
TRUST-WIDE POLICY DOCUMENT

MANAGING CONFLICTS OF INTEREST POLICY

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Version 3.1

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Further information about this document:

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Review period. This document will be fully reviewed every three years in accordance with the Trust's agreed process for reviewing Trust -wide documents. Changes in practice, to statutory requirements, revised professional or clinical standards and/or local/national directives are to be made as and when the change is identified.	

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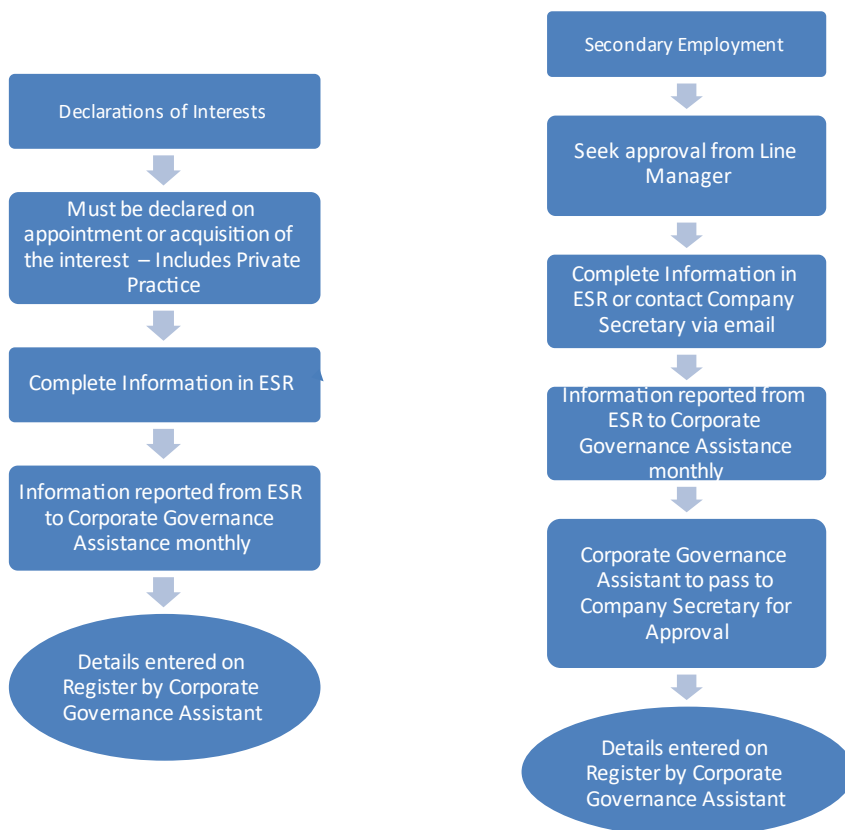
Version History:	
V3.0	Transferred to new template. Insertion of flow charts, new approach to capture declarations of interest through ESR, simplified the declaration of interest form to align with SFT, updated contacts/job titles/referenced policies and minor formatting adjustments.
V3.1	Strengthened the reference to the Bribery Act 2010 as recommended by the internal audit Counter Fraud: Conflicts of Interest (Nov-23)

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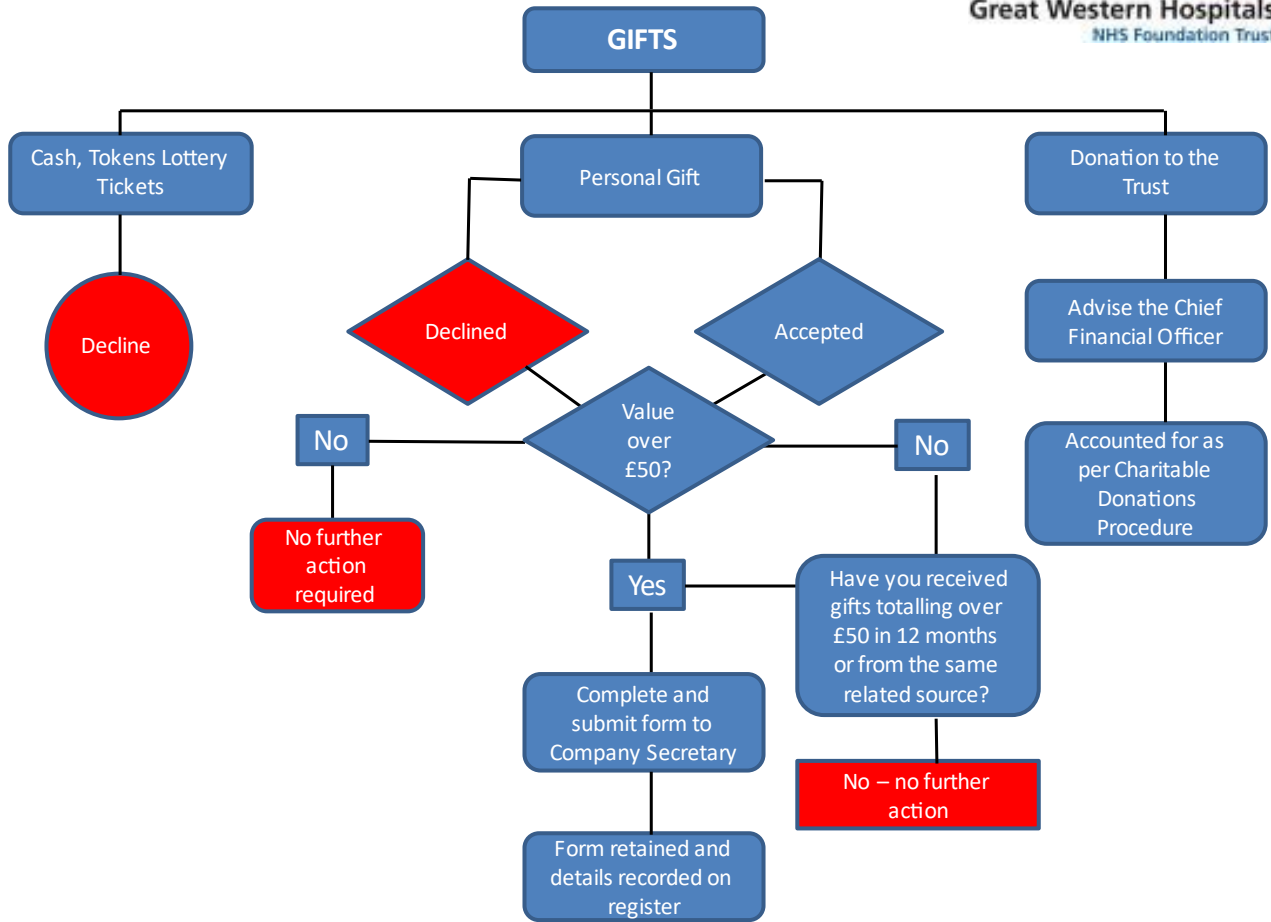
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Flow Chart - Declarations of Interests



