



## CODE OF CONDUCT AND CONFLICTS OF INTEREST POLICY

(Including the Process for Declaring Interests, Gifts, Hospitality, Commercial Sponsorship and Outside/Secondary Employment)

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## 1. POLICY SUMMARY

- 1.1 This policy sets out the Trust's ethical and legal stance on the conduct of business matters and the values which all staff are expected to follow. This policy also explains the requirement to declare actual and potential conflicts of interest and the receipt of gifts, hospitality and sponsorship. It provides staff with the knowledge and information they need in respect of these matters and seeks to protect them from situations that may draw criticism, disciplinary action or criminal sanction.

As a member of staff you should...	As an organisation we will...
<ul style="list-style-type: none"> <li>• Familiarise yourself with this policy and follow it. Refer to the guidance for the rationale behind this policy <a href="https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf">https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf</a></li> <li>• Use your common sense and judgement to consider whether the interests you have could affect the way taxpayers' money is spent;</li> <li>• Regularly consider what interests (including gifts, hospitality and sponsorships) you have and declare these as they arise, using the declaration system available <a href="#">online</a> or attached as Appendix 2).</li> <li>• <b>NOT</b> misuse your position to further your own interests or those close to you;</li> <li>• <b>NOT</b> be influenced, or give the impression that you have been influenced by outside interests;</li> <li>• <b>NOT</b> allow outside interests you have to inappropriately affect the decisions you make when using taxpayers' money;</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that this policy and supporting processes are clear and help staff understand what they need to do.</li> <li>• Identify a team or individual with responsibility for:               <ul style="list-style-type: none"> <li>○ Keeping this policy under review to ensure they are in line with the guidance.</li> <li>○ Providing advice, training and support for staff on how interests should be managed.</li> <li>○ Maintaining register(s) of interests.</li> <li>○ Auditing this policy and its associated processes and procedures at least once every three years.</li> </ul> </li> <li>• <b>NOT</b> avoid managing conflicts of interest.</li> <li>• <b>NOT</b> interpret this policy in a way which stifles collaboration and innovation with our partners</li> </ul>

As a member of staff you should...	As an organisation we will...
<ul style="list-style-type: none"> <li>• Act in accordance with the <a href="#">Nolan Principles</a></li> <li>• Be aware that it is both a serious criminal offence under the Bribery Act 2010, (2012 update) and a disciplinary matter, to receive or give corruptly any fee, loan, gift, reward or other advantage in return for doing (or not doing) anything or showing favour (or disfavour) to any person or organisation;</li> <li>• Understand that failure to follow this policy may damage the Trust's reputation and its work and so may be viewed as a disciplinary matter, to be dealt with under normal employee relations procedures, and the results could include dismissal;</li> <li>• Executive Directors and Non-Executive Directors should also behave in accordance with the principles set out within the Trust's constitution.</li> </ul>	

## 2. INTRODUCTION

- 2.1 Providing best value for taxpayers and ensuring that decisions are taken transparently and clearly are both key principles in the NHS Constitution. Yeovil District Hospital NHS Foundation Trust is committed to maximising resources for the benefit of the whole community. As an organisation and as individuals we have a duty to ensure that all our dealings are conducted to the highest standards of integrity and that NHS monies are used wisely so that we are using our finite resources in the best interests of patients.
- 2.2 This policy sets out the public service values which underpin the work of Yeovil District Hospital NHS Foundation Trust and reflects current guidance and best practice which all individuals within the Trust must follow.

2.3 The Trust aspires to the highest standards of corporate behaviour and responsibility. All Trust staff (defined in section 7) are required to comply with this policy and should be seen to be honest and objective.

### **3. PURPOSE**

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

- Introduces consistent principles and rules;
- Provides simple advice about what to do in common situations;
- Supports good judgement about how to approach and manage interests;
- Sets out how interests (including gifts, hospitality and sponsorship) are to be identified and declared.

