



# MANAGING CONFLICTS OF INTEREST, GIFTS, HOSPITALITY & SPONSORSHIP POLICY

**NEE/CCG/2016/075**

<b>Target Audience</b>	All Staff including Board members, sub-committee members and third parties working for, or on behalf of, NEE CCG
<b>Brief Description (max 50 words)</b>	This policy sets out the principles by which the North East Essex Clinical Commissioning Group defines the requirements of those involved in decision making and the detailed business of the CCG to declare all relevant interests.
<b>Action Required</b>	<p>Following approval at the CCG Board, The Chief Finance Officer and Corporate Business Manager will ensure that the requirements of this policy will be raised at all team meetings, and confirm the requirements with the chairs of each Sub-committee, and with CCG Elected members .</p> <p>Chairs of Sub-committees will receive support and training in order to be able to effectively and consistently manage the conflicts that may arise.</p> <p>The Corporate Business Manager will establish and maintain a registers for interests, and will ensure that these are appropriately reflected on the website. The agreed management of any declared interest will be recorded on the register, and published on the website.</p>

## Document Information

<b>Title /Version Number/(Date)</b>	Managing Conflicts of Interest, Gifts, Hospitality & Sponsorship Policy/ Version 2.0 July 2017
<b>Accountable Executive</b>	Director of Resources (CFO) and Conflicts of Interest Guardian
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<b>Stakeholders engaged in development/review</b>	Board Members
<b>Equality Impact Assessment</b>	<p><b>EQUALITY IMPACT ASSESSMENT</b></p> <p>This document has been assessed for equality impact on the protected groups, as set out in the Equality Act 2010. This Policy is applicable to the Board, every member of staff within the CCG irrespective of their age, disability, sex, gender reassignment, pregnancy, maternity, race (which includes colour, nationality and ethnic or national origins), sexual orientation, religion or belief, marriage or civil partnership, and those who work on behalf of the CCG</p>
<b>Contact details for further information</b>	Please contact the Corporate Business Manager for further information.

## Amendment History

Version	Date	Reviewer Name(s)	Comments
1.0	September 2016	Corporate Business Manager	Policy produced
2.0	July 2017	Corporate Business Manager	Policy reviewed and reflects guidance issued June 2017 by NHS England.

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## 1. INTRODUCTION

'If conflicts of interest are not managed effectively by CCGs, confidence in the probity of commissioning decisions and the integrity of clinicians involved could be seriously undermined. However, with good planning and governance, CCGs should be able to avoid these risks'

### ***Royal College of General Practitioners (RCGP) and NHS Confederation's briefing paper on managing conflicts of interest, September 2011***

1. The Managing Conflicts of Interest Policy applies to all Staff including Board members, elected members sub-committee members and third parties working for, or on behalf of, NEE CCG and will cover:
  - the management of interests,
  - Standards of behaviour and conduct
  
2. Although the policy is primarily designed to deal with behaviour during meetings and decision making processes, it equally applies to the processes of communication associated with decisions, including any correspondence associated with decisions, whether by electronic or other means.
  
3. **It is very important that for any meeting the Chair is informed as early as possible of any potential Conflict of Interest so that this can be mitigated. The onus is on the individual to declare any interest and not to depend on the Chair asking.**

### **Application of this policy**

Declarations of Interest will be routinely sought:

- i. When an individual stands for NEE CCG election – on the application form
- ii. On appointment or formal role change– by requiring a NEE CCG member or staff to complete the declaration of interest form
- iii. At the commencement of Board and sub-committee meetings
- iv. At the commencement of any meeting in which the specification or process relating to a procurement is to be discussed
- v. On a quarterly basis and to ensure it has been completed prior to the publication of the annual report
- vi. All staff are reminded to reiterate any conflict of interest at the beginning of items where appropriate.

In applying this policy the NEE CCG Board encourages all CCG members and staff to declare any conflict of interest at the earliest opportunity, and as soon as they become aware that the conflict may exist.

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Whilst this policy is designed to ensure that there are no current conflicts of interest, NEE CCG members and staff are advised to consider where a change of circumstances or previous activities might be perceived to cause a conflict – particularly where the decision of NEE CCG is likely to be publicly or commercially contentious.

## 1. Definitions specific to this policy

1. In this document the following definitions apply:

- i. **“the organisation”** is defined as NHS North East Essex Clinical Commissioning Group
  - ii. **“CCG members”** is defined as all those individuals serving on the CCG Board and its designated sub-committees, or any other decision making group established by NEE CCG. For the avoidance of doubt this includes lay members and all elected members.
  - iii. **“staff”** is defined as those individuals who hold an employment contract of any nature with the CCG, and includes agency staff ,contract workers, and any individual engaged to
    - a. provide specialist advice to the organisation or
    - b. deliver services on behalf of the organisation which will involve them in participating in the decision making process.
2. A **“conflict of interest”** is often described as a situation where a person’s public or fiduciary duties conflict *or may* conflict with their own personal interests or with a duty owed to another individual or organisation, which can be :
- i. A direct **financial interest** – where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:
  - ii. 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.
  - iii. A shareholder (or similar ownership 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.
  - iv. A management consultant for a provider
- 3 A **Non-financial professional interest** – 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 could include situations where the individual is:
- i. An advocate for a particular group of patients

- ii. A GP with special interests e.g. dermatology etc.
  - iii. A member of a particular specialist body (not routine GP membership of RCGP or BMA or medical defence organisation).
  - iv. An advisor for the Care Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE)
  - v. A medical researcher
- 4 **A Non-financial personal interest** – where an individual may benefit personally in ways that are not directly linked to their professional career and do not give rise to a direct financial benefit. This could include:
- i. A voluntary sector champion for a provider
  - ii. A volunteer for a provider
  - iii. A member of a voluntary sector board or any position of authority in connection with a voluntary sector organisation.
  - iv. Suffering from a particular condition requiring individually funded treatment
  - v. A member of a lobby or pressure group with an interest in health
- 5 **Indirect Interests** – 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) e.g.:
- i. Spouse / partner
  - ii. Close relative e.g. Parent, grandparent, child, grandchild or sibling
  - iii. Close friend
  - iv. Business partner

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 referring to the separate declarations made by those GP partners).

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 the CCG.

A conflict of interest occurs where an individual’s ability to exercise judgement, or act in a role, is or could be impaired or otherwise influenced by his or her involvement in another role or relationship. The individual does not need to exploit his or her position or obtain actual benefit, financial or otherwise, for a conflict of interest to occur.

