.2 Taking Action in Response to Breaches

9.2.1 Action taken in response to breaches of this Policy will be in accordance with the disciplinary procedures of the Trust and could involve organisational leads for staff support (e.g. Human Resources), fraud (e.g. Local Counter Fraud Specialists), members of the management or executive teams and the Trust's auditors.

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

- Clarification or strengthening of existing policies, 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 external auditors, NHS Counter Fraud Authority, the Police, statutory health bodies (such as NHS England / Improvement or the CQC), and / or health professional regulatory bodies.

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

9.2.4 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 Trust 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.

9.2.5 Any financial or other irregularities or impropriety which involve evidence or suspicion of fraud, bribery or corruption by any member of staff, will be reported to the Trust's Local Counter Fraud Specialist in accordance with Standing Financial Instructions and in line with the Trust's Anti-

Fraud and Bribery Policy with a view to an appropriate investigation being conducted and potential prosecution being sought.

9.3 Learning and Transparency Concerning Breaches

9.3.1 Reports on any breaches, the impact of these, and action taken will be considered by the Audit Committee.

10. Maintaining Confidentiality

10.1 Standards Expected for Information Confidentiality

10.1.1 All employees of the Trust have a duty to maintain confidentiality and the guidance which follows sets out the general standard to respect confidentiality of information at all times.

10.1.2 Information about Patients and Clients

When patients or clients visit their own doctors, clinics or hospitals, or are visited at home by staff, they give personal details of their lives and allow staff to carry out investigations and record information confident that whatever staff may learn about them will not be reported to unauthorised persons. Staff must not knowingly, wilfully, or by neglect, disclose anything learned about a patient / client to anyone not authorised to receive it.

10.1.3 Information about Members of Staff

When staff are appointed it is necessary to record personal information about them required for record purposes. It is important that this information should also be regarded as confidential and not disclosed to anyone without the prior approval of the employee having first been given.

10.1.4 Other Confidential Information

Staff may find that, as part of their work, they have access to confidential reports and information concerning the business of the Trust and other NHS organisations. The fact that they do have access to this information places a responsibility on them to honour the trust placed on them by the nature of their employment. "Commercial in confidence" information must not be disclosed to any unauthorised person or organisation as its disclosure would prejudice the principle of a purchasing system based on competition.

10.2 Guidance on Questions of Confidentiality

10.2.1 There is seldom any difficulty in deciding when and to whom disclosures of confidential material ought to be made. When any difficulties or doubts arise, however, staff should act cautiously and, depending on the circumstances, approach their line manager for advice.

10.3 Failure to Maintain Confidentiality

10.3.1 The intention of the Trust's rules are not to make the Trust and its staff a secretive organisation. As a public body, there is a recognised need for openness. However, this should not be confused with a breach of confidentiality. As employees of the Trust, all staff need to know that a breach of confidentiality is potentially a serious disciplinary offence that could result in dismissal (see Disciplinary Policy and Procedures).

10.4 Maintaining Information Security

10.4.1 All employees and contract staff have a duty to abide by the principles of the Information Governance Management Framework Policy. Each individual is accountable for the function they perform. Information, hardware or software should be handled in a secure and responsible way;

such that no security breach results from their actions. Each individual should be aware of all security responsibilities associated with their role, and must report any breach of security, or security weaknesses.

11. Tendering and Contract Procedures

11.1 Staff involvement

11.1.1 Staff involved in the areas of tendering and purchasing are more vulnerable than other colleagues to accusations of impropriety. Even the appearance of impropriety can be highly damaging to the employee and to the Trust. It is vital that all purchasing decisions are made on an objective basis, and seen to be so.

11.1.2 It is a criminal offence for any person to offer gifts, pecuniary advantages or benefits in kind as an inducement to prescribe or supply their medicines. Only inexpensive items relevant to the practice of pharmacy or medicine are allowed. It is also an offence for any person prescribing or supplying medicines for human use to solicit or accept any such inducement.

