

This document is uncontrolled once printed.

Please check on NHS South East London Integrated Care Board's Intranet site for  
the most up to date version

NHS South East London Integrated Care Board

# **Standards of Business Conduct Policy (CG04)**

**(including Managing Conflicts of Interests, Gifts  
and Hospitality & Joint Working with  
Pharmaceutical Industry)**

<b>Approved by</b>	Executive Committee
<b>Date approved</b>	8 May 2024
<b>Name and title of originator/author</b>	Theresa Osborne, Director of Commissioning System Reform
<b>Name and title of sponsor</b>	Tosca Fairchild, Chief of Staff
<b>Review date</b>	31 March 2026
<b>Description</b>	Guidance on standards of business conduct, including how to manage conflicts of interest, which is expected to be adopted by all members of ICB staff and contractors.
<b>Target audience</b>	All Staff of NHS South East London Integrated Care Board (including members of the Board), Integrated Care Partnership, contractors and bidders

#### Version Control

<b>Version number</b>	2.0
<b>Supersedes</b>	1.0

#### Document Review Control Information

<b>Version</b>	<b>Date</b>	<b>Reviewer Name(s) and Job title</b>	<b>Change/amendment</b>
0.1	October 2021	Theresa Osborne	Original draft
0.1	November 2021	T&F Transition Board	Original draft
0.2	April 2022	Simon Beard	Issue of guidance on COIs from NHSEI (email advice–no formal guidance document proposed)
2.0	March 2024	Simon Beard	Revised to incorporate internal audit requests on Breach log and COI guardian, Provider Selection Regime references, and general review.

## Contents

1.	Introduction.....	4
2.	Scope .....	4
3.	Guidance and legal framework .....	5
4.	Application of public service values and principles to the NHS .....	5
5.	Responsibilities.....	6
6.	Committee responsibilities .....	7
7.	Conflicts of Interest .....	7
8.	Gifts and Hospitality .....	11
9.	Sponsorship .....	13
10.	Outside employment and clinical private practice .....	15
11.	Honorariums.....	15
12.	Joint Working with Pharmaceutical Industry .....	15
13.	Publication .....	16
14.	Confidentiality .....	16
15.	Use of resources .....	17
16.	Fraud / Theft.....	17
17.	Donations in relation to the organisation .....	17
18.	Rewards for Initiative .....	17
19.	Candidates for appointment.....	18
20.	Canvassing for appointments.....	18
21.	Trade or discount cards.....	18
22.	Awards or prizes.....	19
23.	Personal Conduct.....	19
24.	Making Declarations .....	19
25.	Non-compliance with policy .....	19
26.	Review .....	21
27.	Links to Relevant policies.....	21
	Appendix 1 - Type of Interests .....	22
	Appendix 2 - Declaration of Interests Form.....	24
	Appendix 3 - Declaration of Gifts, Hospitality and Sponsorship Form .....	28
	Appendix 4 Joint Working Proposal Form .....	30
	Appendix 5 template for declarations of interest for meeting.....	33
	Appendix 6 – Template to be used when Procuring Primary Care Services.....	35
	Appendix 7 – Equity Impact Assessment.....	38

## **1. Introduction**

- 1.1 As a publicly funded organisation, NHS South East London Integrated Care Board (SEL ICB) has a duty to set and maintain the highest standards of conduct and integrity and expects the highest standards of corporate behaviour and responsibility from its membership, board, committee members and all employees.
- 1.2 The NHS constitution sets out some of the key responsibilities of NHS employees. All employees, regardless of their role, are expected to act in the spirit set out in the seven principles of public life: the 'Nolan Principles'. It is a long and well-established principle that public sector organisations must be impartial and honest in their business and that their employees must act with integrity.
- 1.3 Each member of SEL ICB's unitary board must comply with the criteria of the "fit and proper person test".
- 1.4 SEL ICB receives public money to enable it to provide services to the people of south east London. As a result, it is expected to conduct its business as a corporate body, guided by its delegated powers and constitution.
- 1.5 The structure of the ICB board means that partner board members (or other ordinary board members) may have duties and responsibilities that relate to roles they have with other bodies in the NHS. These individuals, and SEL ICB itself, will need to be satisfied that the duties, roles and responsibilities of the two roles do not conflict, or create barriers that prevent fulfilment of both roles. In recognition of this, SEL ICB has in place procedures to ensure maximum transparency of interests to minimise the risk of the integrity of decision-making process being undermined or being perceived to be undermined.
- 1.6 The Standards of Business Conduct policy describes the standards and public service values which underpin the work of SEL ICB and reflects current guidance and best practice which all employees must follow. This policy includes the management of conflicts of interest and joint working with pharmaceutical industry and lays out how SEL ICB will comply with NHS England guidance on standards for business conduct which includes arrangements for managing conflicts of interest.
- 1.7 It is important to emphasise that the policy draws attention to the consequences of non-compliance with the requirements which may include disciplinary action and/or legal action.

## **2. Scope**

- 2.1 All Board, integrated care partnership (ICP) committee and members of any committee or sub-committee of the Board, and all those who are engaged in the services of SEL ICB, employees of SEL ICB including temporary staff such as agency workers, contractors and interim staff, are within the scope of this policy. In addition, those who work with, but are not employed by SEL ICB are required to comply with this policy, for example members of advisory groups, such as clinical leads and other GPs, patient representatives, consultants etc.
- 2.2 As well as promoting the standards of business conduct expected of public bodies, this policy aims to protect SEL ICB and its officers from any suggestion of corruption, partiality or dishonesty by providing a clear framework through which the organisation can provide guidance and assurance that its officers conduct themselves with honesty, integrity and probity. The policy should be read in conjunction with all relevant organisational policies which are developed and agreed in line with the principles set out in this policy.

### 3. Guidance and legal framework

3.1 NHS England's published guidance; "Standards of business conduct for NHS staff" (v2.3, March 2019) provides specific guidance on:

- The standards of conduct expected of all NHS staff where their private interests may conflict with their public duties and
- The next steps which NHS employers should take to safeguard themselves and the NHS against conflicts of interest

In addition, the following published codes and legislations underpin this policy:

- Department of Health's document "Code of Conduct for NHS Managers" (October 2002), which provides guidance on core standards of conduct expected of NHS employees, to act in the best interests of the public and patients/clients and to ensure that decisions are not improperly influenced by gifts or inducements.
- Professional codes of conduct governing health care professionals:
  - General Medical Council's guidance "leadership and management for all doctors" (March 2012) detailing the standards and expectations required of clinicians in leadership and management positions
  - ABPI Code of Practice for the Pharmaceutical Industry
- The Code of Conduct: Code of Accountability in the NHS (Appointments Commission/DOH – 2nd Rev: 2004)
- Department of Health's guidance on "Commercial Sponsorship – Ethical Standards for the NHS" (Department of Health, November 2000).
- Bribery Act 2010; for further information please refer to SEL ICB's Anti-Bribery Policy.
- Managing conflicts of interest in the NHS – guidance for staff and organisations
- Health Care Services (Provider Selection Regime) Regulations 2023 and the Public Contract Regulations 2015.

### 4. Application of public service values and principles to the NHS

4.1 Public service values must be at the heart of the NHS. There is an expected high standard of corporate and personal conduct, based on the recognition that patients come first. Moreover, since the NHS is publicly funded, it is accountable to Parliament for the services it provides and for the effective and economic use of taxpayers' money.

