

Declarations of Interest, Gifts and Hospitality Policy (CG642)

Approval

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Change History

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Other relevant corporate or procedural documents:

This document must be read in conjunction with:

- Freedom of Information Policy, CG007
- Standing Financial Instructions, CG101
- Raising Concerns at Work (Whistle blowing) Policy, CG055
- Disciplinary Policy, CG153
- HR Local Counter Fraud Policy, CG155
- The Trust Constitution

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1. Purpose

Royal Berkshire NHS Foundation Trust ('the Trust') has a duty to ensure that all its dealings are conducted to the highest standards of integrity and probity and that its staff, agents, contractors (including sub-contractors) and others, when acting for the Trust in their official capacity, meet these standards.

This policy aims to ensure that staff covered by the policy are aware that they must take decisions free from any potential or real situations of undue bias or influence in the decision-making of the Trust.

It sets out the standards of conduct expected of all staff where their private interests might conflict with their duties as an employee and the steps the Trust has taken to safeguard itself against potential conflicts of interest.

Conflicts of interest may arise where an individual's personal, or a connected person's interests and/or loyalties may conflict with those of the Trust. The aim of this policy is to protect the Trust and the individuals from any appearance of impropriety which may be a risk to its reputation or a breach of the Bribery Act 2010.

All declaration of interest, gifts and hospitality are published on the Trust website in line with NHSE requirements.

2. Scope

This policy applies to all staff, Non-Executive Directors, Volunteers and the Governors. This includes individuals who are:

- Employed under a contract of employment with the Trust.
- Employed under an honorary contract with the Trust.
- Unpaid volunteers of the Trust.
- Agency staff
- Committee, sub-committee and advisory group members (who may not be directly employed or engaged by the Trust).
- Consultants and locums

3. Roles and Responsibilities

3.1 Board of Directors

The Chief Executive, so far as it is within their control to do so, is responsible for ensuring that there are processes in place to manage declarations of interests and hospitality.

3.2 Corporate Governance

The Trust Secretary (or their nominated deputy) will maintain:

- The statutory register of interests by the Board of Directors.
- The statutory register of interests by the Council of Governors.
- A register of interests for all other staff.
- A register of gifts and hospitality for all staff.

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The Corporate Governance team will review, maintain and update the Declarations of Interest, Gifts and Hospitality Policy in line with national and best practice guidance when this becomes available or at least every two years, whichever is sooner.

The Corporate Governance team will be responsible for raising awareness of the Declarations of Interest, Gifts and Hospitality Policy including issuing annual reminders and publicising the policy via staff newsletter every six months.

In the event a member of staff and their line manager require advice or guidance in relation to declarations of interest or receipt of hospitality, the Corporate Governance team will provide advice on these matters.

3.3 Line Management

Line managers will in the first instance provide advice and guidance to staff where staff are unsure as to whether a 'relevant and material' interest is perceived to exist and where gifts and hospitality offers are made to staff.

3.4 Human Resources

The Learning and Development team, in conjunction with Human Resources, will ensure that staff are made aware of the Declarations of Interest, Gifts and Hospitality Policy at induction.

Human Resources will be responsible for providing the Corporate Governance Team with an annual list of Consultants, Procurement staff, staff on agenda for change band 8d and above, Clinical and Service Directors, General Managers and Senior Nurse Managers.

3.5 Voluntary Services Manager

The Voluntary services manager will be responsible for ensuring that newly appointed volunteers are made aware of the Declarations of Interest, Gifts and Hospitality Policy

3.6 Finance

The Finance Team will be responsible for providing the Corporate Governance Team with an annual list of budget holders and an updated list when any new person is made a budget holder

3.7 All Staff

All staff are required to adhere to the requirements set out in this policy. Staff who declare material interests should make their line manager or the person(s) they are working for aware of their existence. Furthermore, staff who are subject to wider transparency initiatives such as the Association of the British Pharmaceutical Industry (ABPI) Disclosure UK scheme should be aware of and comply with them.

3.8 Audit & Risk Committee

The Audit & Risk Committee will be responsible for monitoring compliance with this policy through an annual review of its effectiveness.

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4. Definitions

A 'conflict of interest' is: "a set of circumstances by which a reasonable person would consider that an individual's ability to apply judgement or act, in the context of 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 – there is a material conflict between one or more interests
- Potential – there is a possibility of a material conflict between one or more interests in the future.

