

# Declaring and Managing Interests

## Including Managing Conflicts of Interest



<b>DOCUMENT STATUS:</b>	<b>APPROVED</b>
<b>DATE ISSUED:</b>	<b>OCTOBER 2017</b>
<b>DATE TO BE REVIEWED:</b>	<b>OCTOBER 2019</b>

## AMENDMENT HISTORY

VERSION	DATE	AMENDMENT HISTORY
1.1	November 2014	First Revision
1.2	December 2014	Revised following comments by Jim Oatridge
1.3	December 2014	Reviewed to incorporate revised guidance from NHS England
<b>2.0</b>	<b>January 2015</b>	<b>Reviewed following comments from the Audit and Governance Committee</b>
2.1	October 2015	Revision by Peter McKenzie
2.2	July 2016	Revision Following changes to NHS England Statutory Guidance
<b>3.0</b>	<b>July 2016</b>	<b>Approved Version by Governing Body &amp; Audit and Governance Committee</b>
3.1	July 2017	Reviewed following amended Guidance from NHS England
<b>4.0</b>	<b>October 2017</b>	<b>Revised Version (statutory changes) approved by Audit and Governance Committee and Senior Management Team</b>

## REVIEWERS

This document has been reviewed by:

NAME	TITLE/RESPONSIBILITY	DATE	VERSION
Peter McKenzie	Corporate Operations Manager	November 2014	1.1
Jim Oatridge	Lay Member for Audit and Governance	December 2014	1.1
Peter McKenzie	Corporate Operations Manager	October 2015	2.1
Peter McKenzie	Corporate Operations Manager	July 2016	3.1
Peter McKenzie	Corporate Operations Manager	July 2017	3.2

## APPROVALS

This document has been approved by:

GROUP/COMMITTEE	DATE	VERSION
Governing Body	13 January 2015	1.3
	9 March 2016	2.1
	12 July 2016	3.0
Audit and Governance Committee	20 January 2015	2.0
	23 February 2016	2.1
	19 July 2016	3.0
	18 July 2017	4.0

## DISTRIBUTION

This document has been distributed to:

Distributed To:	Distributed by/When	Paper or Electronic	Document Location
All Staff			CCG Intranet

## DOCUMENT STATUS

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of the document are not controlled.

## Contents

1. Introduction and Purpose .....	4
2. Scope of Policy .....	5
3. Key Roles and Responsibilities .....	6
4. Registration of Interests .....	7
5. General Principles for Managing Potential and Actual Conflicts of Interest.....	10
6. Declarations of Interests at Meetings .....	11
7. NHS England Delegated Functions.....	12
8. Gifts and Hospitality .....	13
9. Training.....	15
10. Raising Concerns and breaches .....	15
11. Review of Policy.....	16
Appendix A – Declaration of Interest Form.....	18
Appendix B – NHS England Challenge Template.....	21
Appendix C – Conflict of Interest Chair’s Checklist.....	23

## 1. Introduction and Purpose

- 1.1. This policy is a key element of the Group's Business Conduct Policies<sup>1</sup> and is available on the group's website at [www.wolverhamptonccg.nhs.uk](http://www.wolverhamptonccg.nhs.uk). It sets out how NHS Wolverhampton Clinical Commissioning Group (CCG) will manage conflicts of interest arising from the business of the organisation and should be read alongside the constitution (including the standing orders in Appendix E) and the Codes of conduct for staff and Governing Body Members and clinical leads.
- 1.2. The policy has been drafted in accordance with relevant legislation and guidance including:-
- NHS England Code of Conduct: "Managing conflicts of interest where GP practices are potential providers of CCG-commissioned services" (October 2012)
  - NHS England: "Managing conflicts of interest: Statutory Guidance for CCGs" (June 2016)
  - The National Health Service (Procurement, Patient Choice and Competition) Regulations 2013, SI 2013/257
  - Royal College of General Practitioners' ethical commissioning guidance (October 2011)
  - The four principles set out in the NHS England Towards Establishment: Creating responsive and accountable CCGs, Technical appendix 1:-
    - Doing business properly
    - Being proactive not reactive
    - Assuming that individuals will seek to act ethically and professionally, but may not always be sensitive to all conflicts of interest
    - Being balanced and proportionate
- 1.3. The CCG is responsible for the stewardship of vast public resources and the commissioning of healthcare services for the community. It is therefore determined to inspire confidence and trust by demonstrating integrity by acting in accordance with the principles of Good Governance set out in paragraph 4.5 of the constitution. These include nationally recognised standards such as the Nolan Principles governing standards of behaviour in public life, the Good Governance Standard for Public Services<sup>2</sup>, the seven key principles of the NHS Constitution and the Equality Act 2010. Locally, the development of this policy is based on these principles and helps to ensure all of the group's decisions are taken and demonstrably seen to be taken for the right reasons and in line with the following principles:-
- The interests of patients remain paramount at all times;
  - The Group's business is conducted in an impartial and honest manner;
  - Public funds are used to the best advantage of the service, always ensuring value for money;
  - No employees or appointees abuse their position for personal gain or to the benefit of their family or friends;
  - No employees or appointees seek to advantage or further private or other interests in the course of their duties.