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

- Anti-Fraud, Bribery and Corruption Policy;
- Complaints and Concerns Management Policy;
- Standing Financial Instructions;
- Constitution;
- HR Policy Manual

3.3 All current policies and procedures are accessible to staff on the Trust's intranet (yCloud).

### **4. KEY TERMS**

4.1 A 'conflict of interest' is:

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

4.3 A conflict of interest may be:

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

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

## 5. TRUST CODE OF BUSINESS CONDUCT

5.1 All staff (defined in section 7) are expected to:

- Act impartially in all their work;
- Regularly consider what interests (including gifts, hospitality and sponsorships) they have and declare these as they arise, using the declaration system available [online](#) or attached as Appendix 2).
- **NOT** misuse your position to further your own interests or those close to you;
- **NOT** be influenced, or give the impression that you have been influenced by outside interests;
- **NOT** allow outside interests you have to inappropriately affect the decisions you make when using taxpayers' money;
- Ensure professional registration (if applicable) and/or status are not used in the promotion of commercial products or services;
- Beware of bias generated through sponsorship, where this might impinge on professional judgement and impartiality;
- Neither agree to practice under any conditions which compromise professional independence or judgement, nor impose such conditions on other professionals.

## 6. INTERESTS

6.1 Interests fall into the following categories:

### 6.2 **Financial interests:**

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

### 6.3 **Non-financial professional interests:**

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

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

#### 6.4 **Non-financial personal interests:**

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

#### 6.5 **Indirect interests:**

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

### 7. **STAFF**

7.1 At Yeovil District Hospital NHS Foundation Trust we use the skills of many different people, all of whom are vital to our work. This includes people on differing employment terms, who for the purposes of this policy we refer to as 'staff' and are listed below:

- All salaried employees;
- All prospective employees – who are part-way through recruitment;
- Contractors and sub-contractors;
- Agency staff;
- Students and trainees (including apprentices);
- Secondees;
- Non-Executive Directors;
- Governors;
- Volunteers;
- Committee, sub-committee and advisory group members (who may not be directly employed or engaged by the organisation).

### 8. **DECISION MAKING STAFF**

8.1 Some staff are more likely than others to have a decision making influence on the use of taxpayers' money, because of the requirements of their role. For the purposes of this guidance these people are referred to as 'decision making staff.' Decision making staff will be required to make an annual declaration in terms of any actual or potential interests that they may have and the Trust is required to maintain and publish a register setting out these interests (more information about this is described in Appendix 1).

8.2 Decision making staff in this organisation are:

- Executive and Non-Executive Directors who have decision making roles which involve the spending of taxpayers' money;

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

- Hospital Governors;
- Members of advisory groups which contribute to direct or delegated decision making on the commissioning or provision of taxpayer funded services;
- Staff at Agenda for Change band 8C, or at an equivalent remuneration, and above;
- Staff who have the power to enter into contracts on behalf of their organisation;
- Staff involved in decision making concerning the commissioning of services, purchasing of goods, medicines, medical devices or equipment, and formulary decisions;
- **All** procurement staff (both internal and external procurement), regardless of banding;
- Pharmacy and estates staff (Band 5 and above).

## **9. IDENTIFICATION, DECLARATION AND REVIEW OF INTERESTS**

- 9.1 All Trust staff must declare any interest which may directly or indirectly give rise to an actual or potential conflict of interest. Details of the things to declare are set out in this policy and in Appendix 1.
- 9.2 The Trust is required to maintain a register of interests to record formally the declarations of interest of all decision making staff and to refresh this information on an annual basis. This will be published on the Trust's website.
- 9.3 Reporting requirements for members of the Board and the Council of Governors are also laid down in the Foundation Trust's Constitution and Standing Orders.
- 9.4 All staff should identify and declare material interests at the earliest opportunity (and in any event within 28 days). If staff are in any doubt as to whether an interest is material then they should declare it, so that it can be considered. Declarations will need to be signed off by the line manager. Declarations should be made:
- On appointment with the organisation;
  - When staff move to a new role or their responsibilities change significantly;
  - At the beginning of a new project/piece of work;
  - As soon as circumstances change and new interests arise (for instance, in a meeting when interests staff hold are relevant to the matters in discussion).