11.1.3 All staff who are in contact with suppliers and contractors, and in particular those who are authorised to sign purchase orders, or place contracts for goods, materials or services, must adhere to the Trust's rules on tendering and contracting set out in the Trust's Standing Orders, Standing Financial Instructions, and Scheme of Delegation.

11.2 Fair and open competition

11.2.1 Fair and open competition between prospective contractors or suppliers for NHS contracts is a requirement of NHS Standing Orders and of EC Directives on Public Purchasing for Works and Supplies. This means that:

- no private, public or voluntary organisation or company which may bid for Trust business should be given any advantage over its competitors, such as advance notice. This applies to all potential contractors, whether or not there is a relationship between them and the Trust, such as a long-running series of previous contracts.
- each new contract should be awarded on an objective basis, and seen to be so, taking into account the requirements of the Trust and the ability of the contractor to fulfil them.
- scrupulous care must be taken to ensure that the selection of contractors is conducted impartially, and that staff who are known to have a relevant interest play no part in the selection.
- staff must not show any special favour to any business with which they or their family have some personal or professional connection. The same applies to any business connected with current or recent former employees or their partners, close relatives or associates. For example, under no circumstances should staff agree to "linked deals" whereby sponsorship is linked to the purchase of particular products, or to supply from particular sources.

11.2.2 No special favour will be shown to current or former employees or their close relatives or associates in awarding contracts to private or other businesses run by them or employing them in a senior or relevant managerial capacity. Contracts may be awarded to such businesses where they are won in fair competition against other tenders, but scrupulous care must be taken to ensure that the selection process is conducted impartially, and that staff who are known to have a relevant interest play no part in the selection.

11.3 Preferential Treatment in Private Transactions

11.3.1 Staff must not seek or accept preferential rates or benefits in kind for private transactions carried out with companies with which they have had, or may have, official dealings on behalf of the Trust (this does not apply to concessionary agreements negotiated with companies by NHS

management, or by recognised staff interests, on behalf of all staff – for example, NHS staff benefits schemes).

12. Guidance on Fraud, Bribery and Corruption

12.1 Board Commitment

12.1.1 The Board is committed to maintaining compliance with the NHS Counter Fraud Authority Standards for Providers and the provisions of the Bribery Act 2010. It is therefore committed to the elimination of any fraud, bribery or corruption within the Trust, and to the rigorous investigation of any such cases by the Trust's Local Counter Fraud Specialist.

12.1.2 Under the Bribery Act 2010, there are two general offences of bribery:

- offering or giving a bribe to induce someone to behave, or to reward someone for behaving, improperly; and
- requesting or accepting a bribe either in exchange for acting improperly or where the request or acceptance is itself improper;

It is therefore a criminal offence to:

- solicit any gift or benefit whatsoever from any other person;
- as an inducement to all staff to do, or to refrain from doing, anything at all in relation to Trust business;
- accept or to solicit any gift or benefit from anyone after the event as a reward for having done, or having refrained from doing, anything at all in relation to the Trust business; and
- offer or to give any gift or benefit to another employee of the Trust or to any employee of any other person or company who has or even may have a business relationship with the Trust as an inducement to do or to refrain from doing anything in relation to Trust business or as a reward after the event for having done so.

12.1.3 The Bribery Act also places specific responsibility on organisations to have in position sufficient and adequate procedures to prevent bribery and corruption taking place. To demonstrate that the Trust has sufficient and adequate procedures in place and to demonstrate openness and transparency, all staff are required to comply with this Policy.

12.1.4 The Fraud Act 2006 focuses on the dishonest behaviour of the suspect and their intent to make a gain or cause a loss. The Act contains the following offences (amongst others):

- Fraud by false representation (s.2) - lying about something using any means, e.g. by words or actions;
- Fraud by failing to disclose (s.3) - not saying something when you have a legal duty to do so; and
- Fraud by abuse of a position of trust (s.4) - abusing a position where there is an expectation to safeguard the financial interests of another person or organisation.

