

## Register of Interests, Gifts and Hospitality Policy

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### What is in this policy?

In accordance with the Trust's governing documents, it is the responsibility of all governors, directors and other senior decision-making staff within the Trust to ensure that their personal interests do not conflict with those of the Trust, and that they do not abuse their official positions for personal gain or to the unfair benefit of their family or friends.

It is the responsibility of all governors, directors and other senior decision-making staff to ensure that they are not placed in a position which risks, or appears to risk, conflict between their private interests and their NHS duties. This primary responsibility applies to all NHS staff, i.e. those who commit NHS resources directly (e.g. by the ordering of goods and services) or those who do so indirectly.

This Policy expands on the provisions set out in the Foundation Trust Constitution for addressing potential conflicts of interest, demonstrating transparency and probity in business transactions, and upholding appropriate standards of business conduct. It includes provisions for governors, directors and other senior decision-making staff to declare and allow for the appropriate management of their interests, and also sets out the process for managing offers of gifts, hospitality and sponsorship. It alerts staff to the implications of the Bribery Act 2010.

| <b>Document Change Control</b> |                       |  |                         |  |
|--------------------------------|-----------------------|--|-------------------------|--|
| <b>Date of Version</b>         | <b>Version Number</b> | <b>Lead for Revisions</b>              | <b>Type of Revision</b> | <b>Description of Revision</b>   |
| 14/09/2010                     | 1.0                   | Chief Nurse and Director of Governance | Major                   | Register of Interests and Hospitality Policy.  |
| 05/04/2012                     | 1.1                   | Trust Secretary                        | Major                   | Updated Policy to reflect Bribery Act 2010 and Monitor policy provisions.  |
| 08/01/2013                     | 1.2                   | Trust Secretary                        | Minor                   | Minor amendments following consultation with Senior Leadership Team.   |
| 16/01/2013                     | 2.0                   | Trust Secretary                        | Version                 | Approved by Trust Management Executive.  |
| 15/01/2014                     | 2.1                   | Trust Secretary                        | Update                  | Contact details on page 11 updated.  |
| 20/02/2014                     | 2.2                   | Trust Secretary                        | Update                  | Form procedure at 5.3 modified to reflect introduction of online form.   |
| 05/04/2016                     | 3.0                   | Interim Trust Secretary                | 3 year full review      | Policy amended and updated   |
| 04/04/2017                     | 3.1                   | Trust Secretary                        | Minor                   | Minor amendments following consultation with Senior Leadership Team  |
| 15/06/2017                     | 4.0                   | Trust Secretary                        | Update                  | Policy updated to take into account the NHS England guidance issued on declarations of interest  |
| 15/07/2019                     | 4.1                   | Head of Corporate Governance           | Moderate                | Policy revised to reflect recommendations of the internal audit of conflicts of interest in July 2019: in particular to clarify that all senior decision-makers within the trust are required to make at least an annual declaration of interests, and to remove the requirement for divisions to maintain their own registers (since declarations should all be made via the central Trust Register of Interests) |
| 23/03/21                       | 4.2                   | Head of Corporate Governance           | Minor                   | Updated for merged organisation  |

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|------------|-----|----------------------------------|----------|--|
| 17/08/22   | 4.3 | Director of Corporate Governance | Minor    | Minor amendment to language and update to reflect the adoption of a new system for the management of conflicts called Decaflow.  |
| 01/03/2022 | 4.4 | Head of Corporate Governance     | Moderate | Minor amendments to language. Major amendment to weblink on which interests should be declared to reflect the move of the electronic register of interests from the Decaflow to the Declare system and replacement of DMS with My Staff App. Changes to links to policies and procedures. Moderate changes to responsibilities relating to breaches of the policy. Minor change to reflect Declare is a live document. |

| <b>Sign off Process and Dates</b> |                    |
|-----------------------------------|--------------------|
| <b>Groups consulted</b>           | <b>Date agreed</b> |
| Policy Assurance Group            | 12/09/2024         |
| Executive Committee               | 11/09/2024         |

- **Stakeholder Group** can include any group that has been consulted over the content or requirement for this policy.
- **Steering Group** can include any meeting of professionals which has been involved in agreeing specific content relating to this policy.
- **Other Groups** include any meetings consulted over this policy.
- **Policy Assurance Group** must agree this document before it is sent to the **Approval Authority** for final sign off before upload to the DMS.

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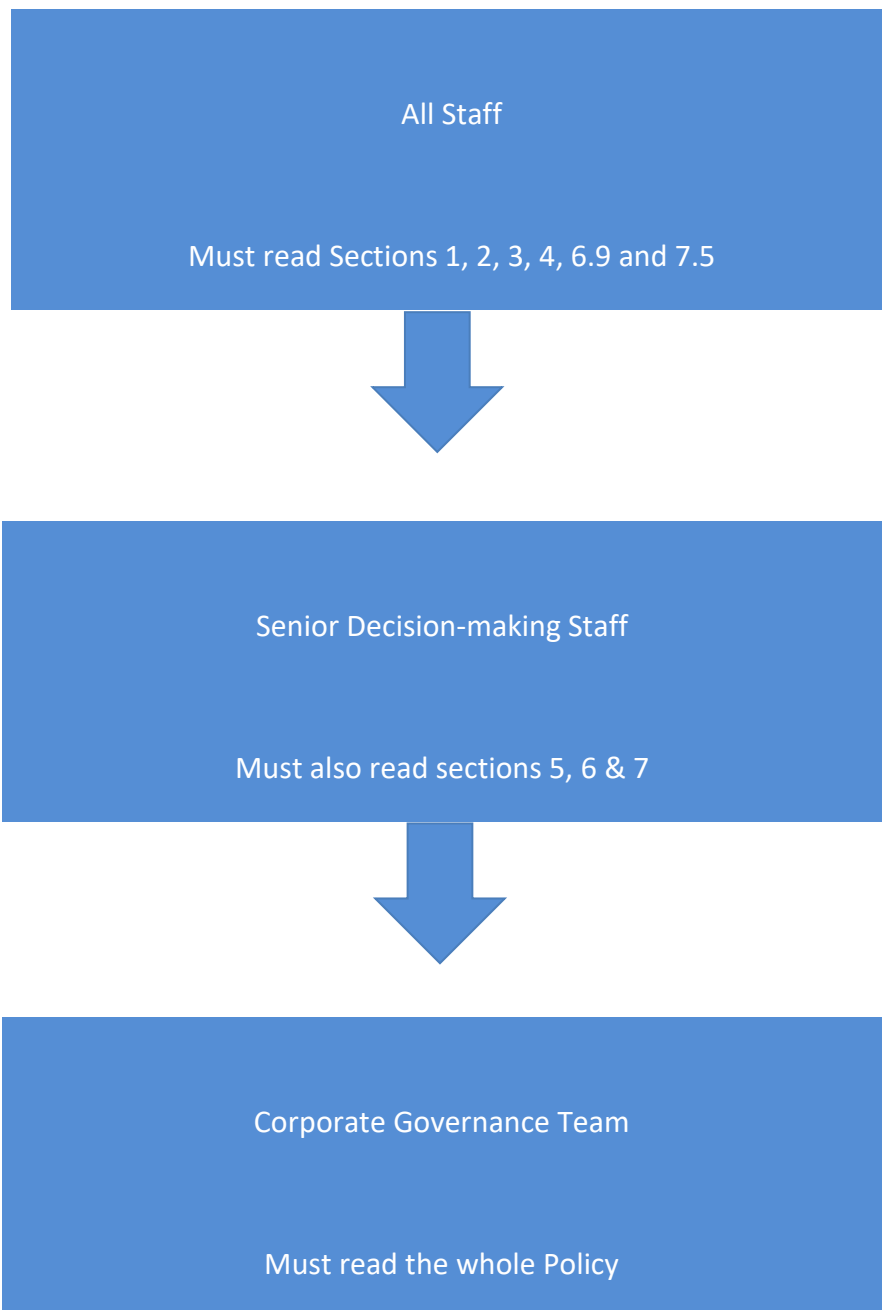
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## Do I need to read this Policy?



