

# NHS Staffordshire and Stoke-on-Trent Integrated Care Board (ICB)

## Standards of Business Conduct Policy

<b>Job title of Policy Author/Lead</b>	Deputy Director of Corporate Services and Governance
<b>Responsible/ Approving Committee</b>	Audit Committee
<b>Ratification Body</b>	Integrated Care Board
<b>Date of Ratification/ Effective from</b>	1 <sup>st</sup> July 2022
<b>Document Reference Number (supplied by Governance Team)</b>	CG-P-004
<b>Review date</b>	30 June 2025
<b>Target audience</b>	All ICB staff including non-executive directors, temporary staff and contractors

CONSULTATION SCHEDULE		
Name and Title of Individual	Groups consulted	Date Consulted

IMPACT ASSESSMENTS		
	Date Completed	Comments
Equality Impact Assessment (EIA)		No impact identified
Quality Impact Assessment (QIA)	N/A	
Data Protection Impact Assessment (DPIA)	N/A	

VERSION CONTROL			
Version	Description of amendments	Date	Author/amended by
1.0	New policy	June 2022	Paul Winter, Deputy Director Corporate Governance
1.1	Updated according to NHSE guidance on Conflicts of Interest	September 2024	Head of Governance

**Document Status:** This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the intranet.

## Contents

<b>(1)</b>	<b>Introduction</b> .....	5
<b>(2)</b>	<b>Scope</b> .....	5
<b>(3)</b>	<b>Failure to comply with Standards of Business Conduct Policy</b> .....	6
<b>(4)</b>	<b>Raising Concerns and Breaches</b> .....	6
<b>(5)</b>	<b>Publication</b> .....	7
<b>(6)</b>	<b>Conflicts and Declarations of Interest</b> .....	7
6.3	<i>What are Conflicts of Interest (COI)?</i> .....	7
6.9	<i>Declaring Interests</i> .....	9
6.10	<i>Registers of Declared Interests</i> .....	9
6.11	<i>Patents and Intellectual Property</i> .....	9
6.16	<i>Managing COI – General</i> .....	10
6.17	<i>Managing COI at Meetings</i> .....	10
6.23	<i>Procurement</i> .....	11
6.25	<i>Grants</i> .....	12
<b>(7)</b>	<b>Gifts and Hospitality</b> .....	12
7.3	<i>Gifts</i> .....	12
7.5	<i>Gifts from ICB Suppliers, Contractors or Customers</i> .....	12
7.7	<i>Gifts from Other Sources</i> (e.g. patients, families, service users, foreign dignitaries) ..	12
7.10	<i>Hospitality</i> .....	13
7.12	<i>Hospitality from Suppliers or Contractors</i> .....	13
7.13	<i>Meals and Refreshments</i> .....	13
7.17	<i>Travel and Accommodation</i> .....	13
7.21	<i>Declaring Gifts and Hospitality</i> .....	14
7.22	<i>Register of Gifts and Hospitality</i> .....	14
7.23	<i>Gifts and Hospitality provided by the ICB</i> .....	14
<b>(8)</b>	<b>Sponsorship</b> .....	14
8.1	<i>Sponsored Posts</i> .....	14
8.6	<i>Sponsored Events</i> .....	15
8.10	<i>Sponsored Research</i> .....	15
8.13	<i>Declaring Sponsorship</i> .....	15
8.19	<i>Register of Sponsorship</i> .....	16
<b>(9)</b>	<b>Outside Employment and Clinical Private Practice</b> .....	16
9.7	<i>Declaring Outside Employment and Private Practice</i> .....	16
9.8	<i>Register of Outside Employment and Private Practice</i> .....	17
<b>(10)</b>	<b>Charitable Collections</b> .....	17
10.1	<i>Individual</i> .....	17

10.2	<b>Organisational</b> .....	17
(11)	<b>Political Activities</b> .....	17
(12)	<b>Personal Conduct</b> .....	17
12.1	<b>Corporate Responsibility</b> .....	17
12.5	<b>Use of Social Media</b> .....	18
12.6	<b>Confidentiality</b> .....	18
12.8	<b>Gambling</b> .....	18
12.9	<b>Lending and Borrowing</b> .....	18
12.11	<b>Trading on Official NHS Premises</b> .....	18
12.13	<b>Individual Voluntary Arrangements, County Court Judgment (CCJ), Bankruptcy / Insolvency</b> .....	18
12.14	<b>Arrest or Conviction</b> .....	19
(13)	<b>Training and Annual Attestation</b> .....	19
(14)	<b>References</b> .....	19
	<b>Appendix A – Nolan Principles</b> .....	20
	<b>Appendix B – Examples of Types of Interests</b> .....	21
	<b>Appendix C – Declaration of Interest Form</b> .....	22

## (1) Introduction

- 1.1 The Integrated Care Board (ICB) Standards of Business Conduct policy describes the standards and public service values which underpin the work of the NHS and reflects current guidance and best practice which all ICB staff must follow.
- 1.2 As publicly-funded organisations, we have a duty to set and maintain the highest standards of conduct and integrity. We expect the highest standards of corporate behaviour and responsibility from all Board members and staff. The NHS Constitution sets out some of the key responsibilities of NHS staff. All staff, regardless of their role, are expected to act in the spirit set out under the “Nolan Principles” (Appendix A).
- 1.3 It is a long and well-established principle that public-sector organisations must be impartial and honest in their business and that their officers must act with integrity.
- 1.4 As well as promoting the standards of business conduct expected of public bodies, this policy aims to protect our organisation from any suggestion of corruption, partiality or dishonesty, by providing a clear framework of guidance and assurance that its officers conduct themselves with honesty, integrity and probity. The policy should be read in conjunction with all relevant organisational policies which currently exist or are developed and agreed in line with the principles set out in this policy.

