

Standards of Business Conduct, incorporating anti-bribery and corruption policy; and the recognition and treatment of conflicting interests, gifts and hospitality

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Purpose - The Trust Board is committed to ensuring that the Board, Trust staff and all individuals providing services in the name of the Trust adhere to the highest standards of personal and business conduct at all times.

This policy explains those standards and provides guidance on how to avoid falling short of the expectations.

Key messages in this policy

- Describes the behavioural expectations laid down in various guidance from the Department of Health and other sources.
- Defines behaviours that are not acceptable (corruption, fraud, bribery)
- Describes how potential conflicts of interest should be addressed
- Describes how offers of gifts and hospitality should be addressed
- Sets out the relevant rules regarding secondary employment
- Sets out the relevant rules involved in

procurement activities

You may also need to refer to the following policies and guidance –

This document forms the first of a three part policy on personal and organisational behavioural governance. The other two policies are:

- Policy for raising concerns, including whistleblowing
- Counter fraud and corruption policy

Other policies that may be relevant include:

- Disciplinary policy
- Procurement policy and regulations

The significant Acts of Parliament are:

- Fraud Act, 2006
- Bribery Act, 2010
- Freedom of Information Act, 2000
- Health and Social Care Act 2012

Other key documents include:

- Managing Conflicts of Interest in the NHS, 2017
- NHS Constitution, 2016
- Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England, 2013

Who should read this policy?

- All staff employed by the Trust, including those working in an unpaid capacity
- All individuals contracted to provide services in the name of the Trust.

Core accountabilities

Policy drafting	Trust Secretary
Review and approval	Trust Management Team
Ratification and adoption	Chief Executive
Dissemination	Trust Secretary
Compliance	All staff and individuals providing services in the name of the Trust

Version history		
V3.1	Apr 2010	Programmed update
V4	Oct 2013	Programmed update, plus update for Bribery Act.
V4.1	Dec 2013	Update for Duty of Candour
V4.2	Dec 2013	Clarification of gifts rules
V4.3	September 2016	Conflicts, secondary employment and Counter Fraud updated.
V4.4	Dec 2016	JCNC amendments
V4.5	May 2017	Update for Managing Conflicts NHS England guidance

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1. Policy statement

- 1.1. It is the Trust's policy that the professional and social conduct of its staff reflects the highest standards of personal integrity; and that the business affairs of the Trust are conducted in a moral, honest manner and in full compliance with all legal requirements. This expectation extends to all individuals who provide services in the name of the Trust and those in posts rated at Agenda for Change Band 8d or above.
- 1.2. Any individuals who are, or feel that they might be, exposed to potential conflicts of interest are expected to report the conflict through the processes adopted by the Trust and take no further part in discussions or decisions where the conflict arises.
- 1.3. Staff shall not seek rewards or gifts, nor accept any gifts, except those of insignificant value (guideline is below £6 for gifts from a supplier or contractor doing business or likely to do business with the Trust and £50 from other sources). Gifts and hospitality should be declared in a Register of Gifts and Hospitality kept by the Chief Executive for that purpose. Acceptance of gifts by way of inducements or rewards may be a criminal offence under the Bribery Act 2010.

2. Regulatory background

- 2.1. Public Sector employees must be impartial and honest in the conduct of business. The Trust's Standing Orders, January 2017 state that:

"Standards of Business Conduct - All NHS staff must comply with the national guidance contained in HSG(93)5 'Standards of Business Conduct for NHS staff', 'Code of Conduct for NHS Managers' 2002 and the seven principles set out by the Committee on Standards in Public Life (the Nolan Principles)."

Under the 'Standards of Business Conduct for NHS Staff' HSG(93)5 the Trust is required to develop a policy on Standards of Business Conduct for all employees. This policy delivers that requirement and encompasses the standards and regulations referred to in the Standing Orders. **Managing Conflicts of Interest in the NHS 2017** clarifies guidance on this aspect for staff and organisations.
- 2.2. The **Bribery Act 2010** came into force on 1 July 2011. It reforms the criminal law of bribery, making it easier to tackle this offence proactively in the public and private sectors. The Act repealed the UK's existing anti-corruption legislation, including the Prevention of Corruption Acts of 1906 and 1916 and the common law offence of bribery.
- 2.3. NHS organisations are included in the Bribery Act's definition of "relevant commercial organisation" and they are required to put in place adequate preventative procedures in respect of acts of bribery and corruption by persons associated with them in the course of their work. One of those procedures is to communicate the Trust's policy to staff. This policy supports delivery of that requirement.
- 2.4. The **NHS Constitution, 2016** sets out the legal rights of staff, including the rights to a good working environment, free from discrimination and harassment; and to be confident and comfortable in raising concerns with their employer. -It sets out further NHS pledges to all staff that are not based in law but will help to provide a positive

working environment and open, supportive cultures; to involve staff in decisions on the way services are delivered; and to encourage staff to raise any concerns that they may have and support them through this process. It also sets out the duties and responsibilities that staff have to the public, their patients and their colleagues.

- 2.5. The **Health and Social Care Act, 2012** sets the legal requirement for NHS trusts to inform patients or their relatives of all incidents where the patient's safety was put at considerable risk: the "Duty of Candour".