## 1. Policy Summary

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.

To declare an interest, gift, hospitality, sponsorship or another type of interest go to <https://uhbw.mydeclarations.co.uk/home>. If you need help accessing the system please contact [trust.secretariat@uhbw.nhs.uk](mailto:trust.secretariat@uhbw.nhs.uk).

| As a member of staff you should...   | As an organisation we will...  |
|--|--|
| <ul style="list-style-type: none"> <li>• Regularly consider what interests you have and declare these as they arise. If in doubt, declare.</li> <li>• Declare any gift, sponsorship or hospitality offered and or accepted, and seek advice if you are uncertain about the appropriateness of accepting or declining an offer.</li> <li>• Familiarise yourself with this policy and follow it. Refer to the guidance for the rationale behind this policy <a href="https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf">https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf</a></li> <li>• Use your common sense and judgement to consider whether the interests you have could affect the way taxpayers' money is spent</li> <li>• <b>NOT</b> misuse your position to further your own interests or those close to you</li> <li>• <b>NOT</b> be influenced, or give the impression that you have been influenced, by outside interests</li> <li>• <b>NOT</b> allow outside interests you have to inappropriately affect the decisions you make when using taxpayers' money</li> <li>• <b>NOT allow gifts, sponsorship or hospitality you have been offered and/or accepted, to affect the decisions you make using taxpayers' money.</b></li> </ul> | <ul style="list-style-type: none"> <li>• Ensure that this policy and supporting processes are clear and help staff understand what they need to do.</li> <li>• Identify a team or individual with responsibility for:                             <ul style="list-style-type: none"> <li>○ Keeping this policy under review to ensure they are in line with the guidance.</li> <li>○ Providing advice, training and support for staff on how interests should be managed.</li> <li>○ Maintaining register(s) of interests.</li> </ul> </li> <li>• Investigate any breaches of this policy.</li> <li>• Audit this policy and its associated processes and procedures at least once every three years.</li> <li>• <b>NOT</b> avoid managing conflicts of interest.</li> <li>• <b>NOT</b> interpret this policy in a way which stifles collaboration and innovation with our partners.</li> </ul> |

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## 2. Introduction

Public sector bodies such as the NHS, which are accountable to the public at large, must be impartial and honest in the conduct of their business. In turn, their staff members and board members should undertake their duties with the highest standards of probity and remain beyond suspicion.

It is the responsibility of all directors (Executive and Non-Executive), governors, and staff to ensure that they are not placed in a position which risks, or appears to risk, conflict between their private interests and their NHS duties. This applies to those who commit NHS resources directly (e.g. by ordering of goods) and those who do so indirectly (e.g. by recommending items to be ordered or by the prescribing of medicines).

The Trust Board of Directors has a legal obligation to act in the best interests of the Trust in accordance with the Trust's governing document<sup>1</sup>, and to avoid situations where there may be a potential for conflict of interest. There is also a requirement for the Trust Board of Directors to adopt appropriate standards of conduct and to be open and transparent in their decision-making and the manner in which conflicts of interests are managed. These obligations are extended to governors, directors and staff<sup>2</sup>.

The Trust Board of Directors has a legal obligation to act, and be seen to act, with integrity and in the best interests of the organisation, in accordance with the trust's governing documents, and to avoid situations where there may be a potential conflict of interest.

All staff members, and particularly senior decision-makers, must conduct themselves and the business of the Trust in an open and transparent way that commands public confidence in their decision-making and the manner in which conflicts of interest are managed.

In addition, The Board must ensure that the Trust's governors, directors and other senior decision-making staff are familiar with the Trust's policy for registering and managing interests, gifts and hospitality. It is essential therefore that there are clear and robust systems in place for identifying and managing real and potential conflicts of interest of governors, directors and staff to protect the reputation and tangible assets of the Trust, as well as the reputation of individual staff.

The Director of Corporate Governance is required to maintain a register of interests declared by senior decision-making staff, members of the Board, and governors and to report on this annually in the public part of the Trust Board meeting. The returns will be maintained in a register which will be open for inspection and accessible under the Freedom of Information Act 2000. The Trust's register of interests is a live document held electronically on the Declare system and published on the Trust's website.

The Bribery Act 2010 came into effect on 1 July 2011. The Act makes it a criminal offence to give, promise or offer a bribe, and to request, agree to receive or accept a bribe. The maximum penalty

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<sup>1</sup> The Foundation Trust Constitution and Trust Standing Orders

<sup>2</sup> Including full time and part time employees on a substantive or fixed-term contract and to associated persons such as secondees, agency staff contractors and others employed under a contract of service

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for bribery will be ten years imprisonment for individuals engaging in bribery and an unlimited fine for the hospital.

If you are found to have accepted, or given, any bribe or inducement that is in breach of Trust policy, and/or the Bribery Act 2010 you will face action which may include an investigation by the Local Counter Fraud Specialist that could result in criminal and/or disciplinary action being taken against you.

The Code of Conduct and Accountability (July 2004) reinforces principles of probity and honesty and the Trust's Standing Orders and Standing Financial Instruction reflect these principles.

See Appendix E – Legal Framework and General Principles for summary of the legal framework and general principles.

### **3. Purpose**

The purpose of this Policy is to set out the minimum standards required of all members of the Board, governors, and senior decision-making staff in relation to identifying, declaring and managing potential conflicts of interest and acts of bribery or other corruption, as well as in relation to declaring gifts, hospitality and sponsorship.

### **4. Scope**

This policy applies to all Board members, governors and all other staff (permanent/ temporary/ contracted staff, including those on honorary contracts), but particularly to senior decision-making staff. It also applies to individuals seeking employment with the Trust. It is particularly applicable to those occupying positions where a potential for conflict of interest exists; i.e. staff able to exercise discretion on issues which affect patient care or financial arrangements.

### **5. Definitions**

#### **5.1 *Relevant and Material Interests***

Staff may hold interests for which they cannot see potential conflict. However, caution is always advisable because others may see it differently and perceived conflicts of interest can be damaging. All interests should be declared where there is a risk of perceived improper conduct. The Foundation Trust Constitution establishes that relevant and material interests may include but may not be limited to the following:

- (a) Directorships, including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies);
- (b) Ownership or part-ownership or directorships of private companies, businesses or consultancies likely or possibly seeking to do business with the NHS;
- (c) Majority or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS;
- (d) A position of authority in a charity or voluntary organisation in the field of health and social care;

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- (e) Any connection with a voluntary or other organisation contracting for or commissioning NHS services;
- (f) Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with the Trust, including but not limited to, lenders or banks;
- (g) Research funding/grants that may be received by an individual or their department;
- (h) Interests in pooled funds that are under separate management.

## 5.2 *Conflicts of Interest*

Conflicts arise when the interests of directors or ‘connected persons’<sup>3</sup>, are incompatible or in competition with the interests of the trust. Such situations present a risk that directors may make decisions based on these external influences, rather than the best interests of the organisation. Decisions made under a conflict of interest may be challenged and could result in personal liability for individual directors.