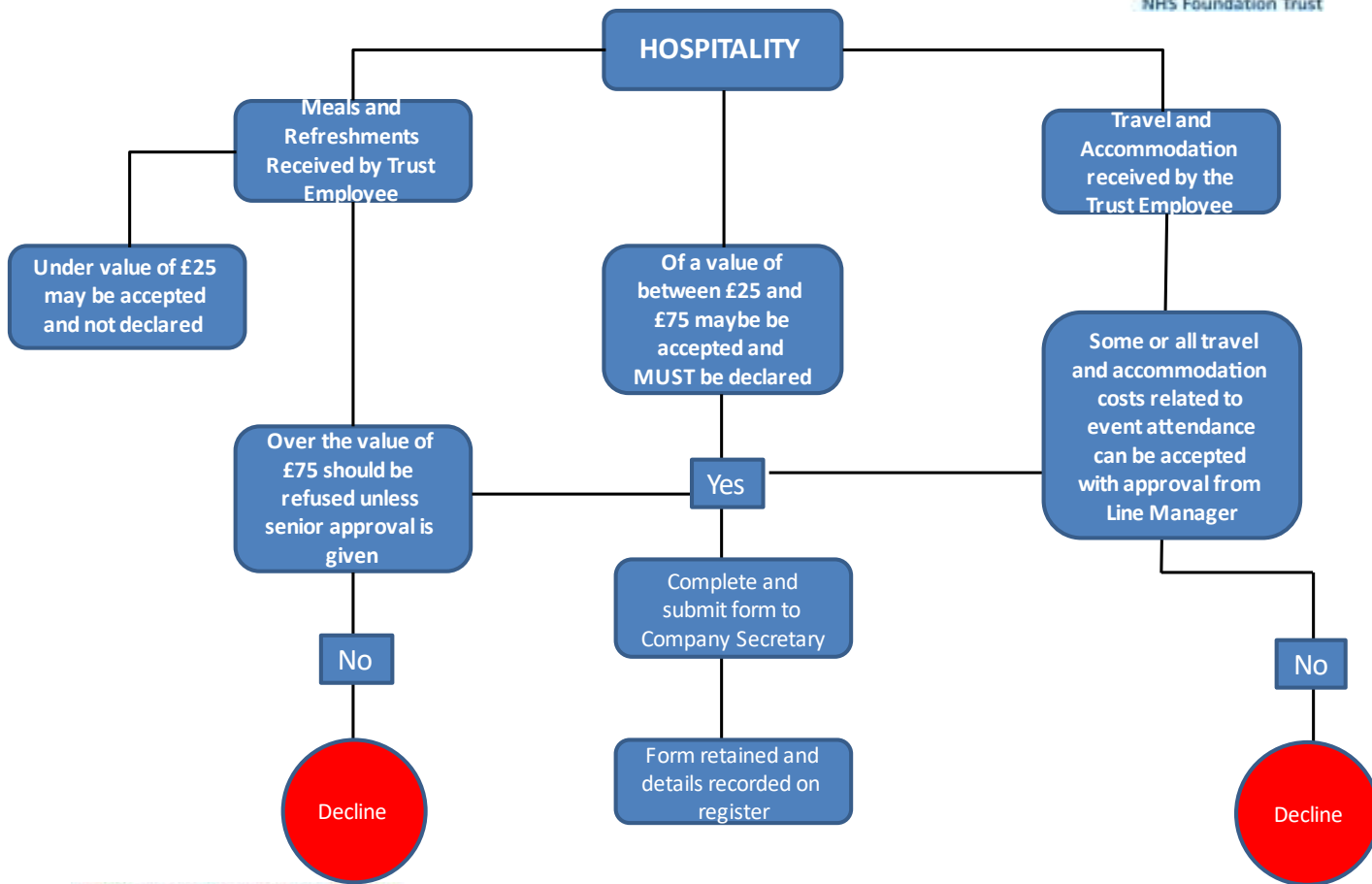
Service Teamwork Ambition Respect

Flow chart - GIFTS



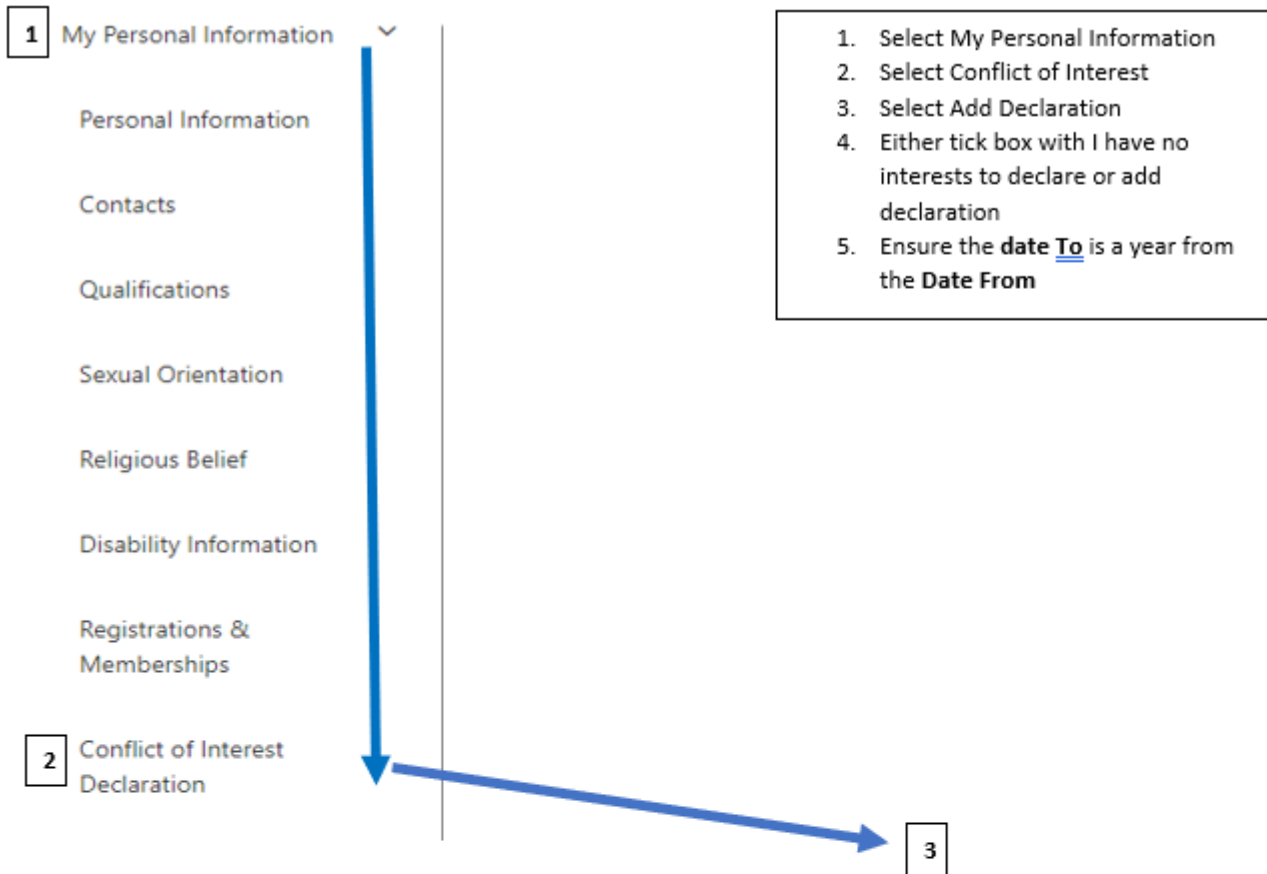
Service Teamwork Ambition Respect

Flow Chart - HOSPITALITY (Meals & Refreshments)



Service Teamwork Ambition Respect

Flow chart - ESR Instructions – How to Record Conflict of Interest



Add Declaration

4 Declare a Conflict of Interest

I have no interests to declare

Category Situation

Description

5 Date From Date To

Comments

1. POLICY SUMMARY

Adhering to this policy will help to ensure that Great Western Hospitals NHS Foundation Trust (the Trust) use National Health Service (NHS) money wisely, providing best value for taxpayers and accountability to its patients for the decisions it takes.

Employees will	The Trust will
<ul style="list-style-type: none"> • Familiarise themselves with this policy and follow it. Refer to the guidance for the rationale behind this policy NHS England » Managing Conflicts of Interest in the NHS: Guidance for staff and organisations • Use their common sense and judgement to consider whether the interests they have could affect the way taxpayers' money is spent. • Regularly consider what interests they have and declare these as they arise. If in doubt, declare. • NOT misuse their position to further their own interests or those close to them. • NOT be influenced or give the impression that they have been influenced by outside interests. • NOT allow outside interests they have to inappropriately affect the decisions they make when using taxpayers' money. 	<ul style="list-style-type: none"> • Ensure that this policy and supporting processes are clear and help employees understand what they need to do. • Identify a team or individual with responsibility for: <ul style="list-style-type: none"> ○ Keeping this policy under review to ensure they are in line with the guidance. ○ Providing advice, training and support