## (2) Scope

- 2.1 All staff are within the scope of this policy. The term “staff” includes all staff of the ICB, including interims, agency workers, specialist contractors, consultants and secondees who carry out work for it but are not directly employed.
- 2.2 In addition, some people who work with, but are not employed by the organisation are required to comply with this policy: e.g. members of advisory groups, such as Clinical Reference Groups or patient representatives. References within this policy to “officers” should be construed in these contexts accordingly.

### 2.3 ***Decision-Making Staff***

Some officers are more likely than others to have a decision-making role or influence on the use of public money because of the requirements of their role. In the context of this policy, the officers listed below are referred to as Decision-Making Staff:

- Board Members
- Executive and Senior Managers (VSM and equivalent)
- Officers at *Agenda for Change* Band 8d and above

### 2.4 ***Strategic decision-making groups***

Our organisation uses the Board, or committees and sub-committees of the Board, advisory groups and procurement panels to make key strategic decisions or recommendations about things such as:

- entering into (or renewing) large scale contracts
- awarding contracts
- making procurement decisions
- selection of medicines, equipment and devices

These are referred to as ‘**strategic decision-making groups**’.

It is important that the interests of those who are involved in these groups are documented and understood.

The list below of the ICB's Strategic decision-making groups is non-exhaustive:

- Portfolio Boards
- Programme Boards
- Collaborative Board
- Consultative Committees
- Place Committees
- Sub-committees and groups of ICB Finance and Performance Committee

The ICB must ensure that those groups operate in compliance with the current policy and in a manner consistent with the following principles, which reflect wider standards of good governance:

- chairs should consider any known interests of members in advance and begin each meeting with a standing agenda item asking for declarations of relevant interests.
- members should take personal responsibility for declaring material interests at the beginning of each meeting and as they arise.
- any new interests identified should be added to the organisation's register.
- 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.
- terms of reference for such groups should refer to the organisation's policy and procedures for managing conflicts of interest and should set out any specific requirements which apply to the group.

2.5 All declarations made by such staff will be published in accordance with paragraph 5.1. All declarations must be reviewed and managed in accordance with paragraphs 6.16 and 6.17.

### **(3) Failure to comply with Standards of Business Conduct Policy**

3.1 Failure by an employee to comply with the requirements set out in this policy may result in action being taken in accordance with disciplinary procedures. Such disciplinary action may include termination of employment (where applicable).

3.2 Where the failure relates to an officer that is not an employee, this may result in action being taken in accordance with the relevant engagement procedures (e.g. termination of a secondment agreement).

3.3 Any financial or other irregularities or impropriety which involve evidence or suspicion of fraud, bribery or corruption by any officer, will be reported to NHS Counter Fraud Authority in accordance with ICB Standing Financial Instructions (SFIs) and Tackling Fraud, Bribery & Corruption procedures, with a view to an appropriate investigation being conducted and potential prosecution being sought.

### **(4) Raising Concerns and Breaches**

4.1 There may be occasions when interests have not been identified, declared or managed appropriately and effectively. This may happen innocently, accidentally, or because of deliberate actions. Members of the Board and staff should speak up about any genuine concerns in relation to compliance with this policy. Staff can raise these concerns directly with their own line manager, or alternatively the Director of Corporate Governance or Senior Governance Lead.

- 4.2 All reported concerns will be treated with the appropriate confidentiality and investigated in line with applicable policies and procedures.
- 4.3 The Director of Corporate Governance and Senior Governance Lead will take a report on breaches and responses to the Audit Committee and the Board on an annual basis.
- 4.4 Staff must report any suspicions of fraud, bribery and corruption as soon as they become aware of them to NHS Counter Fraud Authority, to ensure that they are investigated appropriately and to maximise the chances of financial recovery, via:
- The NHS Fraud and Corruption Reporting Line – (0800) 028 40 60
  - Filing in an online form at <https://cfa.nhs.uk/reportfraud>
- 4.5 Staff may wish to report concerns using the internal Whistleblowing Policy.

## **(5) Publication**

- 5.1 Declarations made in accordance with this policy by ‘Decision-Making Staff’ and Staff who belong to the ‘Strategic decision-making groups’ will be published on the ICB website at intervals set out in the summary. Registers of all staff declarations held by the Corporate Governance team will be made available on request.
- 5.2 In exceptional circumstances, where the public disclosure of information could give rise to a real risk of harm or is prohibited by law, an individual’s name and/or other information may be redacted from the publicly available register(s). Where an officer believes that substantial damage or distress may be caused to him / herself or somebody else by the publication of information about them, they are entitled to request that the information is not published. Such a request must be made in writing to the Corporate Governance team, who will seek legal advice where required. A confidential, un-redacted version of the register will be held securely by the Corporate Governance team.
- 5.3 Officers should be aware that external organisations, e.g. Association of British Pharmaceutical Industries (ABPI), may also publish information relating to commercial sponsorship or other payments. We will review such publications to ensure that appropriate internal declarations have been made in accordance with this policy and will take appropriate action where they have not.
- 5.4 Anonymised information relating to breaches and how those breaches have been managed will be published on the ICB website annually.