---

<sup>1</sup> Paragraph 8.1.2 of the group's constitution

<sup>2</sup> The Good Governance Standard for Public Services, The Independent Commission on Good Governance in Public Services, Office of Public Management (OPM) and The Chartered Institute of Public Finance & Accountability (CIPFA), 2004

- 1.4. This ethos underpins this policy, by setting out steps to avoid any potential or real situations where there could be suggestions of undue bias or influence in the decision making of the CCG throughout the 'Commissioning Cycle'. This means that efforts will be made to ensure that:-
- Service design and specification is informed by appropriate patient and public engagement and the views of relevant providers and expert clinicians;
  - Procurement decisions (and other decisions with financial consequences) are in line with the the CCG's responsibilities under The National Health Service (Procurement, Patient Choice and Competition) Regulations 2013<sup>3</sup>, which stipulate that the Group:
    - when procuring health care services, must treat providers equally and not treat a provider or type of provider more favourably, in particular on the basis of ownership - Regulation 3(2)(b);
    - must not award a contract for the provision of health care services where conflicts or potential conflicts between commissioning and providing the services affect or appear to affect the integrity of that contract award – Regulation 6(1);
    - must maintain a record of how it managed any such conflicts of interest in relation to each such contract that it has entered into – Regulation 6(2);
    - must provide Monitor with any specified information in its possession for the purposes of an investigation into any complaint received by Monitor regarding the Group's failure to comply with the above – Regulation 13(4).

## 2. Scope of Policy

- 2.1. This policy applies to:-
- CCG Member practices;
  - Governing Body Members and members of the Group's committees;
  - Employees of the group; and
  - Any individuals contracted to work on the group's behalf or otherwise provide services or facilities to it.
- 2.2. In addition, anyone engaging with the Group in relation to the actual or potential provision of services or facilities to it will be required to comply with this policy as regards the declaration of any relevant actual or potential conflict of interest.
- 2.3. A conflict of interest is defined as a situation in which:-
- There is a real possibility that any interest will lead an individual to act in a way that is not impartial and independent in carrying out their duties on behalf of the group;
  - There is a real possibility that any interest held by somebody with whom an individual has a close association (such as a close relative, friend or business associate) will lead an individual to act in a way that is not impartial and independent in carrying out their duties on behalf of the group;
  - A fair minded and informed observer would conclude that one of the above interests exists and that there was a real possibility that the interest could lead

---

<sup>3</sup> [SI 2013/257](#)

the individual to act in a way that is not impartial or independent in carrying out their duties on behalf of the group.

- 2.4. As highlighted above, when considering conflicts of interest, there may be circumstances when it is not necessary for an actual conflict to exist. It may be sufficient that there is a perceived conflict, where there is a reasonable perception that the individual is influenced or could be open to influence.
- 2.5. The definition of a close relative includes spouses, civil partners, partners, parents, children (adult and minor) and siblings. It also includes other people living in the same household as the individual. For the avoidance of doubt, GPs on the Governing Body, other GPs in their practice will be considered to be business associates for the purpose of this policy.
- 2.6. Further details on the interests that must be registered is given in Section 3 of this policy, but in general potential conflicts of interest may arise from:-
- **Financial Interests** – where an individual or somebody with whom they have a close association may financially benefit from the consequences of group decision (for example, a decision to commission a provider of services);
  - **Non-Financial Professional Interests** – where an individual or somebody with whom they have a close association may obtain a non-financial professional benefit from the consequences of a group decision, such as increasing their professional reputation or status or promoting their professional career;
  - **Non-Financial Personal Interests** – where an individual or somebody with whom they have a close association may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit (for example, a reconfiguration of hospital services which might result in the closure of a busy clinic next door to an individual's house);
- 2.7. Failure to comply with this policy is taken very seriously by the group and may have significant consequences. Details are given in Section 9 of this policy on how breaches of the policy will be managed but could include investigations under the disciplinary policy for employees or as a breach of the code of conduct for governing body members. Failure to comply with this policy by member practices will be treated as a dispute in line with paragraph 7.10 of the Constitution.

### 3. Key Roles and Responsibilities

3.1. The Accountable Officer has overall responsibility for how the CCG manages conflicts of interest and every individual to whom this policy applies is responsible for acting in accordance with its requirements. Beyond this, there are specific roles for ensuring that this policy operates effectively.

#### 3.2. Conflicts of Interest Guardian

The Governing Body Lay Member for Audit and Governance is designated as the CCG's Conflict of Interest Guardian. The CCG's constitution sets out their role in ensuring arrangements are in place to manage conflicts of interests<sup>4</sup> and to have an

---

<sup>4</sup> Paragraphs 8.4.2 to 8.4.4, Sections 4 and 5 are approved by the Lay Member as the Group's arrangements under these paragraphs

oversight of how effectively they are operating (in conjunction with the Audit and Governance Committee).