3. Definitions

- 3.1. **Bribery** - generally defined as giving someone a financial or other advantage to encourage that person to perform their functions or activities improperly or to reward that person for having already done so. The Bribery Act, 2010 describes two offences specific to the individual:
- Active Bribery – the process of giving or offering a bribe. This offence encompasses:
 - bribes given or offered to benefit, ultimately, the individual giving the bribe
 - bribes given or offered to benefit the individual's employer
 - bribes given or offered by a service supplier to the employer, for the direct or indirect benefit of the employer
 - Passive Bribery – the act of accepting a bribe, which includes actions encouraging a bribe to be given.
- 3.2. **Conflict of interest** – a relationship, or interest from the past or present, including through family and friends, that might be regarded by a reasonable person as a risk to influencing the individual's decisions.
- 3.3. **Corruption** – abuse of powers, associated with the position of the individual, for personal gain.
- 3.4. **Fraud** – intentional deception to achieve personal gain or to damage another individual: seeking to make a benefit, or causing another to suffer a loss, from making a false representation, from failing to disclose relevant information or from abusing their position.
- 3.5. **Gift** - any item of cash or goods or any services which is provided for personal benefit at less than its commercial value.
- 3.6. **Hospitality** – for the purposes of this policy, refers to the provision of meals and accommodation or entry to entertainment events, at no cost or at a subsidised rate.
- 3.7. **Interests** – may be defined as a financial, professional, personal or indirect benefit
- 3.8. **Nolan Principles (seven principles of public life)** – the Parliamentary Committee on Standards of Public Life, established in 1994 and chaired by Lord Nolan defined the seven principles of public life which are incorporated in the Parliament's ministerial code and set the standards of behaviour expected of all individuals in decision making positions in the public sector.

3.9. **Staff** – for the purposes of this policy, “staff” should be taken to include casual and temporary workers, volunteers and individuals employed by other organisations to deliver services in the Trust’s name. This is an important definition in terms of the scope of responsibilities placed on organisations by the Bribery Act.

4. Roles and responsibilities

4.1. The **Trust Board** is responsible for gaining assurance that adequate arrangements are in place to ensure that all staff are aware of the standards of personal and professional behaviour expected of them; and that all staff have access to this policy. The **Chief Executive** is the Accountable Officer.

4.2. The **Trust Secretary** is responsible for:

- ensuring that the Trust maintains a trust-wide register of interests, gifts and hospitality and that this is reviewed by the Audit Committee, annually at least
- ensuring the currency of this policy, on behalf of the Chief Executive.
- arranging for the periodic review, normally by internal audit, of the corporate register
- arranging for an annual audit of compliance with this policy
- providing advice and support to staff on questions regarding the policy

4.3. **Managers** are responsible for ensuring that:

- their staff, including new staff, are aware of and understand the contents of this policy
- records of all conflicts of interest, gifts and hospitality offered and received or refused are complete, up to date and communicated to the Trust Secretary

4.4. **Individual members of staff** are expected to:

- ensure that their behaviour and actions are at all times guided by the seven principles of public life
- avoid situations where they risk the perception of, or actual, abuse of their official position for personal gain or to benefit their friends and family
- report all instances where gifts and hospitality are offered to them, whether covertly or openly and whether or not accepted
- regularly consider what interests they have and declare them as they arise. If in doubt, declare.

5. Consequences of not complying with this policy

5.1. The Trust risks damage to its reputation, both with its patients and catchment population and within the NHS community. It risks services to patients being

compromised by the impact of considerations other than the best interests of the patient and the Trust.

- 5.2. Individual members of staff, in all grades, risk damage to their reputation, by being associated with an organisation that has failed to maintain the expected standards. Those that fail to abide by the expectations and rules set out in this policy risk facing disciplinary action from the Trust. Improper actions by statutorily regulated professional staff may be reported to their regulator.
- 5.3. Repeated or serious behavioural breaches of this policy may result in dismissal from employment. Instances of fraud and corruption, including bribery will be referred for criminal prosecution.

6. Public service values

- 6.1. Public service values must be at the heart of the National Health Service. High standards of corporate and personal conduct, based on a recognition that patients come first, have been a requirement throughout the NHS since its inception. Moreover, since the NHS is publically funded, it must be accountable to Parliament for the services it provides and for effective use of taxpayers' money.
- 6.2. The Trust considers it to be a priority to maintain the confidence and continuing goodwill of its patients, public and fellow service providers. The Trust will ensure that staff are aware of the standards expected of them and will provide guidance on their personal and professional behaviour.
- 6.3. The NHS Constitution, 2016 identifies a number of key rights that all staff have and makes a number of further pledges to support staff in delivering NHS services. It goes on to set out the legal duties and expectations of all NHS staff, including:
 - to accept professional accountability and maintain the standards of professional practice as set out by the relevant regulatory bodies:
 - to act in accordance with the terms of contract of employment:
 - not to act in a discriminatory manner:
 - to protect confidentiality;
 - to be honest and truthful in their work;
 - to aim to maintain the highest standards of care and service;
 - to maintain training and personal development to contribute to improving services;
 - to raise any genuine concerns about risks, malpractice or wrongdoing at work at the earliest opportunity;
 - to involve patients in decisions about their care and to be open and honest with them and;
 - to contribute to a climate where the truth can be heard and learning from errors is encouraged.