## **(6) Conflicts and Declarations of Interest**

- 6.1 Staff are expected to act at all times with the utmost integrity and objectivity and in the best interests of the organisation in performing their duties, and to avoid situations where there may be a potential conflict of interest. ICB Officers must not use their position for personal advantage or seek to gain preferential treatment.
- 6.2 Staff in the scope of this policy are required to declare any actual or potential interests which may be perceived as conflicting with that overriding requirement.
- 6.3 ***What are Conflicts of Interest (COI)?***

A conflict is a set of circumstances by which a reasonable person would consider that an individual’s ability to apply judgement or act, in the context of carrying out their role is, or could be, impaired or influenced by another interest they hold.

- 6.4 A COI may be:
- **Actual** – there is a relevant and material conflict between one or more interests now; or

- **Potential** – there is the possibility of a material conflict between one or more interests in the future.
- 6.5 Officers may hold interests for which they cannot see a potential conflict. However, caution is always advisable because others may see / perceive it differently. It is important to exercise judgement and to declare such interests where there is otherwise a risk of suggestion of improper conduct.
- 6.6 Interests can arise in a number of different contexts. A material interest is one which a reasonable person would take into account when making a decision regarding the use of taxpayers' money because the interest has relevance to that decision. Interests can generally be considered in the following categories:
- **Financial Interests** – this is where an individual may get direct financial benefit from the consequences of a decision they are involved in making;
  - **Non-Financial Professional Interests** – this is 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 status or promoting their professional career;
  - **Non-Financial Personal Interests** – this is where an individual may benefit personally in ways that are not directly linked to their professional career and do not give rise to a direct financial benefit, because of decisions that are involved in making in their professional career;
  - **Indirect Interests** – this is where an individual has a close association (see 6.8) with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest who would stand to benefit from a decision they are involved in making;
  - **Loyalty Interests** – as part of their role, staff may need to build strong relationships with colleagues across the NHS / in other sectors. These can be hard to define and are unlikely to be directed by any formal process or managed via any contractual means, however these interests can be perceived to potentially influence decision making.

**NOTE: In these contexts, a 'benefit' may be a financial gain or an avoidance of loss.**

- 6.7 Where there is potential for interests to be relevant and material to the organisation, the interest should be declared and recorded in the register held and maintained by the Corporate Governance team (see 6.10). Examples of interests which should be regarded as 'relevant and material' are shown below, although this list should not be regarded as exhaustive. Further guidance is given at Appendix B.
- Directorships, including non-executive directorships, held in private companies or PLCs;
  - Ownership or part-ownership of private companies, businesses or consultancies likely or possibly seeking to do business with the ICB / NHS;
  - Shareholdings and ownership interests in any publicly listed, private or not for profit company, business, partnership or consultancy, which are doing, or might reasonably be expected to do, business with the ICB;
  - A position of authority in another NHS organisation, commercial, charity, voluntary, professional, statutory or other body which could be seen to influence the role;
  - A position on an advisory group or other paid or unpaid decision-making forum that could influence how the ICB 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;
  - Any connection with a private, public, voluntary or other organisation contracting for NHS services;
  - Any other commercial interest relating to any relevant decision to be taken by the ICB.

6.8 Conflicts can occur because of interests held by a close family member, business partner, close friend or associate. If staff are aware of material interests (or could be reasonably expected to know about these) then these should be declared. In this context, a close family member is defined as:

- ✓ Spouse or civil partner;
- ✓ Any other person with whom the individual cohabits;
- ✓ Children or stepchildren;
- ✓ Spouse / partners' children or stepchildren;
- ✓ Parents;
- ✓ Grandparents;
- ✓ Siblings.

### 6.9 ***Declaring Interests***

All staff must declare any relevant and material interests. Declarations should be made as soon as is reasonably practicable, and within 28 days after the interest arises, using the form attached at Appendix C. If officers are in any doubt as to whether they have an interest or whether it is declarable, they should consult their line manager or the Corporate Governance team. In addition, officers are required to review and declare interests at the following points:

- ✓ **Board Members** = on appointment / review in formal meetings;
- ✓ **Decision-Making Staff** = on appointment / review in formal meetings (where attending) / through quarterly review / when moving to a new role, or responsibilities change;
- ✓ **All Staff within Scope** = on appointment / through annual review / when moving to a new role, or responsibilities change / review in formal meetings (where attending)

### 6.10 ***Registers of Declared Interests***

The register of interests is maintained by the Corporate Governance team who will formally record the declared interests of all staff. They will retain a record of historic interests for a minimum of six years after the date on which the interest expired. There may be occasions when an officer declares an interest which the Corporate Governance team later decides is not material. In such an instance the declaration will be recorded but not published.