The most common types of conflicts of interest include:

- (a) Financial interests: Where an individual may get direct financial benefit from the consequences of a decision they are involved in making<sup>4</sup>.
- (b) 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.
- (c) 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.

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<sup>3 3</sup> A ‘connected person’ is defined as:

- a) Members of the directors’ family (spouse or civil partner; any other person with whom the director lives as a partner in an enduring family relationship, and that partners’ children or step-children under 18 years of age; children or step-children of the director and their partner or spouse; directors’ parents)
- b) A body corporate with which the director is connected
- c) A person acting in his capacity as a trustee of a trust – i) the beneficiaries of which include the director or a person who by virtue of (a) or (b) is connected with him, or ii) the terms of which confer a power on the trustees that may be exercised for the benefit of the director or any such person, other than a trust for the purposes of an employees’ share scheme or pension
- d) scheme;
- e) A person acting in his capacity as a partner – i) of the director, or ii) of a person who by virtue of (a) to (c) is connected with that director
- f) A firm that is a legal person under the law by which it is governed and in which:
  - i. The director is a partner,
  - ii. A partner is a person who by virtue of (a) to (c) is connected with the director, or
  - iii. A partner is a firm in which the director is a partner

<sup>4</sup> This may be a financial gain, or avoidance of a loss. 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.

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- (d) Indirect interests: Where an individual has a close association 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.

### **5.3 Direct Financial Interests**

The most easily recognisable conflict of interest arises when a director obtains a direct financial benefit over and above the agreed remuneration and terms of service package agreed by the Remuneration Committee. Examples include:

- (a) The award of a contract to a company or other business with which a director is involved; or,
- (b) The sale of assets at below market value to a director.

### **5.4 Indirect Financial Interests**

This arises when a close relative of a director benefits from the Trust. Directors will benefit indirectly if their financial affairs are bound with those of the relative in question through the legal concept of 'joint purse', as would be the case if the relative were the spouse, partner, dependent child of the director, or directly connected in some other way.

### **5.5 Non-financial or personal conflicts**

These occur where directors receive no financial benefit but are influenced by external factors. For instance:

- (a) To gain some other intangible benefit or kudos, or,
- (b) Awarding contracts to friends or personal business contacts.

### **5.6 Conflicts of loyalties**

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

- (a) 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;
- (b) Sit on advisory groups or other paid or unpaid decision-making forums that can influence how an organisation spends taxpayers' money;
- (c) Are, or could be, involved in the recruitment or management of close family members and relatives, close friends and associates, and business partners; or
- (d) Are aware that their organisation does business with an organisation in which close family members and relatives, close friends and associates, and business partners have decision making responsibilities.

Conflicts of interest may present problems in the form of:

- (e) Inhibiting free discussion;

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- (f) Resulting in decisions or actions that are not in the interests of the Trust; and,
- (g) Risking the impression that the Trust has acted improperly.

### **5.7 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.

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

Where holding of patents and other intellectual property rights give rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

### **5.8 Gifts, hospitality, sponsorship**

This category may include:

- (a) A gift of money, goods or services (including hospitality and sponsorship) or combination of these – 'Goods' include food, drink, gifts, furnishings, furniture, vehicles or any type of equipment. 'Services' includes invitations to events, hospitality, entertainment, travel, accommodation, sponsorship or work carried out;
- (b) A loan of money, goods or services or combination of these;
- (c) The receipt of beneficial terms or personal gain that is not generally available regarding the purchase or lease of goods or services;
- (d) The acceptance of pro bono services or sponsorship (i.e. services or sponsorship offered for no payment).

### **5.9 Bribery**

The Bribery Act 2010 describes offences which organisations could be accused of committing if they fail to prevent persons associated with them from offering or accepting bribes<sup>5</sup>.

The Bribery Act 2010 clarifies that bribery is offering an incentive to someone to do something which they wouldn't normally. It sets out four main offences:

- (a) Section 1 – Offering, promising or giving a bribe to another person to perform a relevant 'function or activity' improperly, or to reward a person for the improper performance of such a function or activity ('Active' bribery);

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<sup>5</sup> An organisation that can prove it has adequate procedures in place to prevent persons associated with it from bribing or accepting bribes may have a defence against some or all of these offences

- (b) Section 2 – Requesting, agreeing to receive or accepting a bribe to perform a function or activity improperly, irrespective of whether the recipient of the bribe requests or receives it directly or through a third party, and irrespective of whether it is for the recipient’s benefit (‘Passive’ bribery);
- (c) Section 7 – Failure of a commercial organisation to prevent bribery (the corporate offence). This is a ‘strict liability’ offence and an individual can be found guilty of ‘attempted’ or ‘actual’ bribery on the organisation’s behalf. It should be noted that section 1 or section 6 needs to be proven for a section 7 offences to apply;
- (d) Section 14 – Offering or receiving a bribe or bribing a foreign official. This section applies if an offence under sections 1, 2 or 6 is committed by a body corporate.

The offence of bribery refers to offering, as well as accepting, so that if you offered a bribe in order to encourage someone to purchase goods or services from the Trust, or one of its hosted or associated bodies you would also be guilty of an offence.

The Trust will have to show that it has implemented ‘adequate control activities or procedures’ designed to prevent individuals associated with the trust from engaging in bribery in order to avoid liability. Adequate procedures are defined as the relevant compliance protocols and procedures<sup>6</sup> that the Trust can put in place to prevent bribery by individuals associated with it.

In the context of this Policy, senior decision-making staff are defined in section 6.7.

## **6. Duties, Roles and Responsibilities**

### **6.1 Council of Governors**

- (a) The Foundation Trust Constitution requires that if a Governor has a pecuniary, personal or family interest, whether that interest is actual or potential and whether that interest is direct or indirect, in any proposed contract or other matter which is under consideration or is to be considered or is likely to be considered by the Council of Governors, the Governor shall disclose that interest to the members of the Council of Governors as soon as he/she becomes aware of it.
- (b) The Standing Orders for the Council of Governors make provision for the disclosure of interests and arrangements for the exclusion of a Governor declaring any interest from any discussion or consideration of the matter in respect of which an interest has been disclosed.
- (c) If Governors have any doubt about the relevance of an interest, this should be discussed with the Chair or the Director of Corporate Governance.

### **6.2 Trust Board of Directors**

- (a) The Foundation Trust Constitution requires that if a Director has a pecuniary, personal or family interest, whether that interest is actual or potential and whether that interest is direct or indirect, in any proposed contract or other matter which is

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<sup>6</sup> This might include training, a risk assessment, or briefing.

under consideration or is to be considered or is likely to be considered by the Board of Directors, the Director shall disclose that interest to the members of the Board of Directors as soon as he/she becomes aware of it.

- (b) The Standing Orders of the Board of Directors make provision for the disclosure of interests and arrangements for the exclusion of a Director declaring any interest from any discussion or consideration of the matter in respect of which an interest has been disclosed.
- (c) If Directors have any doubt about the relevance of an interest, this should be discussed with the Chair or the Director of Corporate Governance.

### **6.3 Chief Executive**

- (a) In addition to the responsibilities associated with Board members, the Chief Executive shall ensure that a Register of Interests is established to record formally declarations of interests of Board Directors. In particular, the Register will include details of all directorships and other relevant and material interests which have been declared by both Executive and Non-Executive Directors, as defined in Standing Orders.