- 9.5 All declarations should be made [online](#). Declarations using this method will automatically be sent to your line manager for authorisation and then to the Company Secretary. In circumstances where the online process cannot be used, the form at Appendix 2 can be used.
- 9.6 Declarations should be made to the Company Secretary. The contact details are included on the declaration of interest form.
- 9.7 After expiry, an interest will remain on the register for a minimum of six months and a private internal record of historic interests will be retained for a minimum of six years.
- 9.8 We will prompt decision making staff at least annually to review declarations they have made and, as appropriate, update them or make a nil return.

## **10 DEALING WITH BREACHES AND RAISING CONCERNS**

- 10.1 There will be situations when interests will not be identified, declared or managed appropriately and effectively. This may happen innocently, accidentally, or because of the deliberate actions of staff or other organisations. For the purposes of this policy these situations are referred to as 'breaches'.
- 10.2 Trust staff who fail to disclose any relevant interests, required by this policy or the Trust's Constitution, Standing Orders and Standing Financial Instructions may be subject to disciplinary action which could, ultimately, result in the termination of their employment or position with the Trust. The matter may also be reported to, and investigated by, the Counter Fraud Specialist.
- 10.3 We expect every member of staff to speak up about genuine concerns in relation to criminal activity, breach of a legal obligation (including negligence, breach of contract or breach of administrative law), miscarriage of justice, danger to health and safety or the environment.
- 10.4 The Trust has developed a Complaints and Concerns Management Policy, available on the staff intranet (yCloud) along with the Raising Concerns Policy available within the HR Manual.
- 10.5 Any suspected fraudulent breach of this policy must be reported to, and will be investigated by, the Counter Fraud Specialist and may result in a criminal prosecution being commenced.
- 10.6 Your Counter Fraud Specialist is Claire Baker who can be contacted by telephoning 07583 255 921 or emailing [claire.baker@bdo.co.uk](mailto:claire.baker@bdo.co.uk)
- 10.7 Trust staff can also call the NHS Fraud and Corruption Reporting Line on free phone 0800 028 40 60. This provides an easily accessible and confidential route for the reporting of genuine suspicions of fraud within or affecting the NHS. All calls are dealt with by experienced trained staff and any caller who

wishes to remain anonymous may do so. Alternatively, you can report your concerns online at: <https://www.reportnhsfraud.nhs.uk/>.

- 10.8 The organisation will investigate each reported breach according to its own specific facts and merits, and give relevant parties the opportunity to explain and clarify any relevant circumstances.
- 10.9 Following investigation the organisation will:
- Decide if there has been or is potential for a breach and if so what severity of the breach is;
  - Assess whether further action is required in response – this is likely to involve any staff member involved and their line manager, as a minimum;
  - Consider who else inside and outside the organisation should be made aware;
  - Take appropriate action as set out in the next section.
- 10.10 Action taken in response to breaches of this policy will be in accordance with the disciplinary procedures of the Trust and could involve organisational leads for staff support (e.g. Human Resources), fraud (e.g. Counter Fraud Specialist), members of the management or executive teams and organisational auditors.
- 10.11 Breaches could require action in one or more of the following ways:
- Clarification or strengthening of existing policy, process and procedures;
  - Consideration as to whether HR/employment law/contractual action should be taken against staff or others;
  - Consideration being given to escalation to external parties. This might include referral of matters to external auditors, NHS Protect, the Police, statutory health bodies (such as NHS England, NHS Improvement or the CQC), and/or health professional regulatory bodies.
- 10.12 Inappropriate or ineffective management of interests can have serious implications for the organisation and staff. There will be occasions where it is necessary to consider the imposition of sanctions for breaches.
- 10.13 Sanctions should not be considered until the circumstances surrounding breaches have been properly investigated. However, if such investigations establish wrong-doing or fault then the organisation can and will consider the range of possible sanctions that are available, in a manner which is proportionate to the breach. This includes:
- Employment law action against staff, which might include:
    - Informal action (such as reprimand, or signposting to training and/or guidance);
    - Formal disciplinary action (such as formal warning, the requirement for additional training, re-arrangement of duties, re-deployment, demotion, or dismissal).

- Reporting incidents to the external parties described above for them to consider what further investigations or sanctions might be;
- Contractual action, such as exercise of remedies or sanctions against the body or staff which caused the breach;
- Legal action, such as investigation and prosecution under fraud, bribery and corruption legislation.