### **3. RESPONSIBILITIES WITHIN THE ORGANISATION**

***Everyone in the CCG has a responsibility to appropriately manage conflicts of interest.***

#### **The NEE CCG Board**

- i. The Board will set out its expectations in respect of Conflicts of Interest within the NEE CCG Constitution.
- ii. The Board will set out a statement in respect of Interests, Gifts, Hospitality and Sponsorship within the NEE CCG Constitution.
- iii. The NEE CCG Board will approve the Managing Conflicts of Interest Policy following review and recommendation for approval by the Audit Committee.
- iv. The NEE CCG Board will ensure that the processes and conduct of health need assessments, consultation mechanisms, service reviews to develop commissioning strategies, and procurements will enable conflicts of interest to be identified and mitigated.

#### **Board Sub-committees**

- i. The Audit Committee will review the policy annually and more frequently if there is a material change in legislation or guidance underpinning the policy. It will also be reviewed if there has been an identifiable breach of the policy or if at any stage a concern regarding the robustness of the policy is brought to the attention of the Board.
- ii. The Operational Executive will be responsible for approving the procedures that underpin the policy and in particular for the provision of training and guidance to chairs on the conduct of meetings and management of any interests that may be declared.
- iii. All sub-committee chairs will routinely request the declaration of interests at the commencement of all meetings, and will manage any declaration made in accordance with the provisions within the CCG Constitution and this policy.

#### **Chief Finance Officer**

- i. The Chief Finance Officer (CFO) will be the lead officer on the Operational Executive overseeing the implementation and application of policy and operation of the underpinning procedures.
- ii. The Chief Finance Officer will be responsible for reviewing and identifying the training and development needs of Board and Committee members.

## **Corporate Business Manager**

- i. The Corporate Business Manager will be the policy owner on a day to day basis, and will notify the CFO and Audit Committee of any required updates or changes, and the implications to the Constitution of those changes.
- ii. The Corporate Business Manager will maintain three registers covering
  - a. Interests;
  - b. Gifts and Hospitality; and
  - c. Sponsorship.
- iii. The Corporate Business Manager will:
  - a) ensure that any notifications are brought to the attention of the CFO or, in their absence, the Chief Officer;
  - b) support the chair of Board and any subcommittee in developing and communicating a management plan for mitigation of each declared interest;
  - c) be responsible for ensuring that a register of interests is prepared for each Board meeting and that the register of interests held on the CCG website is updated within a week of the Board meeting taking place.;
  - d) ensure that details of the policy are included in the induction of new Board members, sub-committee members and staff;
  - e) send a reminder to all staff and members regarding the need to amend and update entries on a quarterly basis;
  - f) be responsible for the communication of this policy and any amendments, but it will remain the individual responsibility of all Staff including Board members, sub-committee members and third parties working for, or on behalf of, NEE CCG to review and apply the terms of the policy; and
  - g) liaise with any significant third party to ensure that they have a system of communicating the policy so that it's terms are clearly understood by those to whom it relates.

## **Conflicts of Interest Guardian**

- i. Should in collaboration with the CCG's governance lead:
- ii Act as a conduit for GP practice staff, members of the public and healthcare professionals who have any concerns with regards to conflicts of interest
- iii. Be a safe point of contact for employees or workers of the CCG to raise any concerns in relation to the policy;
- iv. Support the rigorous application of conflict of interest principles and policies;
- v. Provide independent advice and judgement to staff and members who may be in doubt of how conflict of interest policies and principles apply to individual situations;
- vi. Provide advice on minimising risk;
- vii. Does not take away the fact the governing body has an on-going responsibility for ensuring the robust management of conflicts of interest on an ongoing and daily basis.



## **General Practice Primary Care Commissioning Committee Chair**

This Committee must be chaired by a lay chair and a vice chair. It must not be the same as the Audit Committee Chair.

The Audit Committee Chair may serve on this committee provided adequate safeguards are in place to avoid compromising their role as Conflicts of Interest Guardian. This should be avoided unless there is a lack of other suitable candidates for the role.

### **NEE CCG Members and Staff - General**

- i. All Staff including Board members, sub-committee members and third parties working for, or on behalf of, NEE CCG, will be required to declare any existing or potential interests on the form attached at Appendix A, where that interest relates to the business of NEE CCG.
- ii. Where an individual changes role or responsibility within a CCG that individual has the responsibility to declare whether there is any change to any previous declaration of interest.
- iii. Wherever an individual's circumstances change in a way that affects the individual's interests (e.g. where an individual takes on a new role outside of the CCG or sets up a new business or relationship), a further declaration should be made to reflect the change in circumstances. This could involve a conflict of interest ceasing to exist or a new one materialising.
- iv. Secondary paid employment should continue to be notified in accordance with the contractual terms of the individual even where it does not give rise to any conflict of interest.
- v. All Staff including Board members, sub-committee members and third parties working for, or on behalf of, NEE CCG, will be required to work to the meeting etiquette (appendix E).

It is the responsibility of all staff to seek clarification from the Corporate Business Manager or Chief Finance Officer if there are any parts of the policy they do not understand.

Staff who wish to report suspected or known breaches of this policy should inform the Chief Finance Officer, Board Appointed Conflict of Interest Guardian or the Local Counter Fraud Specialist (**see page 18**). All such notifications will be held in the strictest confidence. In the event that they believe the CFO may be implicated in any breach, then the staff member should contact the Local Counter Fraud Specialist.

## **4. PRINCIPLES**

The CCG should observe the principles of good governance in the way they do business. These include:

The Nolan Principles, taken from First Report of the Committee on Standards in Public Life (1995), which are:

- **Selflessness** – Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.
- **Integrity** – Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties;
- **Objectivity** – In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
- **Accountability** – Holders of public office are accountable for their decisions and actions they take. They should give reasons for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office;
- **Openness** – Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands;
- **Honesty** – Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest;
- **Leadership** – Holders of public office should promote and support these principles by leadership and example.

Other principles for good governance are as follows:

- The Good Governance Standards for Public Services 2004, Office for Public Management (OPM) and Chartered Institute of Public Finance and Accountancy (CIPFA)
- The seven key principles of the NHS Constitution
- The Equality Act 2010
- The UK Corporate Governance Code
- Standards for members of NHS Boards and CCG governing bodies in England.