6.4. The Trust adheres to and expects all staff to abide by the seven principles of public life set out by the Parliamentary Committee on Standards of Public Life. These are:

- **Selflessness:** Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.
- **Integrity:** Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.
- **Objectivity:** In carrying out public business, including making public appointments, awarding contracts or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
- **Accountability:** Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.
- **Openness:** Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.
- **Honesty:** Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.
- **Leadership:** Holders of public office should promote and support these principles by leadership and example.

6.5. In addition, staff are expected to conduct themselves in a manner that reflects positively on the Trust and not to act in a way that could reasonably be regarded as bringing their job or the Trust into disrepute. All staff must:

- act in the best interests of the Trust and adhere to its values and this code of conduct;
- respect others and treat them with dignity and fairness;
- seek to ensure that no one is unlawfully discriminated against and promote equal opportunities and social inclusion;
- be honest and act with integrity and probity;
- contribute to the workings of the Trust and its management and directors in order to help them to fulfil their role and functions;
- recognise that all staff are individually and collectively responsible for their contribution to the performance and reputation of the Trust;
- raise concerns and provide appropriate challenge regarding the running of the Trust or a proposed action where appropriate and;
- accept responsibility for their performance, learning and development.

Standards for Board Members, 2012

- 6.6. The Professional Standards Authority issued a set of standards of personal and professional behaviour, technical competence and business practices for NHS Board Directors. The Trust adopted these in January 2013.
- 6.7. Although these are specifically directed to the members of the Trust Board, the messages are pertinent to all staff of all grades within the Trust. The Standards are replicated, in full, in Appendix 1.

Standards of Conduct for healthcare and social care support workers, 2013

- 6.8. The Department of Health has issued a Code of Conduct specific to healthcare support workers and adult social care workers in England. The introduction to the Code states:

“As a Healthcare Support Worker or an Adult Social Care Worker, you make a valuable and important contribution to the delivery of high quality healthcare, care and support. Following the guidance set out in this Code of Conduct will give you the reassurance that you are providing safe and compassionate care of a high standard, and the confidence to challenge others who are not. This Code will also tell the public and people who use health and care services exactly what they should expect from Healthcare Support Workers and Adult Social Care Workers in England.”

- 6.9. The key messages in the Code are that care workers should:
- be accountable by making sure you can answer for your actions or omissions;
 - promote and uphold the privacy, dignity, rights, health and wellbeing of people who use health and care services and their carers at all times;
 - work in collaboration with your colleagues to ensure the delivery of high quality, safe and compassionate healthcare, care and support;
 - communicate in an open and effective way to promote the health, safety and wellbeing of people who use health and care services and their carers;
 - respect a person’s right to confidentiality;
 - strive to improve the quality of healthcare, care and support through continuing professional development and;
 - uphold and promote equality, diversity and inclusion.
- 6.10. The Trust has adopted this Code specifically for health care support workers, band 1 to 4, including Assistant Practitioners. The full Code is available on the Trust’s Intranet site.

7. Conflicts of interest

- 7.1. All staff must seek to ensure they are not placed in a position which risks, or appears to risk, conflict between any private interest they may have and the interests of the

Trust. This rule applies equally to situations of casual gifts from patients or relatives as well as in commercial negotiations and transactions.

- 7.2. Staff must not allow themselves to be influenced in, or to exert anti-competitive, or biased influence in the business decisions of the Trust. All staff who are in roles that might influence business decisions must:
- Declare, in advance, a potential conflict of interests that is clearly going to become relevant at some time. This should be reported formally, most likely on appointment but also when moving to a new role or a significant change of responsibility.
 - Report immediately where a conflict of interest becomes apparent in specific circumstances, such as the negotiation of a particular contract for services. This requirement applies to situations where the potential conflict had already been recognised and reported, as well as those where the conflict is unexpected and had not been reported previously. No further role should be taken in that decision making process and, in extreme cases, an individual's responsibility for an entire area of work may be removed.
- 7.3. Staff must declare whether they or any close relative, partner or associate has any dealings with any private company, partnership, charity, voluntary organisation, public sector or any other statutory organisation associated with the Trust, or might compete for a NHS contract to provide goods or services to the Trust. The declaration must be made through the line manager, to be recorded on the Register of Interests that is maintained by the Chief Executive's Office. Failure to do so may result in disciplinary action.
- 7.4. There needs to be an objective assessment of whether an outside interest, either direct, or by association, is sufficiently significant to be perceived as being in conflict with the Trust's best interests. If there is any doubt, the interest should be reported formally to line management.
- 7.5. Senior managers (AfC Band 8d and above), Consultants and Trust Board directors will be expected to provide a periodic update of their declaration of potential conflicts of interest, normally on an annual basis. They must accept that these declarations are reportable under the Freedom of Information Act, 2000 and might be used in Trust publications, such as the Annual Report. These obligations are described in more detail in the Trust's Standing Orders, (SO 21, January 2017, or subsequent version)
- 7.6. The procedure for registering these interests is set out in Appendix 2.
- 7.7. The types of interests which should be declared include:
- all paid employment and occupations including directorships, non-executive roles, self-employment, consultancies, political roles, charitable trustee roles, paid advisory positions and paid honorariums related to organisations likely to do business with the Trust;
 - any sponsorship of a member of staff, event or research by any other organisation or person;
 - shareholding or ownership interests in companies or other bodies seeking to do business with the NHS. any tenancy or use of premises or land owned or used by the Trust, other than that incurred through employment with the Trust;