10.14 Reports on breaches, the impact of these, and action taken will be considered (on an exception basis) by the Audit Committee.

## **11 APPENDICES**

11.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

## **12 REVIEW**

12.1 This policy will be reviewed in three years unless an earlier review is required.

## **13 EQUALITY IMPACT ASSESSMENT**

13.1 All relevant persons are required to comply with this document and must demonstrate sensitivity and competence in relation to the nine protected characteristics as defined by the Equality Act 2010. If you, or any other groups, believe you are disadvantaged by anything contained in this document please contact the Equality and Diversity Lead.

## **14 MONITORING COMPLIANCE AND EFFECTIVENESS**

14.1 The Company Secretary shall provide the Audit Committee with an overview of compliance against this policy on an annual basis. The Counter Fraud Manager will monitor compliance against the NHS Protect Standards and provide a regular report to the Audit Committee.

## **15 REFERENCES AND ASSOCIATED DOCUMENTS**

Freedom of Information Act 2000  
 ABPI: The Code of Practice for the Pharmaceutical Industry (2016)  
 ABHI Code of Business Practice  
 NHS Code of Conduct and Accountability (July 2004)  
 Nolan Principles  
 Bribery Act 2010 (2012 update)  
 Anti-Fraud, Bribery and Corruption Policy  
 Complaints and Concerns Management Policy  
 Constitution, Standing Orders, Standing Financial Instructions  
 Disciplinary Policy

## DECLARATION OF INTEREST PROCESS

### 1 RECORDS AND PUBLICATION

#### Maintenance

- 1.1 The organisation will maintain a Declaration of Interests Register (including gifts, hospitality and sponsorship).
- 1.2 All declared interests that are material will be promptly transferred to the registers by the Company Secretary.

#### Publication

We will:

- Publish the interests declared by decision making staff in the Declarations of Interests Register;
  - Refresh this information at least annually;
  - Make this information available on the Trust's public website.
- 1.4 If decision making staff have substantial grounds for believing that publication of their interests should not take place then they should contact the Company Secretary, Ben Edgar-Attwell ([Benjamin.edgar-attwell@ydh.nhs.uk](mailto:Benjamin.edgar-attwell@ydh.nhs.uk)). In exceptional circumstances, for instance where publication of information might put a member of staff at risk of harm, information may be withheld or redacted on public registers. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.

#### Wider transparency initiatives

- 1.5 Yeovil District Hospital NHS Foundation Trust fully supports wider transparency initiatives in healthcare, and we encourage staff to engage actively with these.
- 1.6 Relevant staff are strongly encouraged to give their consent for payments they receive from the pharmaceutical industry to be disclosed as part of the Association of British Pharmaceutical Industry (ABPI) Disclosure UK initiative. These "transfers of value" include payments relating to:
  - Speaking at and chairing meetings;
  - Training services;
  - Advisory board meetings;
  - Fees and expenses paid to healthcare professionals;
  - Sponsorship of attendance at meetings, which includes registration fees and the costs of accommodation and travel, both inside and outside the UK;

- Donations, grants and benefits in kind provided to healthcare organisations.

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

## **MANAGEMENT OF INTERESTS – GENERAL**

2.1 If an interest is declared but there is no risk of a conflict arising then no action is warranted. However, if a material interest is declared then the general management actions that could be applied include:

- Restricting staff involvement in associated discussions and excluding them from decision making;
- Removing staff from the whole decision making process;
- Removing staff responsibility for an entire area of work;
- Removing staff from their role altogether if they are unable to operate effectively in it because the conflict is so significant.

2.2 Each case will be different and context-specific, and Yeovil District Hospital NHS Foundation Trust will always clarify the circumstances and issues with the individuals involved. Staff should maintain a written audit trail of information considered and actions taken.

2.3 Staff who declare material interests should make their line manager aware of their existence.

## **3 MANAGEMENT OF INTERESTS – COMMON SITUATIONS AND WHAT TO DECLARE**

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

### **Gifts**

3.2 Staff should not accept gifts (with the exception of items of little value (less than £50) such as diaries, calendars, flowers and small tokens of appreciation (including seasonal gifts), that may affect, or be seen to affect, their professional judgement.