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

5. Declarations of Interest

5.1 Types of Interests

Interests fall into the following four categories:

- **Financial interests:** where an individual may get direct financial benefit (this may be a financial gain, or avoidance of loss) from the consequences of a decision they are involved in making.
- **Non-financial professional interests:** where an individual may obtain a non-financial professional benefit from the consequences of a decision they involved in making, such as increasing their professional reputation or promoting their professional career.
- **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.
- **Indirect interests:** where an individual has a close association (a 'close association' might arise, depending on the circumstances, through relationships with close family members and relatives, close friends and associates, and business partners) with another individual who has a financial interest, a non-financial professional interests or a non-financial personal interest and could stand to benefit from a decision they are involved in making.

5.2 Declaring an Interest (including a nil return)

Staff who have an interest in an organisation with which the Trust has a business relationship, for example in an equipment manufacturer or a pharmaceutical company, (or if they have previously worked for such an organisation) may be vulnerable to allegations of impropriety. This also applies to partners, relatives and close associates of that member of staff.

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If staff have dealings or interests with external organisations which might influence or be seen by others to influence the Trust's business relationship with that organisation and where a conflict of interest could arise, it must be declared at <https://royalberkshire.mydeclarations.co.uk>

Any staff member that does not currently have access to this platform will need to contact foundation.trust@royalberkshire.nhs.uk and request a log on email.

The Trust must be told of all cases where a member of staff, partner, close relative, personal friend or other close associate has a 'relevant and material' interest, including significant financial interests. This includes a private company, public sector organisation, other Trust employer or any other company that may compete for an NHS contract to supply goods or services to the Trust. A non-exhaustive list of interests which the Trust considers as 'relevant and material' is listed in **Appendix A**.

If in doubt about whether a declaration should be made, advice should be sought from your line manager. Staff and managers are expected to err on the side of caution. The test is that an interest must be declared if it conflicts with your official duties, impairs your abilities to carry out your duties and/or impacts on your work.

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

- On appointment with the organisation.
- When staff move to a new role or their responsibilities change significantly.
- At the beginning of a new project or piece of work.
- As soon as circumstances change and new interests arise (for example, in a meeting when interests staff hold are relevant to the matters in discussion).

A heavier duty applies to certain groups of staff, particularly due to their close involvement in the selection of suppliers and purchasing decisions. These staff are required to provide a declaration, including a NIL return where there are no interests to declare.

The Board of Directors and Council of Governors are required to provide an annual declaration and this will be co-ordinated by the Corporate Governance team. Declarations are also required by those occupying Executive and Non-Executive Director equivalent roles who have decision making responsibilities. Additionally, other groups listed below should complete a declaration on commencement of employment as a Consultant, member of staff in the Procurement department or on becoming an authorised budget holder. These staff members must provide an updated declaration as and when necessary, based on the requirements set out in section 5.2.

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Group	Frequency
Board of Directors	Annually (and updated as necessary)
Council of Governors	Annually (and updated as necessary)
Consultants	Annually (and updated as necessary)
Procurement staff	Annually (and updated as necessary)
Budget holders	Annually (and updated as necessary)
Agenda for Change 8d and above staff	Annually (and updated as necessary)
Senior Nurse Managers	Annually (and updated as necessary)
Clinical/Service Directors and General Managers	Annually (and updated as necessary)

After expiry a private record of historic events will be retained for a minimum of six years.

All declarations will be reviewed by the Corporate Governance team prior to being made available on the Trust website.

5.3 How to Declare an Interest

If an interest arises, staff are required to declare their interests on acquisition of the interest by using the Declaration of Interest platform at <https://royalberkshire.mydeclarations.co.uk> Any staff member that does not currently have access to this will need to contact foundation.trust@royalberkshire.nhs.uk and request a log on email.

Staff are responsible for making sure that their registered interests are kept up to date at all times. Although the interest may be declared, this does not remove the member of staff's personal responsibilities for removing themselves from a position or situation which may result in a potential breach of this policy.

The registers of interests will be maintained by the Corporate Governance team.

Further guidance in relation to completing a declaration on the system is available for staff on the declaration of interest platform (appendix C).