- any membership of an NHS Trust's Council of Governors or other health body as defined in the Health and Social Care Act 2012 - e.g. local Health and Wellbeing Boards, Healthwatch etc., any position of authority in another NHS organisation or other body which could be seen to influence decisions and membership of advisory groups or other paid or unpaid decision making forums that can influence how the Trust spends money;
- any interests held by a close family member [spouse, partner, sibling, parent or equivalent] that may conflict with those of the Trust; and
- any patent or other intellectual property right held either individually or through association with a commercial or other organisation.

8. Gifts and hospitality

- 8.1. It may be a criminal offence for any member of staff to accept any money, gift or consideration, if this is offered as an inducement or reward from a person or organisation holding or seeking to hold a contract with the Trust.
- 8.2. Those making the offer of such inducements or rewards might also be committing a criminal offence of attempted bribery. Any member of staff who receives an offer of gifts or hospitality must report this to their line manager immediately, unless the gifts or hospitality offered would be regarded, by most people, to be of insignificant value. Line managers must record these instances in the local register of gifts and hospitality; and report immediately any offers of gifts and hospitality, that are of significant value, to the Trust Secretary.
- 8.3. The guiding principle for all staff to follow is: you should not accept gifts, hospitality or other benefits of any kind from a third party, if they might be seen to compromise your personal and professional integrity. Corruptly soliciting or receiving any gift or favour is a criminal offence. If in doubt, seek advice, in advance, from your line manager.

Gifts

- 8.4. Small gifts might include pens, mugs, diaries and calendars. Small tokens of gratitude, from patients or their relatives might include flowers or chocolates. Wherever possible, these should be regarded as gifts for the ward or department and not for individuals. The acceptance of such gifts which display the name of the product or company does not in any way denote North Bristol Trust's endorsement or advertisement of the product or company.
- 8.5. All casual gifts offered by contractors and suppliers potentially represent an offence under the Bribery Act. Such gifts should be politely and firmly declined. Small gifts of low value (i.e. less than £50) may be accepted.
- 8.6. Staff must not accept cash, of any value, offered to them personally. In this instance "cash" includes cheques, gift vouchers and other cash-equivalent tokens.
- 8.7. The accumulation of gifts from a single source that total £100 or more over a twelve month period should be avoided and advice sought from the line manager.

Donations

- 8.8. If patients or members of the public wish to make donations in the form of cash or cheques, they should be invited to make a contribution to an appropriate Trust, ward or department charitable fund. The donation must be witnessed and a receipt must be issued. Where possible, a letter of thanks should be sent to the donor. If the donor is a tax payer then consideration should be given to gift aid at the time of the donation. Further information can be found in the relevant charitable funds/donations procedure on the Trust's document drive. Guidance can be obtained from the Charitable Funds Accountant or from the Board Secretary.
- 8.9. If the potential donor does not wish to follow this process, the offer should be politely and firmly declined. The line manager should be informed of the event.

Prizes

- 8.10. Where prizes are won by staff who have been entered, by virtue of their representation of, association with, or employment by the Trust, into raffle draws or competitions, the following applies:
- Prizes with an estimated value below the insignificant value (currently set at £25) may be accepted and need not be reported formally
 - Prizes with a higher estimated value shall be reported, using the form in appendix 4, to the staff member's executive or corporate director for approval and recording in the directorate register.
- 8.11. The prize should only be accepted if it is offered without conditions. Photographs or publicity associated with the winning might constitute conditions. The recipient of the prize is responsible for ensuring that any photographic record of the prize award or other form of publicity associated with the prize award is not to be used by the organisation that sponsors or provides the prize to imply any level of endorsement by the Trust, of the sponsoring organisation or its products. If there is any uncertainty, the prize winner should report any potential "conditions" to their manager before the prize is accepted.
- 8.12. Raffles and lotteries run by the Trust and its charities, designed for staff involvement; and awards and rewards made by the Trust to specific members of staff are specifically excluded from these requirements.

Hospitality

- 8.13. Hospitality that is normal and reasonable in the circumstances, is attached to events that are clearly relevant and to the wider benefit of the Trust and is to a scale that an NHS employer would be likely to offer, need not necessarily be refused. These might include (list is not exhaustive):
- Lunches provided in the course of working visits,
 - Refreshments provided during industry led training courses or conferences (within the Trust, or on a regional or national scale)

- 8.14. Meals and refreshments under a value of £25 may be accepted and not declared and of a value between £25 and £75 may be accepted and be declared All other offers should be politely and firmly declined unless senior approval is given and the reasons for acceptance recorded.
- 8.15. It is possible that staff members will find themselves in a position where they feel pressured to accept inappropriate hospitality, such as an expensive lunch, or evening meal, at short notice, where approval from line managers cannot be gained in advance. In this case, staff should consider whether they would be willing to pay for the hospitality themselves. If the answer to this is no, the offer must be refused, regardless of the impact of the refusal on working relationships. The offer must be reported to the Trust Secretary, whether it is accepted or not.
- 8.16. As a publicly funded body, the Trust is required to maintain political neutrality. An individual member of staff must be explicit that they are not speaking or acting on behalf of the Trust in any political activity, except with prior written permission from the relevant Trust director.