3.3 Gifts from suppliers or contractors:

- Gifts from suppliers or contractors doing business (or likely to do business) with the organisation should be declined, whatever their value;

- Low cost branded promotional aids such as pens or post-it notes may, however, be accepted where they are under the value of £6\* in total, and need not be declared;

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

- Gifts of cash and vouchers to individuals should always be declined;
- Staff should not ask for any gifts;
- Gifts valued at over £50 should be declined, or where they cannot be declined, accepted on behalf of Yeovil District Hospital NHS Foundation Trust's charitable fund and not in a personal capacity. These should be declared by staff;
- Modest gifts accepted under a value of £50 do not need to be declared;
- A common sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value);
- Multiple gifts from the same source over a 12 month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.

#### What should be declared:

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

#### Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days of receipt.
- Return promptly any unacceptable gifts, with a letter politely explaining the terms of this policy and stating that you are not allowed to accept them. A template is available at Appendix 3. If staff feel unable to decline the gift, advice should be sought from the Company Secretary.
- Where it is not reasonable to return received gifts from suppliers or contractors doing business with the organisation, these will be retained by the Trust and used for charitable needs. These should be sent to the Management Office, Level 1, YDH.

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

## Hospitality

- Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement;
- Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event;
- Particular caution should be exercised when hospitality is offered by actual or potential suppliers, contractors or individuals concerned with the supply of goods or services. This can be accepted, and must be declared, if modest and reasonable and during the course of working visits. Line manager approval must be obtained. The hospitality should be on a similar scale to that which the Trust might offer in similar circumstances, e.g. hospitality provided at meetings, events, seminars. In cases of doubt, advice should be sought from your line manager or the Company Secretary;
- Staff should be especially cautious of accepting small items of value, or hospitality over that afforded in a normal meeting environment (i.e. beverages) during a procurement process or from bidders/potential bidders. This avoids any potential claim of unfair influence, collusion or canvassing.

### Meals and refreshments:

- Under a value of £25 - may be accepted and need not be declared;
- Of a value between £25 and £75\* - may be accepted and must be declared;
- Over a value of £75 - should be refused unless (in exceptional circumstances) line manager approval is given. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept;
- A common sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or a reasonable estimate).

### Travel and accommodation:

- Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared;

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

- Offers which go beyond modest, or are of a type that the organisation itself might not usually offer, need approval by the line manager, should only be accepted in exceptional circumstances, and must be declared. A clear reason should be recorded on the declaration form and register as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
  - Offers of business class or first class travel and accommodation (including domestic travel);
  - 
  - Offers of foreign travel and accommodation.

What should be declared:

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

Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days, or in advance in the case of travel and accommodation.

**Outside/Secondary Employment**

- Staff (depending on the details of their contract as regards outside employment and private practice) should declare any existing outside employment (e.g. secondary employment) on appointment and any new outside employment when it arises;
- Where a risk of conflict of interest arises, the general management actions outlined in this policy should be considered and applied to mitigate risks;
- Where contracts of employment or terms and conditions of engagement permit, staff may be required to seek prior approval from the organisation to engage in outside employment;
- The organisation may also have legitimate reasons within employment law for knowing about outside employment of staff, even when this does not give rise to risk of a conflict.

### What should be declared:

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

### Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days

### **Shareholdings and other ownership issues**

- Staff should declare, as a minimum, any shareholdings and other ownership interests in any publicly listed, private or not-for-profit company, business, partnership or consultancy which is doing, or might be reasonably expected to do, business with the organisation;
- Where shareholdings or other ownership interests are declared and give rise to risk of conflicts of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks;
- There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

### What should be declared:

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

### Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days.

### **Patents**

- Staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are ongoing, which are, or might be reasonably expected to be, related to items to be procured or used by the organisation;

- Staff should seek prior permission from the organisation before entering into any agreement with bodies regarding product development, research, work on pathways etc., where this impacts on the organisation's own time, or uses its equipment, resources or intellectual property;
- Where holding of patents and other intellectual property rights give rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

What should be declared:

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

Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days.

**Loyalty interests**

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

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

What should be declared:

- Staff name and their role with the organisation;
- Nature of the loyalty interest;

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

Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days.