for employees on how interests should be managed. ○ Maintaining register(s) of interests. ○ Auditing this policy and its associated processes and procedures at least once every three years. • NOT avoid managing conflicts of interest. • NOT interpret this policy in a way which stifles collaboration and innovation with its partners.

2 INTRODUCTION

From 1 June 2017 guidance on [Managing Conflicts of Interest in the NHS](#) (the 'guidance') came into force. This document is the Trusts response to this guidance. NHS England have published some frequently asked questions for specific employee groups on the issues posed and how the guidance applies to them (See Ref 8 for internet address)

The Trust and the people who work with and for it, collaborate closely with other organisations, delivering high quality care for its patients.

These partnerships have many benefits and should help ensure that public money is spent efficiently and wisely. But there is a risk that conflicts of interest may arise.

Providing best value for taxpayers and ensuring that decisions are taken transparently and clearly, are both key principles in the NHS Constitution (Ref 2). The Trust is committed to maximising its resources for the benefit of the whole community. As an organisation and as individuals, the Trust have a duty to ensure that all of its dealings are conducted to the highest standards of integrity and that NHS monies are used wisely so that the Trust is using its finite resources in the best interests of patients.

3 PURPOSE

The purpose of this policy is therefore to set out the actions which staff and office holders should take in respect of gifts, hospitality, commercial sponsorship, and declaring interests in order to safeguard themselves and the Trust against any perceived or actual impropriety, and to comply with the provisions of the Bribery Act 2010, and other anti-corruption legislation.