12.1.5 It should be noted that all offences under the Fraud Act 2006 occur where the act or omission is committed dishonestly and with intent to cause gain or loss. The gain or loss does not have to succeed, so long as the intent is there.

12.1.6 The Board wishes to encourage anyone having reasonable suspicions of fraud, bribery and corruption to report them. Therefore, it is also the Board's policy, which will be rigorously enforced, that no employee will suffer in any way as a result of reporting reasonably held suspicions. Staff should be assured that there will be no recriminations against employees who report reasonably held suspicions. Victimising or deterring staff from reporting concerns is a serious disciplinary matter.

12.1.7 Any contravention of this Policy should be reported to the Chief Executive and NHS Counter Fraud Authority. Equally, however, abuse of the process by raising malicious allegations could be regarded as a disciplinary matter (see Disciplinary Policy and Procedures).

12.1.8 Where fraud, bribery or corruption is proven the Trust will ensure sanctions against that the perpetrators are applied appropriately and consistently. It will also take appropriate steps to recover any assets or monies lost as a result of fraud, bribery or corruption.

12.1.9 If staff suspect a colleague, patient or other person or organisation of a fraud, bribery or corruption offence against the Trust, they should directly report their concerns (not via their Line Manager) to the Trust’s Local Counter Fraud Specialist. Alternatively, you may report your suspicions to the Chief Finance Officer, or the NHS Fraud and Corruption Reporting Line on 0800 028 4060 which is open 24 hours a day. All information received is treated in the strictest confidence.

12.1.10 All instances of fraud, bribery and corruption will be dealt with in accordance with the standards defined in the NHS Anti-Fraud Manual and the Trust’s Anti-Fraud and Bribery Policy.

13. Process for Monitoring Compliance

13.1 The process for monitoring compliance with the effectiveness of this Policy is as follows:

Aspect being monitored (What)	Monitoring Methodology (How)	Reporting		
		Presented by (Who)	Committee (Where)	Frequency (How often)
Review of Interests declared	Report, to include: <ul style="list-style-type: none"> • Updates to the Board of Directors Register of Interests • Updates to the Register of Staff Interests • Updates to the Register of Gifts and Hospitality • Known breaches, the impact of these, and action taken 	Company Secretary	Audit Committee	Six-monthly
Policy compliance and effective use of Policy	Report to include: <ul style="list-style-type: none"> • Review of the Declarations of Interests, Gifts, Sponsorship and Hospitality Policy • Sample testing of staff compliance with the Policy • Any potential of fraud or bribery being committed against the Trust • Any system weaknesses 	Local Counter Fraud Specialist	Audit Committee	Annually

14. Associated Documentation

14.1 This Policy has been prepared taking into account the following guidance:

- Association of British Healthcare Industries (ABHI) Code of Business Practice
- Association of British Pharmaceutical Industry (ABPI): The Code of Practice for the Pharmaceutical Industry (2016)

- Bribery Act 2010 – HFMA Governance & Audit Committee, February 2012
- Chartered Institute of Procurement and Supply: Ethical Code of the Institute of Purchasing and Supply
- Freedom of Information Act 2000
- Health and Social Care Act 2008 (Fit and Proper Persons Regulations 2014)
- Managing Conflicts of Interest in the NHS: Guidance for staff and organisations, NHS England
- The Code of Practice on Openness in the NHS
- The NHS Codes of Conduct and Accountability (NHS Appointments Commission & Department of Health – amended July 2004)

14.2 The following Policies are referred to within the Policy and should be read in conjunction:

- Anti-Fraud and Bribery Policy
- Disciplinary Policy and Procedures
- Fit and Proper Persons Policy
- Information Governance Management Framework Policy
- Whistleblowing (raising concerns) Policy
- Standing Orders

15. Dissemination and Implementation

15.1 This Policy will be uploaded to the Trust's Intranet, and a programme of communication activity will be undertaken throughout the year to raise awareness of the Policy and its implications.

15.2 This Policy will be drawn to the attention of all newly appointed staff through new starter information.

15.3 This Policy will be brought to the attention of all 'decision-making staff' as defined in this Policy when seeking an annual declaration.