### 6.11 ***Patents and Intellectual Property***

Staff should declare patents / other intellectual property rights they hold (either individually or by virtue of association with a commercial or other organisation) relating to goods and services which are, or might reasonably be expected to be, procured or used by the ICB.

6.12 Any patents, designs, trademarks or copyright resulting from the work (e.g. research) of an officer carried out as part of their employment shall be the Intellectual Property of the ICB.

6.13 Where undertaking of external work, gaining patent or copyright or the involvement in innovative work, benefits or enhances our reputation or results in financial gain, consideration will be given to rewarding officers subject to any relevant guidance for the management of Intellectual Property in the NHS issued by the Department of Health & Social Care.

6.14 Staff must seek prior permission through their line manager before entering into any agreement with bodies regarding product development where this impacts on normal working time or uses our equipment and/or resources.

6.15 Where holding of patents and other intellectual property rights give rise to a conflict of interest, then this must be declared in accordance with 6.9.

6.16 ***Managing COI – General***

All declarations must be reviewed by the appropriate line manager, with consideration given to any actions required to mitigate the conflict in the individual circumstances. There may be occasions where the conflict of interest is profound, acute and potentially unmanageable. In such cases it may be necessary to consider a range of possible actions which may include:

- ✓ Deciding that no action is warranted;
- ✓ Restricting the officer's involvement in discussions / excluding them from decision-making;
- ✓ Removing the officer from the whole decision-making process;
- ✓ Removing the officer's responsibility for an entire area of work;
- ✓ Removing the officer from their role altogether if the conflict is so significant that they are unable to operate effectively in the role.

An audit trail of the actions taken must be maintained.

6.17 ***Managing COI at Meetings***

All formal meetings, including the Board and its Committees, must have a standing agenda item at the beginning of each meeting to determine whether anyone has any conflict of interest to declare in relation to the business to be transacted at the meeting. The Standing Orders and all Committee Terms of Reference will incorporate this requirement. Any new interests declared at the meeting should be included in the relevant register of interest as soon as practicable after the meeting.

6.18 In the event that the chair of the meeting has a COI, the deputy chair is responsible for deciding the appropriate course of action to manage COI. If the deputy chair is also conflicted, then the remaining non-conflicted voting members of the meeting should unanimously agree how to manage the conflict(s).

6.19 When a member of the meeting (including the chair or deputy chair) has a COI in relation to one or more items of business to be transacted at the meeting, the chair (or deputy chair or remaining non-conflicted members where relevant as described above) must decide how to manage it. The appropriate course of action will depend on the particular circumstances, but could include one or more of the following:

- Where the chair has a COI, deciding that the deputy chair (or another non-conflicted member of the meeting if the deputy chair is also conflicted) should chair all or part of the meeting;
- Requiring the individual who has a COI (including the chair or deputy chair if necessary) not to attend the meeting;
- Ensuring that the individual does not receive the supporting papers or minutes of the meeting which relate to the matter(s) which give rise to the conflict;
- Requiring the individual to leave the discussion while the relevant matter(s) are being discussed and when any decisions are being taken in relation to those matter(s);
- Allowing the individual to participate in some or all of the discussion when the relevant matter(s) are being discussed but requiring them to leave the meeting when any decisions are being taken in relation to those matter(s);
- Noting the interest and ensuring that all attendees are aware of the nature and extent of the interest but allowing the individual to remain and participate in both the discussion and in any decisions (This is only likely to be an appropriate course of action where it is decided that the declared interest is either immaterial or not relevant to the matter(s) under discussion);

- COIs arising at an ICB Board meeting must be managed in accordance with the requirements of the Standing Orders (set out in ICB Constitution).

- 6.20 In all cases however, a quorum must be present for the discussion and decision; and interested parties cannot be counted in determining whether the meeting is quorate for that item.
- 6.21 All decisions under a COI must be recorded by the meeting admin / secretariat and clearly reported in the minutes of the meeting. The minutes will include:
- ✓ Who has the interest;
  - ✓ The nature and extent of the conflict;
  - ✓ An outline of the discussion;
  - ✓ The actions taken to manage the conflict and
  - ✓ Evidence that the conflict was managed as intended.
- 6.22 To support chairs in their role, the secretariat will provide access to details of any conflicts which have already been made by members of the committee / group.
- 6.23 **Procurement**

COI needs to be managed appropriately through the whole procurement process. At the outset of any process, the relevant interests of individuals involved should be identified and clear arrangements put in place to manage any conflicts. This includes consideration as to which stages of the process a conflicted individual should not participate in, and in some circumstances, whether the individual should be involved in the process at all.

The Health Care Services (Provider Selection Regime) Regulations 2023 ('PSR Regulations') came into force on 1 January 2024. The PSR Regulations is a set of rules for procuring health services which are designed to be a more flexible and proportionate decision-making process for selecting providers to deliver healthcare services. ICBs need to comply with the PSR Regulations when arranging for the provision of relevant health care services, either on their own or as part of a mixed procurement (see PSR Regulations 2(1) and 3(2)).

ICBs need to take appropriate measures to effectively prevent, identify and remedy conflicts of interest arising in the conduct of procurement processes under PSR Regulations (see PSR Regulation 21).