This policy:

- Introduces consistent principles and rules;
- Provides simple advice about what to do in common situations;
- Supports good judgement about how to approach and manage interests.

This policy should be considered alongside these other organisational policies:

- Standing Financial Instructions Policy (Ref 5)
- Procurement Policy (Ref 18)
- Fraud and Corruption Policy (Ref 3)
- Management of Contracts and Service Level Agreements with NHS and Non-NHS Bodies Policy (Ref 4)
- Trust Authorised Signatory Procedure (Ref 6)
- Directors Code of Conduct 2022-2024 (Ref 7).

Further guidance on the implementation of this policy can be sought from the Company Secretary.

4 DEFINITIONS

The following terms and acronyms are used within the document:

ABPI	Association of British Pharmaceutical Industry Disclosure UK initiative
ARAC	Audit, Risk and Assurance Committee
CQC	Care Quality Commission
EIA	Equality Impact Assessment
LCFS	Local Counter Fraud Specialist
NHS	National Health Service

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 the possibility of a material conflict between one or more interests in the future.

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

5 INTERESTS

Interests fall into the following categories:

- **Financial interests:**
Where an individual may get direct financial benefit (this may be a financial gain or avoidance of a 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 are 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* with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest and could stand to benefit from a decision they are involved in making.

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

6 EMPLOYEES

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

- All salaried employees
- All prospective employees – who are part-way through recruitment
- Contractors and sub-contractors
- Agency staff; and
- Committee, sub-committee and advisory group members (who may not be directly employed or engaged by the organisation)

7 DECISION MAKING EMPLOYEES

Some employees are more likely than others to have a decision making influence on the use of taxpayers' money, because of the requirements of their role. For the purposes of this guidance these people are referred to as 'decision making staff.'

Decision making employees in this organisation are:

- Executive and Non-executive Directors (or equivalent roles) who have decision making roles which involve the spending of taxpayers' money
- Members of advisory groups which contribute to direct or delegated decision making on the commissioning or provision of taxpayer funded services
- Those at Agenda for Change (Ref 8) band 8c and above
- Administrative and clinical employees who have the power to enter into contracts on behalf of their organisation
- Administrative and clinical employees involved in decision making concerning the commissioning of services, purchasing of good, medicines, medical devices or equipment, and formulary decisions.
- Staff who are on a procurement panel.

8 IDENTIFICATION, DECLARATION AND REVIEWS OF INTERESTS (INCLUDING GIFTS AND HOSPITALITY)

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

Any provision of hospitality at the Trust's expense must:

- be for genuine business reasons
- be provided only where an appropriate budget exists
- be seen to be reasonable and appropriate in the circumstances,
- be capable of justification to the Trust's auditors
- be authorised in advance by an Executive Director
- not contravene the provisions of the Bribery Act 2010

Declarations should be made:

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

A declaration of Interest can be made on ESR. [ESR \(Electronic Staff Record\) - Employee Self-service](#) under My Personal Information, Conflict of Interest Declaration. This includes a tick box if you have nothing to declare. The Corporate Governance Assistant will send an annual reminder to ensure your declarations are current and up to date. If, before this time, anything changes please log on to ESR and provide an update.

A declaration of interest(s) form is available (appendix B) and is available from the Company Secretary. Declarations of Interest should be made to the Company Secretary.

After expiry, an interest will remain on register(s) for a minimum of six months and a private

record of historic interests will be retained for a minimum of six years.

The Trust will prompt decision making employees annually to review declarations they have made and, as appropriate, update them or make a nil return. For those employees who meet the criteria they will be prompted to review their register of interests via email.

9 RECORDS AND PUBLICATION

9.1 Register Maintenance

The Trust will maintain a Register of Interests and a Gifts and Hospitality Register.

All declared interests which are made by decision making staff will be recorded on the register of interests. All gifts and hospitality will be recorded on a separate register.

9.2 Register Publication

The Trust will:

- Publish the interests declared by decision making employees in our register of interests
- Refresh this information annually.
- Make this information available on the Trusts internet site - <http://www.gwh.nhs.uk>

If decision making employees have substantial grounds for believing that publication of their interests should not take place then they should contact the Company Secretary to explain why. In exceptional circumstances, for instance where publication of information might put an employee at risk of harm, information may be withheld or redacted on public registers. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.

10 WIDER TRANSPARENCY INITIATIVES

The Trust fully supports wider transparency initiatives in healthcare, and the Trust encourages employees to engage actively with these.

Relevant employees are strongly encouraged to give their consent for payments they receive from the pharmaceutical industry to be disclosed as part of the Association of British Pharmaceutical Industry (ABPI) Disclosure UK initiative (Ref 9).

These “transfers of value” include payments relating to:

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

11 MANAGEMENT OF INTERESTS

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

- Restricting employee involvement in associated discussions and excluding them from decision making and discussions
- Removing employees from the whole decision-making process and discussions

- Removing employee's responsibility for an entire area of work
- Removing employees from their role altogether if they are unable to operate effectively in it because the conflict is so significant.

Each case will be different and context-specific, and the Trust **will** always clarify the circumstances and issues with the individuals involved. In some cases, Human Resources may need to be involved if the individual is unable to undertake their role. Employees should maintain a written audit trail of information considered and actions taken.

Employees who declare material interests should make their line manager or the person(s) they are working to aware of their existence.

The Company Secretary is available for advice if any conflict has materialised.

11.1 Gifts

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

Gifts from suppliers or contractors:

- Gifts from suppliers or contractors doing business (or likely to do business) with the organisation should be declined, whatever their value.
- Low cost branded promotional aids such as pens or post-it notes may, however, be accepted where they are under the value of £6 in total, and need not be declared.