4.2 The code of conduct on accountability in the NHS defines three crucial public service values which must underpin the work of the health service:

- **Accountability** - everything done by those who work in the NHS must be able to stand the test of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.
- **Probity** - there should be an absolute standard of honesty in dealing with the assets of the NHS. Integrity should be the hallmark of all personal conduct in decisions affecting patients, staff and suppliers and in the use of information acquired in the course of NHS duties.
- **Openness** – there should be sufficient transparency about NHS activities to promote confidence between the NHS body and its staff, patients and the public.

4.3 The policy also supports the 'Seven Principles of Public Life', also known as the Nolan principles, which apply to all in the public service and which are embodied within SEL ICB's constitution.

- Integrity
- Selflessness

- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

4.4 In addition, individuals should be mindful of the following principles:

- **Do business appropriately:** Conflicts of interest become much easier to identify, avoid and/or manage when the processes for needs assessments, consultation mechanisms, commissioning strategies and procurement procedures are right from the outset, because the rationale for all decision-making will be clear and transparent and should withstand scrutiny.
- **Be proactive, not reactive:** Everyone within the scope of this policy should seek to identify and minimise the risk of conflicts of interest at the earliest possible opportunity.
- **Be balanced, sensible and proportionate:** Rules should be clear and robust but not overly prescriptive or restrictive. They should ensure that decision-making is transparent and fair whilst not being overly constraining, complex or cumbersome.
- **Be transparent:** Document clearly the approach and decisions taken at every stage of NHS activity so that a clear audit trail is evident.
- Create an **environment and culture** where individuals feel supported and confident in declaring relevant information and raising any concerns.

## 5. Responsibilities

5.1 SEL ICB is responsible for ensuring that the requirements of this policy and supporting documents are brought to the attention of all staff and that machinery is put in place for ensuring that the guidelines are effectively implemented.

5.2 These responsibilities are particularly important given the corporate responsibility set out in the Bribery Act for organisations to ensure that their anti-bribery procedures are robust.

5.3 The Chief Executive has overall accountability for SEL ICB's management of conflicts of interest. SEL ICB's governance team (overseen at a director level by the Chief of Staff) is responsible for ensuring implementation of the policy.

5.4 All individuals covered within the scope of this policy should:

- Ensure that they are not placed in a position which creates a potential conflict between their private interests and their SEL ICB duties.
- Familiarise themselves with this policy and comply with the provisions set out in it.
- Comply with NHS and professional codes of conduct and in doing so:
  - not accept gifts, hospitality or benefits of any kind from a third party which might be perceived as compromising their personal judgement or integrity - *refer to the section gifts and hospitality*
  - not make use of their official position to further their private interests or those of others

- declare any private interests which are relevant and material<sup>1</sup> relating to the position they hold within SEL ICB, other NHS organisations, and other related and relevant organisations
- base all purchasing decisions and negotiations of contracts solely on achieving best value for money for the taxpayer - *refer to SEL ICB's procurement policy*
- refer to their line manager when faced with a situation for which the guidance available requires further interpretation
- follow the policy for sponsorship or joint working when accepting any commercial support. They must also refer to their line-manager for approval.
- undertake mandatory training for conflicts of interest as required by SEL ICB.

5.5 If in any doubt, individuals must seek advice from the Chief Executive, Chief of Staff or Chief Financial Officer.

5.6 It is the responsibility of all staff to raise any concerns regarding staff business conduct.

5.7 SEL ICB Board, ICP, committee members and individuals acting on behalf of SEL ICB must act in accordance with this policy whether they are employed fully by SEL ICB, hold appointments with SEL ICB, are employed on a sessional basis or on an honorary contract, or provide services under a service level agreement with SEL ICB. Member practices and individuals of those individual practices acting on their behalf in exercise of SEL ICB's commissioning functions must act in accordance with this policy.

## 6. Committee responsibilities

6.1 The Audit Committee is responsible for reviewing the Gifts and Hospitality / Sponsorship register on behalf of SEL ICB's Board.

6.2 As the committee responsible for overseeing and assuring the board that SEL ICB has appropriate governance arrangements in place, the planning and finance committee also has an interest in ensuring standards of business conduct are maintained in all SEL ICB's dealings.

## 7. Conflicts of Interest

7.1 A conflict of interest is defined as either of the following:

- A conflict between the private interests and the official responsibilities of a person in a position of trust
- A set of conditions in which a professional judgement concerning a primary interest [such as patients' welfare or the validity of research] tends to be unduly influenced by a secondary interest [such as financial gain]
- A set of circumstances by which a reasonable person would consider that an individual's ability to apply judgment 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

7.2 NHS England guidance categorises these interests as below:

- **Financial interests:** This is where an individual may get direct financial benefits from the consequences of a commissioning decision

---

<sup>1</sup> Material interests – interests which a reasonable person would take into account when making a decision regarding the use of taxpayers' money because the interest has relevance to that decision.

- **Non-financial professional interests:** This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career
- **Non-financial personal benefits:** This is 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
- **Indirect interests:** This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above)

7.3 Whether an interest held by another person gives rise to a conflict of interests will depend upon the nature of the relationship between that person and the individual, and the role of the individual within SEL ICB.

#### 7.4 Declaration of Interests

SEL ICB will ensure that declarations of interest are made and regularly confirmed or updated using the systems and procedures in place.

Individuals covered in the scope of this policy should ensure declarations are made as soon as reasonably practicable and by law within 28 days after the interest arises, SEL ICB should be informed of any interests requiring registration within 28 days of a member taking office, or within 28 days of any changes to a member's existing declarations. Such changes should also be reported to the Governance team for inclusion in the Interests register.

Applicants for any appointment to SEL ICB or its board will be asked to declare any relevant interests. Appointments will be followed by a formal declaration form to be submitted.

All staff are to update their declarations of interests at least annually or make a nil return where no interests or changes to declare.

Declarations of interests must be a standing item on the agenda for every board meeting, ICP, committee and subcommittee meeting. Declarations will be recorded in the minutes of the meeting. Even if an interest has been already recorded in the register of interests, it should be verbally declared in meetings where matters relating to that interest are discussed.

New declarations are required when an individual changes role or responsibility with SEL ICB (including the board), and when an individual's circumstances change in a way that affects the individual's interests (e.g. a new role outside SEL ICB or setting up of a new business or relationship). This could include a conflict of interest ceasing to exist or a new one materialising. However, where a declaration ceases to exist, the declaration must remain for a minimum of 6 months after the conflict ceases to exist.

#### 7.5 Decision making officers

Some officers are more likely than others to have a decision-making role or influence on the use of public money because of the requirements of their role. In the context of this policy, the officers listed below are referred to as 'decision making officers':

- Board members
- ICP committee members
- Directors



- Executive and Senior Managers and equivalent who are involved in procurement/ decision making concerning commissioning of services, purchasing goods/ services, medicines, medical devices and formulary decisions
- Officers at Agenda for Change Band 8d and above

ICBs have been created to give a role in decision making to local system provider nominees from Trusts, Foundation Trusts, local authorities and general practice. Consequently, the possibility of actual and perceived conflicts will arise, and this policy seeks to ensure any conflicts are appropriately and robustly managed to avoid undermining decision making whilst ensuring the business of the ICB can benefit from the knowledge and expertise each individual can offer.

## **7.6 The Role of the Independent Non-Executive Member as Conflict of Interest Guardian**

SEL ICB has appointed the independent non-executive member with a lead role in Governance and Audit Committee chair to act as “Conflict of Interest (CoI) Guardian”.