To support the management of conflicts of interest the CCG should:

- **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

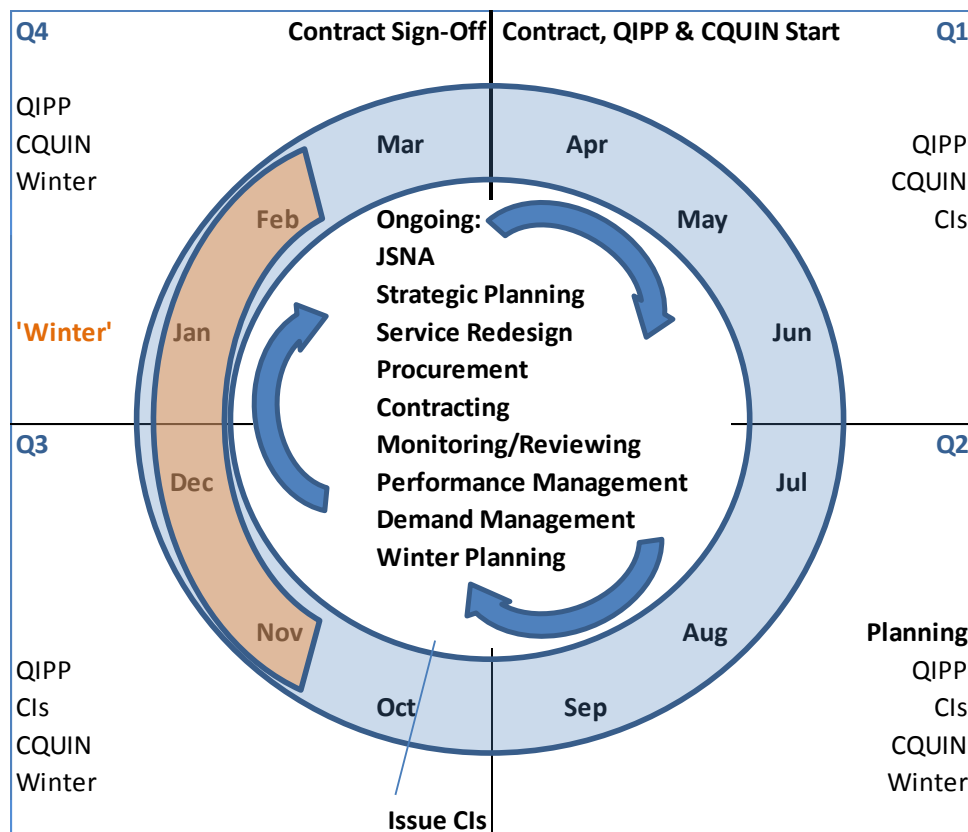
procedures are right from the outset, because the rationale for all decision-making will be clear and transparent and should withstand scrutiny;

- **Be proactive, not reactive** – Commissioners should seek to identify and minimise the risk of conflicts of interest at the earliest possible opportunity;
- **Be balanced 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** – Clearly document the approach and decisions taken at every stage in the commissioning cycle so that a clear audit trail is evident.
- **Environment & Culture** – Create an environment and culture where individuals feel supported and confident in declaring relevant information and raising any concerns.

## 5. IDENTIFICATION & MANAGEMENT

- i. GPs make individual commissioning decisions in respect of health care each time a patient is referred for further care, diagnosis or treatment. When offering choices to patients, where the GP is one of the service providers or associated with the service provider (for example as part of a consortium), then that information must be made available to the patient so that they can take this into consideration when deciding on their treatment or care.
- ii. On a larger scale, conflicts can exist at all stages of the commissioning process. Figure 1 below visually identifies the broad flow of work in an NHS commissioning organisation where decision making has the potential to be influenced by interest, bias, sponsorship or gifts and hospitality (see section on Gifts, Hospitality and Sponsorship).

## Annual Commissioning Cycle



**Fig. 1 Annual Commissioning Cycle**

### 6. DECLARING INTERESTS

- i. The purpose of any declaration of interest is
  - a. to enable the conflict to be appropriately reviewed and managed, so that the potential conflict is mitigated,
  - b. for that mitigation arrangement to be agreed between the parties, recorded and applied so that the functions of the organisation are not negatively affected and the reputation of the individual is maintained.
  - c. For the declared interest to be made publicly accessible
- ii. The manner in which the declaration of interest will be dealt with is set out in detail as part of Section 8 of the Constitution:
  - a. GPs must make their declaration to the Chief Officer where the Accountable Officer is a GP.
  - b. All other members of staff must make their declaration to the Chief Finance Officer.
- iii. Any individual or organisation acting as a third party on behalf of NEE CCG will make their declaration to the Chief Finance Officer

- iv. The Chief Finance Officer and Chief Officer will review the options for mitigation with the individual in the context of their role within the organisation and business planning process, and record this as part of the declaration.
- v. NEE CCG will also ensure transparency in terms of conflicts of interest by maintaining and publishing registers in sufficient detail to satisfy audit and public scrutiny. Only staff classed as decision makers will need to have their declarations of interest published on to the register.
- vi. There will be occasions where the conflict of interest is profound and acute. In such scenarios (e.g. where an individual has a direct financial interest which gives rise to a conflict e.g., secondary employment or involvement with an organisation which benefits financially from contracts for the supply of goods or services to a CCG). The CCG would need to consider whether, practically, such an interest is manageable. If it is not then an appropriate course of action may be to refuse to allow the circumstances which give rise to the conflict to persist. This may result in the individual having to step down from a particular role and/or move to another role within the CCG. HR Policies, governing body and committee terms of reference and standing orders must be reviewed on a regular basis to ensure they enable the CCG to take appropriate action to manage conflicts of interest robustly and effectively in these circumstances.

## **7. REGISTERS OF INTERESTS**

The CCG must maintain one or more registers of interest for the members of the group, members of the governing body, committee and sub-committees of the governing body, and its employees. These must be published and be accessible to the public on request.

Registers of interest should be maintained for all CCG employees including:

- All full and part time staff.
- Any staff on sessional or short term contracts.
- Any students and trainees (including apprentices).
- Agency staff.
- Seconded staff.
- Self-employed consultants or individuals working for the CCG under a contract for services.
- Members of the governing body.
- Members of CCG committees & sub-committees including the NEE GP Commissioning Committee.
- Decision-making staff
- Co-opted members.
- Appointed deputies.
- Any members of advisory groups which contribute to direct or delegated decision making on the commissioning or provision of taxpayer funded

services such as working groups involved in service redesign or stakeholder engagement that will affect future provision of services..

If the CCG is participating in a joint committee alongside other CCGs, any interests which are declared by the committee members should be recorded on the register (s) of interest of each participating CCG.

An interest should remain on the public register for a minimum of 6 months. The CCGs published register of interest should state that historic interests are retained by the CCG for 5 years. This information is available from the Corporate Business Manager or Corporate Services Officer.

The CCG will annually conduct an audit of declared interests in line with the Companies House website. If an undeclared interest is discovered this will be reported to the Chief Finance Officer and the Conflict of Interest Guardian and a form sent to the individual to resubmit immediately with an explanation why this declaration was omitted. An anonymised record of the breach will also be included on our public website.

An annual audit of conflict of interest management will also be included within the NEE CCG audit plan or annual governance audit.