16. Appendices:

Appendix 1 Equality Analysis

Appendix 2 Patient Safety Impact Assessment Tool

Appendix 3 The Seven Principles of Public Life set out by The Committee on Standards in Public Life (The Nolan Principles)

Appendix 4 Staff Declaration of Interests Form

Appendix 5 Board Member Declaration of Interest Form

Appendix 6 Declaration of Gift / Hospitality / Sponsorship Form

Appendix 1 - Equality Analysis

Equality Analysis

Equality analysis is an evidence based approach which enables the Trust to have **due regard** to the need to eliminate discrimination, advance equality of opportunity and foster good relations, as required by the Public Sector Equality Duty (Section 149 of the Equality Act 2010).

Equality analysis involves gathering and analysing evidence to determine the possible impact of proposed policies, procedures and practices on different groups protected from discrimination by the Equality Act 2010 and then using such evidence to inform action to maximize positive impact and remove or minimize negative impact.

Equality analysis is required when:

- Developing a new policy or procedure
- Amending or reviewing an existing policy or procedure
- Commissioning a new service
- Reviewing delivery of a service

Equality analysis should be a meaningful exercise not a tick box process. Evidence of how the trust has had due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations can be requested to be made public.

In advance of implementing a policy please complete this template:

Division/Department:	Corporate / Trust Headquarters
Name of person completing the equality analysis	Barry Ray, Company Secretary
Date of Equality Analysis:	23 February 2022

What is the aim of this policy or procedure?	This Policy sets out specific guidance on the declarations of gifts, sponsorship and hospitality.
Who will be affected by this policy or procedure? e.g. staff, patients, carers etc.	This Policy applies to all staff, including those who are employed, seconded, contracted, prospective and agency employed staff. This Policy also applies to all Board members including Non-Executive and Executive Directors.
Is the policy/procedure being developed or reviewed?	Reviewed.

Could this policy or procedure affect people differently because of:	Yes/No	Is the difference likely to be positive or negative? Please explain why	What evidence sources have you used to make this assessment?* Say if you have not used any evidence sources**
• Age	No	N/A	N/A
• Disability	No	N/A	N/A
• Gender Reassignment	No	N/A	N/A
• Marriage/Civil Partnership	No	N/A	N/A
• Pregnancy / Maternity	No	N/A	N/A
• Race	No	N/A	N/A
• Religion or belief	No	N/A	N/A
• Sex	No	N/A	N/A
• Sexual Orientation	No	N/A	N/A

* E.g. patient/staff surveys; patient/staff demographics; research (Local/national); borough/STP data; consultation exercises, management reports etc.

** A lack of evidence should not be taken as a reason for stating that there is no impact on equality

Where you have indicated there is a negative impact on any group, could this be potentially discriminatory?	Not applicable
Where negative impact has been identified please say what action you will take to remove or mitigate this? Consider who will do this, by when and what the review arrangements there will be	Not applicable

Appendix 2 - Patient & Public Safety Impact Assessment Tool

Patient Safety Impact Assessment Tool

Division: Corporate	
Policy/Strategy/Service redesign: Policy	
Lead: Company Secretary	
Date of Assessment: 23 February 2022	
Review Date: February 2022	
Patient Safety Domains	Impact of Policy, Strategy or Service Redesign on Patient Safety (Positive or Negative) Neutral – policy does not impact on patients
Mortality	Neutral – policy does not impact on patients
Patient Experience	Neutral – policy does not impact on patients
Staffing Levels	Neutral – policy does not impact on patients
Quality of Service	Neutral – policy does not impact on patients
What has been done to promote patient safety in this piece of work? Not applicable - policy does not impact on patients	
Signature: Barry Ray	
Date: 23 February 2022	

Appendix 3 - The Seven Principles of Public Life

The Seven Principles of Public Life set out by The Committee on Standards in Public Life (The Nolan Principles)

Selflessness

Holders of public office should take decisions 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 performance of their official duties.

