

Trust Board Meeting in Public: Wednesday 8 September 2021

TB2021.72

Title: **Declarations of Interests, Gifts, Hospitality and Sponsorship Policy**
 (Identifying and Managing Conflicts of Interest)

Status: **For Decision**
History: **TB2017.113**

Board Lead: **Chief Assurance Officer and Chief Finance Officer**
Author: **Susan Polywka, Corporate Governance Consultant**
Confidential: **No**
Key Purpose: **Assurance, Policy**

Executive Summary

1. This paper presents the proposed revised and updated Trust Policy on Declarations of Interests, Gifts, Hospitality and Sponsorship (Identifying and Managing Conflicts of Interest). The full draft Policy is attached at **Appendix 1**.
2. The Policy has been revised and updated to ensure that it is fully compliant with the latest guidance¹ issued by NHS England [NHSE], and that its provisions are consistent with those of NHSE's model policy², incorporated within the Trust's current policy template. The opportunity has also been taken to refer to the Trust's Local Counter-Fraud Specialists (TIAA), in particular as part of the Fraud Risk Assessment which covered compliance with the Bribery Act, 2010.
3. The revised and updated Policy on Declarations of Interests, Gifts, Hospitality and Sponsorship (Identifying and Managing Conflicts of Interest) aims to clarify what should be declared, how and when declarations should be made, and how any actual or potential conflicts of interest that are identified should be managed.
4. Under the Scheme of Delegation, the Policy requires approval by the Board.
5. The Policy has been considered by the Trust Management Executive [TME], which recommends that the Policy be approved by the Board.
6. To support successful implementation and monitor on-going compliance with the Policy, TME endorsed the plan (subject to development and due approval of the business case) to procure a software package that will facilitate the electronic submission of declarations, and maintenance of an on-line Register for scrutiny.
7. The Policy will be supported by a communications and implementation plan developed under the guidance of the Director of Communications, to ensure that the newly revised Policy is widely publicised throughout the Trust. Particular attention will be paid to providing support and guidance on how the Policy should be put into operation in practice; and how the Policy links in with other policies, systems and processes in the Trust.
8. Material available on the OUH intranet in support of the process for declaring and managing interests will be revised and updated as appropriate.

Recommendations

9. The Trust Board is asked to:
 - **Approve** the revised Declarations of Interests, Gifts, Hospitality and Sponsorship (Identifying and Managing Conflicts of Interests) Policy at **Appendix 1**.

¹ NHS England, Managing Conflicts of Interest in the NHS, 2017 found [here](#)

² NHS England, Managing conflicts of interest – Model Policy, 2017 found [here](#)

Declarations of Interests, Gifts, Hospitality and Sponsorship Policy (Identifying and Managing Conflicts of Interest)

1. Purpose

- 1.1. This paper presents the proposed revised Trust Policy on Declarations of Interests, Gifts, Hospitality and Sponsorship (Identifying and Managing Conflicts of Interest). The full draft Policy is attached at **Appendix 1**.

2. Background

- 2.1. The Trust's current Policy is due for review, subject to approval by the Board. In undertaking the review, the Policy has been revised and updated to ensure that it is fully compliant with the latest guidance issued by NHSE, and that its provisions are consistent with those of NHSE's model policy, incorporated within the Trust's current policy template.
- 2.2. Consideration has been given to briefing published by NHS Providersⁱ, working with NHSE and NHS Improvement to encourage increased compliance across the NHS.
- 2.3. The opportunity has also been taken to refer to the Trust's Local Counter-Fraud Specialists (TIAA), in particular as part of the Fraud Risk Assessment recently undertaken by TIAA for the Trust, which covered compliance with the Bribery Act, 2010.
- 2.4. Proposed revisions to the Policy have been developed under the direction of the Chief Finance Officer and Chief Assurance Officer, and in consultation with key stakeholders.
- 2.5. No decision taken by or on behalf of the Trust should be influenced by factors other than the public interest. Proper recording and publishing of potential conflicts of interest is central to evidencing an open, transparent culture.

3. Revising and updating the Policy

- 3.1. Provisions have been systematically tested to check that they comply fully with the latest guidance issued by NHSE. Wording has been adopted that is consistent with the provisions of the NHSE's model policy, within the Trust's current policy template.
- 3.2. In line with the overarching spirit of NHSE Guidance, the revised and updated Policy aims to clarify what should be declared, how and when declarations should be made, and how any actual or potential conflicts of interest that are identified should be managed.

Changes to existing policy

- 3.3. Changes have been made to the existing policy to augment the Trust's ability to identify and manage actual and potential conflicts of interest, specifically through introducing and/or strengthening provisions that:
- Emphasise **individual responsibility** regularly to consider what interests are held, and to declare any interests as they arise;
 - Expand and **clarify guidance**, in line with NHSE Guidance, on how to identify and manage interests **relating to gifts, hospitality and sponsorship** (refer to *paras* 49-76 of policy), noting that:
 - Subject to the requirement to resist undue influence, non-cash gifts from patients and relatives that are valued at under £50 need not be declared;
 - Any offer of meals/refreshments valued over £25 should be declared, as should any offer to pay for travel and accommodation;
 - The acceptance of sponsorship (refer to *para* 63 et seq of the policy), should be consistent with principles applied by [TheHill](#), and subject always to compliance with the Trust's Standing Financial Instructions;
 - **Clarify guidance** on an expanded range of situations where interests may need to be managed, including in relation to:
 - **loyalty interests** (refer to *paras* 18 and 99-101 of policy)
 - **shareholdings** (refer to *paras* 94-98 of policy)
 - other common situations, as covered in NHSE Guidance, including **clinical private practice** and other **outside employment; patents; and donations** (refer to *para* 77 et seq of policy)
 - Expand and clarify provision to **deter and detect fraud, bribery and corruption in procurement and other strategic decision-making processes, including commercial decisions** (refer to *paras* 42-48 of policy), in particular through
 - The requirement to make the **Register available for scrutiny at the start of any procurement process**, and during any commercial decision or other strategic decision-making process (*para* 42 et seq);
 - Introduce an express requirement (in line with NHSE Guidance) that staff defined as **decision-makers** (refer to *paras* 25-27 of

policy) should at least **annually review and update** their declaration of interests, or submit a nil return; please note

- The aim will be to link this with staff's annual appraisals;
- Introduce a **commitment to publish the register** of interests declared by all decision-makers (in line with NHSE Guidance);
- **Specify** what **management action** should be considered where there is (or may be) a conflict of interest (refer to *paras* 29-31 of policy).

4. Implementing the Policy and Monitoring Compliance

4.1. Under [Government Functional Standard 013 for Counter Fraud Component 12](#) the Trust must:

- Have a policy for managing conflicts of interest; and
- Have a register that includes gifts and hospitality with reference to fraud, bribery and corruption and the requirements of the Bribery Act 2010; and
- Be able to show that effectiveness of the implementation of the process and staff awareness of the requirements of the Policy is regularly tested.

To meet this requirement in full, it is advised that the Trust must be able to show that the Policy is:

- Proactively communicated to staff;
- Fully implemented and demonstrably effective; and that
- Levels of staff awareness of the policy - and of the register - are measured by the Trust; using results to determine if there is a need to raise staff awareness further.

4.2. Under Standard 3.5 of [NHS Counter Fraud Authority Standards for NHS Providers 2020 21 \(Fraud bribery and corruption\)](#) the Trust must:

- Have proportionate processes in place for preventing, deterring and detecting fraud, bribery and corruption in procurement

To meet this standard in full, it is advised that the Trust must be able to show that:

- Conflict of interest declarations and declarations of gifts and hospitality are regularly received from staff engaged in procurement related activities, and any necessary actions are subsequently taken; and

- There is evidence to indicate that measures to combat fraud, bribery and corruption in procurement, including staff awareness, are regularly and soundly evaluated and that, where appropriate, findings lead to improvements in the measures.
- 4.3. To achieve successful implementation of the Policy, and adequately monitoring on-going compliance, TME has endorsed the plan (subject to development and due approval of the business case) to procure a software package that will facilitate the electronic submission of declarations, and maintenance of an on-line Register for scrutiny.

5. Communication and Implementation Plan

- 5.1. Subject to approval of the Board, implementation of the Policy will be supported by a communications and implementation plan developed under the guidance of the Director of Communications, to ensure that the newly revised Policy is widely publicised throughout the Trust.
- 5.2. Particular attention will be paid to providing support and guidance on
- how the Policy should be put into operation in practice, which may include, e.g.
 - encouraging staff to consider whether they should enter into early dialogue with colleagues/managers as soon as they are actively considering acquiring an outside interest (e.g. by taking up another role, or stake in an another organisation)
 - how the Policy links in with other policies, systems and processes in the Trust.
- 5.3. Material available on the OUH intranet in support of the process for declaring and managing interests will be revised and updated as appropriate.

6. Conclusion

- 6.1. There is no reason to believe that any decisions taken by or on behalf of the Trust have been or are being influenced by factors other than the public interest.
- 6.2. However, it is still important to demonstrate that any actual or potential conflicts are being identified and properly managed. Proper recording and publishing of potential conflicts of interest is central to evidencing the open, transparent culture that the Trust strives to maintain.
- 6.3. The revised Policy is fully compliant with the latest guidance issued by NHSE, and is consistent with the provisions of NHSE's model policy.

- 6.4. If the Policy is fully implemented, and subject to monitoring on-going compliance, the Trust should be able to demonstrate compliance with relevant counter-fraud standards.

7. Recommendations

7.1. The Trust Board is asked to:

- **Approve** the revised Declarations of Interests, Gifts, Hospitality and Sponsorship (Identifying and Managing Conflicts of Interests) Policy at **Appendix 1**.