Site visits

- 8.17. In instances where the Trust is seeking to gain the best understanding of a potential investment in equipment or services, this might best be achieved by viewing the equipment or service in action. If the Trust considers it necessary for staff advising on the purchase of equipment or services to inspect such equipment or services in operation in another part of the country or, exceptionally, overseas, the Trust will normally meet all aspects of the cost. This will avoid jeopardising the perceived impartiality of the purchasing decision. Formal prior approval of the Chief Executive, or exceptionally, the Trust Board, will be required to allow costs to be met by an outside company.

Sponsorship

- 8.18. Commercial sponsorship of staff to attend courses or conferences by an I organisation may be acceptable provided the offers are modest and declared. Formal permission must be received, in advance, if the offer is more than modest such as business class of first class travel and accommodation or foreign travel and accommodation and the reasons for giving permission recorded.
- 8.19. Approval to accept invitations from suppliers of products and services, to clinical staff to attend events both in the UK and abroad for educational purposes will not be withheld unreasonably. The principle applies to both suppliers that receive business from the Trust and those that do not. Approval of commercial sponsorship for attendance at relevant courses or conferences can be given providing that the appropriateness and benefits to the Trust have been considered. An individual member of staff must be satisfied that acceptance will not compromise their position in the Trust.
- 8.20. Commercial sponsorship of events organised by the Trust, such as in-house conferences and courses; and for printing and publication of patient information, must also be approved in advance by the appropriate director.

- 8.21. Sponsorship linked to the supply of particular products or to supply from particular sources requires advance approval from both the relevant director and the Procurement Team. During dealings with sponsors, there must be no breach of patient or individual confidentiality or data protection legislation.
- 8.22. Sponsorship of the whole or any part of a post must receive prior approval from the Director of HR and such approval should only be given after the sponsor has been advised in writing that the sponsorship can have no effect on the Trust's purchasing decisions. All such approvals will be subject to a due diligence review of risks and benefits to the Trust. In all such circumstances it will be necessary for the sponsored employee to report formally a declaration of interest.
- 8.23. These sponsorship rules do not apply in instances where staff are supplied by a company to help manage delivery of a contracted service, as part of the agreed contract.
- 8.24. Acceptance of all forms of sponsorship must be reported in the register of gifts and hospitality. The Trust Scheme of Delegations sets a value limit for insignificant items of £25 for reporting the total cost of hospitality received, whether by an individual member of staff, or a group of staff from the Trust.

Gifts and hospitality provided in the name of the Trust

- 8.25. The Trust will not normally provide gifts or allow for gifts to be provided in the Trust's name, other than in specific instances when staff are rewarded, for example, for long or exceptional service. Approval at executive director level will be required before other types of gifts can be given.
- 8.26. The Trust may provide hospitality in circumstances where it is hosting meetings or other events. Such hospitality is taxable.

Register of gifts and hospitality

- 8.27. An employee who receives hospitality or gifts must declare it to their line manager, clinical director or general manager and inform the Trust Secretary on the appropriate form who will acknowledge receipt. Hospitality and gifts of low value may be ignored for the purposes of the register, but it must be remembered that the passing of a gift to a member of staff may be misconstrued as a potential bribe. Members of staff should, for their own comfort, report the gift received to their line manager. This will offer considerable defence if there is an investigation.
- 8.28. The Secretary to the Trust Board will maintain a register of all staff declarations. This Register will be available for inspection by the Internal Audit Department at any time. Any cases of doubt regarding hospitality will be referred initially by Directors to the Secretary to the Trust Board.
- 8.29. Access to the central register will be allowed for managers within the Trust who have a responsibility for purchasing goods or services or registering contracts on behalf of the Trust.
- 8.30. The Trust Register will be presented to the Audit Committee, for review, on a half-yearly basis at least.

8.31. It should be noted that this register will be deemed to be reportable under the Freedom of Information Act, 2000.

9. Procurement processes

- 9.1. Staff who are in contact with suppliers and contractors, particularly if they are authorised to sign purchase orders, specify, negotiate or place contracts for goods, materials or services, must at all times adhere to accepted professional standards laid down in the ethical code of the Chartered Institute of Purchasing and Supply (CIPS) and to be aware of the terms of the Bribery Act.
- 9.2. Competition between prospective contractors or suppliers must be fair and open. No organisation may be given an advantage over its competitors with each new contract being awarded solely on merit.
- 9.3. Care must be taken to ensure that any information which could be deemed 'commercial in confidence' and which might prejudice the principle of a purchasing system based on fair competition is not disclosed. This applies whether private competitors or other NHS providers are concerned.
- 9.4. This practice should not be too restrictive. The disclosure restrictions do not apply to considerations such as service delivery and activity levels, which should be publically available. These rules should not affect the free exchange of data for medical audit purposes.
- 9.5. Organisations seeking to gain business from the Trust through a tendering process or through normal procurement procedures, will be advised of the likely consequences of offering inducements to Trust employees.