### **Publication of registers**

- i. The registers of Interests, Gifts and Hospitality, Sponsorship and Procurement decisions are all available on the NEE CCG website.
- ii. All Conflict of Interest decisions are registered, audited and reported in the Annual Report.
- iii. In exceptional circumstances where public disclosure of information could cause a real risk of harm or is prohibited by law, an individual's name and/or other information may be redacted from the public register. Any individual who believes that substantial damage or distress may be caused by the publication of the information they are entitled to ask that the information is not published by making a request in writing to the Conflicts of Interest Guardian. If agreed then the CCG would retain a confidential un-redacted version of the register(s)
- iv. All CCG staff will be made aware that declarations of interest, gifts and hospitality and sponsorship will be published on the website and will also be made available within the Annual Report. This applies only to those staff classed as decision makers within the organisation.

## **8. MANAGING CONFLICTS OF INTEREST AT MEETINGS**

- i. All those participating in any decision making meeting arranged by the organisation will be required to declare their interest in any

agenda item to the chair within 48 hours of the receipt of agenda papers in order to agree an effective management plan for mitigating the conflict, and recorded within the minutes of the meeting.

- ii. The chairs of meetings will manage those meetings in accordance with the provisions of the Constitution i.e. at the commencement of all CCG decision making meetings, including external and public meetings, the chair person will require that:
  - a. all CCG members and staff declare any new or previously declared interest that they have in any agenda item at the commencement of the meeting
  - b. notify all those participating in the meeting of any agreed management plan
- iii. The final arbiter of a Conflict of Interest at any meeting will be the Chair. Any members who are unhappy with that decision will then be able to take this up with the Chief Finance Officer or Conflicts of Interest Guardian.
- iv. A template to assist the Chairs of meetings in managing Conflict of Interest is available in Appendix B

### **Minute Taking**

- i. All interests declared will be recorded in the minutes of the meetings, as well as being included on the Register.
- ii. The chair will agree and record how the declaration is to be managed as a minimum as follows:
  - a. Individual declaring the interest
  - b. The nature of the interest
  - c. The Chair's decision and resulting action taken
  - d. The point during the meeting at which any individuals retired from and returned to the meeting – even if an interest has not been declared.

***There is checklist to ensure these are recorded correctly in Appendix C***

### **Maintaining a robust system of decision making**

Unpredicted circumstances where meetings may become inquorate (extracted from Constitution)

- i. Where more than 50% of the members of a governing body, or committee delegated to take decisions, are prevented from taking a decision because of a conflict of interest, the chair of the meeting, who must not be conflicted, will determine whether or not the discussion can proceed. If there is such time that this happened then the Vice-Chair would take over this meeting.
- ii. In making his decision the chair will consider whether the meeting is quorate, in accordance with the number and balance of membership set out in the group's standing orders. Where the meeting is not quorate, due to the absence of certain members, the discussion will be deferred until such time as

a quorum can be convened. Where a quorum cannot be convened from the membership of the governing body or committee, the chair will have the discretion to invite others to make up the quorum so that the group can progress the item of business

Known issues which affect all clinical members (not covered by Constitution)

- i. In some circumstances it may be known that all of the GPs or other practice representatives on a decision-making body could have a material interest in a decision. Examples of this may be:
  - a) where the CCG is proposing to commission (or decommission) services on a single tender basis (or LES) from all GP practices in the area, or
  - b) where it is likely that all or most practices would wish to be qualified providers for a service under AQP.
- ii. In these cases, the CCG will introduce the following possible options to address the matter:
  - a) Identify a member of the Executive Team to be accountable for the process of conducting the review of service, and for that process to be agreed at the Operational Executive Committee.
  - b) Establish the benchmark situation across Essex and Suffolk or any other suitable CCG.
  - c) Identify whether an external clinical adviser (or advisers) should be engaged
  - d) Invite individuals from the Health and Well-being Board or from another CCG to provide external scrutiny of the proposal
  - e) Enable a discussion on the matter to take place at a specifically convened provider engagement event(s) for the purpose of enabling members and others to express their perspective on the issue as providers of services.
  - f) Prepare a Full Business Case, including an assessment on the service in accordance with NHS England guidance <sup>1</sup>, incorporating the template attached as Appendix A
  - g) Refer the final decision to the governing body and exclude all GPs or other practice representatives with an interest from the decision-making process, i.e. so that the decision is made only by the non-GP members of the governing body including the lay members and the registered nurse and secondary care doctor;

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<sup>1</sup> Code of Conduct: Managing conflicts of interest where GP practices are potential providers of CCG-commissioned services (NHS Commissioning Board, 2012)

<http://www.commissioningboard.nhs.uk/files/2012/09/c-of-c-conflicts-of-interest.pdf>

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## **9 MANAGING CONFLICTS OF INTEREST THROUGHOUT THE COMMISSIONING CYCLE**

### **Declaration of Interests in relation to service redesign and procurement**

- i. Where a relevant and material interest or position of influence exists in the context of the prioritisation of need, specification for, or award of, a contract the members, staff and third parties will be expected to:
  - a. Declare the interest;
  - b. Ensure that the interest is recorded in the register;
  - c. Withdraw from all discussion on the specification or award; - clinical issues / clinical opinion only
  - d. Not have a vote in relation to the specification or award.
- ii. CCG staff will be expected to undertake a stakeholder analysis at the commencement of any project to identify potential conflicts, and to record this in the business case submission.
- iii. The CCG will require its procurement agent to have clear processes to ensure that all bidders formally identify any potential conflicts of interest. Where relevant and material interests have not been declared, the bid may be inadmissible, and may result in the possible suspension of the relevant member from the CCG.

### **Involvement of clinicians from provider organisations in decisions relating to a service specification, procurement or decommissioning of services**

- i. Clinicians from provider organisations should be asked to complete a declaration of interest prior to contributing their views and shaping options, and to note their interest at meetings.
- ii. No clinician from a provider organisation should be involved in the final decision process for a consultation, specification or contract award, unless specifically commissioned as an external clinical adviser.
- iii. Through pro-active market management, the CCG should seek to engage clinicians from other service providers, who may be competitors to the current provider, as part of its work to develop specifications and assess options

### **Circumstances which may warrant the engagement of external clinical advisers**

An external clinical adviser may be engaged where:

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- i. There is no detailed knowledge of the service within the existing cohort of CCG members, and clinical input is required to ensure that the robustness of a specification and any associated evaluation processes.
- ii. Where there is a requirement to support local clinicians in detailed commissioning or service planning in order to enhance skills
- iii. Where any local clinician having the knowledge and skill has a conflict of interest regarding the outcome of the decision
- iv. Depending on the nature of the conflict, GPs or other practice representatives could be permitted to join in the governing body's discussion about the proposed decision, but should be excluded during any vote on the decision.