5.4 Secondary (Other) Employment

The Trust fully supports wider transparency initiatives in healthcare and encourages staff to engage actively with these. Staff are therefore strongly encouraged to give their consent for payments they receive from the pharmaceutical industry to be disclosed as part of the Association of British Pharmaceutical Industry (ABPI) Disclosure UK initiative. These include "transfers of value" include payments relating to:

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

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If any additional work is undertaken and it is felt there is a conflict/ potential conflict of interest with their NHS work, staff must formally declare such employment by using Declaration of Interest platform.

5.5 *Avoiding Conflicts of Interest*

In line with section 5.1 staff must avoid placing themselves in situations where they may be vulnerable to allegations of impropriety, and must remove themselves from situations where they risk breaching policy.

5.6 *Preferential Treatment in Private Transactions*

Staff must not seek or accept any benefits from private companies with which they have had or may have dealings with on behalf of the Trust. Every member of staff has a duty to ensure that they are not put in a position of risk of conflict between private interests and Trust duties. This includes and is not limited to:

- Goods or services for private use e.g. maintenance work.
- Payment by business contacts to subsidise social events.
- Discounts on products – with the exception of those offered to all staff through the communications unit.
- Tickets to cultural or sporting events - with the exception of those offered to all staff through the communications unit.
- Use of accommodation for personal purposes.
- The offer of a holiday or other similar inducement.

5.7 *Raising Concerns*

Staff that have any concerns relating to a declaration of interest or a private transaction are encouraged to report it in confidence to their line manager, the Trust Secretary or refer to contacts set out in the Raising Concerns at Work (Whistle blowing) Policy (CG055) or the HR Local Counter Fraud Policy (CG155) as soon as possible.

5.8 *Failure to Make a Declaration*

Should it be suspected that a member of staff has failed to appropriately declare an interest, or failed to demonstrate compliance with the conduct outlined in this policy, it may be deemed appropriate to take action in line with the Trust’s Disciplinary Policy and/or make a referral to the Trust’s Local Counter Fraud Specialist.

6. Declarations of Gifts and Hospitality

6.1 *The Need for Practical Guidelines*

NHS guidelines on standards of business conduct apply to all NHS staff, but in practice it is those members of staff whose work involves them in committing the Trust to expenditure, or to collecting income, who need practical guidelines to follow in order that they can maintain strict ethical standards which protect both themselves and the Trust.

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6.2 *The Overriding Consideration*

A gift, hospitality or commercial sponsorship should not be accepted in any case where it is offered in return for that person doing something, or showing preference in an official capacity. Where there is any doubt, the safest course is to decline the hospitality or gift.

6.3 *Practical Guidelines for Acceptability*

Offers of journeys to supplier’s premises perhaps with substantial hospitality should be viewed with great care and in case of doubt, declined or the permission of management obtained before acceptance. Established “custom and practice” may not necessarily afford protection in individual future cases. The ability of the recipient to provide a similar level of hospitality in return may be relevant to any assessment.

Upon receiving gifts or hospitality as set out above, a declaration of gifts and hospitality must be completed on <https://royalberkshire.mydeclarations.co.uk> within 28 days of the offer being made. The declaration should include as much detail as possible and include details of the hospitality received, the organisation/individual who provided the hospitality, the reason and the value or estimated value of the hospitality.

Certain forms of hospitality may require prior approval and so the schedule of hospitality (**Appendix B**) should be consulted before accepting any hospitality offered.

7. Management of Interests – Common Situations

7.1 *General*

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

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

The list above is non-exhaustive and each case will be different and context-specific, thus the Trust will always clarify the circumstances and issues with the individuals involved. Such clarifications and decisions will be taken by management and any further clarification required will be sought from the Chief People Officer or Corporate Governance team, depending on the specific matter requiring clarification. Staff should maintain a written audit trail of information considered and actions taken. Staff who declare material interests should make their line manager or the person(s) they are working for aware of their existence.

7.2 *Common Situations – Gifts*

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

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Staff should not accept gifts that may affect, or be seen to affect, their professional judgement.

Gifts from suppliers or contractors doing business, or likely to do business, with the organisation should be declined whatever their value. Low cost branded promotional aids such as pens or post-it notes may be accepted where they are under the value of £25 in total, and need not be declared. Gifts above £25 per individual must be declared.

In respect of gifts from other sources (for example patients, relatives, services users):

- Gifts of cash and vouchers to individuals **must** always be declined.
- Staff must not ask for any gifts.
- Gifts valued at over £50 must not be accepted in a personal capacity but instead should be handed over to the Royal Berks Charity for use as part of their fund-raising work.
- Modest gifts accepted under a value of £25 do not need to be declared.
- A common sense approach must be applied to the valuing of gifts (the actual amount must be declared if known, or an estimate that a reasonable person would make as to its value).
- Multiple gifts from the same source over a 12 month period should be treated in the same way as single gifts.