ⁱ NHS Providers, Managing Conflicts of Interest, September 2019 found [here](#)

Declaration of Interests, Gifts, Hospitality and Sponsorship Policy

(Identifying and Managing Conflicts of Interest)

Category:	Policy
Summary:	This policy outlines the standards of conduct expected of all Trust staff, including all members of the Board, regarding the identification and management of any actual or potential conflict between their private interests and public service duties. This policy also provides a mechanism for declaring, recording and monitoring interests, gifts, hospitality and sponsorship.
Equality Impact Assessed:	July, 2021.
Valid From:	September, 2021 - tbc
Date of Next Review:	September, 2024
Approval Date/ Via:	8 September, 2021 subject to approval by the Trust Board
Distribution:	Trust-wide
Related Documents:	Counter Fraud & Bribery Policy and Reporting Procedures, Standing Orders, Standing Financial Instructions, Raising Concerns (Whistleblowing) Policy Human Resources Policies, including Home Working Policy
Author(s):	Corporate Governance Consultant
Further Information:	Contact via company.secretary@ouh.nhs.uk
This Document replaces:	Declarations of Interests, Declaration of Gifts, Hospitality and Sponsorship Policy v2.1 issued in November 2017

Lead Director: Chief of Assurance

Issue Date: tbc

This document is uncontrolled once printed.

It is the responsibility of all users to this document to ensure that the correct and most current version is being used.

This document contains many hyperlinks to other related documents.
All users must check these documents are in date and have been ratified appropriately prior to use.

Document History

Date of revision	Version number	Author	Reason for review or update
10 April, 2017	V2.0	Corporate Governance Manager	Policy reviewed and revised in the light of initial NHS England [NHSE] Guidance issued to CCGs in February 2017.
24 October, 2017	V2.1	Head of Corporate Governance	Revised and updated Policy submitted for approval by the Board.
8 February, 2021	v.3	Corporate Governance Consultant	Policy reviewed to ensure full compliance with relevant NHSE Guidance; draft Policy circulated for consultation.
July/August, 2021	V3.1	Corporate Governance Consultant	Draft Policy updated, taking into account comments elicited through consultation.
12 August, 2021	V3.2	Corporate Governance Consultant	Revised and updated Policy endorsed by TME.
8 September 2021	V3.3	Corporate Governance Consultant	Revised and updated Policy to be submitted for approval by the Board.

Consultation Schedule

Who? Individuals or Committees	Rationale and/or Method of Involvement
Financial Consultant and Anti-Crime Specialist	Shared initial draft to elicit comments on adequacy of provision; in particular for declaration of shareholdings and loyalty interests
Director of Procurement and Supply Chain	Shared draft to elicit comments on adequacy of provision; in particular to ensure and protect the integrity of the procurement process
Director of Pharmacy	Shared draft to elicit comments on adequacy of provision; to ensure that the policy will support compliance with wider transparency initiatives such as the ABPI Disclosure UK scheme ⁱ
Director of Communications	Shared draft to elicit general comments, and in particular to seek advice in developing communications plan
Trust Management Executive [TME]	Submitted for approval at meeting of TME held on 12 August, 2021
Trust Board	<i>To be submitted for approval at meeting of the Trust Board held in public on 8 September, 2021</i>

Endorsement

Endorsee Job Title
Financial Consultant and Anti-Crime Specialist
Deputy Director of Finance, Technical and Development
Director of Procurement and Supply Chain
Commercial Director
Programme Director, TheHill
Director of Pharmacy
Chief Finance Officer
Chief Assurance Officer
Executive Directors and Divisional Directors at TME

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Declaration of Interests, Gifts, Hospitality and Sponsorship Policy (Identifying and Managing Conflicts of Interest)

Who should read this document?

1. This policy should be read by all staff in the Trust. Responsibilities under the policy are summarised at **Appendix 1**.

Key Messages

2. **Always act in the public interest** NHS England Guidance emphasises that, in public services, decision makers must act in the public interest and be seen to do so. The Trust is accountable for the decisions it takes, and is committed to operating in an open and impartial manner. All decision-makers acting for or on behalf of the Trust must act free from the influence of any factors that may be in conflict with the interests of the Trust. The Trust must be able to demonstrate that all of its dealings are conducted to the highest standards of integrity and probity and that NHS monies are used wisely, so that finite resources are used appropriately and always in the best interests of patients.
3. **Potential conflicts of interest must be identified in order that they can be properly managed.** This policy establishes a framework to declare and manage any actual or potential conflict that may arise between the private interests and public duties of anybody who is working with, for or on behalf of the Trust; whether on a permanent, occasional, temporary or 'interim' basis. **All those who are engaged by, for or on behalf of the Trust are expected to adhere to the standards set**This requirement applies to all employees, 'office holders', contractors, sub-contractors and agents, those who hold an honorary contract, and those who otherwise may be regarded as representing the Trust whether or not directly employed or engaged by the Trust. [All such are hereafter referred to as "staff"].
4. **Every individual is responsible for regularly considering what interests they have and for declaring any interests as they arise**, as is advised in NHS England Guidance, in which it is also made clear that, if an individual is in any doubt as to whether a declaration is required in any given circumstances, they should make a declaration.
5. **All staff are required to observe the principles of good governance** in the way that Trust business is conducted and to comply with this policy as well as with Standing Orders and Standing Financial Instructions.
6. **All public office-holders must adhere to the Seven Principles of Public Life** (the 'Nolan Principles'ⁱⁱ), as is advised in NHS England Guidance:
 - **Selflessness:** Holders of public office should act solely in terms of the public interest.
 - **Integrity:** Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.
 - **Objectivity:** Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.
 - **Accountability:** Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.
 - **Openness:** Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.
 - **Honesty:** Holders of public office should be truthful.
 - **Leadership:** Holders of public office should exhibit these principles in their own

behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.

Background/Scope

7. The standard NHS contract 2016/17 introduced an express requirement that healthcare providers must ensure that staff declare all actual or potential conflicts of interest and offers of gifts, hospitality or sponsorship.
8. Guidance on Managing Conflicts of Interest in the NHS was published by NHS England in June 2017ⁱⁱⁱ.
9. Under the Bribery Act 2010, the acceptance of gifts, hospitality, preferential treatment in private transactions, sponsorship or loyalty schemes as an incentive for entering into business transactions is specifically prohibited. In addition, the Bribery Act also created a corporate offence of failing to prevent bribery and members of the Trust Board may be liable if it cannot be demonstrated that the Trust has adequate procedures in place to prevent bribery.
10. Gifts, hospitality and sponsorship offered where there is no possibility that their acceptance could act as an incentive to act dishonestly, or in breach of the law, will not constitute a bribe, but may still need to be refused (see further paragraphs 49 *et seq* below).
11. The Trust's Counter Fraud & Bribery Policy and Reporting Procedures specify the process of investigating any suspected fraud, bribery and corruption, and gives instruction to staff about what to do, and whom to contact if they have any fraud related concerns.

Aims of the Policy

12. This policy aims:
 - 12.1. to ensure that the Trust is open, transparent and honest in the way it conducts its business, and to ensure that all members of staff operate in an open and impartial manner (and that they can be seen to do so); and
 - 12.2. to identify and manage any actual or potential conflict of interest that may arise between the private interests and public duties of NHS staff, including all members of the Board, by ensuring that there is:
 - 12.2.1. A clear and **consistent set of principles and rules**, to support good judgement about how to approach and manage interests;
 - 12.2.2. A clear **mechanism** for all staff, including all members of the Board, to **declare interests, gifts, hospitality and sponsorship**; and
 - 12.2.3. A clear **framework** for **maintaining and reviewing the Registers** of Interests, Gifts, Hospitality and Sponsorship, and for **managing conflicts of interest**.

Interests

13. At the earliest opportunity (and in any event within 28 days) **all staff must** declare any personal, professional or business interest which may conflict with their official duty, or may be seen to compromise their personal integrity in any way, This may include an interest held by a close member of their family (as defined in Appendix 2).
14. A 'conflict of interest' is defined as:

"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."

15. 'Interests' can arise in a number of different contexts, *for example* in connection with a role or position held in another organisation, the ownership of assets, or benefit gained through sponsorship, hospitality or gift.
16. Interests may fall into the following categories:
 - 16.1. **Financial interests:** Where an individual may get direct financial benefit (either by making a gain or avoiding a loss) from the consequences of a decision they are involved in making;
 - 16.2. **Non-financial 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;
 - 16.3. **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;
 - 16.4. **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 who would stand to benefit from a decision they are involved in making.
17. The starting point for **interests which are regarded as "relevant and material"** and which must be declared, is provided in NHS England Guidance. Although not exhaustive, they may include:
 - 17.1. Directorships, including Non-Executive Directorships held in private companies or public limited companies (PLCs), including dormant companies, and including any directorship from which an individual has resigned within 28 days of taking up appointment at the Trust ;
 - 17.2. Ownership of publicly traded or privately traded investments in which the Trust also holds shares;
 - 17.3. Ownership or part-ownership of publicly-traded investments, private companies, business or consultancies likely or possibly seeking to do business with the NHS;
 - 17.4. Majority or controlling share holdings in organisations likely or possibly to do business with the NHS;
 - 17.5. A position of authority in a charity or voluntary organisation in the field of health and social care;
 - 17.6. Any connection with a voluntary or other organisation contracting for NHS services;
 - 17.7. Research funding/grants that may be received by an individual or their department;
 - 17.8. Interests in pooled funds that are under separate management;
 - 17.9. Royalties, licence fees or other similar payments that may be received by an individual or their department.
18. Interests which should be declared also include "**loyalty interests**", which are defined as those which relate to:
 - 18.1. a position of authority held 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 (including a position as a local County Councillor, District Councillor or Parish Councillor and including any position of authority at any body that is a member of the local integrated care system);
 - 18.2. participation in an advisory group or other paid or unpaid decision-making forum that can influence how an organisation spends taxpayers' money (including decision-making groups of an Integrated Care System);
 - 18.3. involvement in the recruitment or management of close family members and relatives, close friends and associates, and business partners (refer to Definitions in **Appendix 2**);

18.4. awareness that the Trust does business with an organisation in which close family members and relatives, close friends and associates, or business partners have decision making responsibilities.