In line with the 2016 Statutory Guidance, their role also includes:-

- Acting as a conduit for GP practice staff, members of the public and healthcare professionals who have any concerns with regards to conflicts of interest;
- Being a safe point of contact for employees or workers of the CCG to raise any concerns in relation to this policy;
- Supporting the rigorous application of conflict of interest principles and policies
- Providing independent advice and judgment where there is any doubt about how to apply conflict of interest policies and principles in an individual situation; and
- Providing advice on minimising the risks of conflicts of interest.

### 3.3. **Corporate Operations Manager**

In recognition that the role of Conflict of Interest Guardian is strategic, the Corporate Operations Manager has day to day responsibility for managing conflict of interest matters and queries. This includes:-

- Maintaining the CCG's registers of Interests and Gifts and Hospitality;
- Supporting the Conflict of Interest Guardian to enable them to fulfil their role effectively;
- Providing advice, support and guidance on how conflicts of interest should be managed;
- Ensuring that appropriate administrative processes and training are put in place.

### 3.4. **Governing Body and Committee Chairs**

The nature of the CCG's decision making arrangements mean that conflicts of interest may well occur during formal meetings. The Chairs of such decision making forums will have responsibility for ensuring that the requirements of this policy are met at meetings. This will include (with appropriate advice) determining whether a conflict of interest exists, the action to be taken in response and that the outcome is clearly recorded in the record of the meeting.

## 4. **Registration of Interests**

4.1. It is the responsibility of all individuals to whom this policy applies to ensure that they are not placed in a position which creates a potential conflict between their private interests and their CCG duties. The CCG needs to be aware of all situations where individuals' interests may have the potential to cause a conflict so all persons covered by the policy are required to declare any relevant interest held by themselves or any person defined by paragraph 2.5 above using the Declaration of Interest Form (Appendix A).

4.2. For the purposes of paragraph 3.1, the individuals from Member practices to whom this policy applies are defined as:-

- GP Partners (or where the practice is a company, each director); and
- Any individual directly involved with the business or decision-making of the CCG.

4.3. Individuals should consider their personal circumstances very carefully when completing the declaration form. Whilst not intended to be a comprehensive list,

relevant interests that may impact on the work of CCG that should be declared may include:-

### **Financial Interests**

- Roles and responsibilities held within member practices
- Directorships, including non-executive directorships held in private companies or public limited companies (with the exception of those of dormant companies) which may seek to do business with the CCG (or, where relevant, its providers)
- Ownership or part ownership of companies, businesses or consultancies which may seek to do business with the CCG (or, where relevant, its providers)
- Significant share holdings (a controlling interest or more than £25,000/1% of the nominal share capital whichever is the larger) in organisations which may seek to do business with the CCG (or, where relevant, its providers)
- Employment with (or provision of consultancy services to) an organisation which currently does or may seek to do business with the CCG (or, where relevant, its providers)
- Receipt of research funding/ grants from the CCG (or, where relevant, its providers)
- Interests in pooled funds that are under separate management (any relevant company included in this fund that has a potential relationship with the CCG must be declared)
- Current contracts with the CCG in which the individual has a beneficial interest
- Any payments (e.g. honoraria, one off payments, day allowances or travel or subsistence) from an organisation which currently does or may seek to business with the CCG
- The receipt of individual Gifts and Hospitality worth over £25 or several gifts worth over £100 in a 12 month period from a single source (see Section 6 for more details)

### **Non-Financial Professional Interests**

- Roles acting as an advocate for a particular group of patients
- Clinical areas of special interest for GPs
- Membership of particular specialist professional body
- Advisory roles or non-executive directorships with organisations such as the Care Quality Commission or National Institute for Health and Care Excellence

### **Non-Financial Personal Interests**

- Roles acting as a voluntary sector champion for a provider
- Voluntary roles within organisations which currently or may seek to do business with the CCG
- Membership of or a position of trust in a charity or voluntary organisation in the field of health and social care
- Suffering from a particular condition that requires individually funded treatment
- Formal interest with a position of influence in a political party or organisation
- A member of a lobby or pressure group with an interest in health.

- 4.4. As outlined in the constitution, the arrangements for appointing members to the Governing Body will include a requirement to declare any potential conflicts of interest. The Accountable Officer (in consultation with the statutory Lay Members of the Governing Body) will then assess whether any identified conflicts would prevent the individual concerned making a full and proper contribution to the governing body.

If such significant conflicts do exist, the individual concerned will be excluded from the appointment process.

4.5. Induction arrangements for staff, Governing Body Members and committee members will include training on the arrangements for managing conflicts of interest. In addition, advice on the registration of interests is available to all individuals covered by this policy from the Corporate Operations Manager. This will include any clarification of the categories listed above and advice on whether situations not covered by the above categories should be registered.