An individual being both a member of the Integrated Care Board, and an employee, director, partner or otherwise holding a position within a provider, does not in itself create a conflict or potential conflict of interest. However, when the Competitive Process is followed to award a contract or conclude a framework agreement, an individual who is both -

- (a) a member of the Integrated Care Board, and
- (b) an employee, director, partner or otherwise holding a position within a provider who is taking part in the procurement process,

is required to recuse themselves from the decision-making process.

- 6.24 Further guidance is provided in the PSR Regulations 2023, ICB's Standing Financial Instructions and the ICB Procurement Policy.

## 6.25 **Grants**

Grants should be awarded and governed in accordance with ICB's powers under the NHS Act 2006 (amended). Labelling a payment as a grant payment should not be seen as a way of avoiding procurement processes laid out in the SFIs. State aid rules apply to the awarding of grants, therefore the process to award a grant must be treated the same as any other procurement exercise and should comply with the SFIs.

## **(7) Gifts and Hospitality**

- 7.1 All staff should ensure that they are not placed in a position that risks, or appears to risk, compromising their role or the ICB's public and statutory duties or reputation. Staff must not, or be perceived to, secure valuable gifts and hospitality by virtue of their role.
- 7.2 The Bribery Act 2010 makes it a criminal offence to give / offer a bribe, or to request, offer to receive or accept a bribe. The Act reformed the criminal law of bribery, making it easier to tackle this proactively in both the public and private sectors. It introduced a corporate offence which means that commercial organisations, including NHS Bodies, will be exposed to criminal liability, punishable by an unlimited fine, for failing to prevent bribery.

### 7.3 **Gifts**

Staff should not ask for or accept gifts, gratuities or honoraria (such as grants, scholarships) from any individual or organisation that may be capable of being construed as being able to influence any decision or cast doubt on the integrity of such decisions. Staff are reminded that it may be considered to be a breach of the organisation Disciplinary Policy to solicit gifts. It may also be illegal, under the Bribery Act 2010, and staff that are found to have done so may face disciplinary action and prosecution.

- 7.4 Staff should always refuse gifts or other benefits which might reasonably be seen to compromise their personal judgement or integrity. Under no circumstances should staff accept a personal gift of cash or cash equivalents (e.g. tokens, vouchers, gift cards, lottery tickets or betting slips) regardless of value.

### 7.5 **Gifts from ICB Suppliers, Contractors or Customers**

Gifts from suppliers or contractors that the ICB does business with, is likely to do business with, or customers, should be declined, whatever the value. Low-cost branded promotional aids (e.g. calendars, diaries, other small gifts) may be accepted where they are valued under £6 in total. Team or Directorate gifts of low value, such as confectionary (up to c.£20) intended to be shared by the team may also be accepted.

- 7.6 Gifts accepted from suppliers in accordance with this provision must be declared using a standard form, or by email to the Corporate Governance team. A clear reason should be recorded as to why it was considered permissible to accept the gift, alongside the actual or estimated value and include line manager approval.

### 7.7 **Gifts from Other Sources** (e.g. patients, families, service users, foreign dignitaries)

The acceptance of gifts over £50 should be treated with caution and only accepted on behalf of the organisation, not in a personal capacity. Gifts accepted over a value of £50 must be declared in the same way as section 7.6 – again, a clear reason should be recorded as to why it was considered permissible to accept the gift, alongside the actual or estimated value and include line manager approval.

- 7.8 For gifts exceeding a value of £50 the following options are suggested:

- ✓ Share the gift with all staff;
- ✓ Raffle the gift for charity;

- ✓ Donate the gift to charity; or
- ✓ Make a donation to charity and keep the gift.

7.8 Modest gifts accepted under £50 need not be declared; however multiple gifts from the same source over a 12-month period should be declared where the cumulative value exceeds £50.

7.9 A common sense approach should be applied to the valuing of gifts, using the actual amount if known, or an estimate that a reasonable person would make as to its value. If there is any doubt about the appropriateness of accepting a gift, staff should either politely decline or consult their line manager or the Corporate Governance team.

#### 7.10 **Hospitality**

Hospitality in this context means the provision of meals and refreshments, invitations to functions such as ceremonies, receptions, presentations and conferences as well as invitations to social, cultural and sporting events. Some staff may include overnight accommodation and travel to / from a venue at which an event is being held.

7.11 Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event. Staff should exercise discretion in accepting offers of hospitality in case it would, or might appear to:

- ✓ Place them under any obligation to the individual or organisation making the offer;
- ✓ Compromise their professional judgement and impartiality; or otherwise be improper.

#### 7.12 **Hospitality from Suppliers or Contractors**

Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. Offers can be accepted if modest and reasonable, but must be declared and approved by the line manager.

#### 7.13 **Meals and Refreshments**

Meals and refreshments under the value of £25 may be accepted and need not be reported. In case of doubt, staff should seek advice from their line manager or the Corporate Governance Team.

7.14 Meals and refreshments offered of a value between £25 and £75 may be accepted and must be declared, indicating whether it has been accepted or declined, using the standard form, or by email to the Corporate Governance team.

7.15 Offers over a value of £75 should be refused unless (in exceptional circumstances) VSM approval is given in advance of acceptance. A clear reason should be recorded on the declaration as to why it was permissible to accept hospitality of this value.

7.16 A common sense approach should be applied to the valuing of meals and refreshments, using an actual amount, if known, or an estimate.