19. There may be further, specific situations where the requirement to make a declaration of interest needs to be extended to that of a close relative, close friend or close business or professional associate (as defined in **Appendix 2**). A judgement may have to be made in individual circumstances regarding the appropriateness for a declaration to be made, for example:

19.1. when a close relative, friend or professional associate owns publicly traded or privately traded investments in which the Trust also holds shares; or

19.2. when the closeness of a connection may be perceived to have a bearing on a specific contractual situation or set of circumstances.

20. If a member of staff is in doubt as to whether the interest of a close family member, friend or close business or professional associate should be declared, advice should be sought from the Head of Corporate Governance.

Process for declaring interests

21. The process for making a declaration of interest may be accessed on the OUH intranet [here](#). Those without access to the OUH intranet should contact their line manager in the first instance. Advice may be sought from the Head of Corporate Governance via email sent to declarations@ouh.nhs.uk or to company.secretary@ouh.nhs.uk

21.1. Every member of staff (as defined in paragraph 3) is responsible for regularly considering what interests they have and for declaring any interests as they arise. In particular, declarations of any relevant and material interest should be made:

- On appointment;
- When moving to a new role or changing responsibilities significantly;
- At the beginning of any significant new project or piece of work which will have a bearing on how taxpayers' money is to be spent;
- Upon a change in circumstances which might give rise to new interests, and every member of staff is encouraged to consider whether they should enter into early dialogue with colleagues/managers as soon as they are actively considering a change in circumstances which might give rise to new interest (e.g. by taking up another role, or stake in an another organisation)

21.2. An offer of a gift, hospitality or sponsorship should be declared at the time of receipt.

21.3. **Decision-makers** (as defined under paragraphs 26-27 below) will be asked explicitly to confirm whether or not they have any relevant and material interests to declare:

21.3.1. At the beginning of any new role, project or piece of work in which they will be acting as decision-makers, ie having a bearing on how taxpayers' money is spent;

and in any event

21.3.2. At least once a year.

21.4. Declaration of interests should be **a standing item on meeting agendas**. All material interests that may be relevant to any item under discussion should be declared and recorded in the minutes of the meeting (and submitted for inclusion in the Register of Interests if not previously declared). The Chair of the meeting will generally be responsible for taking the appropriate course of action to manage any conflict of interest (in accordance with paragraph 30 below). Where the Chair is conflicted, non-conflicted attendees should consider how the

conflict of interest should be managed, and if in doubt should refer to the Head of Corporate Governance.

21.5. In **any procurement process, commercial decision or other strategic decision-making process** all individuals who are involved in the process (whether or not they would generally come within the definition of ‘decision-maker’ under paragraphs 26-27 below) should declare any material interest that could have a bearing (whether actual or perceived) on the decision (see further under paragraphs 42-48 below).

22. Whenever a declaration of interest is made, consideration should be given to whether the interest may give rise to a conflict and, if so, what management action should be taken in accordance with paragraph 30 below.
23. All staff must declare interests in line with this policy. A failure to declare a relevant and material interest may give rise to disciplinary action and, in certain circumstances, may render the individual and/or the Trust liable to criminal proceedings for bribery, fraud or corruption.
24. In case of doubt as to what to declare, and how, advice should be sought from the Head of Corporate Governance, who may be contacted *via* company.secretary@ouh.nhs.uk .

Decision-making staff

25. Anyone working with, for or on behalf of the Trust must ensure that any decisions they make in the course of their work are free from the influence of any factors that may be in conflict with the interests of the Trust.
26. NHS England Guidance recognises that there are staff whose role means that they may be more likely than others to have a decision-making influence on the use of taxpayers’ money ; they are defined as “decision-making staff”. As such, they should at least once a year review and update their declarations of interests, gifts, hospitality or sponsorship, or make a nil return, and will be prompted annually to do so.
27. NHS England Guidance advises that decision-making staff are likely to include:
 - Members of the Trust Board;
 - All members of the Trust Management Executive;
 - Those at Agenda for Change Band 8d and above or equivalent, including all Medical and Dental Consultants^{iv};
 - Any member of staff (at any grade) who has the authority to enter into a contract on behalf of the Trust;
 - Administrative and clinical staff at any grade who are involved in decision-making concerning funding allocation, investment decisions and investment management, the commissioning of services, purchasing of goods, medicines, medical devices or equipment and formulary decisions.

Staff who are subject to wider transparency initiatives

28. Staff who are subject to wider transparency initiatives such as the ABPI Disclosure UK scheme^v must comply with them.

Management action where there is (or may be) a conflict of interest

29. Paragraphs 42-48 below make further express provision for managing any actual or potential conflict of interest that may arise in relation to a procurement decision and other strategic decision-making processes including all commercial decisions.
30. In general, any interest declared should be considered initially by the line manager of the individual who has made the declaration and if it is considered to give rise to any actual or potential conflict with the interests of the Trust, the line manager should decide on the most appropriate course of action. In line with NHS England Guidance, this may include:

- 30.1. deciding that no action is warranted at this time;
- 30.2. restricting the individual's involvement in discussions and excluding them from decision making in relation to a matter in which they have declared an interest;
- 30.3. removing an individual from the whole of any decision-making process relating to a matter in which they have declared an interest;
- 30.4. removing an individual's responsibility for an entire area of work (if it relates to a matter in which they have declared an interest); or
- 30.5. requiring an individual to relinquish the interest declared, if the conflict is so significant that they would be unable to operate effectively in their Trust role; or to remove the individual from their Trust role, if they are unwilling to relinquish the conflicting interest.
- 30.6. The line manager of the individual who has made a declaration should seek support from senior management as and where appropriate, and advice may also be sought from the Head of Corporate Governance. The involvement of an individual in a particular matter may be paused, pending the outcome of referral to more senior management within the directorate or division, or ultimately to Executive Directors and the Board, as may be advised by the Head of Corporate Governance.

31. In all cases, an audit trail of the actions taken should be kept and recorded on the declaration submitted.

Managing conflicts of interest at the Board

32. It is a requirement for all members of the Board to declare any personal or business interests they may have which may affect, or be perceived to affect, the conduct of their role. This includes any interest that may influence, or be perceived to influence, their judgment in the course of conducting the Board's business.
33. Members of the Board must notify the Head of Corporate Governance of any such interests at the time of their appointment, and any further interests as they arise through their tenure as Board Members. Members of the Board must also declare any interests held by family members or people or bodies with which they are connected. In the case of Non-Executive Directors, any interest declared should be considered by the Chair.
34. Members of the Board will be prompted annually by the Head of Corporate Governance to review and update their declarations of interests, gifts, hospitality and sponsorship, or to make a nil return.
35. The Head of Corporate Governance will provide advice to the Trust Chair as to what should be considered a material interest, taking account of regulatory requirements. If individual members of the Board are in any doubt about what may be considered a material interest that should be declared, they should seek advice from the Head of Corporate Governance. The onus will rest on each individual member of the Board to declare any interest that could give rise to a conflict with the interests of the Trust.
36. Further information on the declaration of interests, including declaring interests at meetings of the Trust Board, can be found in the Trust's Standing Orders and may be requested from the Head of Corporate Governance.

Maintaining the Registers of Interests, Gifts, Hospitality and Sponsorship

37. The Head of Corporate Governance will ensure that a Register is established and maintained as a formal record of
 - 37.1. all interests declared by staff, including all members of the Board; including
 - 37.2. all declarations made in relation to gifts, hospitality and sponsorship.
38. The Register(s) will be maintained in two parts: Part I relating to all members of the Board;

and Part II including declarations made by other decision-making staff. In line with NHS England Guidance, the declarations of all decision-makers will be published. The Register(s) relating to members of the Board will be published in the Trust's Annual Report which will be available on the Trust's website, as will a link to Part II of the Register(s).

39. If a change to details recorded on the Register(s) arises during the year, it is the individual staff member's responsibility to notify the Head of Corporate Governance at the earliest opportunity (and in any event within 28 days), using the process accessed on the OUH intranet [here](#), so that any conflict between private and public interests can be managed appropriately.
40. At least once a year, after all members of the Board and other decision-making staff have reviewed and updated their declarations of interests, gifts, hospitality and sponsorship, or made a nil return, the Head of Corporate Governance will review the Register(s) to ensure that there is an accurate and comprehensive record of all declarations made.
41. In accordance with NHS England's guidance, an interest will generally remain on the Register(s) for a minimum of 6 months after the date of its expiry and a private record of historic interests will be retained for a minimum of six years.