4.6. The Group will use these declarations to maintain and publish on its internet site Registers of Interests for:

- the members of the Group;
- the members of its Governing Body;
- other members of any committees or sub-committees;
- other employees and anyone else required to declare interest under a contract for their services.

The registers will include details, where appropriate, of how any specifically identified conflicts of interest will be managed. All individuals will be made aware that information included in the register will be published and open to public inspection.

4.7. If an individual feels that information relating to an interest that must be registered is sensitive they can request that the information not be included in the public register. Such requests must be made in writing to the Conflicts of Interest Guardian, who will determine whether the request is valid and maintain a separate register of any information not included on the public version.

4.8. For the purposes of paragraph 3.6, information is considered to be sensitive if making it open to public inspection is prohibited by law or could lead to the individual or a close personal relation suffering harm or distress.

4.9. On at least a six monthly basis, all those persons covered by this policy will be formally reminded of the need to declare interests and to confirm the accuracy of the interests already registered against their name. The Registers will also be reviewed quarterly by the Corporate Operations Manager to ensure that they accurately reflect all of the declarations of interest submitted or withdrawn since the previous such review.

4.10. Any person covered by this policy who becomes aware that they have a relevant interest because:

- their personal circumstances change;
- they become aware, either in the course of any transaction (including conversations between two or more individuals, e-mails, correspondence and other communications) on behalf of the Group or when they find out about a decision to be made by the Group that they have a relevant interest that they had not previously recognised and declared;

must inform the Corporate Operations Manager of the change in their interests, as soon as practicable after they become aware of it to ensure that this interest is registered within 28 days.

## 5. General Principles for Managing Potential and Actual Conflicts of Interest

- 5.1. As highlighted above, the CCG's constitution sets out the responsibility of the Conflict of Interest Guardian to ensure arrangements are in place to manage conflicts of interests<sup>5</sup>. All individuals covered by this policy must comply with the arrangements outlined below and any instructions given to them under those arrangements.
- 5.2. When an actual or potential conflict of interest is identified, the individual with the conflict of interest will normally be instructed to withdraw from any activity, transactions or meetings relating to the conflict on a permanent basis. Where the conflict only becomes apparent in the course of activity, transactions or meetings, the individual must withdraw at the point the conflict is identified and their interest communicated to all relevant parties.
- 5.3. As a consequence of paragraph 5.2, individuals with a conflict of interest should also not be party to any information relating to the matter in which they have a conflict other than information that is publicly available. This means that, if they are a member of a committee or governing body, they should not receive copies of any private papers relating to the matter in which they have a conflict of interest.
- 5.4. For decisions that affect all of the practices in the Group, any individual with a resulting conflict of interest can be involved in developing relevant proposals and their discussion at Committees and Governing Body level. They will not be able to vote on the decision and another non-conflicted party must be involved in formally putting recommendations to any Committee or the Governing Body.
- 5.5. In addition, in regard to conflicts as regards any decision required of the Group with regard to services actually or potentially provided by the members of the group the Group will follow the NHS England Code of Conduct and use the template in Appendix B for all relevant commissioning decisions. In particular the Group will:
- arrange for access to robust, independent advice and support with regard to procurement and contract management;
  - publish the details of all contracts, including their value, on the Group's website as soon as they are agreed;
  - publish on the Group's website the types of services being commissioned through Any Qualified Provider and the agreed price for each service;
  - liaise with NHS England when commissioning any service from a primary care provider that is related to the services that some or all GP practices provide under the GP contract
- 5.6. A register of all procurement decisions made by the Group will be maintained and published on the Group's website and made available for inspection at the Group's offices. This register will include the details of the decision, who was involved in making the decision (including whether this involved the Governing Body or a Committee) and a summary of any conflict of interests that were declared and how they were managed.

---

<sup>5</sup> Paragraphs 8.4.2 to 8.4.4, Sections 4 and 5 are approved by the Lay Member as the Group's arrangements under these paragraphs

- 5.7. Where, due to the specific nature of the interests involved, a different approach is required, the Conflict of Interest Guardian (or their nominee) will communicate the arrangements for managing the actual or potential conflict of interest to all relevant parties within 7 days of a conflict being identified<sup>6</sup>.
- 5.8. As outlined in the constitution, alternative arrangements may include the following actions:
- referring the matter to the group's governing body to progress;
  - inviting one or more of the following, who do not have the conflict of interest, to attend the relevant meeting to provide additional scrutiny to the matter and advice to those who can participate:
    - A practice representative;
    - A member of a relevant Health and Wellbeing Board;
    - A member of a governing body of another clinical commissioning group.
- This list is not exhaustive, and any arrangements will be recorded and communicated in line with the requirements of paragraph 5.7 above and paragraph 8.4.10 of the Constitution.