### **Commercial Confidentiality**

- i. CCG members, staff and third parties acting on behalf of the CCG should avoid providing information on the operations of NEE CCG where it might provide a commercial advantage to any organisation in a position to supply goods or services to NEE CCG. For particularly sensitive matters, staff may be asked to sign a 'non-disclosure' agreement.
- ii. Where an issue is particularly sensitive, consideration must be given to password protecting any related electronic files, and ensuring that secure email or fax transmission systems are used.

All staff who are in contact with suppliers and contractors, and in particular, those who are authorised to sign purchase orders or enter into contracts for goods and services, are expected to adhere to professional standards in line with those set out in the Code of Ethics of the Chartered Institute of Purchasing and Supply<sup>2</sup>.

Further details regarding Procurement can be found within the NEE CCG Procurement Policy.

The Procurement Register can be located on the NEE CCG website and will be kept updated by the Corporate Services Officer on a 6 monthly basis.

## **10. COMMISSIONING OF NEW CARE MODELS**

- i. Where CCGs are commissioning new care models (any Multi-Speciality Community Provider (MCP), Primary and Acute Care Systems (PACS), it is likely that there will be some individuals that will have roles within the CCG and the potential provider. Any conflicts of interest must be identified and appropriately managed in accordance with this policy.

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<sup>2</sup> Code of Ethics of the Chartered Institute of Purchase and Supply available at <http://www.cips.org/Documents/About%20CIPS/CIPS%20Code%20of%20Ethics.pdf>

- ii. The CCG should take every reasonable step to ensure that employees, committee members, contractors and any other contract holders are fully aware of the requirement to inform the CCG of any potential conflict,
- iii. The CCG should identify and manage potential conflicts of interest where staff are involved in both the contract management of existing contracts and involved in procurement of related new contracts.

## **11. CCG IMPROVEMENT AND ASSESSMENT FRAMEWORK AND INTERNAL AUDIT**

NHS England is introducing a new Improvement and Assessment Framework for CCGs from 2016/17 onwards and the management of conflicts of interest is a key indicator of the new framework. As part of this framework the CCG will be required on an annual basis to confirm via self-certification:

- i. The CCG has a clear policy for the management of conflict of interest in line with statutory guidance and a robust process for managing breaches;
- ii. CCG Audit Chair has taken on the role of Conflicts of Interest Guardian;
- iii. There is mandated conflict of interest on-line training in place and staff complete annually.

In addition the CCG will also be required to report on a quarterly basis via self-certification:

- iv. That the CCG has processes in place to ensure individuals declare an interests which may give rise to a conflict or potential conflict as soon as they become aware of it, and in any event within 28 days, ensuring accurate up to date registers are complete for:
  - Conflicts of interest,
  - Procurement decisions and
  - Gifts and hospitality
- v. Registers are available on our website and, upon request, at our Headquarters.
- vi. Is aware of any breaches of its policies and procedures in relation to the management of conflicts of interest and how many:
  - To include details of how they were managed;
  - Confirmation that anonymised details of the breach have been published on the CCG website;
  - Confirmation they have been communicated to NHS England;
  - In addition the CCG has to undertake an annual internal audit on the management of conflicts of interest to provide further assurance on the degree of compliance.

### **Internal Audit**

As part of the annual internal audit the CCG will need to undertake an audit of conflicts of interest management.

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NHS England will provide a template for this audit.

The results of the audit should then be reflected in the CCG Annual Governance Statement and discussed in the end of year governance meeting with NHS regional teams.

## 12. RAISING CONCERNS AND BREACHES

It is the duty of every CCG employee, governing body member, committee or sub-committee member and GP elected member to speak up about genuine concerns in relation to the administration of the CCGs policy on conflict of interest management and to report these concerns. These individuals should not ignore their suspicions or investigate these themselves, but rather speak to the designated CCG point of contact for these matters as shown below:

### CONTACTS

Director of Resources (C F O)	kirsty.denwood@nhs.net	01206 918750
Conflict of Interest Guardian	jerry.wedge999@gmail.com	01206 918703
Corporate Business Manager	angelaroberts1@nhs.net	01206 918703
Corporate Services Officer	eseabrook@nhs.net	01206 918705
Local Counter Fraud Service	Charlie.roberts2@nhs.net	07881 283 949

**The first point of contact in these instances should be the Conflicts of Interest Guardian and this will be dealt with on a strictly confidential basis.**

Any person who is not an employee of NHS NEE CCG and wishing to report a suspected or known breach of the policy should ensure they comply with their own organisation's Whistleblowing Policy, since such policies should provide protection against detriment or dismissal.

Providers, patients and other third parties can make a complaint to NHS Improvement in relation to a commissioners conduct under the Procurement Patient Choice and Competition Regulations. The regulations are designed as an accessible and effective alternative to challenging decisions in the courts.

## 13 IMPACT OF NON-COMPLIANCE

Failure to comply with the CCG's policy on Conflict of Interest Management can have serious implications for the CCG and any individuals concerned.

### Civil Implications

If conflicts of interest are not effectively managed, CCGs could face civil challenges to decisions they make. For instance, if breaches occur during a service re-design or

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procurement exercise the CCG risks a legal challenge from providers who could potentially overturn the award of the contract, leading to damages claims and necessitate a repeat of the procurement process. This could delay the development of better services and care for patients, waste public money and damage the CCGs reputation. In extreme cases, staff and other individuals could face personal civil liability, for example a claim for misfeasance in public office.

### Criminal Implications

Failure to manage conflicts of interest could lead to criminal proceedings including for offences such as fraud, bribery, and corruption. This could have implications for CCGs and linked organisations and the individuals who are engaged by them.

### Disciplinary Implications

CCGs should ensure that individuals who fail to disclose any relevant interests or who otherwise breach the CCG rules and policies relating to the management of conflicts of interest are subject to investigation and, where appropriate, to disciplinary action. CCG staff, governing body and committee members in particular should be aware that the outcomes of such action may, if appropriate, result in the termination of their employment or position within the CCG.

### Professional regulatory implications

Statutorily regulated healthcare professionals who work for, or are engaged by, CCGs are under professional duties imposed by their relevant regulator to act appropriately with regard to conflicts of interest. CCGs should report statutorily regulated healthcare professionals to their regulator if they believe they have acted improperly in order for this to be investigated. Statutorily regulated healthcare professionals should be made aware that the consequences for inappropriate action could include fitness to practice proceedings which could result in them being struck off by their professional regulator as a result.