#### 7.17 **Travel and Accommodation**

Modest offers to pay some or all travel and accommodation costs related to attendance at events may be accepted but must be declared. Offers which go beyond the type which would be funded by the ICB must have VSM approval in advance. A clear reason should be recorded on the declaration as to why it was permissible to accept this.

7.18 Examples of travel and accommodation which we would not normally be funded are shown below, although this list should not be regarded as exhaustive:

- ✓ Offers of business or first-class travel and accommodation (including domestic travel);
- ✓ Offers of foreign travel and accommodation.

7.19 All references to hospitality include that provided by contractors, organisations or individuals concerned with the supply of goods or services.

7.20 Where a meeting is pharmaceutical industry funded, this must be disclosed in the papers relating to the meeting and in any published minutes or actions. The Department or Directorate organising or hosting the event must ensure that the funding has been approved in line with the requirements set out in the Commercial Sponsorship section.

#### 7.21 ***Declaring Gifts and Hospitality***

All staff must declare any gifts and hospitality in accordance with the guidance above as soon as is practicable. Declarations should be made using a standard form, or by email to the Corporate Governance team.

All declarations will need to include the following:

- ✓ Date of offer of gift or hospitality, and date of event where relevant;
- ✓ Name, job title and organisation of recipient / provider;
- ✓ Nature and purpose of gift or hospitality received or declined;
- ✓ The name of any other organisation involved;
- ✓ The estimated value;
- ✓ Confirmation of approval where relevant in accordance with 7.16, 7.18, 7.21 above.

#### 7.22 ***Register of Gifts and Hospitality***

The register of gifts and hospitality is maintained by the Governance team who will formally record the declarations of all staff.

#### 7.23 ***Gifts and Hospitality provided by the ICB***

Gifts provided by the ICB are included in the restricted list of expenditure and would require CFO approval. Any proposal would require the prior approval of the CFO.

7.24 Care should also be taken when providing hospitality from ICB funds and staff must be aware that hospitality provided is still sourced from public funding and the public expect these funds to be used for legitimate purposes and demonstrate value for money.

7.25 In certain circumstances, it may be acceptable for us to provide modest hospitality in the way of working lunches and/or dinners as long as this is:

- ✓ Subject to a genuine business reason; and
- ✓ With the prior approval of the CFO.

### **(8) Sponsorship**

#### 8.1 ***Sponsored Posts***

Staff considering entering into an agreement regarding the external sponsorship of a post within the ICB must seek formal approval from the relevant Executive Director and the Senior Leadership Team for final approval. Officers will be required to demonstrate acceptance of a sponsored post is transparent and does not stifle competition.

8.2 Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and confirm the appropriateness of the arrangements continuing.

8.3 There should be written confirmation that the sponsorship arrangements will have no effect on any commissioning or other management decisions over the duration of the

sponsorship and auditing arrangements should be established to ensure that this is the case. These written arrangements should set out the circumstances under which we may exit the sponsorship arrangements if conflicts of interest arise which cannot be mitigated.

8.4 Holders of sponsored posts must not promote or favour the sponsor's specific products or organisation and information about alternative suppliers must be provided. Sponsors must not have any influence over the duties of the post or have any preferential access to services, materials or intellectual property related to or developed in connection with it.

#### 8.6 ***Sponsored Events***

Sponsorship of events, including courses, conferences and meetings, by external bodies should only be approved if it can be demonstrated that the event will result in clear benefits for the ICB and wider NHS. Any sponsorship would require the approval of the relevant Executive Director in advance. Sponsorship should not in any way compromise any of our decisions or be dependent on the purchase or supply of goods or services. Sponsors should not have any influence over the content of an event, meeting, seminar, publication or training event. We will not endorse individual companies or their products or services because of the sponsorship.

8.7 During dealings with sponsors there must be no breach of patient / individual confidentiality or data protection (or other) legislation. As a general rule, information which is not in the public domain should not be supplied and no information should be supplied to a company for its commercial gain.

8.8 At our discretion, sponsors or their representatives may attend or take part in the event, but they should not have a dominant influence over the event's content or main purpose.

8.9 The involvement of a sponsor in an event should always be clearly identified in the interests of transparency.

#### 8.10 ***Sponsored Research***

Funding sources for research purposes must be transparent. Any proposed research must go through the relevant approvals process.

8.11 There must be a written protocol and written contract between staff, ICB and/or the institute 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. Where the contract includes provision of people this, and accompanying arrangements, must be clearly articulated.

8.12 The study must not constitute an inducement to commission any service.

#### 8.13 ***Declaring Sponsorship***

All pharmaceutical companies entering into sponsorship agreements must comply with the Code of Practice for the Pharmaceutical Industry.

8.14 Should there be any doubt about the appropriateness of accepting sponsorship, officers should seek advice from their line manager or the Governance team.

8.15 All staff must declare any sponsorship in accordance with the guidance above including the value of the sponsorship. A common sense approach should be applied to valuing the sponsorship if there is not a contractual value specified, for example a room and refreshments being provided for an event.