The CoI Guardian, who will have no provider interests, will:

- Be responsible for ensuring that SEL ICB applies conflict of interest principles and policies rigorously and provides SEL ICB with independent advice on how to manage conflicts and exercise judgment where there is any doubt about how to apply them to individual cases.
- Be a safe point of contact for employees or workers of SEL ICB to raise any concerns in relation to this policy
- Ensures that the board and the wider SEL ICB behaves with the utmost probity at all times and be able to give an independent view on possible internal conflicts of interest.
- act as a conduit for GP practice staff, members of the public and healthcare professionals who have any concerns in regard to Conflicts of Interest. Members of the public will be able to contact the independent non-executive member regarding concerns via the SEL ICB website.

The name of the COI Guardian, and details on how to contact them, is provided on the Conflicts of Interest page on the ICBs intranet here:  
<https://selondonics.sharepoint.com/SitePages/Managing-conflicts-of-interest-and-reporting-gifts-and-hospitality.aspx>

All issues raised to the independent non-executive member for Conflict of Interest will be logged with the SEL ICB Governance team, under the COI Guardian log.

## **7.7 Designing Services**

In the course of new or existing service designs SEL ICB will engage with relevant providers, especially clinicians, to confirm service specifications and such engagement when done transparently and fairly, is entirely legal and not contrary to competition law.

SEL ICB will take all necessary steps and ensure safeguards are in place to avoid and manage conflicts of interest arising from such engagement towards service redesign by following the three main principles of procurement law, namely, equal treatment, non-discrimination and transparency. This includes ensuring that the same information is made available to all.

## 7.8 Managing conflicts of interests in Procurements

Conflicts of interest need to be managed appropriately through the whole procurement process. At the outset of any process, the relevant interests of individuals involved should be identified and clear arrangements put in place to manage any conflicts. This includes consideration as to which stages of the process a conflicted individual should not participate in, and in some circumstances, whether the individual should be involved in the process at all.

All individuals involved in redesign or commissioning of a new service or renewing contracts for an existing service will need to declare any interests in the procurement process, whichever the route taken i.e. Competitive tender, Any Qualified Provider, Single Tender for non-healthcare services and the Health Care Services (Provider Selection Regime) Regulations 2023 for healthcare services.

Regulation 21 of the Provider Selection Regime details how conflicts of interest for procurements entered into under this arrangement should be managed. In summary, measures must effectively prevent, identify and remedy conflicts of interest whilst being sympathetic to the vision of collaboration and joint working set out in the NHS Long Term Plan. This means that conflicts should be managed by:

- applying the ICBs general principles in managing conflicts of interest, as set out above
- ensuring decisions made under PSR are clearly and objectively directed towards meeting the statutory functions and duties of the ICB
- securing transparency in decision making through publishing information on any conflicts of interest identified and how they were managed alongside the confirmation of the decision to select a provider
- ensuring actions to mitigate conflicts of interest when making procurement decisions are proportionate and seek to preserve the spirit of collective decision-making wherever possible.
- ensuring, where decisions are taken under competitive process, any individual who is associated with an organisation that has a vested interest in the procurement is recused from decision-making during that provider selection process.

Bidders and Tender Evaluation panel members must submit declarations of interest forms. Failure to do so could result in the procurement process being declared invalid and possible suspension of the relevant individual from SEL ICB.

Relevant and material interests declared will need to be managed according to the degree of interest.

## 7.9 Privileged information

No-one should use confidential information acquired in the pursuit of their role within SEL ICB to benefit themselves or another connected person or create the impression of having done so.

Employees, board members and ICP committee members should take care not to provide any third party with a possible advantage by sharing privileged, personal or commercial information, or by providing information that may be commercially useful in advance of that information being made available publicly (such as by informing a potential supplier of an up and coming procurement in advance of other potential bidders), or any other

information that is not otherwise available and in the public domain.

Further guidance is provided in the Procurement Policy.

### 7.10 Contract Monitoring

Contract monitoring meetings should also follow the protocol for declaration of interests for SEL ICB meetings. This also applies where a contract is held jointly with another organisation.

The individuals involved in the monitoring of a contract should not have any direct or indirect financial, professional or personal interest in the incumbent provider or in any other provider that could prevent them, or be perceived to prevent them, from carrying out their role in an impartial, fair and transparent manner.

SEL ICB should be mindful of any potential conflicts of interest when disseminating any contract or performance information/reports on providers and manage the risks appropriately.

## 8. Gifts and Hospitality

8.1 All SEL ICB staff and those employed under a contract of services should ensure that they are not placed in a position that risks, or appears to risk, compromising their role or the organisation's public and statutory duties or reputation. Officers must not, or be perceived to, secure valuable gifts and hospitality by virtue of their role.

8.2 The Bribery Act 2010 makes it a criminal offence to give or offer a bribe, or to request, offer to receive or accept a bribe. The Act reformed the criminal law of bribery, making it easier to tackle this offence proactively in both the public and private sectors. It introduced a corporate offence which means that commercial organisations, including NHS bodies, will be exposed to criminal liability, punishable by an unlimited fine, for failing to prevent bribery.

### 8.3 Gifts

Officers should not ask for or accept gifts, gratuities or honoraria (such as grants, scholarships) from any individual or organisation that may be capable of being construed as being able to influence any decision or cast doubt on the integrity of such decisions. Officers are reminded that it may be considered to be a breach of the organisation Disciplinary Policy to solicit gifts. It may also be illegal, under the Bribery Act 2010, and staff that are found to have done so may face disciplinary action and prosecution.

Officers should always refuse gifts or other benefits which might reasonably be seen to compromise their personal judgement or integrity.

Table below shows actions to be taken for gifts:

Personal gifts of cash/ cash equivalents (vouchers, token, offers of remuneration to attend	Any value	Always Decline whatever value/ source Declare via form
---------------------------------------------------------------------------------------------	-----------	-----------------------------------------------------------

meetings while working in SEL ICB capacity)		
Gifts to SEL ICB individuals or teams, from suppliers/ contractors– both existing or potential	Less than £6 (total value)	Can be accepted and not declared
	More than £6	Needs to be declined Declare via form (Appendix 3)
Low value teams or directorate gifts intended to be shared by the whole team e.g. chocolates.	up to approximately £20	Can be accepted and not declared
Gifts from patients/ families/ service users	Modest gifts under £50	Accept and not need to be declared
	Gifts above £50	Accept and donate to charity Declare via form
Multiple gifts from same source over 12 month period	Total value exceeds £50	Declare via form

8.4 A common sense approach should be applied to the valuing of gifts, using the actual amount if known, or an estimate that a reasonable person would make as to its value.

8.5 If there is any doubt about the appropriateness of accepting a gift, officers should either politely decline or consult their line manager or the Governance team.

### 8.6 Hospitality

Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. Offers can be accepted if modest and reasonable but must be declared and approved by the line manager.

Meals and refreshments	Under £25	Accept and need not be declared
	£25-£75	May be accepted and Declare via form
	Over £75	Refused unless it has senior manager approval Declare if accept/ refuse

A common sense approach should be applied to the valuing of meals and refreshments, using an actual amount, if known, or an estimate.

### 8.7 Travel and accommodation

Travel and Accommodation	Modest offers related to attendance of events	May be accepted Declare via form
	Offers that go beyond modest (i.e. SEL ICB would not usually offer)	Only exceptional circumstances with senior manager approval Declare via form

8.8 All references to hospitality include that provided by contractors, organisations or individuals concerned with the supply of goods or services.