Procurement, Commercial decision-making and other strategic decision-making processes

42. The Trust will seek to ensure that procurement decisions and other strategic decision-making processes including all commercial decisions are managed in an open and transparent manner, with no discrimination against or in favour of any provider.
43. Any 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.
44. At every stage of any procurement or commercial decision-making process, steps must be taken to identify and manage any conflicts of interest, to ensure and protect the integrity of the process. The Register(s) of Interests, Gifts, Hospitality and Sponsorship will be available for scrutiny by the Director of Procurement and Commercial Director, or a delegated member of staff, at the start of any strategic decision-making process.
45. It is the responsibility of individual members of staff to declare any interests which may impact on any part of a procurement, commercial decision or other strategic decision-making process. Where they have already previously declared any such interest(s), they should also draw them to the attention of colleagues who are involved in the specific procurement, commercial decision or other strategic decision-making process.
46. During any procurement, commercial decision or other strategic decision-making process, it is important that the interests of each individual involved are well known to all those who will be involved in making the decision. Depending upon the nature and extent of the interest declared by an individual, it may be judged appropriate to exclude the individual from all or part of the discussion and/or decision, although NHS England's Guidance expressly advises that the default response should not always be to exclude individuals who have declared an interest, as this may have a detrimental effect on the quality of the decision being made.
47. Where an individual involved in a procurement process, commercial decision or other strategic decision-making process
 - has been identified as having an interest which is or may be in significant conflict with the interests of the Trust, and
 - where that may give rise to undue influence on their decision, or may be perceived as so doing

the Manager who is leading the procurement process, commercial decision or other strategic decision-making process must inform the appropriate lead Director (e.g. Director of Procurement, Commercial Director or the Executive Director who is ultimately responsible for the strategic decision to be taken) **and** the Head of Corporate Governance, who will determine to what extent it is appropriate for the individual to continue to be involved in the procurement process, commercial decision or other strategic decision-making process. As is expressly recognised in NHS England's Guidance, in some cases the individual concerned may be vital to the procurement process, commercial decision or other strategic decision-making process e.g. where they are providing specialist advice that cannot easily otherwise be accessed. In such a case, the individual's involvement should be subject to the oversight of a designated senior manager who will be responsible for documenting how they have been satisfied that there has been no undue influence and no discrimination against or in favour of any provider. A record of all decisions must be retained.

48. The Director of Procurement, the Commercial Director and any other Director with ultimate responsibility for a strategic decision-making process will consider whether the relevant Divisional Director and/or Executive Director should be specifically notified that an interest has been declared which may give rise to actual or potential conflict with the interests of the Trust, and whether further consideration needs to be given to taking management action (by reference to paragraph 30 above). Advice may be sought from the Head of Corporate Governance as appropriate.

Gifts, Hospitality and Sponsorship: Managing interests

49. In line with the Bribery Act 2010, employees should refuse gifts, hospitality or sponsorship or benefits from a third party which may compromise or may be seen to compromise their professional position. This may in certain circumstances also include a gift, hospitality or sponsorship offered to a family member.
50. A breach of the provisions of the Bribery Act renders staff liable not only to dismissal but to criminal prosecution under the Act, and a prison term of up to 10 years if convicted.
51. **If the Trust is found to have failed to prevent bribery, it will be guilty of the “corporate offence,” and both the organisation and its directors can receive a sanction including unlimited fines. A “twin track” approach may be used, to prosecute an individual member of staff, and the Trust simultaneously.**
52. Any concerns or suspicions must also be reported to the Anti-Crime Specialist and Chief Finance Officer (refer to the Counter Fraud & Bribery Policy and Reporting Procedures).
53. All staff have a personal responsibility to volunteer information regarding offers of gifts, hospitality and sponsorship, including those offers that have been refused where there are grounds for concern or suspicion that the offer may be construed as an attempt to induce preferential treatment.
54. **Staff should seek approval from their line manager, prior to accepting any offer of gifts, hospitality or sponsorship.** The process for making a declaration of gifts, hospitality or sponsorship may be accessed on the OUH intranet [here](#). Those without access to the OUH intranet should contact the Head of Corporate Governance *via* email sent to declarations@ouh.nhs.uk or to company.secretary@ouh.nhs.uk. The Head of Corporate Governance will ensure that the details of all declarations made are entered on the Register..

Guiding principles

55. It is not possible to make explicit in exactly what situations gifts, hospitality or sponsorship may be considered acceptable. Each offer should be considered independently. In determining whether any offer of a gift, hospitality or sponsorship should be accepted, an individual should consider the following **guiding principles**, endorsed by NHS England:

55.1. **Openness:** It has been openly offered and the offer will not be construed as any form of inducement and will not put the individual under any obligation to those offering it;

55.2. **Legitimate interest:** Regard should be paid to the reason for the contract on both sides and whether it is a contract that is likely to benefit the Trust i.e. further the aims of the organisation;

55.3. **Relationship:** Consideration should be given as to whether the Trust is likely to enter into a contractual relationship with the organisation/individual making the offer, or is currently tendering for a product/service supplied by the organisation/individual;

55.4. **Value:** Gifts and benefits of a trivial or inexpensive seasonal nature e.g. diaries/calendars, are more likely to be acceptable and can be distinguished from more substantial offers. Similarly, hospitality in the form of a working lunch would not be treated in the same way as more expensive social functions, travel or accommodation.

Gifts

56. As is stated in NHS England Guidance, “Staff in the NHS offer support during significant events in people’s lives. For this work they may sometimes receive gifts as a legitimate expression of gratitude. We should be proud that our services are so valued. But situations where the acceptance of gifts could give rise to conflicts of interest should be avoided. Staff and organisations should be mindful that even gifts of a small value may give rise to perceptions of impropriety and might influence behaviour if not handled in an appropriate way. A gift means any item of cash or goods, or any service, which is provided for personal benefit, free of charge, or at less than its commercial value.”
57. Staff should not ask for any gifts and must refuse gifts that may affect, or be seen to affect, their professional judgement or integrity, or which seek to exert influence to obtain a preferential consideration.
58. Staff must not accept gifts, whatever their value, offered by suppliers or contractors or others involved in the procurement process, even if the offer is not in any way connected with the performance of duties or contract so as to constitute an offence under the Bribery Act 2010. In cases of doubt the Head of Corporate Governance should be consulted.
59. Low cost branded promotional aids such as pens or post-it notes offered by suppliers or contractors may however be accepted where they are under the value of £6 in total, and they need not be declared¹.
60. Anybody working with, for or on behalf of the Trust should exercise the utmost discretion in accepting gifts from service users or their relatives. Further **Guidance on accepting and declaring gifts** (in alignment with NHS England Guidance) is provided at **Appendix 1A**.

What to declare in relation to Gifts

61. In line with NHS England Guidance, and subject to paragraphs 57 and 58 above, modest gifts under a value of £50 do not need to be declared, Whenever the offer of a gift worth over £50 (or multiple gifts with an aggregate value of over £50) is accepted, staff should submit a declaration in accordance with the process that may be accessed on the OUH intranet [here](#) following guidance provided at **Appendix 1A**.

Hospitality

62. Hospitality offered may include meals and refreshments, and/or travel and accommodation. In line with NHS England Guidance, staff must refuse hospitality which may compromise or be seen to compromise their professional judgement or integrity, or which seeks to exert influence to obtain a preferential consideration.

¹ selected by NHSE with reference to existing industry guidance issued by the ABPI
<http://www.pmcpa.org.uk/thecode/Pages/default.aspx>

63. Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors; such hospitality may be accepted if it is modest and reasonable but must be declared and it may only be accepted if it has been approved in advance by a senior manager. Further **Guidance on accepting and declaring hospitality** (in alignment with NHS England Guidance) is provided at **Appendix 1B**.

What to declare in relation to Hospitality

64. If a member of staff wishes to accept an offer of meals and refreshments worth over £25, and/or an offer to pay travel and accommodation costs related to attendance at an event, they should submit a declaration in accordance with the process that may be accessed on the OUH intranet [here](#) , following further guidance provided at **Appendix 1B**.

Sponsorship

65. As is expressly recognised in NHSE Guidance, external sponsorship can benefit the Trust. In all cases, sponsors should be selected using criteria to avoid conflicts of interest, subject to the over-arching principle of transparency, and subject always to compliance with the Trust's Standing Financial Instructions.
66. It is noted that [TheHill](#), established as part of the Trust, is a health and care digital transformation catalyst that aims to generate funding through sponsorship, and in collaboration with partners, to secure long-term sustainability and achieve strategic objectives; whilst operating in accordance with the guidance contained in this policy.
67. Under no circumstances may "linked deals" be agreed, whereby any sponsorship is linked to the purchase of particular products or to supply from particular sources. Sponsorship should not fetter the Trust's intellectual property rights.
68. Staff should bear in mind that their acceptance of sponsorship, including attendance at a sponsored event, may preclude them from participating in an adjudication panel or giving advice on purchasing decisions, or other strategic decisions, in the future.
69. Staff should follow the further **Guidance on accepting and declaring sponsorship** (in alignment with NHS England Guidance) which is provided at **Appendix 1C**, whether the offer of sponsorship relates to:
- 69.1. Sponsored events;
 - 69.2. Sponsored research; or
 - 69.3. Sponsored posts.

What to declare in relation to sponsored events

70. Details of the sponsored event should be declared by the member of staff who is the lead organiser (or the lead point of liaison with the external sponsor), in accordance with the process that may be accessed on the OUH intranet [here](#) , following guidance provided at **Appendix 1C**.

What to declare in relation to sponsored research

71. Written records should be retained and individual members of staff who are involved in the sponsored research should make a declaration, in accordance with the process that may be accessed on the OUH intranet [here](#) , following guidance provided at **Appendix 1C**.

What to declare in relation to sponsored posts

72. Details of any sponsored post should be declared by the member of staff who has secured the external sponsorship, in accordance with the process that may be accessed on the OUH intranet [here](#) , following guidance provided at **Appendix 1C**.