In terms of what should be declared:

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

7.3 Common Situations – Hospitality

Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement. Types of hospitality can include event tickets, holidays, meals etc. This list is not exhaustive and should be discussed with your manager prior to accepting any hospitality.

Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event. Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. This can be accepted, and must be declared, if modest and reasonable. Senior approval must be obtained.

In respect of meals and refreshments, whilst adhering to the above:

- Under a value of £25 may be accepted and need not be declared.
- Of a value of between £25 and £75 may be accepted and must be declared.
- Over a value of £75 should be refused unless (in exceptional circumstances) senior approval is given. A clear reason must be recorded on the declaration form as to why it was permissible to accept.

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- A common sense approach must be applied to the valuing of meals and refreshments (the actual amount must be declared if known, or an estimate that a reasonable person would make as to its value).

In respect of travel and accommodation, whilst adhering to the above:

- Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared.
- Offers which go beyond modest, or are of a type that the organisation itself would not usually offer, must have the prior approval of the Chief Executive, should only be accepted in exceptional circumstances and must be declared. A clear reason should be recorded on the declaration form as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
 - Offers of business class or first class travel and accommodation (including domestic travel).
 - Offers of foreign travel and accommodation.

In terms of what should be declared:

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

7.4 *Outside (Other) Employment*

All secondary employment must be declared on appointment or as it occurs. Where a risk of conflict of interest arises, the general management actions outlined in this policy should be considered and applied to mitigate risks. Where contracts of employment or terms and conditions of engagement permit, staff may be required to seek prior approval to engage in outside employment.

In terms of what should be declared:

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

7.5 *Directorships, Shareholdings and Other Ownership Issues*

Staff should declare, as a minimum, any directorships 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. Where shareholdings or other ownership interests are declared and give rise to risk of conflicts of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks. There is no

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need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

In terms of what should be declared:

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

7.6 Patents

Staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are on-going, which are, or might be reasonably be expected to be, related to items to be procured or used by the organisation. 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. Where holding of patents and other intellectual property rights give rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

In terms of what should be declared:

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

7.7 Loyalty Interests

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

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

In terms of what should be declared:

- Staff name and their role within the Trust.
- Nature of the loyalty interest.
- Relevant dates

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

7.8 Donations

Donations made by suppliers or bodies seeking to do business with the organisation should be treated with caution and not routinely accepted. In exceptional circumstances they may be accepted but should always be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value.

Staff must obtain permission from the organisation if in their professional role they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign for a charity other than the Trust's own. Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt must be issued. Staff wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

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

7.9 Sponsored Events

Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will benefit the Trust and the NHS. During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation. No information should be supplied to the sponsor from whom they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.

At the 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. The involvement of a sponsor in an event should always be clearly identified.

Staff within the organisation involved in securing sponsorship of events should make it clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event. Staff arranging sponsored events must declare this to the organisation.

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

7.10 Sponsored Research

Funding sources for research purposes must be transparent. Any proposed research must go through the relevant health research authority or other approvals process. There must be a written protocol and written contract between staff, the organisation, and/or institutes at which the study will take place and the sponsoring organisation, which specifies the nature of the services to be provided and the payment for those

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services. The Study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical devices, equipment or service. Staff should declare involvement with sponsored research to the organisation.

The Trust will retain written records of sponsorship of research, in line with the above principles and rules. In terms of what should be declared:

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

7.11 Sponsored Posts

External sponsorship of a post requires prior approval from the Trust. Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate. Sponsorship of a post should only happen where there is written confirmation that the arrangements will have no effect on purchasing decisions or prescribing and dispensing habits. This should be audited for the duration of the sponsorship. Written agreements should detail the circumstances under which organisations have the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise.

Sponsored post holders must not promote or favour the sponsor’s products, and information about alternative products and suppliers should be provided. Sponsors should not have any undue influence over the duties of the post or have any preferential access to services, materials or intellectual property relating to or developed in connection with the sponsored posts.

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

7.12 Clinical Private Practice

Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises including:

- Where they practice (name of private facility).
- What they practice (specialty, major procedures).
- When they practice (identified sessions/time commitment).