8.9 Where a meeting is funded by the pharmaceutical industry, this must be disclosed in the papers relating to the meeting and in any published minutes or actions. The team/

Directorate organising or hosting the event must ensure that the funding has been approved in line with the requirements set out in the Joint Working section of this policy.

8.10 Where an individual has a query as to whether travel or accommodation arrangements would constitute an offer that is deemed to be “beyond modest”, they should discuss this with their line manager before proceeding. In circumstances where such arrangements require senior manager approval prior to acceptance, the recipient should complete the declaration form at appendix 3 and obtain their senior managers signature to confirm approval of the arrangements. The completed form should then be submitted to SELGovernance@selondonics.nhs.uk. The signed form will then be used by the Governance team as evidence that prior approval was obtained. The individual concerned is still required to declare the travel and accommodation received by further submission of a declaration on the COI online system.

### **8.11 Declaring gifts and hospitality**

8.11.1 All officers must declare any gifts and hospitality in accordance with the guidance above as soon as is practicable but no later than 28 days from receipt.

8.11.2 In circumstances where receipt of a gift or hospitality requires senior manager approval prior to acceptance, the recipient should complete the declaration form at appendix 3 and obtain their senior managers signature to confirm approval of the arrangements. The completed form should then be submitted to SEL ICB’s governance team. The signed form will then be used by the Governance team as evidence that prior approval was obtained. Following this, the individual will still be required to complete a declaration on the online system.

### **8.12 Register of Gifts and Hospitality**

The register of gifts and hospitality is maintained by the Governance team who will formally record the declarations of all officers. The declarations of board members will be published on the SEL ICB website in accordance with NHS England’s guidance.

### **8.13 Gifts and hospitality provided by SEL ICB for external parties**

Any proposal for hospitality provided by SEL ICB for external parties would require the prior approval of the relevant director and/or the Chief Financial Officer.

## **9. Sponsorship**

### **9.1. Sponsored Posts**

There will be a clear and transparent procedure for acceptance of sponsored posts. There should be written confirmation that the sponsorship arrangements will have no effect on any commissioning or other management decisions over the duration of the sponsorship and auditing arrangements should be established to ensure that this is the case. Holders of sponsored posts must not promote or favour the sponsor’s specific products or organisation and information about alternative suppliers must be provided.

Sponsors must not have any influence over the duties of the post or have any preferential access to services, materials or intellectual property related to or developed in connection with the sponsored post.

## **9.2. Sponsored events**

Sponsorship of events, including courses, conferences and meetings, by external bodies should only be approved if it can be demonstrated that the event will result in clear benefits for SEL ICB and the wider NHS. Any sponsorship would require the approval of the relevant Executive Director in advance and the approval of the Chief Executive if over £500.

During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection (or other) legislation. As a general rule, information which is not in the public domain should not be supplied and no information should be supplied to a company for its commercial gain.

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

## **9.3. Sponsored research**

Funding sources for research purposes must be transparent. Any proposed research must go through the relevant approvals process.

There must be a written protocol and written contract between officers, SEL ICB and/or the institute 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. Where the contract includes provision of people this, and accompanying arrangements, must be clearly articulated.

The study must not constitute an inducement to commission any service.

## **9.4. Declaring sponsorship**

All pharmaceutical companies entering into sponsorship agreements must comply with the Code of Practice for the Pharmaceutical Industry.

Should there be any doubt about the appropriateness of accepting sponsorship, officers should seek advice from their line manager or the Governance team.

All officers must declare any sponsorship in accordance with the guidance above including the value of the sponsorship. A common-sense approach should be applied to valuing the sponsorship if there is not a contractual value specified, for example a room and refreshments being provided for an event.

All officers must declare any sponsorship secured through, contracted by, paid directly to or managed through a 3rd party, such as exhibitors at our events sold through a 3rd party or a sponsor paying for catering directly to an event venue.

In these circumstances, it is expected that sponsorship arrangements will be agreed in advance and prior approval obtained from the individual's director. Evidence of prior approval being obtained should be provided to SEL ICB's governance team through

submission of a signed declaration form (Appendix 3). Following this, the individual will be required to complete a declaration on the online system.

A complete register of Gifts, Hospitality, and Sponsorships will be held by the Governance Team.

Declarations made in accordance with the policy requirements will be published on the SEL ICB website at intervals set out in the summary.

## **10. Outside employment and clinical private practice**

10.1 All officers (depending on the details of their contract as regards outside employment and private practice) are required to seek approval from their line manager if they are engaged in or wish to engage in outside employment in addition to their work with SEL ICB. All officers must declare any relevant outside employment or private practice on appointment, and when any new employment arises, in accordance with the guidance.

Outside employment or private practice must neither conflict with nor be detrimental to the NHS work of the officer in question.

Examples of outside employment or private practice which may give rise to a conflict of interest includes, but is not limited to:

- employment with another NHS body
- employment with another organisation which might be in a position to supply goods/services to SEL ICB and
- self-employment, including private practice, in a capacity which might conflict with the work of SEL ICB or which might be in a position to supply goods/services to SEL ICB

10.2 Where a risk of conflict of interest is identified, these should be managed in accordance with this policy. SEL ICB reserves the right to refuse permission where we reasonably believe a conflict will arise or that approval would be detrimental to the work of the officer in question.

## **11. Honorariums**

11.1 In the event that honorarium payments are offered to GPs or other professionals working for SEL ICB, e.g. as clinical leads, prior approval will be sought from a senior manager in SEL ICB, e.g. the Director responsible for their area for work. Approval before taking up such offers should be evidenced through the submission of the gifts and hospitality declaration form (Appendix 3). The completed and signed form will need to be submitted to the SEL ICB Governance team. Following this, the individual will then be required to complete a declaration on the online system.

## **12. Joint Working with Pharmaceutical Industry**

12.1 Joint working must be for the benefit of patients or of the NHS and preserve patient care. Any joint working between the NHS and the pharmaceutical industry should be conducted in an open and transparent manner and in accordance with ABPI guidance.

12.2 Arrangements should be of mutual benefit, the principal beneficiary being the patient. The length of the arrangement, the potential implications for patients and the NHS, together with the perceived benefits for all parties, should be clearly outlined before entering into any joint working.

12.3 The following principles will also apply to joint working:

- staff should be aware of NHS guidance, the legal position and appropriate and relevant professional codes of conduct as described in existing NHS guidance.
- Contract negotiations will be negotiated in line with NHS values.
- confidentiality of information received in the course of duty must be respected, information governance processes must be followed and information never used outside the scope of the specific project.
- joint working arrangements should take place at corporate, rather than at an individual level.
- clinical and financial outcomes will be assessed through a process of risk assessment.

12.4 A mutually agreed and effective exit strategy will be in place at the outset of any joint working arrangement detailing the responsibilities of each party and capable of dealing with a situation where premature termination may become necessary.

Please refer to Appendix 4 for Joint Working Proposal Form which must be completed and submitted to SEL ICB's governance team.

### **13. Publication**

13.1 The following registers will be maintained by SEL ICB's governance team and be published on the SEL ICB website:

- Register of Interests – for decision making individuals at Board level
- Gifts and Hospitality Register
- Register of Procurement Decisions

13.2 In exceptional circumstances, where the public disclosure of information could give rise to a real risk of harm or is prohibited by law, an individual's name and/or other information may be redacted from the publicly available register(s), after legal advice. Such requests from individuals must be made in writing. A confidential, un-redacted version of the register will be held securely by the Governance team.