Sponsorship from the pharmaceutical or medical technology industries

73. Offers of sponsorship from the pharmaceutical or medical technology industries should be referred to the relevant Divisional Director for consideration and notified to the Commercial Directorate. Offers of sponsorship from other sources may also need to be referred. In determining whether an offer should be accepted or not, the Divisional Director should refer to the Commercial Director where appropriate. They should consider the **guiding principles** in **paragraph 55** above, and should take into account the further specific guidance relating to sponsorship at **Appendix 1C** to the extent that it is relevant. Where sponsorship is accepted, it must be made clear to the company concerned that the sponsorship will have no effect on purchasing or other strategic decisions.
74. All offers of any sponsorship accepted from the pharmaceutical or medical technology industries should be reported annually to the Trust Management Executive [TME], via the Head of Corporate Governance.
75. The pharmaceutical industry is expected to adhere to the ABPI Code of Practice for the pharmaceutical industry which clearly specifies what is and what is not acceptable.
76. No member of staff may enter into individual arrangements for sponsorship with the pharmaceutical or medical technology industries.

Managing interests in other common situations

77. NHS England Guidance sets out principles and rules to be adopted in a range of common situations where interests may need to be managed, and stipulates what should be declared in each situation. Beyond situations where gifts, hospitality and sponsorship are offered, other “common situations” covered in NHS England Guidance include:
 - Outside employment
 - Clinical private practice
 - Patents
 - Shareholdings
 - Loyalty interests
 - Offers of an honorarium; and
 - Donations

Outside employment

78. As is recognised in NHS England Guidance, the involvement of staff in outside employment alongside their NHS roles can be of benefit, but such involvement must be declared so that any conflict of interest can be identified and managed appropriately.
79. In line with NHS England Guidance, (and in addition to the requirements of any other policy, for example in relation to Working Time Regulations), staff should declare any existing outside employment on appointment to their role at the Trust. Any new outside employment which arises during the course of their employment with the Trust must be declared at the point when it arises.
 - 79.1. **Working for NHS Professionals** Shifts worked at the Trust will not be regarded as “outside employment” even if the individual is paid for those shifts by NHS Professionals, (but **NB** such shifts may need to be notified in the context of compliance with Working Time Regulations). Any shifts worked outside the Trust (whether through NHS Professionals, another agency, or in the direct employment of another organisation) will be regarded as “outside employment” which must be declared.

80. Where outside employment may give rise to an actual or potential conflict with interests of the Trust, including where there is any risk that the Trust's intellectual property rights may be diminished, the Trust may require action to be taken to manage the conflict of interest (as outlined in paragraph 30 above). Further advice may be sought from Human Resources.
81. Subject to the terms and conditions of the individual's contract of employment, and compliant with relevant Trust policy, the Trust may require staff to seek prior approval before engaging in outside employment.

What to declare in relation to outside employment

82. Staff should declare any outside employment in accordance with the process that may be accessed on the OUH intranet [here](#) , stating their name and role at the Trust, and providing a description of the nature of their outside employment (including name of employer, duties and time commitment), relevant dates (including expected duration, if known) and any other relevant information e.g. action taken to mitigate any conflict of interest, and details of any approvals given to depart from the terms of this policy.

Clinical private practice

83. As with other outside employment, in addition to the requirements of any other policy (for example in relation to Job Planning), and in line with NHS England Guidance, clinical staff should declare all private practice that they undertake on appointment to their role at the Trust. Any new private practice which arises during the course of their employment with the Trust must be declared at the point when it arises.
84. Any clinical private practice that is undertaken must be undertaken in compliance with Trust policy.
85. In line with NHS England Guidance and the provisions of the NHSE Model Policy, clinical staff should (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):
- 85.1. Seek prior approval from the Trust before taking up private practice;
- 85.2. Ensure that, where there would otherwise be an actual or potential conflict of interest, NHS commitments take precedence over private work;
- 85.3. Not accept direct or indirect financial incentives from private providers other than those allowed by the [Competition and Markets Authority guidelines](#) .
86. In line with NHS England Guidance, 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 to declare in relation to clinical private practice

87. Clinical staff should declare private practice in accordance with the process that may be accessed on the OUH intranet [here](#) , stating their name and role at the Trust, describing the nature of the private practice (e.g. what, where and when they practise, sessional activity etc), relevant dates, and any other relevant information (e.g. action taken to mitigate a conflict, and details of any approval given to depart from the terms of this policy).
88. Specifying details of the nature and location of the work undertaken, its expected duration, hours spent per week/month, and the contractual basis (e.g. whether as employee, or self-employed consultant/contractor).

Patents

89. As is recognised in NHS England Guidance, the development and holding of patents and other intellectual property rights allows staff to protect something that they create, preventing unauthorised use of products or the copying of protected ideas. Staff are encouraged to be innovative in their practice and therefore this activity is welcomed. However, conflicts of interest can arise when staff who hold patents and other intellectual property rights are involved in decision making and procurement. In addition, where product development involves use of time, equipment or resources from their organisation, then this too could create risks of conflicts of interest, and it is important that the organisation is aware of this and it can be managed appropriately
90. In line with NHS England Guidance, staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are ongoing which are, or might be reasonably expected to be, related to items to be procured or used by the Trust.
91. Staff should seek prior permission from the Trust before entering into any agreement with bodies regarding product development, research, work on pathways etc, where this impacts on the Trust's own time, or uses its equipment, resources or intellectual property.
92. Where holding of patents and other intellectual property rights do or may give rise to a conflict of interest then appropriate management action should be considered and applied to mitigate the risks, as outlined in paragraph 29 above.

What to declare in relation to patents

93. Staff should declare patents and any other intellectual property rights held in accordance with the process that may be accessed on the OUH intranet [here](#), stating their name and role at the Trust, and providing a description of the patent or other intellectual property right and its ownership, including relevant dates and any other relevant information e.g. action taken to mitigate any conflict of interest, and details of any approvals given to depart from the terms of this policy.

Shareholdings

94. As is recognised in NHS England Guidance, holding shares or other ownership interests can be a common way for staff to invest their personal time and money to seek a return on investment. However, conflicts of interest can arise when staff personally benefit from this investment because of their role with an organisation. For instance, if they are involved in their organisation's procurement of products or services which are offered by a company they have shares in then this could give rise to a conflict of interest. In these cases, the existence of such interests should be well known so that they can be effectively managed.
95. In line with NHS England Guidance, and the provisions of NHSE's Model Policy, all staff should as a minimum declare any material 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 Trust.
96. Where shareholdings or other ownership interests are declared and give rise to a risk of conflicts of interest then appropriate management action should be considered, as outlined in paragraph 30.
97. In line with the provisions of NHSE's Model Policy, there is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

What to declare in relation to shareholdings

98. Staff should declare shareholdings in accordance with the process that may be accessed on the OUH intranet [here](#), stating their name and role at the Trust, and providing a description of the shareholding or other ownership interest, including relevant dates and any other relevant information e.g. action taken to mitigate any conflict, and details of any approvals given to depart from the terms of this policy.

Loyalty interests

99. As is recognised in NHS England Guidance, as part of their role, staff (including all members of the Board) may need to build strong relationships with colleagues across the NHS and in other sectors. These relationships can be hard to define as they may often fall into the category of indirect interests. They are unlikely to be directed by any formal process or managed via any contractual means, however these 'loyalty' interests can influence decision making. Conflicts of interest can arise when decision making is influenced subjectively through association with colleagues or organisations out of loyalty to the relationship they have, rather than through an objective process. The scope of loyalty interests is potentially huge, so judgement is required for making declarations.
100. In line with NHS England Guidance, and the provisions of NHSE's Model Policy, loyalty interests (as defined in paragraph 18) should be declared by staff involved in decision making where they:
- 100.1. 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.
 - 100.2. Sit on advisory groups or other paid or unpaid decision making forums that can influence how an organisation spends taxpayers' money.
 - 100.3. Are, or could be, involved in the recruitment or management of close family members and relatives, close friends and associates, and business partners.
 - 100.4. 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 to declare in relation to loyalty interests

101. Staff should declare loyalty interests in accordance with the process that may be accessed on the OUH intranet [here](#), stating their name and role at the Trust, and providing a description of the nature of the loyalty interest, including relevant dates and any other relevant information e.g. action taken to mitigate any conflict of interest and details of any approvals given to depart from the terms of this policy.

Offers of Honorarium

102. An honorarium is an ex gratia payment (i.e. one which is made other than on the basis of any legal obligation).
103. The offer of honoraria to a member or members of staff may be made in connection with sponsorship. In some cases, staff may be offered an honorarium for deploying their professional expertise to the benefit of others outside the Trust, e.g. through responding to market research, being interviewed, or delivering a lecture. Wherever a member of staff has received an offer of an honorarium they must consider the appropriateness of acceptance and whether this might be perceived as impacting on their impartiality. Staff should refer to their line manager in the first instance, and advice may be sought from the Head of Corporate Governance .
104. Where a member of staff wishes to accept an honorarium and it is determined to be appropriate that they may do so, they must declare the paid honorarium as "outside

employment” (see further under paragraph 78-82) and the activity in respect of which the honorarium has been offered should be undertaken outwith the individual member of staff’s contracted hours of paid employment by the Trust. (If undertaken within usual “business hours”, then the time should be made up, or taken as leave). The member of staff should note that acceptance of an honorarium may have tax implications and that they will need to make appropriate declarations for tax purposes.

105. An honorarium should be declared in accordance with the process that may be accessed on the OUH intranet [here](#) — stating the member of staff’s name and role at the Trust, and providing relevant information e.g. why it was considered appropriate to accept, whether it could be perceived as impacting on impartiality, and any action taken to mitigate any conflict of interest.