### **6.4 Executive Committee**

- (a) The Executive Committee is responsible for ensuring that this policy is implemented across the Clinical and Non-Clinical Divisions and Departments of the Trust.

### **6.5 Divisional Management Boards**

- (a) Divisional Management Boards are responsible for ensuring compliance with this policy within their Divisions and for ensuring that all senior decision-making staff within their Divisions complete a declaration of interest return at least annually, via the Trust's central Register of Interests.

### **6.6 Departmental Directors**

- (a) Trust Services Directors (e.g. Finance, Human Resources, Information Technology, etc.) are responsible for ensuring that all senior managers are aware of their responsibilities with regard to declarations of interest.

### **6.7 Senior Decision-Making Staff**

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 policy these people are referred to as 'decision making staff.'

The Foundation Trust Constitution requires that the following staff groups have a duty to ensure that declaration of interests are made which could materially affect the outcome of decisions made by them:

- (a) Executive and non-executive directors who have decision making roles which involve the spending of taxpayers' money;

- (b) All senior managers and clinicians (at band 8d and above);
- (c) Members of staff who have the power to enter into contracts on behalf of the Trust;
- (d) Members of advisory groups which contribute to direct or delegated decision making on the commissioning or provision of taxpayer funded services; and
- (e) Administrative and clinical staff involved in decision making concerning the commissioning of services, purchasing of good, medicines, medical devices or equipment, and formulary decisions

Where in doubt, all senior managers and clinicians should contact their respective Directors or the Director of Corporate Governance for clarification.

### **6.8 Director of Corporate Governance.**

- (a) The Director of Corporate Governance shall maintain a Register of Interests for the Council of Governors, Trust Board of Directors and other senior decision-making staff.
- (b) This Register shall be kept up to date by means of an annual review of the Register in which any changes to interests declared during the preceding twelve months will be incorporated. The Register will be available to the public via the Trust's website.

### **6.9 All Staff**

All staff (howsoever engaged by the Trust) are required to comply with the provisions of this policy.

The Trust's Freedom to Speak Up Policy is the appropriate route for staff to raise concerns about conflicts of interest and other financial integrity or business conduct issues that cannot be dealt with satisfactorily through line-management in the first instance.

Staff witnessing any perceived bribery or corruption are encouraged to report their concerns about conduct that could potentially breach the Act, confidentially, to the Counter Fraud Team on telephone 0117 342 0838 or to CRIMESTOPPERS/NHS Counter Fraud Authority on 0800 028 40 60, or online at <https://reportfraud.cfa.nhs.uk/>.

### **6.10 Responsibility for Investigating Breaches and Monitoring Compliance**

- (a) The Director of Corporate Governance will oversee the publication of the relevant Registers in accordance with the Trust Publication Scheme.
- (b) Staff will be reminded periodically of their requirement to declare gifts and hospitality provided/accepted/declined in accordance with this Policy.
- (c) The Trust Board of Directors will monitor changes in declarations of interest at each meeting of the Board, and through an annual review of Registers of Interest.
- (d) The Director of Corporate Governance will liaise with the Counter Fraud Team to identify and investigate any breaches of this Policy which amount to actual or

perceived bribery or corruption and will report the outcome of any investigations to the Audit Committee.

- (e) The Audit Committee will monitor compliance with this policy through regular reporting on counter fraud and whistle-blowing, as well as an annual review of the Registers of Interest, Gifts and Hospitality.

## **7. Policy Statement and Provisions**

The following Policy provisions are to be read in conjunction with the Foundation Trust Constitution, Trust Standing Orders and Standing Financial Instructions.

### ***7.1 Identification, Declaration and Review of Interests***

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

- (a) On appointment with the Trust;
- (b) When staff move to a new role or their responsibilities change significantly;
- (c) At the beginning of a new project/piece of work; or
- (d) 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).

To declare an interest please use the Declare system which can be accessed at: [University Hospitals Bristol and Weston NHS Foundation Trust \(mydeclarations.co.uk\)](https://mydeclarations.co.uk). The system can also be used to make a nil declaration which is required for all senior decision-making staff as defined in section 6.7. After expiry, an interest will remain on register(s) for a minimum of 6 months and a private record of historic interests will be retained for a minimum of 6 years.

### ***7.2 Dealing with breaches***

Staff who are aware about actual breaches of this policy, or who are concerned that there has been, or may be, a breach, should report these concerns to the Director of Corporate Governance.

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 refer to the Trust's Freedom to Speak Up Policy.

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.

Following investigation the Trust will:

- (a) Decide if there has been or is potential for a breach and if so what the severity of the breach is;
- (b) Assess whether further action is required in response – this is likely to involve any staff member involved and their line manager, as a minimum;

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- (c) Consider who else inside and outside the Trust should be made aware; and
- (d) Take appropriate action as set out in the next section.

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 organisational auditors.

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

- (e) Clarification or strengthening of existing policy, process and procedures.
- (f) Consideration as to whether HR/employment law/contractual action should be taken against staff or others.
- (g) 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, NHS Improvement or the CQC), and/or health professional regulatory bodies.

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.

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

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

Reports on breaches, the impact of these, and action taken will be considered by the Audit Committee at least annually.

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

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### **7.3 *Declarations of Interest – Governors and Board Members***

The Chair, all Governors and all Directors of the Board are required to comply with the provisions for declarations of interest as set out in the Foundation Trust Constitution. Governors and Directors should approach the Director of Corporate Governance for confidential guidance if necessary.

Interests will be recorded on the Trust's Register of Interests, which will be maintained by the Secretariat on behalf of the Chief Executive and is available on the Trust website for public inspection.

### **7.4 *Declarations of Interest – All Senior Decision-Making Staff***

All senior decision-making staff (howsoever engaged by the Trust) are required to declare and record financial or personal interest in any organisation with which they deal, and must be prepared to withdraw from those dealings if required, thereby ensuring that their professional judgement is not influenced by such interests.

All senior decision-making staff must update their declarations at least annually via the Register of Interests, as well as in-year when their interests change, using the Declare system at [University Hospitals Bristol and Weston NHS Foundation Trust \(mydeclarations.co.uk\)](https://mydeclarations.co.uk).

### **7.5 *Gifts, hospitality and sponsorship***

As outlined in the Trust's Standing Orders all offers of gifts, hospitality or entertainment which create a sense of obligation and can be perceived as a bribe, should be declined. The test should be whether a fair-minded member of the public, knowing all the facts, would see anything improper or suspicious in the receipt or offer of hospitality. All staff (howsoever engaged by the Trust) are required to:

- (a) Refuse gifts, benefits, hospitality or sponsorship of any kind which might reasonably be seen to compromise their personal judgement or integrity;
- (b) Immediately declare and register gifts, hospitality or sponsorship worth £50<sup>7</sup> or more, whether the offer was refused or accepted;
- (c) Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared. Offers which go beyond modest, or are of a type that the Trust itself might not usually offer, need approval by the Divisional Director, should only be accepted in exceptional circumstances, and must be declared. A clear reason should be recorded on the Trust's register(s) of interest as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
  - (i) Offers of business class or first class travel and accommodation (including domestic travel), and offers of foreign travel and accommodation.