## **6. Declarations of Interests at Meetings**

- 6.1. The agenda for meetings of the Group, the Governing Body and their Committees and Locality Boards will contain a standing item at the commencement of each meeting, requiring the chair, members and other invited attendees to declare any interests relating specifically to the agenda items being considered.
- 6.2. Participants must be specific when declaring interests. They should state which agenda item their interest relates to, the nature of the interest and whether or not their interest creates a potential conflict of interest.
- 6.3. If a member or other invited attendee becomes aware of an interest during the course of the discussion on a particular item they must declare it as soon as they become aware of it and, if it has not previously been included in the register of interests, take the steps outlined in paragraph 3.9 to ensure the interest is registered.
- 6.4. Where the interest declared constitutes an actual or potential conflict of interest, the participant in question will leave the room prior to the item being discussed and not take part in the discussion or any vote that takes place<sup>7</sup>.
- 6.5. If there is any doubt as to whether an interest that has been declared constitutes a conflict of interest advice should be sought from the Corporate Operations Manager. In general terms, it is often safest to assume that a conflict does exist and act accordingly, particularly where the interest relates to a decision to be made at the meeting.

---

<sup>6</sup> This may include circumstances covered by paragraphs 8.4.9 and 8.4.10 of the constitution when a quorum of the Governing Body or a Committee cannot be reached due to the existence of conflicts of interest.

<sup>7</sup> Unless alternative arrangements have been put in place by the Lay Member for Audit and Governance under paragraphs 8.4.3 or the Chair under Paragraphs 8.4.9 and 8.4.10 of the Constitution

- 6.6. The Chair will follow the checklist set out at Appendix C for ensuring that the arrangements outlined in this policy are rigorously applied at meetings. If the Chair has to make a ruling on any potential or actual conflicts during the meeting, including determining the action to be taken, their ruling will be final.
- 6.7. If the application of paragraph 5.4 above means that a meeting cannot be quorate for any decision, that matter will be deferred until the meeting is quorate or dealt with under paragraphs 8.4.9 to 8.4.10 of the constitution as necessary.
- 6.8. Paragraphs 8.4.9 and 8.4.10 of the constitution cover situations where a quorum could never be reached due to actual or perceived conflicts of interest. It sets out the responsibility of the chair of the meeting to consult with the Lay Member for Audit and Governance on alternative actions that could be taken.
- 6.9. If a part of a meeting of the Governing Body cannot be quorate due to conflicts of interest, standing order 3.6.2 will apply and the relevant parts of such meetings will be chaired by the Deputy Chair or, in their absence, another non-conflicted member selected from among and by the non-conflicted members present. Those members allowed to vote will do so having ensured that they have received independent advice<sup>8</sup>, either before or at the relevant meeting.
- 6.10. All declarations of interest, any subsequent action taken and any other relevant information – including any advice given will be recorded in the minutes of the meeting.

## **7. NHS England Delegated Functions**

- 7.1. In general, the arrangements set out above in sections 5 and 6 will apply when the CCG is discharging functions delegated to it by NHS England. This includes the commissioning of Out of Hours services and Primary Medical Services.
- 7.2. Specific arrangements have been made in the NHS England guidance for co-commissioning of Primary Medical services, including ensuring that:-
  - The Deputy Chair of the CCG Governing Body Chairs the committee responsible for commissioning Primary Medical Services;
  - A Lay Member of the Governing Body acts as the deputy chair of the committee responsible for commissioning Primary Medical Services;
  - The committee responsible for commissioning Primary Medical Services will have a Lay and Executive majority;
  - NHS England representatives on the committee responsible for commissioning Primary Medical Services will be required to comply with the CCG's arrangements for managing conflicts of interest; and
  - A representative of Local Healthwatch and a Local Authority representative from the Health and Wellbeing Board are invited to observe meetings of the Committee responsible for commissioning Primary Medical Services to provide assurance that conflicts of interest are adequately managed.