- 8.16 All staff must declare any sponsorship secured through, contracted by, paid directly to or managed through a third party, such as exhibitors at ICB events sold through a third party or a sponsor paying for catering directly to an event venue.
- 8.17 Declarations should be made using a standard form, or by email to the Corporate Governance team within 28 day of the occurrence by the officer responsible for the event (who will usually be a Decision-Making Officer). For the purposes of events the declaration should be made within 28 days of when the sponsorship was agreed rather than the date of the event. In exceptional circumstances where there are multiple sponsorship arrangements, the sponsorship may be declared within 28 days of the event taking place, provided that this is agreed in advance by the Director of Corporate Governance and Senior Governance Lead.
- 8.18 Declarations made in accordance with the policy will be published on the ICB website at intervals set out in the summary. In exceptional circumstances the value of the sponsorship may be published in bands where there are multiple sponsors of an event. A complete register will be held by the Corporate Governance team.

8.19 ***Register of Sponsorship***

The register of sponsorship is maintained by the Corporate Governance team who will formally record the declarations of all officers.

**(9) Outside Employment and Clinical Private Practice**

- 9.1 All staff (depending on the details of their contract as regards outside employment and private practice) are required to seek approval from their line manager if they are engaged in or wish to engage in outside employment in addition to their work with the ICB. This approval should be sought even if the officer is temporarily absent from work e.g. through sickness, maternity leave or secondment.
- 9.2 Outside employment or private practice must neither conflict with nor be detrimental to the NHS work of the officer in question. Examples of outside employment or private practice which may give rise to a conflict of interest includes, but is not limited to:
- Employment with another NHS Body;
  - Employment with another organisation which might be in a position to supply goods / services to the ICB; and
  - Self-employment, including private practice, in a capacity which might conflict with the work of the ICB, or which might be in a position to supply goods / services to the ICB.
- 9.3 Where a risk of COI is identified, these should be managed in accordance with the guidance provided at section 6.16. The ICB reserves the right to refuse permission where it reasonably believes a conflict will arise, or that approval would be detrimental to the work of the officer in question.
- 9.4 In undertaking any outside employment, officers should have regard to section 12.11 – Trading on NHS Premises.
- 9.5 The ICB may have legitimate reasons within employment law for knowing about outside employment of officers, even where this does not give rise to the risk of a COI. Nothing in this policy prevents such enquiries being made.
- 9.6 Where an officer is approached to speak at an externally sponsored event, the officer should ensure that the provisions of Section 8 – Sponsorship are observed.
- 9.7 ***Declaring Outside Employment and Private Practice***

All staff must declare any relevant outside employment or private practice on appointment, and when any new employment arises, in accordance with the guidance above. Declarations should be made using a standard form, or by email to the Corporate Governance team.

#### 9.8 ***Register of Outside Employment and Private Practice***

The register of outside employment and private practice is maintained by the Corporate Governance team, who will formally record the declarations of all staff.

### **(10) Charitable Collections**

#### 10.1 ***Individual***

Whilst ICB supports staff who wish to undertake charitable collections amongst immediate colleagues, no reference or implication should be drawn to suggest that the ICB is supporting the charity. Permission is not required for informal collections amongst immediate colleagues on an occasion like retirement, marriage, birthday or a new job.

#### 10.2 ***Organisational***

Charitable collections which reference the ICB must be authorised and documented by the appropriate Executive Director in advance and reported to the Corporate Governance team using the standard form or email, who will maintain an internal record.

### **(11) Political Activities**

11.1 Any political activity should not identify an individual as an officer of the ICB. Conferences or functions run by a party-political organisation should not be attended in an official capacity, except with prior written permission from an Executive Director.

### **(12) Personal Conduct**

#### 12.1 ***Corporate Responsibility***

All staff have a responsibility to respect and promote the corporate or collective decision of the ICB, even though this may conflict with their personal views. This applies particularly if the ICB is yet to decide on an issue; or has decided in a way with which they personally disagree. Directors and staff may comment as they wish as individuals; however, if they decide to do so, they should make it clear that they are expressing their personal view and not the view of the ICB.

12.2 When speaking as a member of the ICB, whether to the media, in a public forum or in a private or informal discussion, staff should ensure that they reflect the current policies or view of the organisation. For any public forum or media interview, approval should be sought in advance:

- In the case of the Board, from the Chairman and/or Chief Executive or their nominated deputies and ICB Communications Team;
- In the case of all other staff, the ICB Communications Team.

When this is not practicable, they should report their action to the Chairman or Chief Executive, or their nominated deputies, as soon as possible.

12.3 All staff must ensure their comments are well considered, sensible, well informed, made in good faith, in the public interest and without malice and that they enhance the reputation and status of the ICB.

12.4 Staff must follow the guidance for communication with the media; disciplinary action may be taken if this is not followed.

#### 12.5 ***Use of Social Media***

Staff should be aware that social networking websites are public forums and should not assume that their entries will remain private. Officers communicating via social media must comply with the relevant organisational social media and associated policies. Staff must not:

- Conduct themselves in a way that brings the ICB into disrepute;
- Disclose information that is confidential to ICB business, staff or patients.

#### 12.6 ***Confidentiality***

Staff must at all times operate in accordance with UK GDPR / Data Protection Act 2018 principles; and maintain the confidentiality of information of any type, including but not restricted to personal information relating to staff and commercial information. This duty remains after officers (however employed) leave the ICB.