13.3 Officers should be aware that external organisations, e.g. Association of British Pharmaceutical Industries (ABPI), may also publish information relating to commercial sponsorship or other payments. We will review such publications to ensure that appropriate internal declarations have been made in accordance with this policy and will take appropriate action where they have not. Anonymised information relating to breaches and how those breaches have been managed will be published on the SEL ICB website annually.

### **14. Confidentiality**

14.1 Employees, Board and committee members should be particularly careful using, or making public, internal information of a confidential nature, particularly regarding details covered under the Data Protection Act 1998 or other legislation, whether or not disclosure is prompted by the expectation of personal gain.



14.2 Disclosure of information which counts as “commercial in confidence” and which might prejudice the principle of a purchasing system based on fair competition may be subject to scrutiny and disciplinary or criminal action, or both.

14.3 This does not affect SEL ICB’s grievance or complaints procedures in terms of freedom of expression and is not intended to restrict any of the freedoms protected under Article 10 of the Human Rights Act 1998. It is designed to complement professional and ethical rules, guidelines and codes of conduct on an individual’s freedom of expression.

14.4 For further information, please refer to the SEL ICB’s policy on:

- i) Grievances
- ii) Freedom to speak up and Whistleblowing policy
- iii) Disciplinary Policy and Procedure

## **15. Use of resources**

15.1 Under the code of conduct for NHS Managers, all managers are required to use the resources available to them in an effective, efficient and timely manner having proper regard to the best interests of the public and patients.

## **16. Fraud / Theft**

16.1 SEL ICB employees should not be afraid of raising concerns and will not experience any blame or recrimination as a result of making any reasonably evidenced suspicion known. Further information is available in SEL ICB’s Freedom to speak up - Whistleblowing policy. However, it may be considered a disciplinary issue if an employee makes non-evidenced and malicious allegations.

## **17. Donations in relation to the organisation**

17.1 Employees must check with their line manager or director before making any requests for donations (e.g. to charitable funds) or funding, to clarify the appropriateness and/or financial or contractual consequences. Requests for equipment or services should not be made without the express permission of a director.

17.2 Donations/Gifts from individuals, charities, companies (as long as they are not associated with known health-damaging products), often related to individual pieces of equipment or items, provide additional benefits to patients but may have revenue implications for SEL ICB. Further guidance regarding charitable funds and gifts and donations can be requested from the Chief Financial Officer. Any gifts to the organisation should be receipted and a letter of thanks should be sent.

## **18. Rewards for Initiative**

18.1 SEL ICB will identify potential intellectual property rights (IPR), as and when they arise, so that it can protect and exploit them properly and ensure that it receives any rewards or benefits (such as royalties) in respect of work commissioned from third parties, or work carried out by individuals in the course of their NHS duties. Most IPR are protected by

statute, e.g. patents are protected under the Patents Act 1977 and copyright (which includes software programmes) under the Copyright Designs and Patents Act 1988.

18.2 To achieve this, SEL ICB should build appropriate specifications and provisions into the contractual arrangements which it enters into before the work is commissioned, or begins. Legal advice should also be sought as required.

## **19. Candidates for appointment**

19.1 Candidates for any appointment with SEL ICB must disclose in writing if they are related to, or in a significant relationship with (e.g. spouse or partner), any board member, ICP member or employee of SEL ICB. The NHS Jobs application form requests this information and therefore must be disclosed before submission.

19.2 A member of an appointment panel, which is to consider the employment of a person, to whom he/she is related, must declare the relationship before an interview is held.

19.3 Candidates for any appointment with SEL ICB shall, when applying, also disclose cases where they or their close relatives or associates have a controlling and/or significant financial interest in a business (including a private company, public sector organisation, other NHS employer and/or voluntary organisation) or in any other activity or pursuit which may compete for an NHS contract to supply either goods or services to SEL ICB.

19.4 For directors of the ICB, the requirement of the Fit and Proper Persons Test (FPPT) will also be assessed. Part of this process includes obtaining assurance that the individual who is to be appointed as a director as per the ICBs FPPT policy has completed a conflicts of interest declaration before the appointment is confirmed, and that no conflicts disclosed are considered to impact the individuals eligibility for appointment.

## **20. Canvassing for appointments**

It is acknowledged that informal discussions concerning an advertised post can be part of the recruitment process. However, canvassing or lobbying of SEL ICB employees, board or any members of an appointment committee, either directly or indirectly, shall disqualify a candidate. This will not preclude a member from giving a written reference or testimonial of a candidate's ability, experience or character for submission to an appointments panel. Jobs will be awarded on the merit of the individual candidate and not through any such canvassing or lobbying.

## **21. Trade or discount cards**

21.1 Trade or discount cards, by which personal benefit is obtained from SEL ICB's purchase of goods or services at a reduced price are classified as gifts and should be politely declined and/or returned to the sender. The exceptions to this are benefits negotiated by SEL ICB on behalf of its staff.

## **22. Awards or prizes**

Staff should consult their relevant executive director if they are offered an award or prize in connection with their official duties and ensure that it is recorded in the same way as other gifts and hospitality.

## **23. Personal Conduct**

### **23.1. Corporate Responsibility**

All officers have a responsibility to respect and promote the corporate or collective decision of SEL ICB, even though this may conflict with their personal views. This applies particularly if a decision on an issue has yet to be made or has been decided in a way with which they personally disagree. When speaking as a member of SEL ICB, whether to the media, in a public forum or in a private or informal discussion, officers should ensure that they reflect the current policies or view of the organisation.

For any media questions or freedom of information requests, the matter should be referred to the Communications Team.

### **23.2. Gambling**

Access to gambling and betting sites is strictly prohibited. No officer may bet or gamble when on duty or on SEL ICB premises.

## **24. Making Declarations**

24.1 Declarations of any interests should be made via the online system used by the ICB, which is accessible at <https://selicb.disclose.org.uk>. The following declarations can be made via this route:

- Declarations of interest
- Declaration of gifts and hospitality received/ offered
- Honorariums – via the gifts and hospitality page

Support in accessing and completing the online form can be obtained from the ICB governance team.

## **25. Breaches**

There will be situations when interests are not identified, declared or managed appropriately and effectively. This may happen innocently, accidentally, or because of the deliberate actions of individuals or organisations.

These situations are referred to as 'breaches'. It is the duty of every ICB employee, Board member, and committee member to speak up about genuine concerns in relation to the administration of the ICB's policy on conflicts of interest management, and to report these concerns.

Individuals wishing to report a breach should in the first instance raise this to either:

- Associate Director of Corporate Operations
- Chief of Staff

- Chief Finance Officer
- Conflicts of Interest Guardian

Colleagues may also wish to consider the provisions in the Freedom to Speak Up (Whistleblowing) policy.

Irrespective of the method which is followed to raise a breach, the individual raising the concern must advise whether they wish to remain anonymous whilst the concern is investigated. If someone has a particular concern about confidentiality, they may raise the matter solely with the Conflicts of Interest Guardian, using the method identified on the Conflicts of Interest page on the ICBs intranet to make contact (<https://selondonics.sharepoint.com/SitePages/Managing-conflicts-of-interest-and-reporting-gifts-and-hospitality.aspx>). The COI guardian will be the first instance discuss the matter with the individual and consider how to retain confidentiality.