Donations

106. A donation is a charitable financial payment, which can be in the form of direct cash payment or through the application of a will or similar directive. Charitable giving and other donations are often used to support the provision of health and care services. As a major public sector employer the NHS holds formal and informal partnerships with national and local charities. In their private lives, staff may undertake voluntary work or fundraising activities for charity. A supportive environment across the NHS and charitable sector should be promoted. However, conflicts of interest can arise.
107. In line with NHS England Guidance, donations made by suppliers or bodies seeking to do business with the Trust should be treated with caution and should not be routinely accepted. Such donations should never be accepted in a personal capacity and should not routinely be accepted by the Trust. In exceptional circumstances they may be accepted as a donation to the Oxford Hospital Charity but should always be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value.
108. Staff should not actively solicit charitable donations from any source unless this is a prescribed or expected part of their duties for the Trust, or is being pursued on behalf of the Oxford Hospital Charity or other charitable body and is not for their own personal gain.
109. Staff must obtain permission from the Trust if in their professional role they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign for a charity other than the Oxford Hospital Charity.
110. Donations when received should be made to a specific charitable fund of the Oxford Hospital Charity (never to an individual) and a receipt should be issued.
111. Staff wishing to make a donation to a charitable fund of the Oxford Hospital Charity in lieu of receiving a professional fee or honorarium 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.
112. The Trust will maintain records in line with the above principles and rules and relevant obligations under charity law.

Consequences of breaching this Policy

113. In line with NHS England Guidance, action taken in response to breaches of this policy will be in accordance with the Trust’s disciplinary procedures and could involve organisational leads for staff support (e.g. Human Resources), fraud (e.g. Local Counter Fraud Specialists), members of the management or executive teams and organisational auditors.
114. Disciplinary action for gross misconduct may be initiated, after investigation, if any member of staff fails to make a declaration as required under this policy, provides false information or participates in a decision making process where special favour is shown to unfairly award a contract, or if any member of staff otherwise abuses their official position or knowledge for

the purpose of benefit to themselves, family or friends.

115. If staff have any concerns or suspicions that a fraud may have occurred in relation to other staff not declaring gifts, hospitality or sponsorship received or failing to declare an interest, the concern should immediately be reported to the Anti-Crime Specialist and Chief Finance Officer (please refer to the Counter Fraud & Bribery Policy and Reporting Procedures). It should be noted that individuals may also be liable to prosecution under the Fraud Act 2006 or the Bribery Act 2010.

Review

116. This policy will be reviewed every 3 years, as set out in the *Policy for the Development and Implementation of Procedural Documents*.

References

NHS England Guidance on Managing Conflicts of Interest in the NHS, found [here](#)

NHS England Model Policy, found [here](#)

Guidance issued by the Information Commissioner's Office with regard to Freedom of Information legislation, [Home | ICO](#)

ABPI Disclosure UK Scheme details are found [here](#)

Appendix 1: Responsibilities under the Policy

1. **All members of staff** whether acting on behalf of the organisation or in partnership with another organisation must:
 - Be impartial and honest in the conduct of their official business;
 - Ensure that the interest of the service user is paramount at all times;
 - Use the Trust's funds delegated to them to the best advantage of the service, always ensuring value for money;
 - Be open and explicit about companies that offer incentives for awarding or renewing a contract for goods and services. These companies must be excluded from consideration during the tendering process of a contract.
2. In addition, staff including all **members of the Board** are expected to ensure that they **do not**:
 - Abuse their official position for the benefit of themselves, family or friends;
 - Seek to gain advantage for a business or other interest during the course of their official business.
3. It is recommended that where there is doubt, a declaration of interest should be made.
4. **All staff** should adhere to the Seven Principles of Public Life (the 'Nolan Principles'):
 - 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 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.

Who is responsible for what?

1. Under the Bribery Act 2010, **the Trust** must have procedures in place to prevent bribery; and must be able to demonstrate that these procedures are followed.
2. Under procurement law and regulations, **the Trust** must ensure that procurement processes are in place to prevent discrimination against or in favour of any provider of goods, services or equipment; and must be able to demonstrate that these processes are being followed.
3. Under guidance issued by NHS England, **the Trust** must have procedures and processes in place to ensure that potential conflicts of interest are being identified and properly managed, as part of the Trust's commitment to ensuring that all its dealings are conducted to the highest standards of integrity and that NHS monies are used wisely so that finite resources are always used in the best interests of patients.
4. **All members of the Trust Board** have specific duties under the NHS Act 2006, which include:
 - a. A duty to avoid conflict between their own interest(s) and those of the Trust^{vi};
 - b. A duty not to accept in their capacity as a member of the Board any benefit from a third party; and
 - c. A duty to declare an interest in any proposed transaction or arrangement which may give rise to a conflict of interests.
5. **All staff** (including anybody working for, with or on behalf of the Trust – whether on a permanent, occasional or 'interim'/consultancy basis) may have personal interests, but must ensure that a conflict between their personal interests and the interests of the Trust does not inappropriately affect decisions made on the use of taxpayers' money.
6. **All staff** should declare a material interest at the earliest opportunity, and in any event within 28 days of the interest arising, using the process accessed on the OUH intranet [here](#). Common situations in which an actual or potential conflict of interest may arise include – but are not limited to - the receipt of gifts, hospitality or sponsorship, as well as positions held at another organisation or body, and shareholdings in any publicly-listed or private company with which the Trust may do business.
7. **All staff involved in any part of a procurement, commercial decision or other strategic decision-making process** should at the outset of their involvement in the process declare any relevant interests (to their colleagues, and for entry on the Trust's Register).
8. The **Director of Procurement** will be responsible for implementing processes to ensure that any procurement is 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. They will have oversight of the procurement processes to ensure that they are conducted in a manner that does not constitute anti-competitive behaviour, which is against the interest of patients and the public.
9. Those members of staff who, because of the requirements of their role, are more likely than others to have a decision-making influence on the use of taxpayers' money [**“decision-making staff”**] should at least once a year review and update their declarations of interest (including those arising from the receipt of gifts, hospitality or sponsorship), or make a nil return. Decision-making staff will include:
 - a. All members of the Trust Board;
 - b. All members of the Trust Management Executive;
 - c. Staff at Agenda for Change Band 8d and above or equivalent, including all Medical and Dental Consultants;
 - d. Any member of staff with authority to enter into a contract on behalf of the Trust;
 - e. Administrative and clinical staff involved in decision-making concerning funding allocation, investment decisions and investment management, the commissioning of services, purchasing of goods, medicines, medical devices or equipment and formulary decisions.

10. Any **line manager** of a member of staff who has made a declaration should determine whether it may give rise to a conflict of interest. If so, they should decide on the most appropriate course of management action, with support from senior management and advice from the Head of Corporate Governance as and where appropriate. This may include making arrangements to:
 - a. restrict the individual's involvement in discussions and exclude them from decision making relating to the matter in which they have declared an interest;
 - b. remove an individual from the whole of any decision-making process relating to the matter in which they have declared an interest;
 - c. remove an individual's responsibility for an entire area of work (if it relates to the matter in which they have declared an interest);
 - d. require an individual to relinquish the interest declared, if the conflict is so significant that they would be unable to operate effectively in their Trust role; or to remove the individual from their Trust role, if they are unwilling to relinquish the conflicting interest;
 - e. suspend any involvement by the individual, pending referral to more senior management within the directorate or division, or ultimately to Executive Directors and the Board, as may be advised by the Head of Corporate Governance.
11. Any member of **staff leading a procurement process, commercial decision or other strategic decision-making process** should consider the interests declared by all those involved in the process and determine whether any give rise to a conflict of interest. If so, they should decide on the most appropriate course of management action (as under paragraph 10 above), although the default response should not always be to exclude individuals who have declared an interest, as this may have a detrimental effect on the quality of the decision being made.
12. The **Director of Procurement, Commercial Director** or the **Executive Director with responsibility for a strategic decision** and the **Head of Corporate Governance** should be notified in any case where an individual involved in a procurement process, commercial decision or other strategic decision has been identified as having an interest which is in significant conflict with the interests of the Trust. They will advise on the extent to which it is appropriate for the individual to continue to be involved in the procurement process. **NB** It is recognised that in some cases the individual may be vital to the procurement process e.g. where they are providing specialist advice that cannot easily otherwise be accessed. In such a case, the individual's involvement should be subject to the oversight of a designated senior manager who will be responsible for documenting how they have been satisfied that there has been no undue influence and no discrimination against or in favour of any provider. A record of all decisions should be retained.
13. The **Head of Corporate Governance** will be responsible for ensuring that an annual reminder is issued to all members of the Board and other decision-making staff to review and update their declarations of interest (including those arising from the receipt of gifts, hospitality or sponsorship), or make a nil return.
14. The **Head of Corporate Governance** will be responsible for maintaining a record of all declarations received in the Registers of Interests, Gifts, Hospitality and Sponsorship. The Registers will be maintained in two parts: Part I relating to all members of the Board; and Part II including declarations made by other decision-making members of staff. Part I of the Register will be published in the Trust's Annual Report which will be available on the Trust's website, as will a link to Part II of the Register, making both parts of the Register available for inspection by the public and by the Trust's auditors.
15. The **Head of Corporate Governance** will annually review the Registers to ensure that they constitute an accurate and comprehensive record of all declarations made. (An interest will generally remain on the Register for a minimum of 6 months after expiry. Interests removed from the Register after they have expired will be archived and a private record of these will be retained for a minimum of 6 years).