Objective

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 the 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 4 - Staff Declaration of Interests Form

Staff Declaration of Interests Form

It is a requirement that all employees of the North Middlesex University Hospital NHS Trust should declare any conflict of interest that may arise in the course of conducting NHS business, as detailed in the Declarations of Interests, Gifts, Sponsorship and Hospitality Policy.

Please complete the declaration below providing as much information as possible. If a category is not applicable please state 'Not Applicable'.

1. 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 be expected to do, business with the Trust.

Nature of the shareholdings / other ownership interest, and dates owned:

2. 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 Trust.

Description of Patent held and relevant dates:

3. Loyalty Interests - Staff are required to declare interests 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 the Trust does business with an organisation in which close family members and relatives, close friends and associates, and business partners have decision-making responsibilities.

Please indicate if you believe any organisation named is likely or possibly seeking to do business with the NHS.

Nature of Loyalty Interests including organisation name, post held, and dates held:

4. Outside Employment - Staff should declare any existing outside employment on appointment and any new outside employment when it arises.

Nature of outside employment (who it is with, a description of duties, time commitment):

5. Clinical Private Practice - Clinical staff should declare all private practice on appointment, and / or any new private practice when it arises including:

- Where you practise (name of private facility).
- What you practise (specialty).
- When you practise (identified sessions / time commitment).

Nature of Clinical Private Practice (Please specify where, what and when):

6. Any other interests which you believe may be relevant to declare

Notes regarding the use of this information:

- The information you provide on this form will be recorded in the Trust's Staff Register of Interests, which will be drawn to the attention of the Trust's internal and external auditors.
- If a conflict of interest is established during the course of Trust business, Trust employment, or during a Trust meeting you are required to declare this as early as possible and to consider whether or not you should continue to play any further part in the relevant discussions or decision.
- Interests will remain on the Staff Register of Interests for a minimum of 12 months and a private record of historic interests will be retained for a minimum of 6 years.
- Information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000.

Declaration by individual

I acknowledge that if I do not make full, accurate and timely declarations then civil, criminal, internal disciplinary, or professional regulatory action may result.

Name (Please Print)	Position (Please Print)
Signature	Date declared

Declaration by Manager of above member of staff:

I have discussed this declaration with the above named member of staff and we have agreed procedures which will ensure that this will not undermine the quality of patient care or in some other way be detrimental to the service provided by or the interests of the Trust.

A copy of this declaration is to be kept on the individual's employee's personnel file.

Managers Name (Please Print)	Position (Please Print)
Signature	Date signed
Please detail what general management actions have been agreed. These might include: <ul style="list-style-type: none">• restricting the member of staff involvement in associated discussions and excluding them from decision-making.• removing the member of staff from the whole decision-making process.• removing the member of staff's responsibility for an entire area of work.• removing the member of staff from their role altogether if they are unable to operate effectively in it because the conflict is so significant.	

Please return this form to:
Barry Ray
Company Secretary
North Middlesex University Hospital NHS Trust
Trust Headquarters
North Middlesex University Hospital

Tel no: 020 8887 3749
E-mail address: northmid.declarations@nhs.net

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Appendix 5 - Board Member Declaration of Interest Form

Board Member Declaration of Interest Form

The NHS Code of Accountability requires Trust Board Members to declare interests which are relevant and material to the NHS Board of which they are a member.

Please complete the declaration below (if not applicable you must state 'Not Applicable' and not simply put a line through):

1. Shareholdings and Other Ownership Issues - Board members 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 be expected to do, business with the Trust.

Nature of the shareholdings / other ownership interest, and dates owned:

2. Patents - Board members 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 Trust.

Description of Patent held and relevant dates:

3. Loyalty Interests - Board members are required to declare interests 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 the Trust does business with an organisation in which close family members and relatives, close friends and associates, and business partners have decision-making responsibilities.

Please indicate if you believe any organisation named is likely or possibly seeking to do business with the NHS.