The ICB will investigate each reported breach and give relevant parties the opportunity to explain and clarify any relevant circumstances.

Following the investigation, the ICB will:

- Decide if there has been or is potential for a breach and if so what the severity of the breach is.
- Consider the impact to both future and previous decisions where the individual under investigation has been involved.
- 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.
- Advise the individual raising the concern of any decisions taken as a result of the investigation.

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

- Clarification or strengthening of existing policy, process, and procedures.
- Consideration as to whether HR/employment law/contractual action should be taken against staff or others.
- Consideration being given to escalation to external parties. This might include referral of matters to external auditors, NHS Protect, the Police, statutory health bodies (such as NHS England, NHS Improvement or the CQC), and/or health professional regulatory bodies.
- Review of previous decisions made.

In the event that a breach of the COI policy is reporting, the ICB will ensure this is recorded on the Conflicts of Interest Breach Log which will be maintained by the ICBs governance team. The Breach log will record:

- Date breach logged
- Dates of committee affected
- Date of breach
- Reporting individual
- Individual to whom the breach relates
- Description of the breach

- COI interest type associated with the breach
- Action to mitigate impact
- Action to resolve breach for future committee meetings
- Where and how the breach has been reported

A report will be submitted on a six monthly basis to the Audit Committee, providing a summary of any breaches reported and any decisions made. Where an investigation is underway at the time of an intervening Audit Committee meeting, an update on progress of a live investigation will be provided to the Audit Committee.

## **26. Non-compliance with policy**

Failure to comply with the requirements set out in this policy may lead to action against the individual in accordance with the organisation's disciplinary procedure and/or criminal action (including prosecution) under the relevant legislation.

## **27. Review**

This policy will be reviewed every two years or earlier, if NHS England issues new guidance, or if there is a change in legislation that may affect this policy.

## **28. Links to Relevant policies**

- Anti Fraud and Bribery Policy
- Freedom to Speak Up and Whistleblowing Policy
- Procurement Policy
- Disciplinary Policy
- Grievance Policy
- Standing Orders, Standing Financial Instructions & Scheme of Delegation
- Fit and Proper Persons Test Policy

## Appendix 1 - Type of Interests

- **Financial interests:** This is where an individual may get direct financial benefits from the consequences of a commissioning decision. **Examples** include:
  - A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations
  - A shareholder (or similar owner interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations
  - Management consultant for a provider
  - A provider of clinical private practice

Also includes an individual in:

- In employment outside of SEL ICB
  - In receipt of secondary income from a provider
  - In receipt of a grant from a provider
  - In receipt of any payments (for example honoraria, one off payments, day allowances or travel or subsistence) from a provider
  - In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role and
  - Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider)
- **Non-financial professional interests:** This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:
    - An advocate for a particular group of patients
    - A GP with special interests e.g., in dermatology, acupuncture etc.
    - An active member of a particular specialist professional body (although routine GP membership of the RCGP, BMA or a medical defence organisation would not usually by itself amount to an interest which needed to be declared)
    - An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE)
    - Engaged in a research role
    - Development and holding of patents and other intellectual property rights which allow staff to protect something they create, preventing unauthorised use of products or the copying of protected ideas, or
  - **Non-financial personal benefits:** This is 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. This could include, for example, where the individual is:
    - A voluntary sector champion for a provider
    - A volunteer for a provider
    - A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation
    - Suffering from a particular condition requiring individually funded treatment
    - A member of a lobby or pressure groups with an interest in health

- **Indirect interests:** This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above). For example, this should include:
  - Spouse / partner
  - Close relative e.g., parent, grandparent, child, grandchild or sibling
  - Close friend
  - Business partner

## Appendix 2 - Declaration of Interests Form

### NHS SOUTH EAST LONDON INTEGRATED CARE BOARD

#### DECLARATION OF INTERESTS FORM

*This form should only be completed by individuals who are unable to submit a declaration via the online COI system as a matter of last resort and as a short term solution whilst access is arranged.*

<b>Name:</b>				
<b>Position within or relationship with SEL ICB</b>				
<b>Interests</b>				
Type of Interest	Description of Interest (including for indirect Interests, details of the relationship with the person who has the interest)	Date interest relates From & To		Actions to be taken to mitigate risk (to be agreed with line manager or a SEL ICB senior manager)
<b>Financial</b> <i>(see overleaf)</i>				SEL ICB conflict of interest policy and procedures will be followed to ensure interests do not influence SEL ICB's commissioning/ procurement decisions.
<b>Non-Financial Professional</b> <i>(see overleaf)</i>				



<b>Non-Financial Personal</b> <i>(see overleaf)</i>				
<b>Indirect Interests</b> <i>(see overleaf)</i>				

I understand that this form follows NHS England’s guidance on interests’ declaration for ICBs. The information submitted will be held by SEL ICB for personnel or other reasons specified on this form and to comply with the organisation’s policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that SEL ICB holds.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to SEL ICB as soon as practicable as 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, professional regulatory or internal disciplinary action may result.

***To the best of my knowledge and belief, the above information is complete and correct. I have read the Conflict of Interest policy for SEL ICB and undertake to update as necessary the information provided and to review the accuracy of the information provided regularly and no longer than annually. I give my consent for the information to be used for the purposes described in the NHS South East London constitution and published accordingly.***

**Signed:**   
 (please sign not print)

**Dated:**

## Guidance Notes:

This form is required to be completed in accordance with SEL ICB's Constitution and Section 140 of *The National Health Service Act 2006*.

### Notes:

- A declaration must be made of any interest likely to lead to a conflict or potential conflict as soon as the individual becomes aware of it, and within 28 days.  
**Where a field is not applicable, please denote 'NA' and for a nil return, please denote 'Nil' or 'None'.**
- Any changes to interests declared must be registered **within 28 days** by completing and submitting a new declaration form.
- The register will be published in the Annual Report as well as every month after the board meeting on the SEL ICB public website. It will also be available to public on request and during each board meeting.
- Any individual – and in particular members and employees of SEL ICB - must provide sufficient detail of the interest, and the potential for conflict with the interests of SEL ICB and the public for whom they commission services, to enable a lay person to understand the implications and why the interest needs to be registered.
- If there is any doubt as to whether or not a conflict of interests could arise, a declaration of the interest must be made.
- An explanation of the types of interests to be declared is as below:

Types of Interest	Description
<b>Financial interests</b>	<p>This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:</p> <ul style="list-style-type: none"> <li>• A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations. This includes involvement with a potential provider of a new care model</li> <li>• A shareholder (or similar owner interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations</li> <li>• A management consultant for a provider</li> <li>• A provider of clinical private practice</li> </ul> <p>Also includes an individual in -</p> <ul style="list-style-type: none"> <li>• In employment outside of SEL ICB</li> <li>• In receipt of secondary income from a provider</li> <li>• In receipt of a grant from a provider</li> <li>• In receipt of any payments (for example honoraria, one off payments, day allowances or travel or subsistence) from a provider</li> <li>• In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role and</li> <li>• Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider)</li> </ul>

