NHS
Birmingham and Solihull
Integrated Care Board

Conflicts of Interests Policy

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1 Policy Summary

Adhering to this policy will help to ensure that we use NHS money wisely, providing best value for taxpayers and accountability to our patients for the decisions we take.

As a member of staff you should…	As an organisation we will…
• Familiarise yourself with this policy and follow it. Refer to the guidancefor the rationale behind this policy https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf • Use your common sense and judgement to consider whether the interests you have could affect the way taxpayers' money is spent- you should base this on the perception of the average person, not your own perception. • Regularly consider what interests you have and declare these as they arise. If in doubt, declare. • **NOT** misuse your position to further your own interests or those close to you • **NOT** be influenced, or give the impression that you have been influenced by outside interests • **NOT** allow outside interests you have to inappropriately affect the decisionsyou make when using taxpayers' money	• Ensure that this policy and supporting processes are clear and help staff understand what they need to do. • Identify a team or individual with responsibility for: ○ Keeping this policy under review to ensure they are in line with the guidance. ○ Providing advice, training, and support for staff on how interests should be managed. ○ Maintaining register(s) of interests. ○ Auditing this policy and its associated processes and procedures at least once every three years. • **NOT** avoid managing conflicts of interest. • **NOT** interpret this policy in a way which stifles collaboration and innovation with our partners

2 Introduction

The Birmingham and Solihull Integrated Care system and the people who work with and for us, collaborate closely with other organisations delivering high quality care for our population.

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

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

3 Who this Policy applies to;

The policy applies to:
Staff who are directly employed by the ICB in either a permanent, fixed term or temporary post and hold a contract of employment with the ICB including Board Members

Other stakeholders (including CSU staff, patients, visitors, medical locums, agency staff, contractors, suppliers and visiting clinicians).

4 Purpose

This policy will help staff (identified in section 3 above) manage conflicts of interest risks effectively. It:

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

This policy should be considered alongside these other organisational policies:

- The ICB Constitution
- Policy and Guidance for Joint Working with the Pharmaceutical Industry and Other Commercial Organisations
- Freedom to Speak Up Policy
- Standards of Business Conduct Policy
- Fraud Bribery and Corruption Policy
- Recruitment Policy
- Disciplinary Policy
- Standing Financial Instructions.

In addition, staff should be aware of statutory guidance issued by NHS England:
Managing Conflicts of Interest: Revised Statutory Guidance for CCGs 2017 (or any successor document).

5 Key terms

A 'conflict of interest' is:

> "A set of circumstances by which a reasonable person would consider that an individual's ability to apply judgement or act, in the context of delivering, commissioning, or assuring taxpayer funded health and care services is, or couldbe, impaired or influenced by another interest they hold."

A conflict of interest may be:

- Actual - there is a material conflict between one or more interests
- Potential – there is the possibility of a material conflict between one or more interests in the future

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

Declare:

The organisation utilises an online declaration system called Declare. Each member of staff has a personal log in and the onus is on the member of staff to log into the system and make the necessary declarations.

The system provides the option to submit a nil return or to declare no change. The system must be updated as a minimum at the start of each financial year, at commencement of employment or when any change in circumstance occur. The Declare system automatically publishes the declarations on the ICB website.

Declare sends monthly reports to the Director of Governance and Corporate Affairs of all new declarations made, including nil declarations. These are checked and individuals and/ or their line managers consulted with if/as required. The system is updated to show as checked. A report is presented to Audit committee quarterly, which includes current compliance rate of

declarations made (against a performance indicator of 80%).

6 Interests

Interests fall into the following categories:

- **Financial interests:**
  Where an individual may get a direct financial benefit[1] from the consequences of a decision they are involved in making.
- **Non-financial professional interests:**
  Where an individual may obtain a non-financial professional benefit from the consequences of a decision, they are involved in making, such as increasing their professional reputation or promoting their professional career.
- **Non-financial personal interests:**
  Where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit, because of decisions they are involved in making in their professional career.
- **Indirect interests:**
  Where an individual has a close association[2] with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest and could stand to benefit from a decision they are involved in making.

Further details on the type of interest that needs to be declared can be found in Annex 1.

7 Staff

NHS England has published a number of frequently asked questions for specific staff groups and how the guidance applies to them. Staff can access these resources at www.england.nhs.uk/ourwork/coi.

The ICB utilises the skills of many different people, all of whom are vital to our work.This includes people on differing employment terms, who for the purposes of this policy we refer to as 'staff' and are listed below:

- Office holders including non-executive members
- Board members
- Integrated Care Partnership Members
- All salaried employees
- All prospective employees who are part-way through recruitment
- Contractors and sub-contractors
- Agency staff
- Committee, sub-committee, and advisory group members (who may not be directly employed or engaged by the organisation) including those employed by other organisations, clinical leads and clinical advisors
- Embedded CSU staff.

1. This may be a financial gain, or avoidance of a loss.
2. A common sense approach should be applied to the term 'close association'. Such an association might arise, depending on the circumstances, through relationships with close family members and relatives, close friends and associates, and business partners.

8 Decision Making Staff

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

Decision making staff in the ICB are:

- Board Members
- Non-executive Directors
- Directors and other executive staff
- Members of advisory groups which contribute to direct or delegated decision making on the commissioning or provision of taxpayer funded services
- Individuals who are members of committees that approve investment or disinvestment decisions
- Job roles/ staff with decision making authority identified within the Scheme of Reservation and delegation
- Administrative and clinical staff who have the power to enter into contracts on behalf of the organisation
- Administrative and clinical staff involved in decision making concerning the commissioning of services, purchasing of goods, medicines, medical devices or equipment, and formulary decisions.