**Donations**

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

What should be declared:

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

**Sponsored events**

- Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in a clear benefit to the organisation and the NHS;
- During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation;

- No information should be supplied to the sponsor from whom they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied;
- At the organisation's discretion, sponsors or their representatives may attend or take part in the event but they should not have a dominant influence over the content or the main purpose of the event;
- The involvement of a sponsor in an event should always be clearly identified;
- Staff within the organisation involved in securing sponsorship of events should make it clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event;
- Staff arranging sponsored events must declare this to the organisation.

What should be declared:

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

**Sponsored research**

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

What should be declared

- The organisation will retain written records of sponsorship of research, in line with the above principles and rules.

Staff should declare:

- Their name and their role with the organisation;

- Nature of their involvement in the sponsored research;
- Relevant dates;
- Other relevant information (e.g. what, if any, benefit the sponsor derives from the sponsorship, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days

**Sponsored posts**

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

What should be declared

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

Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days.

## Clinical private practice

- Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises\* including:
  - Where they practise (name of private facility);
  - What they practise (specialty, major procedures);
  - When they practise (identified sessions/time commitment).
- Clinical staff should (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):
  - Seek prior approval of their organisation before taking up private practice;
  - Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.†;
  - Not accept direct or indirect financial incentives from private providers other than those allowed by Competition and Markets Authority guidelines:  
[https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment\\_Order\\_amended.pdf](https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf)
- Hospital Consultants should not initiate discussions about providing their Private Professional Services for NHS patients, nor should they ask other staff to initiate such discussions on their behalf.

### What should be declared:

- Staff name and their role with the organisation;
- A description of the nature of the private practice (e.g. what, where and when staff practise, sessional activity, etc);
- Relevant dates;
- Any other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

### Staff should:

- Complete the declaration form available [online](#) or by using the form at Appendix 2 and submit to the Company Secretary within 28 days

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

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

## **4 HOW TO MANAGE INTERESTS – ADVICE IN SPECIFIC CONTEXTS**

### **Strategic decision making groups**

4.1 In common with other NHS bodies Yeovil District Hospital NHS Foundation Trust uses a variety of different groups to make key strategic decisions about things such as:

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

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

- Trust Board;
- Audit Committee;
- Board of Trustees;
- Governance Assurance Committee;
- Financial Resilience and Commercial Committee;
- Medicines Management Group;
- Medical Devices Committee
- Tender Evaluation Teams

4.3 These groups should adopt the following principles:

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

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

- Requiring the member to not attend the meeting;
- Excluding the member from receiving meeting papers relating to their interest;

- Excluding the member from all or part of the relevant discussion and decision;
- Noting the nature and extent of the interest, but judging it appropriate to allow the member to remain and participate;
- Removing the member from the group or process altogether.

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

### **Procurement**

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

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

## **5 EXTERNAL WORK AND PROJECTS**

5.1 As a general principle any financial gain resulting from external work where use of Trust time or title is involved (e.g., speaking at training events/conferences, writing articles etc.) and/or which is connected with Trust business will be forwarded to the Company Secretary.

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

5.3 Approval from the appropriate line manager should be sought prior to entering into an obligation to undertake external work connected with the business of the Trust, e.g. writing articles for publication, speaking at conferences.

5.4 Where the undertaking of external work, gaining patent or copyright or the involvement in innovative work, benefits or enhances the Trust's reputation or results in financial gain for the Trust, consideration will be given to rewarding employees subject to any relevant guidance for the management of Intellectual Property in the NHS issued by the Department of Health.

## 6 POLITICAL ACTIVITIES

- 6.1 Any political activity should not identify an individual as a Trust employee. 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.
- 6.2 Political canvassing on Trust premises will not be permitted.

## 7 PERSONAL CONDUCT

### Lending or borrowing

- 7.1 The lending or borrowing of money between staff should be avoided, whether informally or as a business, particularly where the amounts are significant.
- 7.2 Staff should never lend money to or borrow money from patients whether informally or as a business, whether the amounts are small or significant.
- 7.3 It is a particularly serious breach of Trust policy for any member of staff 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.

### Gambling

- 7.4 No member of staff may bet or gamble when on duty or on Trust 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.