<p><b>Non-Financial Professional interests</b></p>	<p>This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:</p> <ul style="list-style-type: none"> <li>• An advocate for a particular group of patients</li> <li>• A GP with special interests e.g., in dermatology, acupuncture etc.</li> <li>• An active member of a particular specialist professional body (although routine GP membership of the RCGP, BMA or a medical defence organisation would not usually by itself amount to an interest which needed to be declared)</li> <li>• An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE)</li> <li>• Engaged in a research role</li> <li>• Development and holding of patents and other intellectual property rights which allow staff to protect something they create, preventing unauthorised use of products or the copying of protected ideas</li> <li>•</li> </ul>
<p><b>Non-Financial Personal interests</b></p>	<p>This is 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. This could include, for example, where the individual is:</p> <ul style="list-style-type: none"> <li>• A voluntary sector champion for a provider</li> <li>• A volunteer for a provider</li> <li>• A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation</li> <li>• Suffering from a particular condition requiring individually funded treatment</li> <li>• A member of a lobby or pressure groups with an interest in health</li> </ul>
<p><b>Indirect interests</b></p>	<p>This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above). For example, this should include:</p> <ul style="list-style-type: none"> <li>• Spouse / partner</li> <li>• Close relative e.g., parent, grandparent, child, grandchild or sibling</li> <li>• Close friend</li> <li>• Business partner</li> </ul> <p>A declaration of interest for a business partner in a GP partnership should include all relevant collective interests of the partnership, and all interests of their fellow GP partners (which could be done by cross-referring to the separate declarations made by those GP partners, rather than by repeating the same information verbatim).</p> <p>Whether an interest held by another person gives rise to a conflict of interest will depend upon the nature of the relationship between that person and the individual, and the role of the individual within SEL ICB.</p>

## Appendix 3 - Declaration of Gifts, Hospitality and Sponsorship Form

<b>Name</b>	
<b>Job title/ Position in SEL ICB / Department / Practice</b>	
<b>Date of Offer</b>	
<b>Date of Receipt</b> <i>(if applicable)</i>	
<b>Details of Gift / Hospitality/ Sponsorship</b>	
<b>Estimated Value</b>	
<b>Supplier / Offeror Name and Nature of the business</b>	
<b>Details of previous offers or acceptance by this Offeror / Supplier</b>	
<b>Was the gift/hospitality/ sponsorship declined or accepted?</b>	
<b>Reason for accepting or declining</b>	
<b>Other comments</b>	

<b>Signature</b>	
<b>Date</b>	

*The information submitted will be held by SEL ICB for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998.*

*Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that SEL ICB holds.*

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to SEL ICB 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, professional regulatory or internal disciplinary action may result.

I also note that completion of this form does not replace recording of the declaration on the online Disclose system, but is necessary to record my line managers acknowledgement and approval.

**MANAGER REVIEW, if applicable: Please delete as appropriate**

**I have reviewed the gift /hospitality\*/sponsorship recorded above. I consider the action taken to be reasonable / I have taken the following action with regard to the matter:**

**Comments:**

.....

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

## Appendix 4 Joint Working Proposal Form

### Procedure and framework for the approval of joint working projects between NHS South East London ICB and the Pharmaceutical Industry.

#### 1. Identify potential collaborative work

Any collaboration with the pharmaceutical industry must be transparent and defensible with agreed aims and objectives

#### 2. Complete joint working proposal

It is the responsibility of each individual employee to follow the policy framework when accepting any commercial support. SEL ICB staff must gain permission from their line manager and the medicines management team before undertaking any joint projects with the pharmaceutical industry.

#### 3. Line manager and a Deputy Chief Pharmacist assess appropriateness of application

The line manager must be satisfied that approval of the joint working project will not compromise trust decisions. They must ensure that the work is beneficial to the organisation, that there is no conflict of interests and that the framework is adhered to. They must refer to the SEL ICB medicines management team if they feel unable to judge the suitability of the proposal. In order to ensure congruence with the strategic aims of SEL ICB's prescribing agenda, each project will require approval by the Head of Medicines Management. It is their responsibility to resolve any contentious issues and have the final say in determining the appropriateness of any collaboration with the industry.

#### 4. Submission of full business case

If the joint working proposal is approved then the applicant must submit a business case to NHS South East London ICB Board for approval.

Each project will require relevant documentation in place which includes a:

- Business case for project with the pharmaceutical industry
- Framework for joint working
- Joint working agreements

This does not apply to procurement. One particular concern is the impact of commercial sponsorship on prescribing. This will need to be assessed against certain criteria e.g.

- **Affordability:** an increase in prescribing in one area may deprive funding and resources for other areas of healthcare.
- **Current evidence-based guidelines:** e.g. NICE, NSFs, South London cardiac and stroke network guidelines, local formularies.
- **Healthcare priorities:** does this fit with nationally and locally agreed healthcare priorities.

**Joint working proposal form**

Name of applicant.....

Position/ directorate.....

Name of sponsoring organisation.....

Sponsor contact name..... Date.....

Please summarise the joint work proposal?

What is the proposed contribution by the sponsoring organisation?

**Please answer the following questions:**

1. Is the joint working proposal consistent with the guidance given in the NHS South East London ICB Standards Of Business Conduct Policy?
2. **Y / N\***
3. Is the proposed involvement of the sponsoring organisation of an appropriate level for the purpose? **Y / N\***
4. Is SEL ICB satisfied with its knowledge of the sponsoring organisation, e.g. is it known to SEL ICB? Is there evidence of audited accounts? Is it capable of being independently audited? **Y / N\***
5. Is SEL ICB satisfied that the offer is independent of purchasing or prescribing decisions? **Y / N\***
6. Can it be confirmed that there is no current conflict of interest for any parties in relation to the service offered? **Y / N\***
7. Are you satisfied that all materials and information supplies are valid, evidence-based, balanced and non-promotional? **Y / N\***
8. Have you reached an agreement with all members of your team involved that the service is appropriate? **Y / N\***
9. If patients are involved have arrangements been made to ensure the patients are aware of the service where appropriate? **Y / N / Not applicable\***

N.B. If the answer is no to any of the above questions the proposed sponsorship is likely to be unsuitable and should be reviewed before submission.

**Once complete please pass this to your line manager and the medicines management team for approval.**

**All projects should be included on the SEL ICB's Register of Interests.**

Signature of approval..... Date.....

Name and position.....

Signature of Deputy Chief Pharmacist.....

Name of Deputy Chief Pharmacist.....

**\* delete as appropriate**



## Appendix 5 template for declarations of interest for meeting

Under the Health and Social Care Act 2012, there is a legal obligation to manage conflicts of interest appropriately. It is essential that declarations of interest and actions arising from the declarations are recorded formally and consistently across all SEL ICB board, ICP, committee and sub-committee meetings. This checklist has been developed with the intention of providing support in conflicts of interest management to the chair of the meeting- prior to, during and following the meeting. It does not cover the requirements for declaring interests outside of the committee process.