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

- Gifts of cash and vouchers to individuals should always be declined.
- Employees should not ask for any gifts.
- Gifts valued at over £50 should be treated with caution and only be accepted on behalf of Brighter Futures, which is the Great Western Hospital's charity. This means the gift is for the benefit of the NHS served by the Trust. (see Charitable Funds Procedure (Ref 10) not in a personal capacity. These should be declared by employees.
- Modest gifts accepted under a value of £50 do not need to be declared.
- A common sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value).
- Multiple gifts from the same source over a 12 month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.

*The £6 value has been selected with reference to existing industry guidance issued by the ABPI (Ref 19)

What Should be Declared?

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

11.2 Hospitality

Employees should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.

Hospitality must only be accepted when there is a legitimate business reason, and it is proportionate to the nature and purpose of the event.

Caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. This can be accepted, but must be declared, if modest and reasonable. Senior approval must be obtained.

Meals and refreshments:

- Under a value of £25 - may be accepted and need not be declared.
- Of a value between £25 and *£75 - may be accepted and must be declared.
- Over a value of £75 - should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept.
- A common sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or a reasonable estimate).
- *The £75 value has been selected with reference to existing industry guidance issued by the ABPI (Ref 9)
- Travel and accommodation:
 - Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared. It is advisable to get this approved.
 - Offers which go beyond modest, or are of a type that the organisation itself might not usually offer, need approval by senior employees, should only be accepted in exceptional circumstances, and must be declared. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
 - Offers of business class or first class travel and accommodation (including domestic travel)
 - Offers of foreign travel and accommodation.

What Should be Declared

- Employees name and their role with the organisation.
- The nature and value of the hospitality including the circumstances.
- Host's details.
- 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).

11.3 Outside Employment

- All employees should declare any existing outside employment on appointment and any new outside employment when it arises with their line managers.
- It is good practice for managers to discuss secondary employment with employees during regular 1-2-1s to ensure secondary employment is not impacting employee's health and wellbeing and/or their role at the Trust.
- All medical consultants and staff bands 8C and above should declare secondary employment as part of the declaration process.

What Should be Declared?

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

11.4 Shareholdings and Other Ownership Issues

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

What Should be Declared?

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

11.5 Patents

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

What Should be Declared?

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

11.6 Loyalty Interests - Personal Relationships

The Trust recognises that staff who work together may hold or form personal friendships and, in some cases, close personal relationships. While it does not wish to unnecessarily interfere with these personal relationships, it is necessary for the Trust to ensure staff behave in an appropriate and professional manner and that personal relationships do not create perceived or actual conflicts of interest.

Examples of personal relationships include immediate family, i.e. spouse, child, brother, sister, parent or partner (list is not exclusive). Relatives - people who are related by blood, marriage, or civil partnership, or who co-habit, or dependents of such people. Close friends - refers to anyone with whom an employee may have a particularly close relationship, not just a partner or co-habitee. For example, this may include where a fair amount of time is spent together outside of the workplace.

Staff must declare personal relationships that are likely to create an actual or perceived conflict of interests. Examples include:

- Are, or could be, involved in the recruitment or management of close family members and relatives, close friends and associates, and business partners.
- Are in a relationship with another staff member who is at a different level of seniority within the Trust, particularly when one of the individuals has significant influence over the decisions of another or when the relationship has the potential to be seen as offering an advantage to an individual or disadvantage to other staff members.
- If individuals wish to be accompanied on business by a partner or other close personal contact individuals must have the authorisation of their manager and all the expenses for the companion, including travel and accommodation must not be paid for by the Trust.

Where there are potential conflicts of interest actions should be taken to mitigate against this. It is acknowledged that each case will be different, but options include:

- A change in line management or reporting lines;
- Removal of an individual from decision making processes such as, for example, recruitment decisions;
- A change of role or team;
- A change to shift pattern or working hours

Personal relationships must be declared, however managers must manage the situation sensitively and confidentially; in particular they should be mindful that some staff may not wish to make their declared relationship public. Managers must not share details of declared relationships with any colleagues other than those who need to be made aware to help manage risks and mitigations. When completing the conflicts of interest declaration form, staff member should indicate their wishes around publishing their personal relationship.

What Should be Declared?

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

11.7 Outside Loyalty Interests

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

- Hold a position of authority (including being a shareholder) in another NHS organisation or commercial, charity, voluntary, professional, statutory or other body which could be seen to influence decisions they take in their NHS role.
- Sit on advisory groups or other paid or unpaid decision making forums that can influence how an organisation spends taxpayers' money.
- Are aware that their organisation does business or are likely to procure service/items from an organisation in which close family members and relatives, close friends and associates, and business partners have decision making responsibilities.

11.8 Political Interests

Active political involvement in a political party may present a conflict of interest. The extent of political involvement that is acceptable will be a matter of judgement dependent on the level of political involvement and the nature and level of the individual's role. Individuals may be asked for the name of the organisation to which the political involvement relates if it is relevant for considering the declaration.

If individuals are involved in political activity they must not use the Trust's name or make reference to their engagement with the Trust to further their political objectives, nor should individuals engage in any political activity during the course of their employment or on Trust property.

Where there is political activity this could be a conflict of interests.

What Should be Declared?

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

11.9 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.
- Employees should not actively solicit charitable donations unless this is a prescribed or expected part of their duties for the organisation, or is being pursued on behalf of the organisation's own registered charity or other charitable body and is not for their own personal gain.
- Employees 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 Trusts own.
- Donations, when received, should be made to a cheque is made payable to "Brighter Futures" in all instances (never to an individual) and a receipt should be issued.
- Employees wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

What Should be Declared?

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

11.10 Sponsored Events

- Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in clear benefit to the organisations and the NHS.
- During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.
- No information should be supplied to the sponsor from whom they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.
- At the organisation's discretion, sponsors or their representatives may attend or take part in the event but they should not have a dominant influence over the content or the main purpose of the event.
- The involvement of a sponsor in an event should always be clearly identified.
- Employees 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.