Note: Hospital consultants are already required to provide their employer with this information by virtue of paragraph 3, schedule 9 of the Terms and Conditions – Consultants (England) 2003 (further information can be at: https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf)

Clinical staff should (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):

- Seek prior approval of their organisation before taking up private practice.

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- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.
- Not accept direct or indirect financial incentives from private providers other than those allowed by the Competition and Markets Authority (CMA) guidelines: (https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf)

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

In terms of what should be declared:

- Staff name and their role within the Trust.
- A description of the nature of the private practice (e.g. what, where and when staff practise, sessional activity, etc.)
- Relevant dates
- Other relevant information (e.g. what, if any, benefit the sponsor derives from the sponsorship, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

8. Management of Interests – Advice in Specific Contexts

8.1 Strategic Decision Making Groups

In common with other NHS bodies, the Trust uses a variety of different groups to make key strategic decisions about things such as:

- Entering into (or renewing) large scale supply and provider contracts.
- Awarding grants
- Procurement including the selection of goods, services and works, including pharmacy sourcing.

These groups will adopt the following principles:

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

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

- Requiring the member to not attend the meeting.
- Excluding the member from receiving meeting papers relating to their interest.
- Excluding the member from all or part of the relevant discussion and decision.
- Noting the nature and extent of the interest, but judging it appropriate to allow the member to remain and participate.

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- Removing the member from the group or process altogether.

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

For further information on strategic decision making groups see the Trust’s Standing Financial Instructions (CG101).

8.2 Procurement

Procurement should be managed in an open and transparent manner, compliant with applicable UK Laws and Regulations, as well as Public Sector rules. Procurement processes should be conducted in a manner that does not constitute anti-competitive behaviour, anti-discriminatory, to prevent fraud and corruption, or, conduct activity which is against the interest of patients and the public.

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

9. Dealing with Breaches

There may be situations when interests will not be identified, declared or managed appropriately and effectively. This may happen innocently, accidentally or because of the deliberate actions of staff or other organisations. For the purposes of this policy these situations are referred to as ‘breaches’.

9.1 Identifying and Reporting Breaches

Staff who are aware about actual breaches of this policy, or who are concerned that there has been, or may be, a breach, should report these concerns to the Trust’s Local Counter Fraud Specialist or HR, as appropriate.

To ensure that interests are effectively managed staff are encouraged to speak up about actual or suspected breaches. Every individual has a responsibility to do this. For further information about how concerns should be raised, see Raising Concerns at Work (Whistle blowing) Policy, CG055 and HR Local Counter Fraud Policy (CG155).

The Trust is committed to investigating each reported breach and give relevant parties the opportunity to explain and clarify any relevant circumstances. Following the investigation, the Trust will:

- Decide if there has been or is potential for a breach and, if so, what the severity of the breach is.
- Assess whether further action is required in response. This is likely to involve any staff member involved and their line manager, as a minimum.
- Consider who else inside and outside the organisation should be made aware.
- Take appropriate action as set out in the next section.

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9.2 Taking Action in Response to Breaches

Action taken in response to breaches of this policy will be in accordance with the disciplinary procedures of the organisation and could involve organisational leads for staff support (e.g. Human Resources), fraud (e.g. Local Counter Fraud Specialist), members of the management or executive teams and the Trust's auditors.

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

- Clarification or strengthening of existing policy, process and procedures.
- Consideration as to whether HR/employment law/criminal action/contractual action should be taken against staff or others.
- Consideration being given to escalation to external parties (e.g. external auditors, NHS Protect, the Police, statutory health bodies [such as NHS England, NHS Improvement or the CQC], and/or health professional regulatory bodies.

Inappropriate or ineffective management of interests can have serious implications for the Trust and staff. Where necessary, the Trust will consider the imposition of sanctions for breaches. Sanctions should not be considered until the circumstances surrounding breaches have been properly investigated. However, if such investigations establish wrongdoing or fault then the Trust can and will consider the range of possible sanctions that are available, in a manner which is proportionate to the breach. This includes:

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

10. Consultation Undertaken

In preparing this policy, the model policy content for NHS organisations on 'Managing Conflicts of Interest in the NHS' published by NHS England has been incorporated. This policy will be reviewed by the following stakeholder groups:

- Local Counter Fraud Specialist.
- Human Resource, Procurement, Finance and Pharmacy.
- Joint Staff Consultative Committee.
- Local Negotiating Committee.
- Executive Management Committee (Executive Committee)
- Policy Approval Group. (Executive Committee)
- Board Audit and Risk Committee.