Appendix 1A: Guidance on accepting and declaring gifts

1. As is stated in NHS England Guidance, “Staff in the NHS offer support during significant events in people’s lives. For this work they may sometimes receive gifts as a legitimate expression of gratitude. We should be proud that our services are so valued. But situations where the acceptance of gifts could give rise to conflicts of interest should be avoided. Staff and organisations should be mindful that even gifts of a small value may give rise to perceptions of impropriety and might influence behaviour if not handled in an appropriate way. A gift means any item of cash or goods, or any service, which is provided for personal benefit, free of charge, or at less than its commercial value.”
2. Staff should not ask for gifts and must refuse gifts that may affect, or be seen to affect, their professional judgement or integrity, or which seek to exert influence to obtain a preferential consideration.
3. Staff must not accept gifts, whatever their value, offered by suppliers or contractors or others involved in the procurement process, even if the offer is not in any way connected with the performance of duties or contract so as to constitute an offence under the Bribery Act 2010. In cases of doubt the Head of Corporate Governance should be consulted. The only exception to this is that low cost branded promotional aids such as pens or post-it notes offered by suppliers or contractors may be accepted where they are under the value of £6 in total
4. In other cases, and where the gift offered is not of high value and is of a non-cash nature – *for example* a box of chocolates - it may be accepted graciously, and with thanks.
5. Subject to paragraphs 2 and 3 above (consistent with paragraphs 57 and 58 of the policy), gifts may be accepted **up to a value of £50** and **do not need to be declared**.
6. When valuing a gift offered, the actual purchase price should be used if known, or an estimate that a reasonable person would make as to its value.
7. Gifts valued at over £50 should be treated with caution and should not be accepted in a personal capacity, but only on behalf of the Trust, for donation to a specified charitable fund of the Oxford Hospitals Charity. Staff may contact The Oxford Hospitals Charity <https://www.ouh.nhs.uk/charity/> and if accepted the gift must be declared. Multiple gifts from the same source over a 12 month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50, *i.e.* a second or subsequent gift which takes the cumulative value to over £50 may only be accepted on behalf of the Trust, for donation to a specified charitable fund of the Oxford Hospitals Charity (not in a personal capacity), and must be declared if accepted.
8. If a gift is offered to a member of staff in lieu of a professional fee for work that has been undertaken as part of the individual’s NHS role (*e.g.* for a lecture, presentation, publication or broadcast), then, subject to consideration of the guiding principles as outlined in **paragraph 55** of the policy, there may be circumstances in which the gift can be accepted on behalf of the Trust, for donation to a specified charitable fund of the Oxford Hospitals Charity, but not in a personal capacity. If the gift is valued at over £50 it must be declared.
9. Gifts of cash and vouchers should always be declined. The putative donor may be advised that they can make a donation to charitable funds by contacting The Oxford Hospitals Charity <https://www.ouh.nhs.uk/charity/>. If it is not possible to trace and/or contact the donor of cash or vouchers received (for example, if cash or vouchers are contained within a card and it is not clear from whom the card came), then the cash or vouchers should be paid into a specified charitable fund of the Oxford Hospitals Charity, and a full declaration made.
10. In case of any doubt as to whether a gift can be accepted, and whether it needs to be declared, the Head of Corporate Governance should be consulted.

What to declare in relation to Gifts

8. Whenever the offer of a gift worth over £50 (or multiple gifts with an aggregate value of over £50) is accepted, staff should submit a declaration in accordance with the process that may be accessed on the OUH intranet [here](#), stating
 - 8.1. their name and role;
 - 8.2. a description of the nature and value of the gift, including its source;
 - 8.3. the date of receipt; and
 - 8.4. any other relevant information (e.g. circumstances surrounding the gift and action taken to mitigate against the gift being perceived as an inducement). To the extent that acceptance of the gift departs from the guidance contained in this policy, details should be documented of the basis upon which approval was given.

Appendix 1B: Guidance on accepting and declaring hospitality

1. Meals, refreshments, travel costs and accommodation can all constitute hospitality offered.
2. In line with NHS England Guidance, staff must refuse hospitality which may compromise or be seen to compromise their professional judgement or integrity, or which seeks to exert influence to obtain a preferential consideration.
3. Staff may accept offers of hospitality that are compatible with the **guiding principles** outlined in **paragraph 55** of the policy, provided that there is a legitimate business reason and the hospitality is proportionate to the nature and purpose of the event.
4. Meals and refreshments up to a value of £25 may be accepted and need not be declared. Meals and refreshments of a value between £25 and £75^{vii} must be declared and should be approved prior to accepting the offer of hospitality. Over a value of £75, the offer of meals and refreshments as hospitality should be refused unless there are exceptional circumstances and senior approval is given. A clear reason should be recorded on the Register as to why it was permissible to accept the hospitality.
5. When valuing meals and refreshments offered as hospitality, the actual amount should be used, if known, or an estimate that a reasonable person would make as to its value.
6. Where more than one member of staff receives hospitality in the form of a meal and/or other refreshments, each individual must complete a Declaration of Gifts, Hospitality and Sponsorship form and submit this to the Head of Corporate Governance.
7. When hospitality is received in any form, the person(s)/organisation offering the hospitality should be made aware that the Trust will not and does not agree to preferential treatment as a result of receiving the hospitality.
8. Modest offers to pay some or all of the travel and/or accommodation costs related to attendance at events may be accepted and must be declared.
9. Offers of travel and/or accommodation which go beyond that which could be regarded as modest, or that are of a type that the Trust itself might not usually offer:
 - need prior approval by a senior manager;
 - should only be accepted in exceptional circumstances; and
 - must be declared.

A clear reason should be recorded on the Register as to why it was permissible to accept the travel and/or accommodation, in particular (but not limited to):

- 9.1. offers of business class or first class travel and accommodation (including domestic travel); and/or
- 9.2. offers of foreign travel and accommodation.

What to declare in relation to Hospitality

8. If a member of staff wishes to accept an offer of meals/refreshments worth over £25, or any offer to pay for travel and/or accommodation, they should submit a declaration in accordance with the process that may be accessed on the OUH intranet [here](#) stating
 - 8.1. their name and role;
 - 8.2. a description of the nature and value of the hospitality, including the circumstances;
 - 8.3. the date of receipt; and
 - 8.4. any other relevant information (e.g. action taken to mitigate against any actual or perceived conflict of interest). To the extent that acceptance of the hospitality departs from the guidance contained in this policy, details should be documented of the basis upon which approval was given.

Appendix 1C: Guidance on accepting and declaring sponsorship

1. As is recognised in NHSE Guidance, external sponsorship can benefit the Trust. Established as part of the Trust, [TheHill](#) is a health and care digital transformation catalyst that aims to generate funding through sponsorship, and in collaboration with partners, to secure long-term sustainability and achieve strategic objectives. Sponsors approved by [TheHill](#) are selected using criteria to avoid conflicts of interest, and subject to the over-arching principle of transparency.
2. Offers of sponsorship made other than through [TheHill](#) may be accepted in accordance with the guidance contained in this policy, consistent with the principles applied by [TheHill](#), and subject always to compliance with the Trust's Standing Financial Instructions.
3. Under no circumstances may "linked deals" be agreed, whereby any sponsorship is linked to the purchase of particular products or to supply from particular sources. Sponsorship should not fetter the Trust's intellectual property rights.
4. Staff should bear in mind that their acceptance of sponsorship, including attendance at a sponsored event, may preclude them from participating in an adjudication panel or giving advice on purchasing decisions, or other strategic decisions, in the future.

Sponsored events

5. In line with NHS England Guidance
 - 5.1. Sponsorship of events by appropriate external bodies should only be approved if a reasonable person would conclude that the event will result in clear benefit for the Trust and the NHS.
 - 5.2. During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.
 - 5.3. No information should be supplied to the sponsor from which they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.
 - 5.4. At the Trust's discretion, sponsors or their representatives may attend or take part in the event but they should not have a dominant influence over the content or the main purpose of the event.
 - 5.5. The involvement of a sponsor in an event should always be clearly identified in the interest of transparency.
 - 5.6. It should be made 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.
 - 5.7. Staff should declare their involvement with arranging any sponsored events.
 - 5.8. Where a member of staff is required to take study leave to attend a sponsored event or conference, details of the sponsorship arrangements should be recorded on their application for study leave.
6. Where the Trust receives or invites offers of sponsorship for events, which are hosted wholly or partly by the Trust, the relevant line manager must apply the **guiding principles** outlined in **paragraph 55** of the Policy and consider whether it is appropriate to accept the offer. The relevant line manager must complete a Declaration of Gifts, Hospitality and Sponsorship form and submit it to the Head of Corporate Governance.

What to declare in relation to sponsored events

3. Details of the sponsored event should be declared by the member of staff who is the lead organiser (or the lead point of liaison with the external sponsor), by submission of a declaration in accordance with the process that may be accessed on the OUH intranet [here](#)
 - 3.1. The declaration should record that sponsorship of the event complies with paragraphs 1-8 above, or document the reasons for any departure therefrom.

Sponsored research

4. As is recognised in NHS England Guidance, research is vital in helping the Trust to transform services and improve outcomes. Without sponsorship of research some beneficial projects might not happen. More broadly, partnerships between the Trust and external bodies on research are important for driving innovation and sharing best practice. However, there is potential for conflicts of interest to occur, particularly when research funding by external bodies does or could lead to a real or perceived commercial advantage. There needs to be transparency and any conflicts of interest should be well managed.
5. In line with NHS England Guidance:
 - 5.1. Funding sources for research purposes must be transparent and any benefit derived from funding or grants secured should be declared;
 - 5.2. Any proposed research must go through the relevant approvals process;
 - 5.3. There must be a written protocol and written contract between staff, the Trust and the sponsoring organisation, which specifies the nature of the services to be provided and the payment for those services;
 - 5.4. The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service;
 - 5.5. Staff should declare involvement with sponsored research to the Trust (even if the research is being undertaken under contract with another organisation, e.g. The University of Oxford).