- Employees arranging sponsored events must declare this to the organisation.

Occasionally commercial sponsorship might be provided for a whole department encompassing a number of employees. In these circumstances it is the responsibility of the relevant Director as applicable, to complete the sponsorship, hospitality and gifts pro forma suitably amended and forward to the Company Secretary for inclusion in the register.

On occasions when the Trust considers it necessary for employees advising on the purchase of equipment or a service to inspect such equipment or the service operation in other parts of the country (or exceptionally, overseas) the Trust may wish to consider meeting the cost so as to avoid putting in jeopardy the integrity of future purchasing decisions. Sponsorship falling into this category MUST be referred to the relevant Director for advice.

What Should be Declared?

A record of acceptance or receipt of offers MUST be made in the register:

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

11.11 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 employees, the Trust, and/or institutes at which the study will take place and the sponsoring organisation, which specifies the nature of the services to be provided and the payment for those services.
- The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.
- Employees should declare involvement with sponsored research to the organisation.

What Should be Declared?

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

Employees should declare:

- Their name and their role with the organisation.
- Nature of their involvement in the sponsored research.
- Relevant dates.
- Sponsor details
- 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).

11.12 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.

What Should be Declared?

The Trust will retain written records of sponsorship of posts, in line with the above principles and rules.

Employees should declare any other interests arising as a result of their association with the sponsor, in line with the content in the rest of this policy.

11.13 Clinical Private Practice

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

- Where they practice (name of private facility).
- Where the staff member owns their own company for private practice they must declare the name of the company, especially where the company trades with the Trust.
- What they practice (specialty, major procedures).
- When they practice (identified sessions/time commitment).

*Hospital Consultants are already required to provide their employer with this information by virtue of Para.3 Sch. 9 of the Terms and Conditions – Consultants (England) 2003: British Medical Association (Ref 11)

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

- Seek prior approval of their organisation before taking up private practice.
- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work (Paras.5 and 20, Sch. 9 Ref 11)
- Not accept direct or indirect financial incentives from private providers other than those allowed by Competition and Markets Authority guidelines: (Ref 12)
- Not use NHS resources (including use of their NHS secretary) for the benefit of their private practice

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

What Should be Declared?

- Employee name and their role with the organisation.
- A description of the nature of the private practice (e.g. what, where and when employees practise, sessional activity, etc).
- Relevant dates.
- Any other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy) including Where the staff member owns their own company for private practice they must declare the name of the company, especially where the company trades with the Trust.

12 Management of Interests – Advice in Specific Contexts

12.1 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 contracts.
- Awarding grants.
- Making procurement decisions.
- Selection of medicines, equipment, and devices.

The interests of those who are involved in these groups should be well known so that they can be managed effectively. At the Trust these groups are:

- Trust Board
- Audit Risk and Assurance Committee
- Quality and Safety Committee
- Financial, Infrastructure & Digital Committee.
- Performance, Population and Place Committee
- People & Culture Committee
- Mental Health Governance Committee
- Remuneration Committee
- Charitable Funds Committee

These groups should adopt the following principles:

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

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

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

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.

12.2 Procurement

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.

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

Employees should refer to the Trusts Management of Contracts and Service Level Agreements with NHS and Non-NHS Bodies Policy (Ref 4) for further details on the Trusts processes of managing contracts.

Employees taking part in the procurement of a product or service for the Trust, will be required to complete a separate declaration of interests document as part of this process. This will be managed by the procurement team.

13 DEALING WITH BREACHES

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

13.1 Identifying and Reporting Breaches

The Trust encourages anyone having reasonable suspicions of fraud, corruption and bribery to report their suspicions. The Trust's Fraud and Corruption Policy (Ref 3), which is to be rigorously enforced, is that no individual is to suffer any detrimental treatment as a result of reporting reasonably held suspicions. The Trust recognises that, whilst cases of theft are usually obvious, there may initially only be a suspicion regarding potential fraud and thus employees must report the matter to their Local Counter Fraud Specialist who will then ensure that Trust's procedures are followed.

Employees 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

- Chief Financial Officer
- Local Counter Fraud Specialist (LCFS) on;

The Local Counter Fraud Specialist – 07392861672

Email: Isabel.Turner@kpmg.co.uk

*Remember to ensure the email is secure, only an email **from** a @nhs.net **to** a @nhs.net is secure*

- National Fraud and Corruption Reporting Line on 0800 028 4060.
- Report fraud on-line at NHS Counter Fraud Authority Fraud Corruption Reporting. (Ref 15)
- Protect - Speak Up, Stop Harm on 020 3117 2520. This is an independent charity who can offer advice on how to proceed.

To ensure that interests are effectively managed employees are encouraged to speak up about actual or suspected breaches. Every employee has a responsibility to do this. For further information about how concerns should be raised are held within the Trusts Fraud and Corruption Policy. Employees may also wish to refer to the Freedom to Speak up Policy (Ref 15)

The Trust will investigate each reported breach according to its own specific facts and merits, and give relevant parties the opportunity to explain and clarify any relevant circumstances.

Following investigation the Trust will:

- Decide if there has been or is potential for a breach and if so the what severity of the breach is.
- Assess whether further action is required in response – this is likely to involve any employees 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.

13.2 Taking Action in Response to Breaches

In first instance breaches will be escalated to the relevant Clinical Lead and if required the Medical Director.

If adherence to the policy is still not forthcoming or there is belief that the breach is a deliberate act, action taken in response to breaches of this policy will be in accordance with the disciplinary procedures of the Trust and could involve organisational leads for employment support (e.g. Human Resources), fraud (e.g. Local Counter Fraud Specialists), members of the management or executive teams and organisational 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 Human Resources /employment law/contractual action should be taken against employees or others.
- Consideration being given to escalation to external parties. This might include referral of matters to external auditors, NHS Counter Fraud Authority, the Police, statutory health bodies (such as NHS England, NHS Improvement or the Care Quality Commission), and/or health professional regulatory bodies.