---

<sup>8</sup> In line with paragraph 8.4.10(b) of the constitution

## 8. Gifts and Hospitality

- 8.1. In general terms, in order to support the broad aims of this policy, offers of gifts and hospitality beyond those defined in paragraph 6.4 should be politely but firmly declined as accepting such offers could lead to similar claims of undue influence as with other conflicts of interest. It is an offence under the Bribery Act 2010 for anyone to request, agree to receive or receive any financial or other advantage as an inducement to or reward for improper behaviour by them or anyone else.
- 8.2. For the purposes of this policy, the offer of a discount that would not normally be available to the individual is to be considered the offer of a gift.
- 8.3. All relevant offers of gifts or hospitality should be declared to the Corporate Operations Manager, who will maintain a register of gifts and hospitality both received and declined and who will advise individuals when the receipt of gifts or hospitality becomes a relevant interest as defined in paragraph 4.3 above. The register of gifts and hospitality will be published on the CCG's website.
- 8.4. Any personal gift of cash or cash equivalents (e.g. vouchers, tokens, offers of remuneration to attend meetings whilst in a capacity working for or representing the CCG) must always be declined, regardless of value. The offer which has been declined must be reported to the Corporate Operations Manager.
- 8.5. Gifts, from suppliers or contractor doing business or likely to do business with the CCG other than low cost, branded promotional aids under the value of a common industry standard of £6 should be declined, whatever their value. Such promotional gifts need not be declared but the offer of any other gifts should be declared to the Corporate Operations Manager.
- 8.6. Modest Gifts of low intrinsic value (less than £50) from other sources, including patients or their families, may be accepted but must be declared. Any gifts over £50 should be treated with caution and only be accepted on behalf of the Group, not by a member of staff in a personal capacity. Any such offers must be declared.
- 8.7. A common sense approach to the valuing of gifts will be taken, using an actual amount where possible or an estimate made by a reasonable person. The Corporate Operations Manager will be responsible for making the estimation in conjunction with the individual offered the gift.
- 8.8. Hospitality such as meals and refreshments provided to individuals in connection with events, meetings or working visits at another organisation is acceptable without being declared, provided it is under the value of £25. Meals and refreshments of a value between £25 and £75 may be accepted but must be declared. Individuals covered by this policy must consider whether or not accepting such offers of hospitality would affect or be seen to affect their judgement. Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. Individuals should seek advice and, where appropriate, senior approval before accepting and declaring such offers.

- 8.9. Where the Group receives or solicits offers of sponsorship for meetings, training events or publications this Policy requires that:-
- the sponsor's involvement must be made public without giving their advertising or promotional material undue significance;
  - nothing said or issued during a meeting or training event or written in the publication must give any explicit or implicit suggestion that the Group is endorsing the products or services of the sponsor;
  - receipt of the sponsorship must be declared and recorded in the gifts and hospitality register;
  - sponsorship should not be sought from and should be declined if offered by any organisation if it is known or considered likely that they will be submitting a competitive bid to the Group within three months either side of the sponsored event or publication.
- 8.10. Employees of the group should only accept sponsorship to fund their attendance at relevant conferences, courses or work-related visits with the prior approval of their line manager, who needs to ensure there can be no perception of a conflict of interest in relation to the motives of the organisation making the offer. All such offers, whether accepted or not, should be declared and recorded in the gifts and hospitality register.
- 8.11. The Group might wish to sponsor (i.e. contribute part of the funding for) local events or publications in which they have no other involvement but which contribute to the aim of the Group. This must be done such that the Group is not seen to be endorsing everything said at the event or in the publication and with due regard to the timing of the event/publication and any actual or potential commercial relationship between the Group and the organisation being sponsored.
- 8.12. If an employee or representative of the Group is asked to contribute on behalf of the Group to a conference or other event arranged by another organisation, the invitation is accepted as part of the individual's job or role with the Group and the contribution delivered during time for which they are already being paid, it is not appropriate for them to be paid for doing so. The Group may wish to reimburse any related expenses, particularly any overnight accommodation and related meals, if they are not funded by the organisers of the event. Anyone accepting such an invitation needs to ensure that doing so does not create any potential conflict with any other relationship between the Group and the event organisers. Expenses and hospitality directly associated with contributing to an event in this way need not be declared, provided that the event takes place in the UK.
- 8.13. Such an offer can also be accepted by an individual in their own right, to be carried out in their own time and with any views expressed to be explicitly those of the individual, not necessarily the Group. It is then acceptable for them to be paid for their contribution provided that this does not create any conflict of interest with their role within the Group or any potential relationship with the other organisation. All related expenses must be met by the individual or the event organisers; if the latter, any such expenses, except reimbursement of travel expenses within the UK, should be declared and recorded in the gifts and hospitality register.

8.14. The Group and its members must follow the toolkit issued by the Department of Health and Association of the British Pharmaceutical Industry (ABPI)<sup>9</sup> whenever any joint working is undertaken with pharmaceutical companies. This defines the difference between sponsorship (where pharmaceutical companies simply provide funds for a specific event or work programme) and joint working, where goals are agreed jointly by the NHS organisation and company, in the interest of patients, and shared throughout the project. Whenever the group engages in any joint work with a pharmaceutical company a working agreement must be drawn up and management arrangements conducted with participation from both parties in an open and transparent manner.

## 9. Training

9.1. The Corporate Operations Manager will be responsible for providing training to all individuals covered by this policy. The training will cover (but not be restricted to) the following key areas:-

- What is a conflict of interest?
- Why is conflict of interest management important;
- What are the responsibilities of the organisation you work for in relation to conflict of interests?
- What should you do if you have a conflict of interest relating to your role, the work you do or the organisation your work for? (who to tell, where it should be recorded, what actions to take and the implications for your role);
- How conflicts of interest can be managed;
- What to do if you have concerns that a conflict of interest is not being declared or managed appropriately;
- What are the potential implications of the CCG's rules and policies for Managing conflicts of interest.