10. Secondary employment

- 10.1. This section applies to the Trust's employed staff only.
- 10.2. All staff should declare any secondary employment to their line manager. Secondary employment includes the following:
 - additional employment within the Trust which is over and above the contracted hours. This includes NHS Professionals and internal staff bank, but excludes overtime
 - additional paid work undertaken for another employer
 - work undertaken as a self-employed person or as the partner of a self-employed person
 - voluntary work undertaken
- 10.3. The general rule is that staff should not engage in any outside employment which could adversely affect their ability to perform their normal contractual obligations, or which may involve potential conflicts of interest in the use of any confidential or commercial information obtained in the course of employment within the Trust.

- 10.4. Secondary employment should not conflict with the regulations laid down in the working time directive. Employees should ensure that they are not working in excess of an average of 48 hours per week, unless there is a prior agreement that they have opted out of this limit.
- 10.5. Secondary employment should be declared by completing the form in Appendix 5

Private practice (clinical staff)

- 10.6. Consultants and SAS Doctors are permitted to engage in private practice subject to the conditions outlined in A Code of Conduct for Private Practice - Recommended Standards of Practice for NHS Consultants, January 2004.
- 10.7. The Consultant is responsible for ensuring that the provision of Private Professional Services or Fee Paying Services for other organisations does not:
- result in detriment of NHS patients and services
 - diminish the public resources that are available for the NHS
- 10.8. The consultant should inform their clinical manager of any regular commitments in respect of their Private Practice Services and should declare this as a potential conflict of interest. This is part of the terms and conditions of a Consultant's contract (2003). This information should include the planned locations, timing and broad type of work involved. The Consultant should disclose this information at least annually as part of the Job Plan review.
- 10.9. Other professional clinical staff may undertake private practice or work for outside agencies, providing they do not do so within the time they are contracted to work for the NHS and they observe the conditions set out for secondary employment above.

11. Monitoring compliance and effectiveness

- 11.1. The Trust Secretary will commission reviews of compliance with this policy. As a minimum, this will comprise an:
- annual review of the consolidated register of interests, gifts and hospitality and reasonableness check on the completeness of record keeping and;
 - annual review of investigations carried out at the Trust by the Local Counter Fraud Specialist for evidence of non-compliance with this policy.
- 11.2. The results of these reviews will be reported to the Audit Committee on a twice yearly basis, at least. Delivery of actions required to address any weaknesses identified through these reviews will be monitored by the Audit Committee.

12. Consultation and approval

- 12.1. The review period for this document is three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the policy.

- 12.2. The review and revision of this document will be monitored through the TMT.
- 12.3. Non-significant amendments to this policy may be made, under delegated authority from the Chief Executive, by the nominated author. These must be ratified by the Chief Executive and should be reported, retrospectively, to the TMT.
- 12.4. Significant reviews and revisions to this policy will involve consultation with relevant managers and staff across the Trust, internal and external audit and trades union representatives. Where possible, the consultation process will include discussion with the Policy Review sub-group of the Joint Consultative and Negotiating Committee (JCNC).

13. Dissemination and implementation

- 13.1. Following approval and ratification, this policy will be published on the Trust's intranet library of policies. All staff will be notified through one of the Trust's current communications vehicles.
- 13.2. Implementation is immediate on ratification.
- 13.3. Although no formal training is proposed, all staff will be encouraged to read and understand the whole policy. The Trust may also, from time to time, issue reminders about the main messages in the policy or about specific elements of the policy.

Appendix 1 - Standards for members of NHS boards and Clinical Commissioning Group governing bodies in England, 2012

All members of NHS boards and CCG governing bodies should understand and be committed to the practice of good governance and to the legal and regulatory frameworks in which they operate. As individuals they must understand both the extent and limitations of their personal responsibilities.

To justify the trust placed in me by patients, service users and the public, I will abide by these Standards at all times when at the service of the NHS.

I understand that care, compassion and respect for others are central to quality in healthcare; and that the purpose of the NHS is to improve the health and well-being of patients and service users, supporting them to keep mentally and physically well, to get better when they are ill and, when they cannot fully recover, to stay as well as they can to the end of their lives.

I understand that I must act in the interests of patients, service users and the community I serve and that I must uphold the law and be fair and honest in all my dealings.

Personal behaviour

1. As a Member I commit to:
 - The values of the NHS Constitution
 - Promoting equality
 - Promoting human rights
 - in the treatment of patients and service users, their families and carers, the community, colleagues and staff, and in the design and delivery of services for which I am responsible.
2. I will apply the following values in my work and relationships with others:
 - **Responsibility:** I will be fully accountable for my work and the decisions that I make, for the work and decisions of the board, including delegated responsibilities and for the staff and services for which I am responsible
 - **Honesty:** I will act with honesty in all my actions, transactions, communications, behaviours and decision-making and will resolve any conflicts arising from personal, professional or financial interests that could influence or be thought to influence my decisions as a board member
 - **Openness:** I will be open about the reasoning, reasons and processes underpinning my actions, transactions, communications, behaviours and decision-making and about any conflicts of interest

- **Respect:** I will treat patients and service users, their families and carers, the community, colleagues and staff with dignity and respect at all times
- **Professionalism:** I will take responsibility for ensuring that I have the relevant knowledge and skills to perform as a board member and that I reflect on and identify any gaps in my knowledge and skills and will participate constructively in appraisal of myself and others. I will adhere to any professional or other codes by which I am bound
- **Leadership:** I will lead by example in upholding and promoting these Standards and use them to create a culture in which their values can be adopted by all
- **Integrity:** I will act consistently and fairly by applying these values in all my actions, transactions, communications, behaviours and decision-making and always raise concerns if I see harmful behaviour or misconduct by others.