What to declare in relation to sponsored research

6. Written records should be retained and individual members of staff who are involved in the sponsored research should make a declaration in accordance with the process that may be accessed on the OUH intranet [here](#), including:
 - 6.1. their name and their role with the Trust;
 - 6.2. a description of their involvement in the sponsored research;
 - 6.3. relevant dates; and
 - 6.4. any other relevant information (e.g. what, if any, benefit the sponsor derives from the sponsorship, action taken to mitigate against a conflict, and details of any approvals given to depart to any extent from Trust guidance).

Sponsored posts

7. Any offer to sponsor a post (i.e. where an organisation external to the NHS offers to fund a position in whole or in part) should initially be referred by the member of staff to their line manager, who should consider whether there may be on-going financial

implications for the Trust after the term of sponsorship has ended. Where necessary, further advice should be sought from the Divisional Management Team, to confirm whether approval will be required from Executive Directors.

8. As is recognised in NHS England Guidance, sponsored posts can offer benefits to the delivery of care, providing expertise, extra capacity and capability that might not otherwise exist if funding was required to be used from the NHS budget. However, safeguards are required to ensure that the deployment of sponsored posts does not cause a conflict of interest between the aims of the sponsor and the aims of the Trust, particularly in relation to procurement and competition.
9. In line with NHS England Guidance, when considering whether to approve a sponsored post, the following principles should be taken into account:
 - 9.1. Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and confirm the appropriateness of arrangements continuing;
 - 9.2. 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. For the duration of the sponsorship, auditing arrangements should be established to ensure this is the case. 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;
 - 9.3. Sponsored post holders must not promote or favour the sponsor's specific products, and information about alternative products and suppliers should be provided;
 - 9.4. 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 to declare in relation to sponsored posts

10. Details of any sponsored post should be declared by the member of staff who has secured the external sponsorship who should make a declaration in accordance with the process that may be accessed on the OUH intranet [here](#). The declaration should record that sponsorship of the post complies with paragraphs 13-19 above, or document the reasons for any departure from the guidance.

Appendix 2: Definitions

TERM	EXPLANATION
Staff	Any individual who is working with, for, or on behalf of the Trust, whether on a permanent, occasional or temporary/'interim' basis, including all employees, 'office holders', contractors, sub-contractors and agents, those who hold an honorary contract, and those who otherwise may be regarded as representing the Trust whether or not directly employed or engaged by the Trust.
Benefit	Any type of benefit*, reward, financial gain, equitable right or commodity received either directly or indirectly by an individual. *A benefit may arise from the making of a gain or avoiding a loss
Close relative	Partner or spouse, Parents (or parents of a partner or spouse) Children (or children of a partner or spouse) Siblings (or siblings of a partner or spouse) Grandparent or grandchild Aunt or uncle Niece or nephew Partners or the above
Close friend, business or professional associate	Someone with whom you have a close association, the nature of which is such that you are likely to be pre-disposed to acting in their favour – and/or to be perceived as likely to act in their favour
Conflict of Interest ¹	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. A conflict of interest may be: Actual – where there is a material conflict between one or more interests; or Potential – where there is the possibility of a material conflict between one or more interests in the future.
Declaration	A formal statement of any (or no) interests that have arisen.
Gifts	Any item over £50 (or cash of any value) that is for personal use.

Hospitality	The provision of food, drink, accommodation or an event for which no payment (or minimal payment) is required to be made by the recipient.
Interest (in relation to a matter or organisation)	Something which a reasonable person would be likely to take into account as relevant when making a decision on a matter regarding the use of taxpayers' money.

Appendix 3: Education and Training

1. There is no mandatory training associated with this policy.
2. Guidance is available from the Head of Corporate Governance (contacted via company.secretary@ouh.nhs.uk), with whom the need for ad hoc training sessions may be discussed, based on any training needs identified as part of an individual's annual appraisal or supervision.

Appendix 4: Monitoring Compliance

3. Use the following statement and mandatory table to list specifically what will be monitored to ensure that the policy is effective, including the minimum standards for compliance or non-compliance.
4. Compliance with the document will be monitored in the following ways.

What will be monitored:	How will it be monitored:	By whom:	Minimum standard/ Frequency of monitoring	Reporting to:
Maintenance of the Register of Interests, Gifts, Hospitality and Sponsorship.	Register will be reviewed annually, prior to publication of Trust's Annual Report	Head of Corporate Governance/ Corporate Governance Manager	Annual review (March)	Audit Committee
Compliance with requirement for all staff to submit Declarations of Interests, Gifts, Hospitality and Sponsorship in accordance with the Policy	Dissemination of email alert by the Corporate Governance Department, disseminated through Directorates	Head of Corporate Governance/ Corporate Governance Manager	Annual reminder (February/March)	Trust Management Executive
Compliance with requirement to manage conflicts of interest at the Trust Board.	Any change in the interests of members of the Board will be declared and recorded at every meeting of the Board; and Register of Board members' interests will be reviewed and updated before publication in the Trust's Annual Report.	Trust Chair, with advice as appropriate from the Head of Corporate Governance	At Trust Board meetings; and Annually, upon publication of Trust's Annual Report.	Audit Committee And Trust Board
Compliance with requirement to manage conflicts of interest in relation to procurement and other strategic decisions, including commercial decisions.	Scrutiny of the Register to identify interests declared by staff involved in any procurement decisions.	Director of Procurement and Commercial Director, in liaison with Head of Corporate Governance.	Periodically (as required in relation to any procurement or other strategic decision-making process, including commercial decisions)	Audit Committee

Appendix 5: Equality Impact Assessment

1. Information about the policy, service or function

What is being assessed	Revisions to existing Policy
Job title of staff member completing assessment	Corporate Governance Consultant
Name of policy / service / function:	Declaration of Interests, Gifts, Hospitality and Sponsorship Policy
Details about the policy / service / function	Identifying and Managing Conflicts of Interest
Is this document compliant with the Web Content Accessibility Guidelines?	Yes
Review Date	September 2024
Date assessment completed	31/08/21
Signature of staff member completing assessment	
Signature of staff member approving assessment	

2. Screening Stage

Who benefits from this policy, service or function? Who is the target audience?

Staff are the target audience

Does the policy, service or function involve direct engagement with the target audience?

Yes - *continue with full equality impact assessment*

3. Research Stage

Notes:

- If there is a neutral impact for a particular group or characteristic, mention this in the 'Reasoning' column and refer to evidence where applicable.
- Where there may be more than one impact for a characteristic (e.g. both positive and negative impact), identify this in the relevant columns and explain why in the 'Reasoning' column.
- The Characteristics include a wide range of groupings and the breakdown within characteristics is not exhaustive, but is used to give an indication of groups that should be considered. Where applicable please detail in the 'Reasoning' column where specific groups within categories are affected, for example, under Race the impact may only be upon certain ethnic groups.

Impact Assessment

Characteristic	Positive Impact	Negative Impact	Neutral Impact	Not enough information	Reasoning
Sex and Gender Re-assignment – men (including trans men), women (including trans women) and non-binary people.			✓		Legal and regulatory requirements to identify and manage conflicts of interest apply universally
Race - Asian or Asian British; Black or Black British; Mixed Race; White British; White Other; and Other			✓		
Disability - disabled people and carers			✓		
Age			✓		
Sexual Orientation			✓		
Religion or Belief			✓		
Pregnancy and Maternity			✓		
Marriage or Civil Partnership			✓		
Other Groups / Characteristics - for example, homeless people, sex workers, rural isolation.			✓		

Sources of information

None

Consultation with protected groups

None

4. Summary stage

Outcome Measures

List the key benefits that are intended to be achieved through implementation of this policy, service or function and state whether or not you are assured that these will be equitably and fairly achieved for all protected groups. If not, state actions that will be taken to ensure this.

The key benefit intended to be achieved through implementation of this policy – which should be equitably and fairly reached for all protected groups - is that all decision-makers acting for or on behalf of the Trust will act free from the influence of any factors that may be in conflict with the interests of the Trust; and that the Trust will be able to demonstrate that all of its dealings are conducted to the highest standards of integrity and probity and that NHS monies are used wisely, so that finite resources are used appropriately and always in the best interests of patients.

Positive Impact

List any positive impacts that this policy, service or function may have on protected groups as well as any actions to be taken that would increase positive impact.

None

Unjustifiable Adverse Effects

List any identified unjustifiable adverse effects on protected groups along with actions that will be taken to rectify or mitigate them.

None

Justifiable Adverse Effects

List any identified unjustifiable adverse effects on protected groups along with justifications and any actions that will be taken to mitigate them.

None

Equality Impact Assessment Action Plan

Complete this action plan template with actions identified during the Research and Summary Stages

Not applicable

Identified risk	Recommended actions	Lead	Resource implications	Review date	Completion date

ⁱ <http://www.abpi.org.uk/ourwork/disclosure/Pages/disclosure.aspx>

ⁱⁱ [The Seven Principles of Public Life - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

ⁱⁱⁱ NHS England Guidance on Managing Conflicts of Interest in the NHS, found [here](#)

^{iv} reflecting guidance issued by the Information Commissioner's Office with regard to Freedom of Information legislation: <https://ico.org.uk/media/1220/definition-document-health-bodies-inengland.pdf>

^v <http://www.abpi.org.uk/ourwork/disclosure/Pages/disclosure.aspx>

^{vi} In limited circumstances, and where a matter has been duly and expressly authorised in accordance with the Constitution, there will be no breach of this duty

^{vii} selected with reference to existing industry guidance issued by the ABPI <http://www.pmcpa.org.uk/thecode/Pages/default.aspx>