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<sup>7</sup> This sum is in line with the NHS on Guidance on Conflicts of Interest

- (ii) Meals or refreshments of a value between £25 and £75<sup>8</sup> - may be accepted and must be declared.
- (iii) Meals or refreshments over a value of £75 - should be refused unless (in exceptional circumstances) Line Manager approval is given. A clear reason should be recorded on the Trust's register(s) of interest as to why it was permissible to accept. A common sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or a reasonable estimate).
- (d) Not misuse or dishonestly abuse their official position of trust or information acquired in the course of their official duties, to further their private interests or the private interests of others;
- (e) Ensure that their professional registration (if applicable) and/or status are not used in the promotion of commercial products or services;
- (f) Beware of bias generated through sponsorship, where this might impinge on professional judgement and impartiality;
- (g) Neither agree to practise under any conditions which compromise professional independence or judgement, nor impose such conditions on other professionals;
- (h) Avoid any activities that might be construed as either offering or accepting any form of bribe, whether 'active' or 'passive' as described at 5.9 Bribery, above.

Where gifts or hospitality are declined on the basis that they create a sense of obligation the Director of Corporate Governance must be notified.

## **7.6 *Outside Employment and Private Practice***

Clinical consultants are permitted to carry out private practice subject to national terms and conditions and their individual contracts of employment and ensure where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work<sup>9</sup>. Clinical consultants carrying out private practice work must declare their private practice work on at least an annual basis via the Register of Interests.

Clinical consultants must not accept direct or indirect financial incentives from private providers other than those allowed by Competition and Markets Authority guidelines:

[https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment\\_Order\\_amended.pdf](https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf).

Other staff may undertake private practice or work provided that:

- (a) Either the work is conducted at the request or with the approval of the Trust, or,

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<sup>8</sup> 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>

<sup>9</sup> 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](https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf)

- (b) The work is conducted outside of the time they are contracted to the Trust, does not conflict with their NHS work and is not detrimental to it.
- (c) Any such work is declared via the Trust's Register of Interests.

Any external work undertaken by staff under either (a) or (b) above must be declared and agreed in writing with line managers before it is undertaken.

Clinical consultants working as self-employed individuals may accept gifts or hospitality relating directly to their self-employed work. However, in the spirit of openness and transparency, it is recommended that such gifts are declared in accordance with this policy to avoid any potential conflicts arising in a private capacity.

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

### **7.7 Cash and Donations**

Under no circumstances may staff accept cash or vouchers, even below the £50.00 threshold. Where cash is offered as a charitable donation, a receipt should be issued and the cash banked through the Trust's cashier's office. Under these circumstances, a declaration form does not need to be submitted.

Where such a donation is offered by a present or past supplier, the employee's line manager must be satisfied that this does not affect the Trust's impartiality towards the contractor. Should any doubt remain, the donation should be politely declined or the matter referred to the relevant Divisional Manager or the Director of Corporate Governance.

Staff should not actively solicit charitable donations unless this is a prescribed or expected part of their duties for the Trust, or is being pursued on behalf of the Trust's own registered charity or other charitable body and is not for their own personal gain.

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 Charities.

Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued.

Staff wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

Each Division must hold a receipt book for the purposes of recording cash donations.

### **7.8 Commercial Sponsorship**

Commercial sponsorship refers to all funding from sources external to the NHS. This includes funding of all or part of the cost of a member of staff, NHS research (see separate policy on

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research), training, pharmaceuticals, equipment, meeting rooms, costs associated with meetings, hotel and transport costs, and provision of speakers or premises.

Any sponsorship offered over the value of £50.00 or more must be declared regardless of whether it is declined or accepted.

Staff may accept commercial sponsorship subject to seeking permission from the appropriate Divisional Manager or Executive Director in advance and ensuring that purchasing or other relevant decisions will not be compromised in any way.

Where it is necessary for staff to travel to inspect equipment for possible purchase, the Trust will consider meeting the cost itself to avoid purchasing decisions being compromised. Where contractors meet the cost it must be made clear that this does not create an obligation.

The Trust will not enter into any arrangements regarding the commercial sponsorship of a post unless it has been made clear to the sponsor that the arrangements will have no effect on purchasing decisions.

All pharmaceutical companies entering into sponsorship agreements must comply with the Code of Practice for the Pharmaceutical Industry 2014<sup>10</sup>. Those sponsorship agreements valued in excess of £500 will require advice from the Medical Director or Chief Pharmacist.

Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in clear benefit the Trust and the NHS. The department organising or hosting the event must ensure that the receipt of funding is approved by an Executive Director and recorded in the Register of Gifts, Hospitality and Sponsorship in advance and ensure the following conditions are adhered to:

- (a) During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation;
- (b) No information should be supplied to the sponsor from which they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied;
- (c) 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;
- (d) The involvement of a sponsor in an event should always be clearly identified;
- (e) 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; and
- (f) Staff arranging sponsored events must declare this to the Trust.

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<sup>10</sup> <http://www.pmcpa.org.uk/thecode/Documents/PMCPA20Code202014.pdf>

### **7.9 *Gifts and hospitality offered by the Trust***

Staff must be mindful that the value of all gifts and hospitality offered by the Trust are sourced from public funding, and the expectation is that such funding will be used for legitimate purposes and demonstrate value for money.

In exceptional circumstances it may be appropriate for the Trust to provide a gift of up to £50.00 in value, for example:

- (a) Providing a bouquet of flowers to a seriously ill employee, or to a longstanding employee who is retiring;
- (b) Giving book or gift tokens to someone who spoke at a Trust conference free of charge.

It is acceptable for the Trust to provide modest hospitality in the way of working lunches and/or dinners to existing and potential contractors and stakeholders subject to a genuine business reason.

### **7.10 *Application of the Policy***

Prior to employment, all applicants will be required to declare any potential conflict of interest.

All successful applicants will be sent a form with their contract of employment requiring them to indicate any involvement either direct or indirect with any organisation which to their knowledge has a contract with the Trust.

This form will be passed to the HR manager who will refer it to the applicant's prospective line manager. The line manager must sign the form to acknowledge that they are aware of the conflict.

Where there is uncertainty about whether a conflict exists or how to manage a potential conflict, the relevant executive director will be informed. The director will decide, in consultation with other relevant staff whether or not a conflict of interest exists and if so whether appropriate safeguards can be put in place. In the case of Trust board members, the Chair will make the final decision, and in the case of executive directors, the Chair and the chief executive will make the final decision.

Where a conflict of interest is found to exist and appropriate safeguards can be implemented the employment can proceed. The form is copied to the company secretary for declaration to the Trust board and filing in the register of interests.

Where appropriate safeguards cannot be implemented the candidate must be invited to give up their outside interests or make arrangements to remove the potential conflict. These arrangements will have to be approved by the chief executive and recorded on the register.

If it is discovered after appointment that such information has been withheld then this may lead to the individual being dismissed.

### **7.11 *Publication of the Register of Interests, Gifts and Hospitality Register (s)***

The Trust publishes the interests declared by senior decision-making staff in the Register of Interests and Register of Gifts and Hospitality, which is a live document held on the Declare system and accessible via the Trust website.

If senior decision-making staff have substantial grounds for believing that publication of their interests should not take place then they should contact the Director of Corporate Governance to explain why.

In exceptional circumstances, for instance where publication of information might put a member of staff at risk of harm, information may be withheld or redacted on public registers. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.

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. These “transfers of value” include payments relating to:

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

Further information about the scheme can be found on the ABPI website:

<https://www.abpi.org.uk/reputation/disclosure-uk/>.

### **7.12 *Trust Freedom to Speak Up Policy***

The Trust’s Freedom to Speak Up Policy is the appropriate route for staff to raise legitimate and genuine concerns about conflicts of interest and other financial integrity or business conduct issues. The policy can be found on My Staff App ([MyStaff UHBW Web \(mystaffapp.org\)](http://MyStaff UHBW Web (mystaffapp.org))).