Technical competence

3. As a Member, for myself, my organisation, and the NHS, I will seek:
 - Excellence in clinical care, patient safety, patient experience and the accessibility of services
 - To make sound decisions individually and collectively
 - Long term financial stability and the best value for the benefit of patients, service users and the community.
4. I will do this by:
 - Always putting the safety of patients and service users, the quality of care and patient experience first and enabling colleagues to do the same
 - Demonstrating the skills, competencies and judgement necessary to fulfil my role, and engaging in training, learning and continuing professional development
 - Having a clear understanding of the business and financial aspects of my organisation's work and of the business, financial and legal contexts in which it operates
 - Making the best use of my expertise and that of my colleagues while working within the limits of my competence and knowledge
 - Understanding my role and powers, the legal, regulatory and accountability frameworks and guidance within which I operate and the boundaries between the executive and the non-executive
 - Working collaboratively and constructively with others, contributing to discussions, challenging decisions and raising concerns effectively
 - Publicly upholding all decisions taken by the board under due process for as long as I am a member of the board
 - Thinking strategically and developmentally
 - Seeking and using evidence as the basis for decisions and actions

- Understanding the health needs of the population I serve
- Reflecting on personal, board and organisational performance and on how my behaviour affects those around me; and supporting colleagues to do the same
- Looking for the impact of decisions on the services we and others provide, on the people who use them and on staff
- Listening to patients and service users, their families and carers, the community, colleagues and staff and making sure people are involved in decisions that affect them
- Communicating clearly, consistently and honestly with patients and service users, their families and carers, the community, colleagues and staff and ensuring that messages have been understood
- Respecting patients' rights to consent, privacy and confidentiality and access to information, as enshrined in data protection and freedom of information law and guidance.

Business practices

5. As a Member, for myself and my organisation, I will seek:
 - To ensure my organisation is fit to serve its patients and service users and the community
 - To be fair, transparent, measured and thorough in decision-making and in the management of public money
 - To be ready to be held publicly to account for my organisation's decisions and for its use of public money.
6. I will do this by:
 - Declaring any personal, professional or financial interests and ensuring that they do not interfere with my actions, transactions, communications, behaviours or decision-making and removing myself from decision-making when they might be perceived to do so
 - Taking responsibility for ensuring that any harmful behaviour, misconduct, or systems weaknesses are addressed and learnt from and taking action to raise any such concerns that I identify
 - Ensuring that effective complaints and whistleblowing procedures are in place and in use
 - Condemning any practices that could inhibit or prohibit the reporting of concerns by members of the public, staff, or board members about standards of care or conduct
 - Ensuring that patients and service users and their families have clear and accessible information about the choices available to them so that they can make their own decisions
 - Being open about the evidence, reasoning and reasons behind decisions about budget, resource and contract allocation

- Seeking assurance that my organisation's financial, operational and risk management frameworks are sound, effective and properly used and that the values in these Standards are put into action in the design and delivery of services
- Ensuring that my organisation's contractual and commercial relationships are honest, legal, regularly monitored and compliant with best practice in the management of public money
- Working in partnership and co-operating with local and national bodies to support the delivery of safe, high quality care
- Ensuring that my organisation's dealings are made public, unless there is a justifiable and properly documented reason for not doing so.

Appendix 2 - Declarations of Interest Procedure

1. Any interest may be deemed to be a potential conflict to the business of the Trust. Trust Board Members, senior managers and any other member of staff should therefore declare such interests either when they take up a position with the Trust or as soon as the interest is acquired.
2. The Secretary to the Board will request, on an annual basis, a signed “declaration of interest” from key members of staff in the Trust who have been selected on a risk assessment basis because of their position and will remind staff of their obligations under the Nolan Principles. It is the responsibility, however, of all staff to adhere to the Policy and to make a “declaration of interest” if it is applicable, regardless of whether or not they receive a form to complete.
3. **Where there is any doubt, a “declaration of interest” should be made to your line manager for decision on whether the declaration should be made formally.**
4. Declaration of Interest forms can be requested from the Chief Executive’s Office or the Secretary to the Board.
5. The signed responses will be recorded in the form of a register and kept by the Secretary to the Board. If a change arises during the year, the Secretary should be notified immediately in order that it may not pose a detriment to either the Trust or its patients in the form of undue influence over a contract tendering procedure etc.
6. Interests which are regarded as relevant and material are:
 - Directorships, including non executive directorships, held in private companies or PLCs
 - Ownership or part ownership, (10% or more and, depending on value, as little as 1% share) of private companies, businesses or consultancies which seek to do business with the Trust or may in the future seek to do business with the Trust or where it is known to be in a merger, acquisition or takeover situation with a private company, business or consultancy
 - A position of authority in a charity or voluntary body in the field of health and social care
 - A personal or departmental interest in any part of the pharmaceutical industry that could be perceived as an influence on their decision making or on the advice to members of the team
 - Any connection to a voluntary or other body contracting with the Trust.