## **14. CONFLICTS OF INTEREST TRAINING**

- i. The NEE CCG Board is committed to ensure appropriate training takes place on the subject of Conflicts of Interest, declaring Gifts, Hospitality and Sponsorship for all staff and member practices, and will delegate the development of training on this policy to the Chief Financial Officer
- ii. Conflict of Interest will be included in the induction programme and induction pack for new NEE CCG members/new members of staff/those participating on sub-committees from other organisations or forums and any third party acting on behalf of the CCG.
- iii. Conflict of Interest training will also become part of the mandatory annual training that all staff must complete. NHS England are currently in the process

of compiling a training package which is expected to be in place by the Autumn of 2017.

- iv. Conflict of Interest training will be provided annually for the Board as part of its development, and the content of such training includes helping to develop a clear, corporate view about the organisations appetite for risk in this area.
- v. Training for the chairs of meetings will be provided to enable them to confidently fulfil their responsibilities in respect of this policy
- vi. The Corporate Business Manager will ensure that administrative staff record the interests declared at meetings in a consistent and sufficiently detailed manner.
- vii. The content of such training will adopt best practice from national guidance and learning from other CCGs/public bodies.
- viii. Dissemination of learning from these events will be shared with all staff.

## 15 . DECLARATIONS OF GIFTS, HOSPITALITY & SPONSORSHIP

- A **Gift** is defined as an item of any value estimated to be under £50 offered or provided in the nature of the organisation’s business by anyone other than the organisation. Low value work related gifts, such as notebooks, pens, pencils, calendars or paper diaries are excluded.
- **“Hospitality”** is defined as food, drink, accommodation or entertainment offered to an individual employee or CCG members outside of their usual place of work, or provided in the nature of the organisation’s business by anyone other than the organisation itself. Hospitality between £25 and £75 can be accepted but must be declared. Hospitality valued above £75 must be declared and should be refused unless senior approval is given..
- **“Sponsorship”** is defined within DH guidance<sup>3</sup> as funding from an external source, including funding of all or part of the cost of a member of staff, NHS research, staff training, pharmaceuticals, equipment, meeting rooms, costs associated with meetings, meals, gifts, hospitality, hotel and transport costs (including trips abroad), provision of free services and buildings or premises.

Sponsorship may also be indirect – such as the offer from a current contractor to deliver a pilot scheme at no cost to the CCG.

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<sup>3</sup> Commercial Sponsorship – Ethical Standard for the NHS (DH, 2000)

- i. Individuals need to consider the risks associated with accepting offers of gifts, hospitality and entertainment when undertaking activities for and on behalf of the CCG and/or their GP practice. This will be particularly pertinent during any procurement exercises where it could be seen that the acceptance of any gifts could give rise to real or perceived conflict of interest, accusations of unfair influence, collusion or canvassing.
- ii. All gifts of any nature offered to CCG staff, governing body and committee members by suppliers or contractors (linked or prospectively) to the CCG's business should be declined, whatever their value. The person to whom the gifts were offered should also submit a declaration to their Line Manager before submission to the Corporate Business Manager for inclusion on the Gifts and Hospitality register.
- iii. Gifts offered from other sources should also be declined if accepting them might be seen as bias or giving favouritism. Responsibility for making this decision would be down to the Conflict of Interest Guardian. A common sense approach should be adopted as to whether or not this is the case. Exceptions are made where these are items of little financial value (i.e. less than £10) such as diaries, calendars, stationery and other gifts acquired from meetings, events or conferences. This would also include small tokens of appreciation from members of the public to staff for work well done e.g. flowers etc. Gifts of this nature do not need to be declared to the Line Manager or Corporate Business Manager.
- iv. Any personal gift of cash or cash equivalents (e.g. vouchers, tokens or offers of remuneration to attend meetings on behalf of the CCG) must always be declined, whatever their value and source. The offer which has been declined must be declared to the Line Manager and sent to the Corporate Business Manager to be recorded on the register of Gifts and Hospitality

## **Hospitality**

- i. A blanket ban on accepting or providing hospitality is neither practical nor desirable from a business point of view. However, individuals should be able to demonstrate that the acceptance or provision would benefit the NHS or CCG.
- ii. Modest hospitality e.g. tea, coffee, light refreshments at meetings is acceptable and does not require to be declared. If the hospitality is being offered by suppliers or contractors linked (currently or prospectively) to the CCGs business then such offers accepted or declined must be notified to Line Manager and Corporate Business Manager.
- iii. There is a presumption that offers of hospitality might go beyond modest and should be therefore politely refused. Examples of this could be:

- iv. Hospitality of a value above £25
- v. Offers of foreign travel and accommodation
- vi. There may be some limited and exceptional circumstances where accepting this type of hospitality may be contemplated. Express prior approval must be sought from a member of the Executive Team before accepting the offer and the reason for acceptance recorded within the register of gifts and hospitality. Caution should be exercised where hospitality is offered by suppliers or contractors linked (currently or prospectively) to the CCG's business. Offers of this nature can be accepted if they are modest and reasonable but advice should always be sought from Senior Management due to potential sensitivities e.g. re-tendering or procurement. Offers of hospitality should be reported to Line Manager at the point of offer to avoid inappropriate gifts being accepted , thus to avoid reputational damage to the CCG. If accepted or declined this should still be declared and recorded on the register of gifts and hospitality.

### **Commercial Sponsorship**

- i. Sponsorship of CCG events by an appropriate external bodies should only be approved if a reasonable person would conclude that the event will result in clear benefit for the CCG and the NHS;
- ii. During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation;
- iii. No information should be supplied to the sponsor from which they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied;
- iv. The involvement of a sponsor in an event should always be clearly identified in the interest of transparency.
- v. It should be made clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event;
- vi. Staff should declare any involvement with arranging sponsored events.

### **Other forms of sponsorship**

- ii. Organisations external to the CCG may also sponsor posts or research. However, there is a potential for conflict of interest to occur, particularly when research funding by external bodies does or could lead to a real or perceived commercial advantage, or if sponsored posts cause a conflict of interest between the aims of the sponsor and the aims of the organisation, particularly around procurement and competition.



## **Declaration of offers and receipt of gifts and hospitality**

The template for declaring of gifts and hospitality is available at Appendix D of this policy. On submission to the Corporate Business Manager the information is added to the CCG's register of gifts and hospitality which is also available on the CCG website.

### **Consequences of a Failure to Declare**

Any member of staff failing to declare accepting gifts or offers of hospitality as reward or inducement may be liable to disciplinary action, investigation for fraud and corruption, or criminal charges. In certain circumstances, these offences could be committed as a result of a gift consideration being accepted by a friend or relative as well as by a member of staff.

Any unwitting failure to declare gifts, hospitality, sponsorship, will not necessarily render void any decision made by the NEE CCG Board or its properly constituted committees or sub-committees although

- a. the CCG will reserve the right to declare such a contract or decision void and
- b. the CCG member, or staff member affected will be required to declare any benefit he or she, their spouse, civil partner, cohabitee, child or parent received under the contract in the Register of Interests maintained by NEE CCG.