## **8. Standards and Key Performance Indicators**

### **8.1 *Applicable Standards***

Members of the Trust Board of Directors (including Non-executive Directors and the Chair) are required to abide by the standards of conduct set out in the Code of Conduct and Code of Accountability in the NHS.

All senior decision-making staff, including Executive and Divisional Directors, are required to abide by the standards of conduct set out in the Code of Conduct for NHS Managers.

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All governors, Directors of the Board and senior managers are required to make a declaration of interest at the beginning of their appointment, including a nil return, and again in March of each year.

All staff are required to declare offers of gifts, hospitality and sponsorship.

## ***8.2 Measurement and Key Performance Indicators***

Registers of Interest, Gifts and Hospitality are published via the Trust website at least annually.

## **9. References**

- Bribery Act 2010
- ABPI: Code of Practice for the Pharmaceutical Industry 2021
- NHS Code of Conduct and Accountability (July 2004)
- Chartered Institute of Purchasing and Supply: Code of Conduct (September 2013)
- Freedom of Information Act 2000
- ABHI Code of Ethical Business Practice (July 2019)

## **10. Associated Internal Documentation**

- [Trust Constitution](#)

[Trust Freedom to Speak Up Policy Local Counter Fraud Bribery and Corruption Policy](#)



## 11. Appendix A – Monitoring Table for this Policy

The following table sets out the monitoring provisions associated with this policy. Please ensure any possible means of monitoring this policy to ensure all parts are fulfilled are included in this table.

| Objective   | Evidence   | Method  | Frequency  | Responsible            | Committee       |
|---|--|---|--|------------------------|-----------------|
| All governors, directors and senior managers are required to make a declaration of interest at the beginning of their appointment (or to complete a nil return where they have no interests to declare) and at least annually thereafter. | The Trust Secretariat will advise governors and directors of the declaration requirements, and prompt SLT and Divisional managers to advise their senior managers of the same. | Via Email and prompts from the Declare system | At beginning of tenure, and annually thereafter. | Trust Secretariat      | Audit Committee |
| Staff will be reminded periodically of the requirement to declare gifts and hospitality provided/accepted/declined in accordance with this Policy.  | Dissemination of an email alert by the Trust Secretariat and Divisional Boards.  | Email   | Quarterly  | Senior Leadership Team | Audit Committee |
| The Trust Board of Directors will monitor changes in declarations of interest at each meeting of the Board, and through an annual review of Registers of Interest.  | Preparation of the annual review for the Trust Board of Directors.   | Email   | Yearly in April                                  | Trust Secretariat      | Audit Committee |
| The Audit Committee will monitor compliance with this policy through regular reporting on counter fraud and whistle-blowing, as well as an annual review of the Registers of Interest, Gifts and Hospitality.                             | Preparation of the annual review for the Audit Committee.  | Meeting paper                                 | Yearly in January in line with meeting schedule  | Trust Secretariat      | Audit Committee |

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## 12. Appendix B – Dissemination, Implementation and Training Plan

The following table sets out the dissemination, implementation and training provisions associated with this Policy.

| Plan Elements   | Plan Details  |
|---|---|
| The Dissemination Lead is:  | Director of Corporate Governance  |
| Is this document: A – replacing the same titled, expired policy, B – replacing an alternative policy, C – a new policy: | A   |
| If answer above is B: Alternative documentation this policy will replace (if applicable):                               |   |
| This document is to be disseminated to:   | Trust Board of Directors, Senior Leadership Team, Divisional Management Boards. |
| Method of dissemination:  | Email, Newsbeat and notification from Declare system                            |
| Is Training required:   | No  |
| The Training Lead is:   | N/A   |

## 13. Appendix C – Equality Impact Assessment (EIA) Screening Tool

Further information and guidance about Equality Impact Assessments is available here:

<http://nww.avon.nhs.uk/dms/download.aspx?did=17833>

| Query  | Response  |
|--|---|
| What is the <b>main purpose</b> of the document?   | The purpose of this Policy is to set out the minimum standards required of all members of the Board, governors, and senior decision-making staff in relation to identifying, declaring and managing potential conflicts of interest and acts of bribery or other corruption |
| Who is the target audience of the document?<br>Who is it likely to impact on?<br>(Please tick all that apply.) | Add <input checked="" type="checkbox"/> or <input checked="" type="checkbox"/><br><b>Staff</b> <input checked="" type="checkbox"/> <b>Patients</b> <b>Visitors</b> <b>Carers</b> <b>Others</b> <input checked="" type="checkbox"/>  |

| Could the document have a significant <b>negative</b> impact on equality in relation to each of these characteristics? | YES | NO                                  | Please explain why, and what evidence supports this assessment in relation to your response. |
|--|-----|-------------------------------------|--|
| <b>Age</b> (including younger and older people)  |     | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally.                              |

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|  |                                     |   |
|--|-------------------------------------|---|
| <b>Disability</b> (including physical and sensory impairments, learning disabilities, mental health) | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Gender reassignment</b>   | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Pregnancy and maternity</b>   | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Race</b> (includes ethnicity as well as gypsy travellers)   | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Religion and belief</b> (includes non-belief)   | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Sex</b> (male and female)   | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Sexual Orientation</b> (lesbian, gay, bisexual, other)  | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Groups at risk of stigma</b> or social exclusion (e.g. offenders, homeless people)                | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |
| <b>Human Rights</b> (particularly rights to privacy, dignity, liberty and non-degrading treatment)   | <input checked="" type="checkbox"/> | By declaring any interests, all people will be treated equally. |

| <b>Could the document have a significant <span style="color: red;">positive</span> impact on inclusion by reducing inequalities?</b> | <b>YES</b>                          | <b>NO</b>                           | <b>If yes, please explain why, and what evidence supports this assessment.</b>                                |
|--|-------------------------------------|-------------------------------------|---|
| Will it promote equal opportunities for people from all groups?  | <input checked="" type="checkbox"/> |                                     | By declaring interests, all people will be treated equally and all contracts will be awarded on equal footing |
| Will it help to get rid of discrimination?   | <input checked="" type="checkbox"/> |                                     | By declaring interests, all people will be treated equally and all contracts will be awarded on equal footing |
| Will it help to get rid of harassment?   |                                     | <input checked="" type="checkbox"/> |   |
| Will it promote good relations between people from all groups?   | <input checked="" type="checkbox"/> |                                     | By declaring interests, all people will be treated equally and all contracts will be awarded on equal footing |
| Will it promote and protect human rights?  |                                     | <input checked="" type="checkbox"/> |   |

On the basis of the information/evidence so far, do you believe that the document will have a positive or negative impact on equality? (Please rate by circling the level of impact, below.)

| <b>Positive impact</b> |      |                    |      | <b>Negative Impact</b> |      |             |
|------------------------|------|--------------------|------|------------------------|------|-------------|
| Significant            | Some | <u>Very Little</u> | NONE | Very Little            | Some | Significant |

Will the document create any problems or barriers to any community or group? NO

Will any group be excluded because of this document? NO

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Will the document result in discrimination against any group? NO

If the answer to any of these questions is YES, you must complete a full Equality Impact Assessment.