Inappropriate or ineffective management of interests can have serious implications for the Trust and its employees. There will be occasions where it is necessary to 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 wrong-doing 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:

- Informal conduct management or performance management action, including training and/or signposting to guidance).
- A formal conduct hearing, which may lead to disciplinary action (such as a formal written warning, the requirement for additional training, re-arrangement of duties, re-deployment, down banding, 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 employees which caused the breach.
- Legal action, such as investigation and prosecution under fraud, bribery, and corruption legislation.

13.3 Learning and transparency concerning breaches

Reports on breaches, the impact of these, and action taken will be considered by the Board of Directors at least annually.

To ensure that lessons are learnt and management of interests can continually improve, anonymised information on breaches, the impact of these, and action taken will be prepared and published on the Trust website as appropriate, or made available for inspection by the public upon request.

14 MONITORING, COMPLIANCE AND EFFECTIVENESS OF IMPLEMENTATION

The arrangements for monitoring compliance are outlined in the table below:-

Measurable objectives	Monitoring or audit method	Monitoring responsibility (individual, group or committee)	Frequency of monitoring	Reporting arrangements (committee or group the monitoring results is presented to)	What action will be taken if gaps are identified
Gifts and Hospitality are being registered	Review of the Register	Company Secretary	Annually	Audit, Risk and Assurance Committee	Consider appropriate action such as further communication and training are necessary
Maintenance of the Register of interests	Annual review of register of interests and reasonableness check on the completeness of record keeping (action may be allocated to internal audit)	Company Secretary	Annual	Audit, Risk and Assurance Committee	Delivery of actions required to address any weaknesses identified through these reviews will be monitored by the Audit Committee

10 SUPPORTING DOCUMENTS

The following is a list of other policies, procedural documents or guidance documents (internal or external) which employees should refer to for further details:

Ref. No.	Document Title	Document Location
1	NHS England guidance on managing conflicts of interest in the NHS	https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf
2	NHS Constitution	https://www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-england

Ref. No.	Document Title	Document Location
3	<p>Fraud and Corruption Policy</p> <p>The policy should also be read in conjunction with the Trust's Counter Fraud and Corruption Policy which includes provisions required by the Bribery Act 2010 regarding the prevention of bribery and corruption. The Act makes it a criminal offence to give, promise or offer a bribe, to request, agree to receive or accept a bribe, and to fail to prevent bribery. The maximum penalty for bribery is 10 years imprisonment for individuals engaging in bribery and an unlimited fine for the Trust.</p>	T:\Trust-wide Documents
4	Management of Contracts and Service Level Agreements with NHS and Non-NHS Bodies Policy	T:\Trust-wide Documents
5	Standing Financial Instructions Policy	T:\Trust-wide Documents
6	Trust Authorised Signatory Procedure	T:\Trust-wide Documents
7	Directors Code of Conduct 2022-2024	T:\Trust-wide Documents
8	Agenda for Change	https://www.nhsemployers.org/topic/s/pay-pensions-and-reward/nhs-terms-and-conditions-service-agenda-change
9	Association of British Pharmaceutical Industry Disclosure UK initiative	www.abpi.org.uk
10	Charitable Funds Procedure	T:\Trust-wide Documents
11	<p>Terms and Conditions – Consultants (England) 2003</p> <p>Consultants and Private Practice</p>	<p>https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultantermsandconditions.pdf</p> <p>Consultants and private practice (bma.org.uk)</p>
12	Competition and Markets Authority guidelines:	https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf
13	Freedom of Information Act 2000	https://www.legislation.gov.uk/ukpga/2000/36/contents
14	NHS Code of Conduct and Accountability (July 2004)	https://www.nhsbsa.nhs.uk/sites/default/files/2017-02/Sect_1_-_D_-_Codes_of_Conduct_Acc.pdf
15	Report NHS Fraud	https://reportfraud.cfa.nhs.uk/
16	Freedom to Speak Up Policy	T:\Trust-wide Documents

APPENDIX A – Initial Screening for Equality Impact Assessment

At this stage, the following questions need to be considered:			
1	What is the name of the policy, strategy or project? Managing Conflicts of Interest Policy		
2.	Briefly describe the aim of the policy, strategy, project. What needs or duty is it designed to meet? This policy will help our staff manage conflicts of interest risks effectively. It: <ul style="list-style-type: none"> • Introduces consistent principles and rules; • Provides simple advice about what to do in common situations; • Supports good judgement about how to approach and manage interests. 		
3.	Is there any evidence or reason to believe that the policy, strategy or project could have an adverse or negative impact on any of the nine protected characteristics (as per Appendix A)?	Yes	No x
4.	Is there evidence or other reason to believe that anyone with one or more of the nine protected characteristics have different needs and experiences that this policy is likely to assist i.e. there might be a <i>relative</i> adverse effect on other groups?	Yes	No x
5.	Has prior consultation taken place with organisations or groups of persons with one or more of the nine protected characteristics of which has indicated a pre-existing problem which this policy, strategy, service redesign or project is likely to address?	Yes	No x

Signed by the manager undertaking the assessment	Caroline Coles
Date completed	7 November 2023
Job Title	Company Secretary

On completion of Stage 1: A full impact assessment will normally be required if you have answered YES to one or more of questions 3, 4 and 5 above

Equality Impact Assessment

Equality Impact Assessment

Are we Treating Everyone Equally?

Define the document. What is the document about? What outcomes are expected?