12.7 For the avoidance of doubt, this does not prevent the disclosure of information where there is a lawful basis for doing so (e.g. consent). Staff should refer to the suite of ICB IG policies for detailed information.

#### 12.8 ***Gambling***

No officer may bet or gamble when on duty or on ICB premises, with the exception of small lottery syndicates or sweepstakes related to national events such as the World Cup or Grand National among immediate colleagues within the same offices where no profits are made or the lottery is wholly for purposes that are not for private or commercial gain (e.g. to raise funds to support a charity: see section 10).

#### 12.9 ***Lending and Borrowing***

The lending or borrowing of money between staff should be avoided, whether informally or as a business, particularly where the amounts are significant.

12.10 It is a particularly serious breach of discipline for any officer to use their position to place pressure on someone in a lower pay-band, a business contact, or a member of the public to loan them money.

#### 12.11 ***Trading on Official NHS Premises***

Trading on official premises is prohibited, whether for personal gain or on behalf of others. This includes, but is not limited to:

- ✓ Flyers advertising services / products in common areas; and
- ✓ Catalogues in common areas

12.12 Canvassing within the office by, or on behalf of, outside bodies or firms (including non-ICB interests of staff or their relatives) is also prohibited. Trading does not include small tea or refreshment arrangements solely for staff.

#### 12.13 ***Individual Voluntary Arrangements, County Court Judgment (CCJ), Bankruptcy / Insolvency***

Any officer who becomes bankrupt, insolvent, has active CCJ, or made individual voluntary arrangements with organisations must inform their line manager and the HR & OD team as soon as possible. Staff who are bankrupt or insolvent cannot be employed, or

otherwise engaged, in posts that involve duties which might permit the misappropriation of public funds or involve the approval of orders or handling of money.

#### 12.14 ***Arrest or Conviction***

Any officer who is arrested, subject to continuing criminal proceedings, or convicted of any criminal offence must inform their line manager and the HR & OD team as soon as is practicably possible.

### **(13) Training and Annual Attestation**

- 13.1 An annual training package to raise awareness and understanding of this policy will be included in the ICB's mandatory training for all staff. All Decision-Making Staff will be required to submit annual attestations that all appropriate declarations required by this policy have been submitted.

### **(14) References**

- Nolan Principles
- Code of Conduct for NHS Managers UK Corporate Governance Code
- Standards for Members of NHS Boards in England
- Relevant ICB Organisational Policies:
  - Tackling Fraud, Bribery & Corruption Policy
  - Whistleblowing Policy
  - Disciplinary Policy
  - Expenses Policy
  - Procurement Policy
- ICB Standing Orders / Standing Financial Instructions / Scheme of Delegation
- ICB Constitution

## **Appendix A – Nolan Principles**

- **Selflessness**

Holders of public office should act solely in terms of the public interest

- **Integrity**

Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family or their friends. They must declare and resolve any interests and relationships.

- **Objectivity**

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

- **Accountability**

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

- **Openness**

Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for doing so.

- **Honesty**

Holders of public office should be truthful.

- **Leadership**

Holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.

## Appendix B – Examples of Types of Interests

Type of Interest	Description
<b>Financial Interest</b>	<p>Where an individual may get direct financial benefit from the consequences of a decision they are involved in making. This could, for example, include being:</p> <ul style="list-style-type: none"> <li>• a director (including a non-executive director) or senior employee in another organisation which is doing, or is likely to do business with an organisation in receipt of NHS funding</li> <li>• a shareholder, partner, or owner of an organisation which is doing, or is likely to do business with an organisation in receipt of NHS funding</li> <li>• someone in secondary employment</li> <li>• someone in receipt of secondary income</li> <li>• someone in receipt of a grant</li> <li>• someone in receipt of other payments (e.g. honoraria, day allowances, travel or subsistence)</li> <li>• someone in receipt of sponsored research</li> </ul>
<b>Non-Financial Professional Interest</b>	<p>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 status or promoting their professional career. This could include situations where the individual is:</p> <ul style="list-style-type: none"> <li>• an advocate for a particular group of patients</li> <li>• a clinician with a special interest</li> <li>• an active member of a particular specialist body</li> <li>• an advisor for the Care Quality Commission or National Institute of Health and Care Excellence</li> <li>• a research role</li> </ul>
Type of Interest	Description
<b>Non-Financial Personal Interest</b>	<p>This is where an individual may benefit personally in ways that are not directly linked to their professional career and do not give rise to a direct financial benefit, because of decisions that are involved in making in their professional career. This could include where the individual is:</p> <ul style="list-style-type: none"> <li>• a member of a voluntary sector board or has a position of authority within a voluntary organisation</li> <li>• a member of a lobbying or pressure group with an interest in health and care</li> </ul>
<b>Indirect Interest</b>	<p>Where an individual has a close association with another who has a financial interest, a non-professional personal interest or a non-financial personal interest who would stand to benefit from a decision they are involved in.</p>
<b>Loyalty Interest</b>	<p>As part of their role, officers may need to build strong relationships with colleagues across the NHS / in other sectors. These can be hard to define as they may often fall into the category of indirect interests. They are unlikely to be directed by any formal process or managed via any contractual means, however these 'loyalty' interests can influence decision making.</p>

**Appendix C – Declaration of Interest Form**

X