Is a full equality impact assessment required? NO

Date assessment completed: 01 August 2025

Person completing the assessment: Mark Pender

## 14. Appendix D – Evidence of Learning from Incidents

The following table sets out any incidents/ cases which informed either the creation of this document or from which changes to the existing version have been made.

| Incidents | Summary of Learning |
|-----------|---------------------|
| N/A       | N/A                 |

## 15. Appendix E – Legal Framework and General Principles

### 15.1 Code of Conduct and Code of Accountability

The Code of Conduct and Code of Accountability emphasise three crucial public service values which must underpin the work of the health service:

**Accountability** – Everything that is done by those who work in the NHS must be able to stand the test of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.

**Probity** – There should be an absolute standard of honesty in dealing with the assets of the NHS; integrity should be the hallmark of all personal conduct in decisions affecting patients, staff and suppliers, and any news or information acquired in the course of NHS duties.

**Openness** – There should be sufficient transparency about NHS activities to promote confidence between the NHS Authority or Trust and its staff, patients and the public.

If any member of staff is unclear as to whether or not a proposed activity is governed by this policy they should seek advice from the Director of Corporate Governance.

### 15.2 Fraud Act 2006

The Fraud Act 2006 states that a person is guilty of fraud if he is in breach of any section listed within the Act, namely:

- (a) Fraud by false representation;
- (b) Fraud by failing to disclose information;

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(c) Fraud by abuse of position.

If, following an investigation a person is guilty of fraud they may be liable on summary conviction to imprisonment for a term not exceeding 12 months or to a fine not exceeding the statutory maximum (or both) (on conviction on indictment to imprisonment for a term not exceeding 10 years or to a fine (or both)).

### ***15.3 Bribery Act 2010***

The Bribery Act 2010 clarifies that bribery is offering an incentive to someone to do something which they would not normally do. It sets out four offences relevant to this policy:

**Section 1** – Offering, promising or giving a bribe to another person to perform a relevant, ‘function or activity’ improperly, or to reward a person for the improper performance of such a function or activity (‘Active’ bribery).

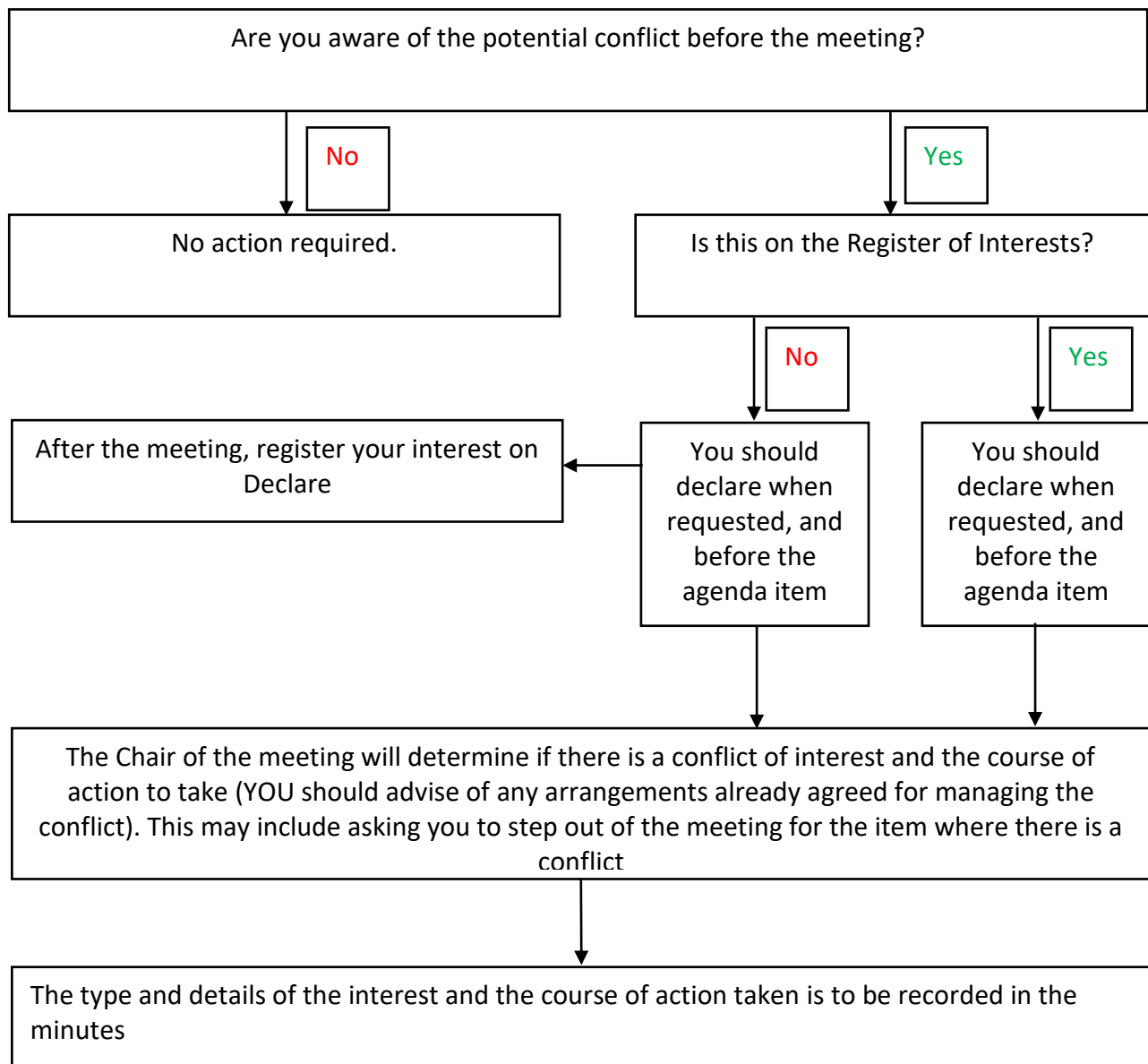
**Section 2** – Requesting, agreeing to receive or accepting a bribe to perform a function or activity improperly, irrespective of whether the recipient of the bribe requests or receives it directly or through a third party, and irrespective of whether it is for the recipient’s benefit (Passive bribery).

**Section 7** – Failure of a commercial organisation to prevent bribery (the corporate offence). This is a strict liability offence and an individual can be found guilty of attempted or actual bribery on the organisation’s behalf. It should be noted that section 1 or section 6 needs to be proven for a section 7 offence to apply.

**Section 14** – Offering or receiving a bribe or bribing a foreign official. This section applies if an offence under sections 1, 2 or 6 is committed by a body corporate; strict liability offences do not require proof of intention or recklessness – in other words, it is not necessary for the prosecution to show that the company intended to make the bribe in bad faith, or that it was negligent as to whether any bribery took place.