Timing	Checklist for Chairs	Responsibility
In advance of the meeting	<ol style="list-style-type: none"> <li>1. <b>The agenda</b> to include a standing item on declaration of interests to enable individuals to raise any issues and/or make a declaration at the meeting.</li> <li>2. A <b>definition of conflicts of interest</b> should also be accompanied with each agenda to provide clarity for all recipients.</li> <li>3. <b>Agenda</b> to be circulated to enable attendees (including visitors) to identify any interests relating specifically to the agenda items being considered.</li> <li>4. <b>Members should contact the chair</b> as soon as an actual or potential conflict is identified.</li> <li>5. Chair to review a <b>summary report from preceding meetings</b> i.e., sub-committee, working group, etc., detailing any conflicts of interest declared and how this was managed.</li> </ol> <p><b>A template for a summary report</b> to present discussions at preceding meetings is detailed below.</p> <ol style="list-style-type: none"> <li>6. A <b>copy of the members' declared interests</b> is checked to establish any actual or potential conflicts of interest that may occur during the meeting.</li> </ol>	<p>Meeting chair and secretariat</p> <p>Meeting chair and secretariat</p> <p>Meeting chair and secretariat</p> <p>Meeting members</p> <p>Meeting chair</p> <p>Meeting chair</p>
During the meeting	<ol style="list-style-type: none"> <li>7. <b>Check and declare the meeting is quorate</b> and ensure that this is noted in the minutes of the meeting.</li> </ol>	Meeting chair

Timing	Checklist for Chairs	Responsibility
	<p><b>8. Chair requests members to declare any interests in agenda items-</b> which have not already been declared, including the nature of the conflict.</p> <p><b>9. Chair makes a decision</b> as to how to manage each interest which has been declared, including whether / to what extent the individual member should continue to participate in the meeting, on a case by case basis, and this decision is recorded.</p> <p><b>10. As minimum requirement, the following should be recorded in the minutes of the meeting:</b></p> <ul style="list-style-type: none"> <li>• Individual declaring the interest;</li> <li>• At what point the interest was declared;</li> <li>• The nature of the interest;</li> <li>• The chair’s decision and resulting action taken;</li> <li>• The point during the meeting at which any individuals retired from and returned to the meeting - even if an interest has not been declared;</li> <li>• <b>Visitors in attendance</b> who participate in the meeting must also follow the meeting protocol and declare any interests in a timely manner.</li> </ul> <p style="text-align: center;"><b>A template for recording any interests during meetings</b> is detailed below.</p>	<p>Meeting chair</p> <p>Meeting chair and secretariat</p> <p>Secretariat</p>
<p><b>Following the meeting</b></p>	<p><b>11. All new interests declared</b> at the meeting should be promptly updated onto the declaration of interest form;</p> <p><b>12. All new completed declarations of interest</b> should be <b>transferred onto the register of interests for that meeting.</b></p>	<p>Individual(s) declaring interest(s)</p> <p>Designated person responsible for registers of interest</p>

## Appendix 6 – Template to be used when Procuring Primary Care Services

To be used when commissioning services from GP practices, including provider consortia or organisations in which GPs have a financial interest

<b>Service:</b>
-----------------

Question	Comment/Evidence
<b>Questions for all three procurement routes</b>	
How does the proposal deliver good or improved outcomes and value for money – what are the estimated costs and the estimated benefits? How does it reflect SEL ICB's proposed commissioning priorities? How does it comply with the SEL ICB's commissioning obligations?	
How have you involved the public in the decision to commission this service?	
What range of health professionals have been involved in designing the proposed service?	
What range of potential providers have been involved in considering the proposals?	
How have you involved your Health and Wellbeing Board(s)? How does the proposal support the priorities in the relevant joint health and wellbeing strategy (or strategies)?	
What are the proposals for monitoring the quality of the service?	
What systems will there be to monitor and publish data on referral patterns?	
Have all conflicts and potential conflicts of interests been appropriately declared and entered in registers which are publicly available? Have you recorded how you have managed any conflict or potential conflict?	

Why have you chosen this procurement route? <sup>2</sup>	
What additional external involvement will there be in scrutinizing the proposed decisions?	
How will SEL ICB make its final commissioning decision in ways that preserve the integrity of the decision-making process and award of any contract?	

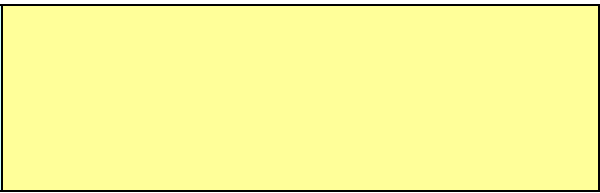
<b>Additional question when qualifying a provider on a list or framework or pre-selection for tender (including but not limited to any qualified provider) or direct award (for services where national tariffs do not apply)</b>	
How have you determined a fair price for the service?	

<b>Additional questions for when qualifying a provider on a list or framework or pre-selection for tender (including but not limited to any qualified provider) where GP practices are likely to be qualified providers</b>	
How will you ensure that patients are aware of the full range of qualified providers from whom they can choose?	

<b>Additional questions for proposed direct awards to GP providers</b>	
What steps have been taken to demonstrate that the services to which the contract relates are capable of being provided by only one provider?	
In what ways does the proposed service go above and beyond what GP practices should be expected to provide under the GP contract?	

<sup>2</sup> Taking into account all relevant regulations (e.g. the NHS (Procurement, patient choice and competition) regulations 2013 and guidance (e.g. that of Monitor).

What assurances will there be that a GP practice is providing high-quality services under the GP contract before it has the opportunity to provide any new services?



## Appendix 7 – Equity Impact Assessment

This is a checklist to ensure that relevant equality and equity aspects of proposals have been addressed either in the main body of the document or in a separate Equality & Equity Impact Assessment (EEIA)/ Equality Analysis. It is not a substitute for an EEIA which is required unless it can be shown that a proposal has no capacity to influence equality. The checklist is to enable the policy lead and the relevant committee to see whether an EEIA is required and to give assurance that the proposals will be legal, fair and equitable.

The word “proposal” is a generic term for any policy, procedure or strategy that requires assessment.

### Equality Impact Assessment Screening Tool

<b>Date of Assessment</b>	03/04/24
<b>Assessor Name(s) &amp; Job Title(s)</b>	Simon Beard, associate director of corporate operations
<b>Organisation</b>	NHS SEL ICB
<b>Name of the project/decision</b>	SEL ICB Standards of Business Conduct policy
<b>Aim/Purpose of the project/decision</b>	To ensure the policy does not obtain any content which may have an adverse workforce equality or health inequality impact.

- 1. Do you consider the project/decision to have an *adverse workforce equality impact and/or health inequality impact* on any of the protected groups as defined by the Equality Act 2010? Write either ‘yes’ or ‘no’ next to the appropriate group(s).**

Protected group	Yes/No	Protected group	Yes/No	Protected group	Yes/No
Age	No	Pregnancy/Maternity	No	Marriage/Civil Partnership (employment only)	No
Disability	No	Race	No	Socio-economic / Deprivation	No
Gender	No	Religion/Belief	No	Carers	No
Gender reassignment	No	Sexual orientation	No		

**2. If you answered 'yes' to any of the above give your reasons why**

[Please insert comments here]

**3. If you answered 'no' to any of the above give your reasons why**

This policy document is written to ensure that the ICB has a robust and effective set of standards for business conduct, in order to appropriately manage actual or perceived conflicts of interest which may arise for individuals in key roles within the organisation.

No detrimental impact is anticipated to any group of individuals as a result of implementation of this policy. The policy adheres to best practice and national guidance, and will be applied to all NHS staff employed by the organisation in addition to other committee members and associated individuals. There is no evidence that the policy will impact, disadvantage or discriminate against any particular protected characteristic group.

<b>4. Please indicate if a Full Equality Impact Assessment is recommended:</b>		<b>NO</b>	<b>YES</b>
Signature of Project Lead:  Simon Beard	Date completed 03/04/24	  <b>X</b>	
Signature of reviewing member of Equality Team:  Roger Hendicott	Date reviewed:  19/04/24	<b>IF YES, BEGIN TO GATHER DATA FOR COMPLETION OF A FULL EQUALITY IMPACT ASSESSMENT</b>	

**The signed and completed Screening Tool should be attached as an appendix to the project/decision documentation as evidence of completion and proof of review**