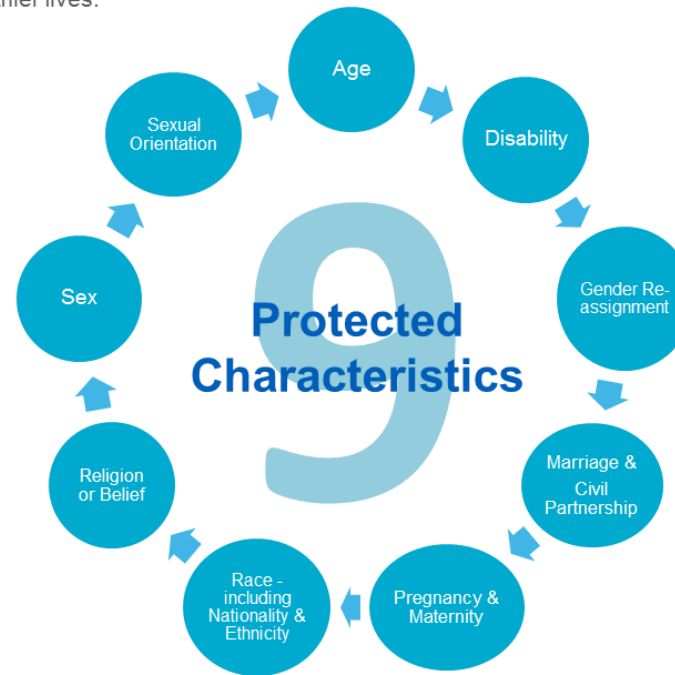
Consider if your document/proposal affects any persons (Patients, Employees, Carers, Visitors, Volunteers and Members) with protected characteristics? Back up your considerations by local or national data, service information, audits, complaints and compliments, Friends & Family Test results, Staff Survey, etc.

If an adverse impact is identified what can be done to change this? Are there any barriers? Focus on outcomes and improvements. Plan and create actions that will mitigate against any identified inequalities.

If the document upon assessment is identified as having a positive impact, how can this be shared to maximise the benefits universally?

Our Vision

Working together with our partners in health and social care, we will deliver accessible, personalised and integrated services for local people whether at home, in the community or in hospital empowering people to lead independent and healthier lives.



Trust Equality and Diversity Objectives

Better health outcomes for all	Improved patient access & experience	Empowered engaged & included staff	Inclusive leadership at all levels
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APPENDIX B – Declaration of Interest Form

Declaration of Interests Form

This form should be completed by:

- All new staff
- Existing staff who hold a 'relevant and material interest or who consider their personal interests could constitute a significant conflict of interest.
- For a specific group of staff as per section 7 of the Conflicts of Interest policy, an annual declaration will be requested.

DECLARATION

I have read and understood the Conflicts of Interest Policy. I confirm that the information provided is complete and correct. I am aware that if I do not make full, accurate and timely declarations then civil, criminal or disciplinary action may result.

The information submitted will be held by Salisbury Foundation Trust for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 2018 and the GDPR. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and in the case of 'decision making staff' (as defined by NHS England guidance) may be published in registers that Salisbury Foundation Trust holds. I acknowledge that any changes in these declarations must be notified to Salisbury Foundation Trust as soon as practicable and no later than 28 days after the interest arises.

Please indicate the statement which applies to you:

1.1 I **DO NOT** have any known declaration of Interest between private interest and my position as an employee of Salisbury Foundation Trust.

1.2 I **DO** have a declaration of Interest between my private interest and my position as an employee of Salisbury Foundation Trust. (***Please complete the relevant sections overleaf***)

SIGNED

DATE

NAME (in CAPITALS)

JOB TITLE

STAFF GROUP

DEPARTMENT/DIRECTORATE

2. Your declaration of interest – *please provide details below including the nature of your interest, when the interest arose and, if relevant, when it ceased.*

1	Directorships held in private companies, Public Limited Companies or Limited Liability Partnerships	
2	Ownership or part ownership of private companies, business or consultancies	
3	Majority or controlling shareholdings	
4	Position of authority in a charity or voluntary body	
5	Connections with voluntary or other organisation contracting for or commissioning NHS services	
6	Connections with an organisation or Company entering into, or having entered into financial arrangement with the Trust	
7	Any of the above interests held by a spouse, partner, close relative, other close associates or personal friends	
8	Any other relevant interests.	
9	Secondary Employment Secondary employment should always be declared even if no conflict as per the Policy.	Employer: Post: Date employment began: Contracted hours:
10	Clinical Private Practice Clinical Private Practice should always be declared even if no conflict as per the Policy.	Employer: Post: Date employment began: Contracted hours:

Management Action/ Approvals - *please detail any action taken to manage an actual or potential conflict or approvals to adopt a certain course of action.*

I can confirm that I am the above staff member's Line Manager and that they have discussed the matter with me in full. I can confirm that I have taken necessary steps within the department to mitigate any risk associated with the declared interest.

Manager Name Signature.....

Please return the completed form to the Corporate Governance Department, Trust HQ.

APPENDIX C – [Gift and Hospitality Declaration Form](#)

Name	Role	Description of Interest	Relevant Dates		Comments
			From	To	
					<i>If making a hospitality/gift declaration, please include why this has been accepted and who has authorised this.</i>
Mr John Smith	Senior Policy Manager, Commissioning Directorate, Organisation A	Hospitality received - £95 from Organisation Z to pay for travel to speak at conference on Managing Conflicts of Interest on 21/12/16	21/12/16	21/12/16	Approval to attend event and accept hospitality given by Mary Baker, Head of Unit

Please see below for information on how to populate the above boxes

The information submitted will be held by **Great Western Hospitals NHS Foundation Trust** for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 2018. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that **Great Western Hospitals NHS Foundation Trust** holds.

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

Please note that consent to publish must be given. Should employees have substantial grounds for believing that publication of their interests should not take place then they should detail in the box below. In exceptional circumstances, for instance where publication of information might put an employee at risk of harm, information may be withheld or redacted on public registers. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.

Signed:		Date:	
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Please return this form to Company Secretary, Trust HQ, GWH
<mailto:gwh.corporategovernance@nhs.net>