Nature of Loyalty Interests including organisation name, post held, and dates held:

4. Outside Employment - Board members should declare any existing outside employment on appointment and any new outside employment when it arises.

Nature of outside employment (who it is with, a description of duties, time commitment):

5. Clinical Private Practice - Board members staff should declare all private practice on appointment, and / or any new private practice when it arises including:

- Where you practise (name of private facility).
- What you practise (specialty).
- When you practise (identified sessions / time commitment).

Nature of Clinical Private Practice (Please specify where, what and when):

6. Any other interests which you believe may be relevant to declare

Notes regarding the use of this information:

- The information you provide on this form will be recorded in the Trust's Board Member Register of Interests, which will be drawn to the attention of the Trust's internal and external auditors. The Register of Interests will also be made available at each public meeting of the Trust Board and published in the Trust's Annual Report.
- If a conflict of interest is established during the course of Trust business, Trust employment, or during a Trust meeting you are required to declare this as early as possible and to consider whether or not you should continue to play any further part in the relevant discussions or decision.
- Interests will remain on the Board Member Register of Interests during your period of office and a private record of historic interests will be retained for a minimum of 6 years.
- Information may be held in both manual and electronic form in accordance with the data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000.

Declaration by individual

I acknowledge that if I do not make full, accurate and timely declarations then civil, criminal, internal disciplinary, or professional regulatory action may result.

Name (Please Print)	
Position (Please Print)	
Signature	
Date	

Please return this form to:

Barry Ray
Company Secretary
North Middlesex University Hospital NHS Trust
Trust Headquarters
North Middlesex University Hospital

Tel no: 020 8887 3749

E-mail address: northmid.declarations@nhs.net

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Appendix 6 - Declaration of Gifts / Hospitality / Sponsored Events

Declaration of Gift / Hospitality / Sponsored Events

Name (Please Print)	
Position and Department (Please Print)	
Date of Receipt	

Description and Nature of *hospitality / *sponsorship / *gift offered to you with a value in excess of £50. Please indicate if this was *accepted or *declined (*delete as applicable)

Please contact the Company Secretary to declare Sponsored Research or a Sponsored Post

Value of above:	£
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Person or External body offering the hospitality / sponsorship / gift

Any other relevant information (e.g. circumstances surrounding the hospitality / sponsorship / gift, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of the Policy):

I confirm that the information provided above is complete and correct. I declare that the gift / hospitality / sponsorship acquired or received was entirely consistent with the requirements of the Declarations of Interests, Gifts, Sponsorship and Hospitality Policy, and that no business decisions have or will be improperly influenced by the hospitality / sponsorship / gift, nor personal gain obtained. I acknowledge that if I do not make full, accurate and timely declarations then civil, criminal, internal disciplinary, or professional regulatory action may result.

Notes regarding the use of this information:

- The information you provide on this form will be recorded in the Trust's Register of Gifts, Hospitality and Sponsorship, which will be drawn to the attention of the Trust's internal and external auditors.
- If a conflict of interest is established during the course of Trust business, Trust employment, or during a Trust meeting you are required to declare this as early as possible and to consider whether or not you should continue to play any further part in the relevant discussions or decision.
- Interests will remain on the Register of Gifts, Hospitality and Sponsorship for a minimum of 12 months and a private record of historic interests will be retained for a minimum of 6 years.
- Information may be held in both manual and electronic form in accordance with the data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000.

Name (Please Print)	Position (Please Print)
Signature	Date declared

I have discussed this declaration with the above named staff member and we have agreed appropriate management actions which will ensure that this conflict will not undermine the quality of patients care or be in some other way detrimental to the service provided by or the interests of the Trust.

Please retain a copy of this declaration on the individual's employee's personnel file.

Manager's Name	Position
Signature	Date signed

Please return this form to:
 Barry Ray
 Company Secretary
 North Middlesex University Hospital NHS Trust
 Trust Headquarters
 North Middlesex University Hospital

Tel no: 020 8887 3749
 E-mail address: northmid.declarations@nhs.net