There is an unavoidable overlap between the provisions of the Constitution and this policy. In the event of any discrepancy, the provisions of the Constitution will apply.

### **CCG members and staff – outside employment/speaking at conferences etc.**

- i. All external professional activity, initiatives or secondary paid employment related to the functions of the CCG must be disclosed by CCG members and staff, by completion of Appendix A (interests).
- ii. Notification of engagement in outside employment/private practice will be required in advance of any position being agreed, so that consideration can be given to the impact (if any) on NEE CCG. Where NEE CCG believes a conflict of interest will arise, it reserves the right to refuse permission for a member of staff to undertake outside employment or private practice.
- iii. If an individual is paid directly for external work undertaken in NEE CCG time, he / she should take annual or unpaid leave, and this work would be considered as independent consultancy. The individual is responsible for any resultant National Insurance and Income Tax liabilities. This could also be viewed as potential fraud if the staff member is paid for external work during CCG time. Annual or unpaid leave should be requested in advance of any time taken off to conduct external work.

- iv. If the individual is speaking at a conference during work hours and representing NEE CCG, payment should be made directly to NEE CCG. The arrangements for this should be agreed in advance with the Director of Resources (CFO).
- v. Any patents, designs, trademarks or copyright derived from work carried out as part of a member of staff's CCG duties, shall be the intellectual property of NEE CCG.

Where external work, gaining patent or copyright or the involvement in innovative work benefits or enhances NEE CCG's reputation, or results in financial gain for NEE CCG, consideration will be given to rewarding the member of staff, subject to any guidance on the management of intellectual property, issued by the Department of Health.

**GIFTS AND HOSPITALITY SHOULD NOT BE ACCEPTED OTHER THAN IN ACCORDANCE WITH THIS POLICY.**

- i. Gifts from patients are unlikely to occur for NEE CCG members and staff in respect of their duties within the CCG, but in the event that this does occur, then gifts of small value (up to the value of £50) (the value of these items should be judged by the individuals Line Manager) should be accepted on behalf of the organisation and where appropriate, shared with the immediate work team.
- ii. Under no circumstances must personal gifts of cash, cigarettes or alcohol be accepted, even if the recipient perceives that the value is below the £50 limit.
- iii. Offers of hospitality, such as theatre tickets, tickets or admission to sporting events, holiday accommodation must be refused, but recorded on the form attached as Appendix D
- iv. NEE CCG members and staff should consider any offer to fund their attendance at an NHS related event or training event with their senior manager or CFO in order to determine whether attendance is required in an official capacity. Written agreement should be obtained, and the item logged on the register in accordance with this policy.
- i. The funding of GP Education events, training or consultation events on behalf of NEE CCG by a third party where the CCG is drawing together a number of clinicians or members of the public should be dealt with as if it were sponsorship.

a) .

<b>Sponsorship Value</b>	All Staff including Board members, sub-committee members and third parties working for, or on behalf of, NEE CCG
Less than £50	<ul style="list-style-type: none"> <li>• No authorisation required</li> <li>• Staff report to their Director/Head of Service and report to Corporate Business Manager</li> <li>• Corporate Business Manager to enter on to register</li> </ul>
£50 - £500	<ul style="list-style-type: none"> <li>• CCG staff submit proposal to their Director/Head of Service</li> <li>• Executive members submit proposal to the Chief Finance Officer</li> <li>• Reported to Corporate Business Manager and entered into register</li> </ul>
£500 - £4999	<ul style="list-style-type: none"> <li>• Staff submit proposal to their Director/Head of Service</li> <li>• Executive members submit proposal to the Chief Finance Officer</li> <li>• Authorised by the Chief Officer or the Chief Finance Officer</li> <li>• Reported to Corporate Business Manager and entered in the register</li> </ul>
£5000 and over	<ul style="list-style-type: none"> <li>• Prior approval by CCG/Board required.</li> <li>• Entered onto register by Corporate Business Manager</li> </ul>

## Declaration of Interest for CCG members and employees

<b>Name:</b>					
<b>Position or relationship with the CCG (or NHS England in the event of joint committees):</b>					
<b>Detail of interests held (complete all that are applicable):</b>					
Type of Interest*	Description of Interests (including, for Indirect Interests, details of the relationship with the person who has the interest)	Personal interest or that of a family member, close friend or other acquaintance?	Date interest relates From & To		Actions taken to mitigate risk (to be agreed with Line Manager)
<ul style="list-style-type: none"> <li>See reverse of form for details</li> </ul>					

*The information submitted will be held by the CCG 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 the CCG holds.*

### Declaration:

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

I do /do not (delete as applicable) give my consent for this information to be published on the registers that the CCG holds. If consent is NOT given please give reasons:

Signed:

Date:

Signed:  
(Line Manager)

Position:

Date:

**PLEASE RETURN COMPLETED FORMS TO THE CORPORATE BUSINESS MANAGER  
OR CORPORATE SERVICES OFFICER**

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## Types of conflicts of interest

Type 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 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;</li> <li>• A shareholder (of more than 5% of the issued shares), partner or owner of a private or not for profit company, business or consultancy which is doing, or is likely, or possibly seeking to do, business with health or social care organisations.</li> <li>• A consultant for a provider</li> <li>• In secondary employment</li> <li>• In receipt of a grant 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 the failure of the provider)</li> </ul>
<b>Non-Financial Professional Interests</b>	<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 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>• A member of a particular specialist professional body (not normally a routine membership of the RCGP, BMA or medical defence organisation)</li> <li>• An advisor for CQC or NICE</li> <li>• A medical researcher</li> </ul>
<b>Non-Financial Personal Interests</b>	<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 a position of authority in or connected to a voluntary sector organisation</li> <li>• A member of a political party</li> <li>• Suffering from a particular condition requiring individually funded treatment</li> <li>• A financial advisor</li> </ul>
<b>Indirect Interests</b>	<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). 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>

## Appendix B

### Declaration of Interest checklist Chair's Guide

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 are recorded formally and consistently across all CCG governing body, 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. This checklist is not designed to cover requirements for declaring incidents outside of the committee process.