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11. Dissemination/Circulation/Archiving

The policy will be available on the Trust's Policy Hub and staff will be made aware of the policy and any changes via a staff communication.

The Trust Secretary will facilitate review and update of the policy as necessary and at least every two years.

The Trust Secretary is responsible for archiving all previous versions and supporting evidence of approval, for the relevant policies.

12. Implementation

The policy will be published on the intranet and communicated to staff via Round Up.

Reminders to raise awareness on key aspects of this policy (e.g. declaration of interest reminders) will be sent at least annually coordinated by the Corporate Governance team.

13. Training

There is no mandatory training associated with this procedure. However, if staff have queries about its operation, they should contact their line manager in the first instance. Failing to obtain clarification, staff/line managers may contact the Corporate Governance team.

14. Monitoring of Compliance

Aspect of compliance or effectiveness being monitored	Monitoring method	Individual or dept. responsible for the monitoring	Frequency of the monitoring activity	Group/committee which will receive the findings/ monitoring report	Committee/ individual responsible for ensuring that the actions are completed
Statutory declarations: Board and Council	Publication of Board and Governors' registers of interests	Corporate Governance	Six monthly	Audit & Risk Committee	Audit & Risk Committee
Other declarations	Report to Audit and Risk Committee	Corporate Governance	Six monthly	Audit & Risk Committee	Audit & Risk Committee
Policy review	Amended policy submitted for approval	Corporate Governance	Every 2yrs or as legislation/ best practice	Executive Management Committee	Executive Management Committee

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requires

The Trust reserves the right to amend its monitoring requirements in order to meet the changing needs of the organisation.

15. Supporting Documentation and References

- Raising Concerns at Work (Whistle blowing) Policy, CG055.
- Freedom of Information Policy, CG007
- Trust’s Standing Financial Instructions, CG101.
- Disciplinary Policy, CG153
- HR Local Counter Fraud Policy, CG155
- The Constitution
- NHS England: ‘Managing Conflicts of Interest in the NHS: Model policy content for organisations (2017)
- Bribery Act 2010.

16. Equality Impact Assessment

Stage 1: Screening

Part 1: Initial Scoping

For each of the nine protected groups identified in the table below, respond to the identified questions with a Yes (Y); No (N); or Unclear (U)

	Age	Sex	Disability	Race	Gender Reassignment	Religion or Belief	Sexual Orientation	Marriage and Civil Partnership	Pregnancy and Maternity
Do different groups have different needs, experiences, issues and priorities in relation to the proposed policy/change proposal?	N	N	N	N	N	N	N	N	N
Is there potential for or evidence that the proposed policy/change will not promote equality of opportunity for all and promote good relations between different groups?	N	N	N	N	N	N	N	N	N
Is there potential for or evidence that the proposed policy will affect different population groups differently (including unintended discrimination against certain groups)?	N	N	N	N	N	N	N	N	N
Is there public concern (including media, academic, voluntary or sector specific interest) in potential discrimination against a particular population group or groups?	N	N	N	N	N	N	N	N	N

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Part 2: Evidence and Feedback that has informed your analysis

Please identify below the data, information or feedback that you have drawn on to reach the conclusions above. This will be information that has enabled you to assess the actual or potential impacts in the context of the key needs to **eliminate unlawful discrimination, advance equality of opportunity and foster good relations** with respect to the characteristics protected by equality law. These sources could include:

- Equalities monitoring information of staff/service users affected by the identified provision/policy etc.
- Engagement (internal/external or both) with or feedback from relevant stakeholders e.g. staff; patient groups, commissioners, external agencies.
- Staff Survey Data; Patient Survey Data etc.
- Research or information available relative to the identified protected group.
- Project leads professional knowledge of the issues the policy/change is seeking to enact.

No inequalities noted in the nine protected groups identified.

If the analysis under Part 1 has concluded that there are equality impacts or that the impacts are unclear (i.e. you responded ‘Yes’ or ‘Unclear’ in Part 1), **please move on to Part 4 of the assessment**. If no equality impacts are identified, **please move on to Part 3 below** to conclude the assessment

Part 3: Narrative

If you have concluded there are no equality impacts related to the policy/provision, please provide a brief narrative to explain why you have come to this conclusion:

No inequalities noted in the nine protected groups identified.