9.2. In addition to this training, all CCG staff will be required to complete online training provided by NHS England by **31 January** of each year. This training will support raising of awareness of the risks associated with conflicts of interest and support staff in managing conflicts of interest in practice. Compliance rates will be recorded as part of the annual conflict of interest audit.

## 10. Raising Concerns and breaches

10.1. If any person within the scope of this policy has concerns about its administration or the management of conflicts of interests within the CCG, including any non-compliance they must report it. Such reports can be made to:-

- The Conflict of Interest Guardian;
- The Accountable Officer;
- The Chief Finance and Operating Officer;

---

<sup>9</sup> [Moving Beyond Sponsorship](#), 2010, underpinned by important pieces of Guidance. "Best Practice Guidance for Joint Working between the NHS and the Pharmaceutical Industry" was issued by the Department of Health in February 2008. "The ABPI Code of Practice for the Pharmaceutical Industry" and "Guidance Notes on Joint Working between Pharmaceutical Companies, the NHS and Others for the Benefit of Patients"

- The Governing Body Chair;
- The Corporate Operations Manager
- Line Manager

10.2. If an employee makes a report under this policy, they will be afforded the same legal protections as those defined under the CCG's Whistleblowing Policy. All other reports from other parties will be managed in accordance with the principles underpinning the Whistleblowing policy.

10.3. When a report is made that constitutes an allegation of a breach of this policy, the following procedure will apply:-

- i. The person to whom the report has been made will notify the Corporate Operations Manager of the details of the alleged breach.
- ii. The Corporate Operations Manager will investigate the alleged breach. The investigation will focus on determining whether a breach has occurred and whether the breach is serious to merit any further action either under CCG policies (such as the disciplinary policy for employees or the CCG's Counterfraud arrangements) or criminal or regulatory investigation.
- iii. The Corporate Operations Manager will report the outcome of their investigation and recommendation for next steps to the appropriate person. Dependent on the nature of the breach this could include:-
  - An employee's line manager;
  - The relevant Director;
  - The Accountable Officer;
  - The Chair of the Governing Body.
- iv. If either the person to whom the Corporate Operations Manager has made a recommendation or the individual (or individuals) involved in the alleged breach have concerns about the investigation they can refer the matter to the Conflict of Interest Guardian for further investigation and recommendation.
- v. When the investigation has concluded and any action has been taken, the Corporate Operations Manager will record the details of the breach, a summary of the investigation, the outcome and any comments from the Conflict of Interest Guardian (if relevant) in the register of breaches.
- vi. Summaries of breaches (with any personal identifiable information removed) will be published on the CCG website.

10.4. The Corporate Operations Manager will report any breaches or ongoing investigations to the Audit and Governance Committee on a quarterly basis. Any significant breaches (i.e. those that would have a material impact on the CCG's finances or place a significant risk to the achievement of the CCG's objectives or its reputation) will be reported contemporaneously to the Audit and Governance Committee and the Locality Director of NHS England.

## 11. Review of Policy

11.1. The Audit and Governance Committee will keep the effectiveness of this policy under review and the lay Member for Audit and Governance will ensure that the arrangements outlined remain fit for purpose in line with the requirements in paragraph 8.4.2 of the Group's Constitution.

- 11.2. The review process will include consideration of any lessons to be learned from any non-compliance with the policy during the year. This may include the committee undertaking an incident review in addition to any disciplinary or conduct procedures undertaken with the individual(s) concerned.
- 11.3. In addition, the CCG will conduct an annual audit of conflict of interest management in line with the terms of reference issued by NHS England. The results of this audit will be reported to the Audit and Governance Committee and will be reported in the Annual Governance Statement.

**DECLARATION OF INTERESTS FORM**

<b>Name:</b>	
<b>Position within CCG:</b>	

As Highlighted in Section 4 of the Declaring and Managing Interests policy, the CCG needs to be aware of relevant interests that may impact on the work of the CCG. The descriptions of interests in the boxes below are intended to be examples of the kind of interests that should be recorded and are not intended to be comprehensive. If you have any queries about whether an interest needs to be included on this form, please contact Peter McKenzie, Corporate Operations Manager for more information.

Type of Interest	Details	Whose interest? (Self or other <sup>10</sup> )	Action to be taken to mitigate risk
<p><b>Financial Interests</b></p> <ul style="list-style-type: none"> <li>• Roles and responsibilities held within member practices</li> <li>• Directorships, including non-executive directorships held in private companies or public limited companies (with the exception of those of dormant companies) which may seek to do business with the CCG (or, where relevant, its providers)</li> <li>• Ownership or part ownership of companies, businesses or consultancies which may seek to do business with the CCG (or, where relevant, its providers)</li> <li>• Significant share holdings (more than £25,000 or 1% of the nominal share capital) in organisations</li> </ul>			