## 16. Appendix F – Flowcharts

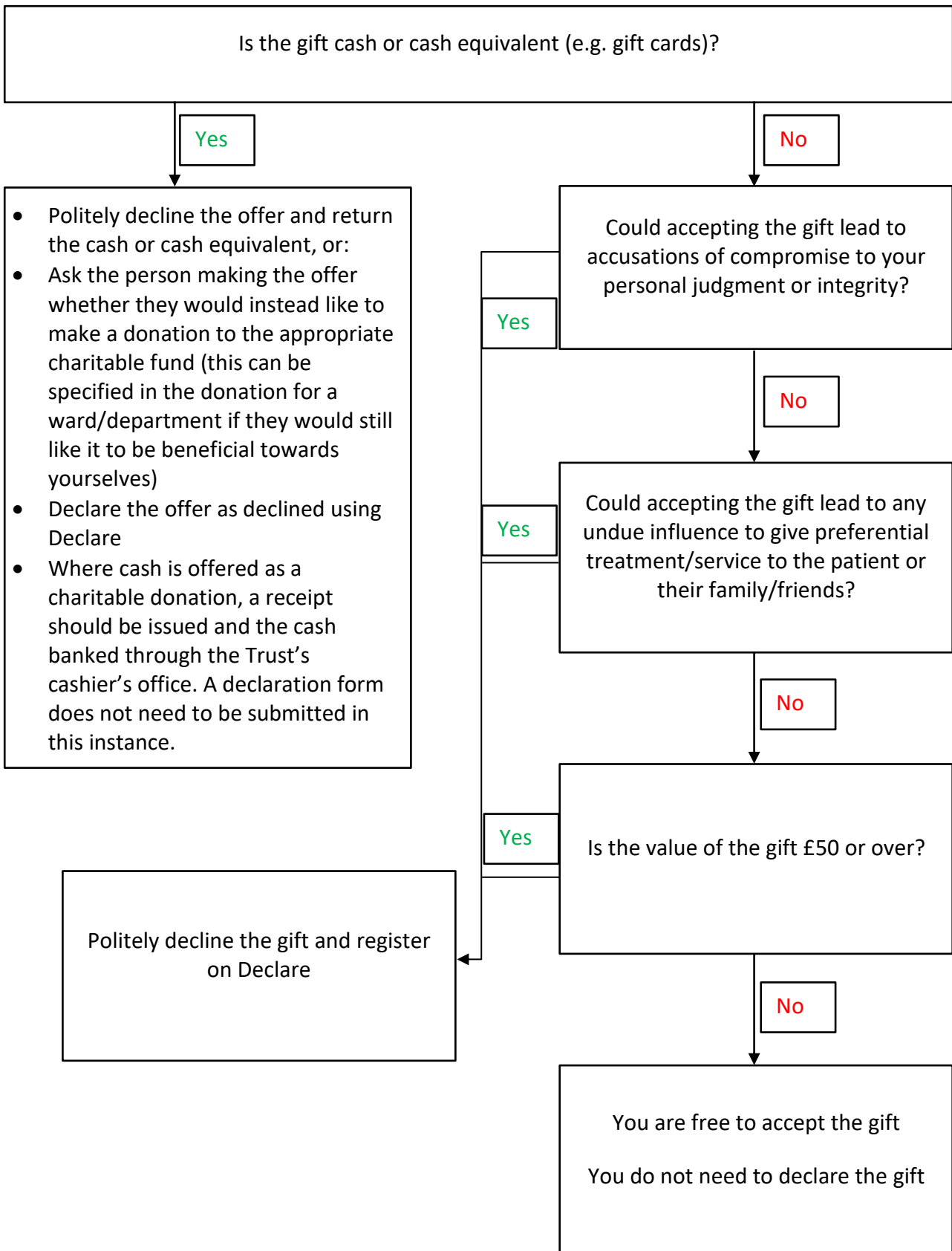
### 16.1 Flowchart for Declaring Interests During and After a Meeting



#### Types of interests to declare:

- Financial interest (e.g. direct financial benefit, outside income)
- Non-financial professional interest (e.g. increasing professional reputation)
- Non-financial personal interest (e.g. personal benefit not directly linked to professional career and that does not give rise to direct financial benefit)
- Indirect interest (e.g. close association with an individual who would stand to benefit from a decision you are making)

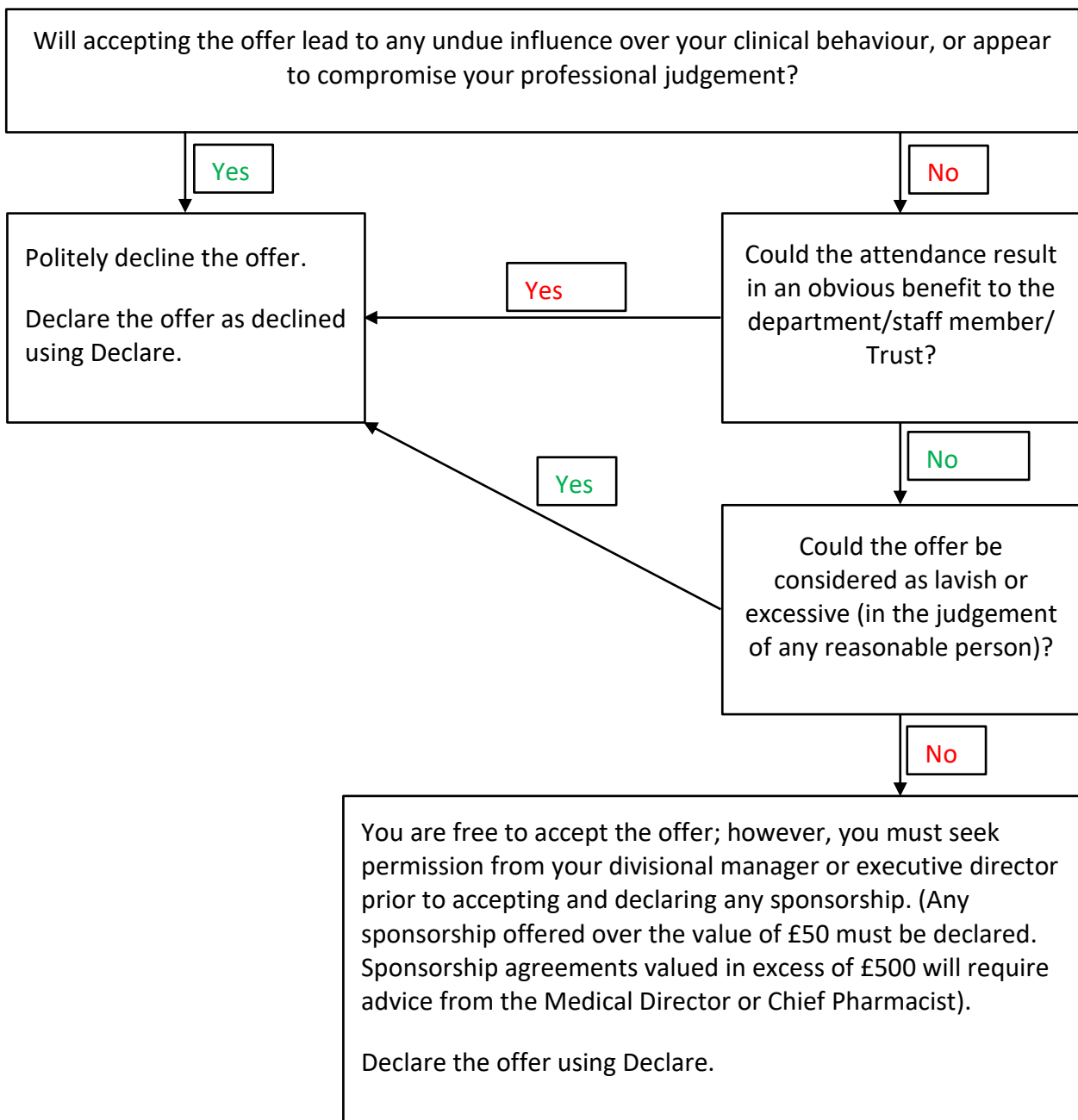
**16.2 Flowchart to Assist in Decision-making for Gifts Offered by a Grateful Patient/ Member of the Public**



Status: Approved

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16.3 *Flowchart to Assist in Decision-making on Hospitality and Sponsorship*



- Hospitality could include:
- Sponsorship to attend a Conference
  - Invitation to an event (work or non-work related)
    - Sponsorship to fund a post
  - Sponsorship to cater or hold an event