If no equality impacts have been identified, this concludes the equality impact assessment. Please complete the declaration below:

Based on the information set out above I have decided that a full equality impact assessment is (please delete as appropriate): ~~Not necessary~~

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Appendix A - Guidance for Completing the Declarations of Interest Form

All interests that might unduly influence, or be seen to influence, an individual’s judgement and objectivity in the conduct of Royal Berkshire NHS Foundation Trust’s (the Trust’s) business must be declared. This includes **all** relevant and/or material interests (including business interests) held personally and by family, relatives and other close associates.

Who needs to complete the form at least every year?	Who is considered a ‘close relative’?	What needs to be declared?
<ul style="list-style-type: none"> • Executive Directors and Non-Executive Directors • Consultants • Clinical Directors • Service Directors (including Chief Pharmacist) • General Managers • Commercial Directors/ Managing Directors • All Other Directors • Senior Nurse Managers • Council of Governors 	<ul style="list-style-type: none"> • Partner or spouse • Parents (or parents of a partner or spouse) • Children (or children of a partner or spouse) • Siblings (or siblings or a partner or spouse) • Grandparent or grandchild • Aunt or uncle • Niece or nephew • Partners of the above 	<ul style="list-style-type: none"> (a) Directorships, including non-executive directorships held in private companies of PLCs (with the exception of those of dormant companies). (b) Ownership, part-ownership or directorship of private companies, business or consultancies likely or possibly seeking to do business with the NHS. (c) Majority or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS. (d) A position of authority (including Directorships) in another public sector organisation, charity or voluntary organisation in the field of health and social care. (e) Any connection with a voluntary or other organisation contracting for NHS services or commissioning NHS services. (f) Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with Royal Berkshire NHS Foundation Trust, including but not limited to, lenders or banks.

For further information, please refer to section 5 of the Declarations of Interest, Gifts and Hospitality Policy (CG642).

You must provide an update as soon as any change in your interests occurs, no later than 28 days from the change occurring.

If you have any queries, speak to your Line Manager in the first instance, or the Corporate Governance team.

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Appendix B - Guidance for Completing the Gifts and Hospitality Form (including Commercial Sponsorship)

A gift, hospitality or commercial sponsorship should not be accepted in any case where it is offered in return for that person doing something, or showing preference in an official capacity. Where there is any doubt, the safest course is to **decline** the hospitality or gift.

Who needs to complete the form?	What gifts, hospitality and commercial sponsorship cannot be accepted?	What gifts, hospitality and commercial sponsorship can be accepted?
<p>All staff accepting gifts, hospitality or commercial sponsorship.</p>	<p>Staff should not accept gifts that may affect, or be seen to affect, their professional judgement, and must not ask for any gifts.</p> <ul style="list-style-type: none"> • Gifts from suppliers or contractors doing business, or likely to do business, with the organisation should be declined whatever the business • Gifts of cash and vouchers to individuals from other sources (e.g. patients, relatives, service users etc.) must always be declined • Offers of journeys to supplier’s premises perhaps with substantial hospitality should be viewed with great care and in case of doubt, declined or the permission of management obtained before acceptance • Meals and refreshments over a value of £75 should be refused unless (in exceptional circumstances) senior approval is given 	<p>Gifts valued at over £50 must be treated with caution and must not be accepted in a personal capacity but instead referred to the Royal Berkshire Charity.</p> <ul style="list-style-type: none"> • Modest gifts accepted under a value of £25 do not need to be declared • Low cost branded promotional aids such as pens or post-it notes may be accepted where they are under the value of £25 in total, and need not be declared • Meals and refreshments under a value of £25 may be accepted and need not be declared • Meals and refreshments of a value of between £25 and £75 may be accepted and must be declared • Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared • Offers which go beyond modest, or are of a type that the organisation itself would not usually offer, must have the prior approval of the Chief Executive, should only be accepted in exceptional circumstances and must be declared.

For further information, please refer to section 6 of the Declarations of Interest, Gifts and Hospitality Policy (CG642). You must declare all offers of gifts, hospitality or commercial sponsorship accepted within 28 days of the offer being made. **If you have any queries, speak to your Line Manager in the first instance, or the Corporate Governance team.**

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Appendix C

For further information on how to declare a conflict of interest, gifts and hospitality please see below link

<https://admin.mydeclarations.co.uk/download/staffguide.pdf>

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