Recording of Interest at Formal Board Meetings

7. During any Board or formal Board committee meeting, Trust Board members, Executive Board members or members of any of the formal committees of the Trust Board who make a declaration of interest of any agenda item should have that declaration recorded in the minutes of the meeting (see Standing Orders). The declaration should also be placed on the Register of Interests, held by the Secretary to the Board. The Register will include, on an annual basis, details of all interests declared by Trust staff. The Register should be kept up to date, will be reviewed annually and be available for scrutiny.

Failure to Adhere to Standards of Conduct

8. Any case where a Trust employee fails to declare an interest as defined above, (or participates in a decision making process where special favour is shown to unfairly award a contract or abuse their official position or knowledge for the purpose of benefit to themselves, family or friends) will be referred for investigation. If proven it will result in appropriate disciplinary action for gross misconduct. Criminal proceedings may also be taken which could lead to a fine and/or imprisonment for up to ten years if found guilty.

Advice

9. If in doubt staff should seek advice on the application of this policy in the first instance from their Executive, Corporate or Clinical Director who will, when necessary, request that they complete a "declaration of interest" form

Appendix 3 Declaration of interests form

Full Name: (Please Print)		Date	
Contact Address at work:			
Tel No:			
Title/Position Held in Trust			
<p>In accordance with the Trust's Standards of Business Conduct, Standing Orders 21, 22 & 23 and Financial Reporting Standard IFRS12, I list below my relevant interests and those of my family for inclusion in the Register of Members' and Senior Managers' Interests.</p> <p>If in doubt, declare</p>			

Declaration	Details of nature of relationship	Period of involvement
1)Gain of Direct Financial Benefit – because you are a director or shareholder in a company doing or likely to do business with North Bristol or have outside employment or receive a secondary income, grant, other payment (honoraria, day allowance, travel, subsistence) or sponsored research:		
Name of Organisation:		

Declaration	Details of nature of relationship	Period of involvement
<p>2)Gain of Non-Financial Professional Benefit – because you have links to an organisation (a particular group of patients, special interest group, specialist body, national body or research body) that makes a decision that increases your professional reputation or promotes your career:</p>		
<p>Name of Organisation:</p>		

Declaration	Details of nature of relationship	Period of involvement
3)Gain of Non-Financial Personal Benefit – because you are a member or have a position of authority with a voluntary sector organisation or of a lobbying or pressure group with an interest in health care:		
Name of Organisation:		
4)Gain of Indirect Benefit - through association of another individual e.g. close family member or relative, close friend or associate or business partner with some form of interest:		
Name of Person:		

Declaration	Details of nature of relationship	Period of involvement
<p>I undertake to notify the Trust of any changes which may occur within four weeks from the date of the change, in writing to the Secretary to the Board, THQ Southmead</p>		
<p>I confirm that the list accurately reflects my interests and those of my close family and understand that these declarations will be included in the Register available for public inspection.</p>		
<p>NB – An electronic signature, sent from your Trust email address, will be regarded as a valid signature.</p>		
Signed:		Date/submit:
<p>Or I confirm a nil declaration</p>		
Signed:		Date/submit:

Appendix 4 - Gifts and hospitality notification

Name of Employee _____

Directorate/Location _____

Date of Declaration _____

Type	Description, including estimate of value	Offered by	Accepted / Declined
Gift			
Hospitality Entertainment Travel			
Sponsorship			

Notification of potential conflict	Description
Secondary Employment	
Links to Trust Contractors	

Details:

Signed by Employee		Date:	
Signed by Approving Manager		Date:	

NB – An electronic signature, sent from your Trust email address, will be regarded as a valid signature.

Appendix 5 – Declaration of Secondary Employment

NORTH BRISTOL NHS TRUST

DECLARATION OF SECONDARY EMPLOYMENT

Personal Details

Full Name Title

Job Title

Department

Directorate

Hours of work per week

Pattern of hours (e.g. 24/7 shifts, 8.30am – 5.00pm).....

Days worked

Other Employment/Work Details

I have other employment/work or I am considering other employment/work including Bank/Locum Agency, the details of which are below:-

Organisation/Company/Agency

Job Title

Description of work undertaken

.....

.....

Type of work: Paid Unpaid Voluntary Casual

(Circle as appropriate)

Hours per week

Pattern of hours (e.g. 24/7 shifts, 8.30am – 5.00pm)

Date commenced/planning to commence.....

Declaration

I declare that the above information is correct and that secondary employment in this instance will not have a detrimental effect on my work at North Bristol NHS Trust. I will inform my Line Manager if there are any changes to the above.

I understand that false information given with regard to this policy could be treated as Gross Misconduct or fraudulent and dealt with accordingly under the Disciplinary/Counter Fraud Policy. To prevent and detect fraud, I consent to the disclosure of relevant inform from this form to and by the NHS Counter Fraud Service.

Signed Date

(Employee)

Approved by Date

(Manager) Job title

A copy of this form should be retained by both the employee and manager and a file copy should be sent to Employment Services.