<sup>10</sup> See Paragraph 2.5

Type of Interest	Details	Whose interest? (Self or other <sup>10</sup> )	Action to be taken to mitigate risk
<p>which may seek to do business with the CCG (or, where relevant, its providers)</p> <ul style="list-style-type: none"> <li>• Employment with (or provision of consultancy services to) an organisation which currently does or may seek to do business with the CCG (or, where relevant, its providers)</li> <li>• Receipt of research funding/ grants from the CCG (or, where relevant, its providers)</li> <li>• Interests in pooled funds that are under separate management (any relevant company included in this fund that has a potential relationship with the CCG must be declared)</li> <li>• Current contracts with the CCG in which the individual has a beneficial interest</li> <li>• Any payments (e.g. honoraria, one off payments, day allowances or travel or subsistence) from an organisation which currently does or may seek to do business with the CCG</li> <li>• The receipt of individual Gifts and Hospitality worth over £25 or several gifts worth over £100 in a 12 month period from a single source (see Section 6 for more details)</li> </ul>			
<p><b>Non-Financial Professional Interests</b></p> <ul style="list-style-type: none"> <li>• Roles acting as an advocate for a particular group of patients</li> <li>• Clinical areas of special interest for GPs</li> <li>• Membership of particular specialist professional body</li> <li>• Advisory roles with organisations such as the Care Quality Commission or National Institute for Health and Care Excellence</li> </ul>			

Type of Interest	Details	Whose interest? (Self or other <sup>10</sup> )	Action to be taken to mitigate risk
<b>Non-Financial Personal Interests</b> <ul style="list-style-type: none"> <li>• Roles acting as a voluntary sector champion for a provider</li> <li>• Voluntary roles within organisations which currently or may seek to do business with the CCG</li> <li>• Membership of or a position of trust in a charity or voluntary organisation in the field of health and social care</li> <li>• Suffering from a particular condition that requires individually funded treatment</li> <li>• Formal interest with a position of influence in a political party or organisation</li> <li>• A member of a lobby or pressure group with an interest in health.</li> </ul>			
<b>Any other information you wish to declare</b>			

In accordance with the requirements of the requirements of Paragraph 8.4 of the Constitution and Section 4 of the Managing Conflicts of Interest Policy I declare that I hold the above interest and confirm that:-

- To the best of my knowledge and belief, the above information is complete and correct and that a failure to comply with the requirements of the Conflict of Interest Policy will be treated seriously and civil, criminal or internal disciplinary action may result.
- I will review and update this information as necessary in accordance with the requirements of Section 4 of the Managing Conflicts of Interest Policy at least annually and within 28 days of my becoming aware of a change of circumstances.
- I understand that the information may be held in both manual and electronic form in accordance with the Data Protection Act 1998.
- I understand that the information contained in this form will be published in the Register of Interests published on the Group's Website and may be disclosed to third parties in accordance with the Freedom of Information Act 2000.

Signed \_\_\_\_\_

Date: \_\_\_\_\_

## Appendix B

### NHS Wolverhampton Clinical Commissioning Group NHS England Challenge Template

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 the CCG's proposed commissioning priorities?	
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?	

Why have you chosen this procurement route? <sup>11</sup>	
What additional external involvement will there be in scrutinising the proposed decisions?	
How will the CCG make its final commissioning decision in ways that preserve the integrity of the decision-making process?	

<b>Additional question for AQP or single tender (for services where national tariffs do not apply)</b>	
How have you determined a fair price for the service?	

<b>Additional questions for AQP only (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 single tenders from GP providers</b>	
What steps have been taken to demonstrate that there are no other providers that could deliver this service?	
In what ways does the proposed service go above and beyond what GP practices should be expected to provide under the GP contract?	
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?	

---

<sup>11</sup> Taking into account S75 regulations and NHS Commissioning Board guidance that will be published in due course, Monitor guidance, and existing procurement rules.

## APPENDIX C

### CHECKLIST FOR CHAIRS

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. 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 Admin Officer</p> <p>Meeting Chair and Admin Officer</p> <p>Meeting Chair and Admin Officer</p> <p>Meeting members</p> <p>Meeting Chair and Admin Officer</p>
During the meeting	<ol style="list-style-type: none"> <li>6. <b>Check and declare the meeting is quorate</b> and ensure that this is noted in the minutes of the meeting.</li> <li>7. Chair requests <b>members to declare any interests in agenda items</b>- which have not already been declared, including the nature of the conflict.</li> <li>8. <b>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.</li> </ol>	<p>Meeting Chair</p> <p>Meeting Chair</p> <p>Meeting Chair and Admin Officer</p>

Timing	Checklist for Chairs	Responsibility
	<p><b>9. 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> </ul>	Admin Officer
Following the meeting	<p><b>10.</b> All new interests declared at the meeting should be promptly updated onto the declaration of interest form;</p> <p><b>11.</b> All new completed declarations of interest should be <b>transferred onto the register of interests.</b></p>	<p>Individual(s) declaring interest(s)</p> <p>Corporate Operations Manager</p>