Timing	Checklist for Chairs	Responsibility
In advance of the meeting	The agenda to include a standing item on declaration of interests to enable individuals to raise any issues and/or make a declaration at the meeting.	Meeting Chair & administrator
	Agenda to be circulated to enable attendees (including visitors) to identify any interests relating to the agenda.	Administrator
	Members should contact the Chair as soon as they identify an actual or potential conflict.	Meeting member
	Chair to review a summary report from preceding meeting detailing any conflict of interest declared and how this was managed.	Meeting Chair
	Copy of members declared interests are checked to establish any actual or potential conflict that may occur during the meeting.	Meeting Chair
During the Meeting	Check and declare the meeting is quorate and ensure this is noted in the minutes of the meeting	Meeting Chair
	Chair requests members to declare any interests in the agenda items which have not already been declared, including the nature of the conflict.	Meeting Chair
	Chair makes a decision as how to	Meeting Chair and

	<p>manage each interest which has been declared including whether the individual can continue to participate in the meeting and the decision is recorded.</p> <p>As a minimum requirement the following should be recorded in the minutes of the meeting:</p> <ul style="list-style-type: none"> <li>i. Individual declaring the interest</li> <li>ii. At what point the interest was declared</li> <li>iii. The nature of the interest</li> <li>iv. The Chair’s decision and resulting action taken</li> <li>v. The point in the meeting where an individual retired from and returned to the meeting – even if an interest has not been declared.</li> </ul> <p>Visitors in attendance who participate in the meeting must also follow the protocol and declare any interests in a timely manner.</p>	<p>Administrator</p> <p>Administrator</p>
<p>Following the meeting</p>	<p>All interests declared at the meeting should be promptly updated on the declaration of interest form</p> <p>All new completed declarations of interest should be transferred onto the register of interests</p>	<p>Individual declaring interest</p> <p>Corporate Team</p>

**APPENDIX C**

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## Guidelines for Minute Takers

- Remind the Chair to check and declare that the meeting is quorate
- Record within the minutes the fact the meeting was quorate
- Chair will request members to declare any conflict of interest in agenda items that have not already have been declared including the nature of the conflict.
- Chair makes a decision as how the conflict will be managed i.e. if the member will be able to continue to participate in the meeting and this will be recorded on a case by case basis.
- As a minimum the following should be recorded in the minutes of the meeting:
  - i. Individual declaring the interest
  - ii. At what point in the meeting the interest was declared
  - iii. Nature of the interest
  - iv. The Chair's decision and resulting action taken
  - v. The point during the meeting at which any individual retired from and returned to the meeting even if an interest has not been declared.
- Visitors in attendance must also follow the meeting protocol and declare any interest in a timely manner.
- Any new interests declared at the meeting should promptly be updated onto the declaration of interest form and sent to the Corporate Business Manager or Corporate Services Officer to be transferred onto the register of interests



## APPENDIX D

### REGISTER OF GIFTS AND HOSPITALITY FORM

(To be completed where the value of the hospitality, or gift is estimated to exceed £50)

Date hospitality or gift offered/received:	
Name of person offered/receiving the hospitality or gift :	
Work base:	
Hospitality or gift received from:	
Details of Interest, hospitality or gift offered/received:	
Approximate value of hospitality or gift offered/received:	£
<b>Declaration: (delete as applicable)</b>	
* The hospitality or gift was offered but was declined	
* I declare that the interest/gift/hospitality (please delete as appropriate) acquired or received was entirely consistent with the requirements of the Code of Conduct for NEE CCG managers and Standards of Business Conduct that no business decisions have or will be improperly influenced by gifts or advancements nor personal gain obtained.	
* I confirm that I have read and understand the NEE CCG Policy on Standards of Business Conduct for Employees and have made all necessary declarations during the last year.	
I do /do not (delete as applicable) give my consent for this information to be published on the registers that the CCG holds (both on the website and also within the Annual Report). If consent is NOT given please give reasons:	

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<b>Signed:</b>	
	(If the declaration is made <b>by e-mail and your name</b> , state by e-mail in the signature box above)
Date of declaration:	
Managers Statement:	I confirm I have been made aware of the hospitality/ gift offered or received by this individual.
Print Name:	
Signed and Dated:	

This form must be completed, not later than the end of the month following that in which the hospitality/gift offer **was made or received** and sent to:

**Angela Roberts**

**Corporate Business Manager**

**NEE CCG**

**Aspen House, Stephenson Road, Severalls Business Park, Colchester CO4 9QR**

**Email: [angelaroberts1@nhs.net](mailto:angelaroberts1@nhs.net)**

## APPENDIX E

### REGISTER OF SPONSORSHIP ARRANGEMENTS SPONSORSHIP DECLARATION FORM

(To be completed where the value of the sponsorship is estimated to exceed  
£50)

Date sponsorship offered/received:	
Name of person offered/receiving sponsorship:	
Work base:	
Sponsorship received from:	
Details of sponsorship offered/received:	
Approximate value of sponsorship offered/received:	£
<b>Declaration: (delete as applicable)</b>	
* The sponsorship was offered but was declined	
* I declare that the sponsorship acquired or received was entirely consistent with the requirements of the Code of Conduct for NEE CCG managers and Standards of Business Conduct that no business decisions have or will be improperly influenced by gifts or advancements nor personal gain obtained.	
* I confirm that I have read and understand the NEE CCG Policy on Standards of Business Conduct for Employees and have made all necessary declarations during the last year.	
I do /do not (delete as applicable) give my consent for this information to be published on the registers that the CCG holds (both on the website and also within the Annual Report). If consent is NOT given please give reasons:	
<b>Signed:</b>	
	(If the declaration is made <b>by e-mail and your name</b> , state by e-mail in the signature box above)

Date of declaration:	
Managers Statement:	I confirm I have been made aware of the sponsorship offered or received by this individual.
Print Name:	
Signed and Dated:	

This form must be completed, not later than the end of the month following that in which the sponsorship **offer was made or received** and sent to:

**Angie Roberts, Corporate Business Manager**

**NEE CCG,**

**Aspen House, Stephenson Road, Severalls Business Park, Colchester CO4 9QR**

**Email: [angelaroberts1@nhs.net](mailto:angelaroberts1@nhs.net)**

## APPENDIX F

### Meeting Etiquette for NEE Clinical Commissioning Group

- i. Members are asked to be punctual as meetings should start on time
- ii. Ensure that you are available for the duration of the meeting – if this is not possible then inform the chair before the start of the meeting. However this is should be the exception rather than a regular occurrence.
- iii. Communicate non-attendance to the chair or the administrative support officer prior to the meeting. Ensure that any substitutes are agreed with the chair.
- iv. Be polite and show courtesy. All members of the meeting have an equal status.
- v. Address all communication or discussion through the chair.
- vi. Avoid collateral conversations that will be distracting to other members of the meeting.
- vii. Mobile phones should be on silent. Do not text or manage email traffic during the meeting. Do not leave to make or take calls unless it is urgent.
- viii. Be prepared for the meeting by making sure all papers are read.
- ix. Be prepared to participate in the meeting.
- x. Avoid or explain jargon and acronyms where possible.