### Trading on official premises

- 7.5 Trading on Trust premises is prohibited, whether for personal gain or on behalf of others **unless with written approval by the Director of Finance**. Canvassing within the office by, or on behalf of, outside bodies or firms (including non-Trust interests of staff or their relatives) is also prohibited. Trading does not include small tea or refreshment arrangements solely for staff.

### Collection of money

- 7.6 With line management agreement, collections may be made among immediate colleagues and friends to support small fundraising initiatives, such as raffle tickets and sponsored events. Permission is not required for informal collections amongst immediate colleagues on an occasion like retirement, marriage or a new job.

**DECLARATION OF INTERESTS FORM (INCLUDING GIFTS, HOSPITALITY AND SPONSORSHIP)**

Declarations should be made using the [electronic form](#).

In situations where this is not possible, the following form may be used for making declarations. Forms should be returned to the Company Secretary at: Management Office, Yeovil District Hospital, Higher Kingston, Yeovil, BA21 4AT Email: [Benjamin.edgar-attwell@ydh.nhs.uk](mailto:Benjamin.edgar-attwell@ydh.nhs.uk)

Personal Details	
Name (please print)	
Job Title and Department	

Description of Interest						
	Tick here for a "nil" return against interests which are N/A.	Description of the interest	Value	Name of Provider	Date of receipt / to-from	Any other relevant information
<a href="#">Gifts</a>						
<a href="#">Hospitality</a>						
<a href="#">Outside/Secondary Employment</a>						

<a href="#"><u>Shareholdings and Other Ownership Issues</u></a>						
<a href="#"><u>Patents</u></a>						
<a href="#"><u>Loyalty Interests</u></a>						
<a href="#"><u>Donations</u></a>						

<a href="#"><u>Sponsored Events</u></a>						
<a href="#"><u>Sponsored Research</u></a>						
<a href="#"><u>Sponsored Posts</u></a>						
<a href="#"><u>Clinical Private Practice</u></a>						

The information submitted will be held by **Yeovil District Hospital NHS Foundation Trust** for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that **Yeovil District Hospital NHS Foundation Trust** holds.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to **Yeovil District Hospital NHS Foundation Trust** as soon as practicable and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, internal disciplinary, or professional regulatory action may result.

**Signed:** ..... **Date:** .....

Authorisation of Line Manager				
<b>Name</b>				
<b>Approved</b>	<b>Yes</b>		<b>No</b>	

What actions have you taken, if any, to mitigate the conflict of interest:

**Signed:** ..... **Date:** .....

## REFUSAL OF GIFTS AND HOSPITALITY – LETTER TEMPLATE

Yeovil District Hospital  
Higher Kingston  
Yeovil  
Somerset  
BA21 4AT

**Recipients Address**

**RE: Gifts and Hospitality**

Dear

[I/We] would like to thank you for your thoughtfulness in gifting [insert item] that you [sent/gave] to [insert name]. Unfortunately it is the policy of Yeovil District Hospital NHS Foundation Trust that gifts and hospitality over the value of £50 cannot be accepted however well intended. Gifts and hospitality from suppliers or contractors with the hospital are to be declined whatever their value.

The hospital adopts a strict policy on the receipt of gifts and hospitality in line with public service values, which underpin the work of Yeovil District Hospital NHS Foundation Trust and reflects current guidance for public organisations.

We are sorry for any inconvenience this may cause you and would like to thank you once again for your kind offer.

Yours sincerely

**NAME**  
**TITLE**

## ANNEX A – EQUALITY IMPACT ASSESSMENT TOOL

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes / No / N/A	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	Race	No	
	Ethnic origins (including gypsies and travellers)	No	
	Nationality	No	
	Gender	No	
	Culture	No	
	Religion or belief	No	
	Sexual orientation including lesbian, gay and bisexual people	No	
	Age	No	
	Disability	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	N/A	
4.	Is the impact of the policy/guidance likely to be negative?	N/A	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this procedural document, please refer it to the Trust's lead for Equality & Diversity, together with any suggestions as to the action required to avoid / reduce this impact.

For advice in respect of answering the above questions, please contact the Trust's lead for Equality & Diversity.

**Signed** – Name: Ben Edgar-Attwell

Date: 20 November 2020