Individuals who work with the ICB or sit on committees, but whom are not directly employed by the ICB should be clear in which capacity they are attending meetings, e.g. as a representative of their employing organisation or as a contributor to the system voice. The relevant Committee Chair must ensure that the individual only offers an individual organisation view when they are attending the meeting in that capacity.

9 Identification, declaration, and review of interests

9.1 Identification & declaration of interests (including gifts and hospitality)

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

- Upon appointment to the ICB (including temporary roles)
- When staff move to a new role, or their responsibilities change significantly
- At the beginning of a new project/piece of work
- As soon as circumstances change and new interests arise (for instance, in a meeting when interests staff hold are relevant to the matters in discussion)
- When their personal circumstances change resulting in a declaration being required.

Declarations should be made via the Declare system:
birminghamandsolihullccg.mydeclarations.co.uk/home (To be updated when new website in place)
After expiry, an interest will remain on register(s) for six months and a private record of historic interests will be retained for a minimum of six years.

Any questions or concerns should be addressed to: bsol.administrator@nhs.net

The ICB has an appointed a Conflicts of Interest Guardian as follows:

- Chair of Audit Committee: phil.jones7@nhs.net

The Conflict of Interest Guardian has oversight of the management of conflicts in the organisation, and acts as a point of independent authority and scrutiny.

Any person can raise a concern about conflicts of interests with the relevant Conflicts of Interests Guardian, and contact will remain confidential unless the individual consents to their details being shared.

The ICB Governance Team has responsibility for implementing this guidance, including:

- Reviewing current policies and bringing them in line with this guidance
- Providing advice, training, and support for staff on how interests should be managed
- Maintaining register(s) of interests
- Auditing policy, process and procedures relating to this guidance at least every three years.

Specific advice on the materiality of an interest or action that needs to be taken in relation to an interest is available from the Director of Governance and Corporate Affairs

9.2 Proactive review of interests

We will prompt decision making staff every six month to review declarations they have made and, as appropriate, update them or make a nil return. However, staff should be aware of the need to update their declarations, as when required in the interim period, in accordance with this policy.

Staff will receive an e mail asking them to provide a return. If such return is not provided within one month the matter will be escalated to the individual's line manager. Should the relevant declaration not be received within one further month the matter will be escalated to the relevant Executive Director. For Board members, the matter will be escalated to the ICB Chair. A report will be provided to the Audit Committee on a regular basis showing non-compliance. Management of the Declare system is outlined in section 5.

Gifts and hospitality should be declared on an ongoing proactive basis in accordance with sections 12.1 and 12.2 below.

10 Records and publication

10.1 Maintenance

The organisation will maintain the following registers:

- Declarations of interests
- Gifts and Hospitality
- Procurement register.

10.2 Publication

We will:

- Publish registers
- Publish the interests declared by decision making staff of the ICB, which will be updated as a minimum on a six-monthly basis
- Publish a combined register of gifts and hospitality
- Publish a combined procurement register
- The registers will be published on the websites of the ICB.

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

10.3 Wider transparency initiatives

The ICB fully supports wider transparency initiatives in healthcare, and we encourage staff to engage actively with these.

Relevant staff should give their consent for payments they receive from the pharmaceutical industry to be disclosed as part of the Association of British Pharmaceutical Industry (ABPI) Disclosure UK initiative. These “transfers of value” include payments relating to:

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

Further information about the scheme can be found on the ABPI website:
http://www.abpi.org.uk/our-work/disclosure/about/Pages/default.aspx

11 Management of interests – general

If an interest is declared but there is no risk of a conflict arising, then no action is warranted. However, if a material interest is declared a management plan will bemade and will identify any actions required to manage the risk. The general management actions that could be applied include:

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

Each case will be different and context-specific, and the governance team will, in conjunction with the relevant committee chair or executive lead, clarify the circumstances and issues with the individuals involved. Staff should maintain a written audit trail of information considered and actions taken.

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

Any disputes on whether an interest needs to be declared or upon the management of an interest shall be referred to the Director of Governance and Corporate Affairs for consideration. If further resolution is required, the matter will be referred to the ICB Chair for decision.

12 Management of interests – common situations

This section sets out the principles and rules to be adopted by staff in common situations, and what information should be declared. Staff are also reminded that the Bribery Act 2010 makes it a serious criminal offence to offer, give, seek or receive any sort of “financial or other advantage” that may lead to the improper performance of someone’s duties.

12.1 Gifts

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

Gifts from suppliers or contractors:

- Gifts from suppliers or contractors doing business (or likely to do business) with the organisation should be declined, whatever their value

- Low cost branded promotional aids such as pens or post-it notes may, however, be accepted where they are under the value of £6[3] in total and need not be declared.

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

- Gifts of cash and vouchers to individuals should always be declined
- Staff should not ask for any gifts
- Gifts valued at over £50 should not be accepted. These should still be declared by staff
- Modest gifts accepted under a value of £50 do not need to be declared
- A common-sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value)
- Multiple gifts from the same source over a 12-month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.

What should be declared

- Staff name and their role with the organisation
- A description of the nature and value of the gift, including its source
- Date of receipt
- Any other relevant information (e.g., circumstances surrounding the gift, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy), Senior approval must be obtained.
- The declaration should be made using Declare
- You need to make your declaration at the earliest opportunity and within 28 days of receiving the offer of the gift.

12.2 Hospitality

- Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement
- Hospitality must only be accepted when there is a legitimate business reason, and it is proportionate to the nature and purpose of the event
- Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. This can be accepted, and must be declared, if modest and reasonable. Senior approval must be obtained.
- The declaration should be made using Declare
- You need to make your declaration at the earliest opportunity and within 28 days of receiving the offer of the hospitality.

Meals and refreshments:

- Under a value of £25 - may be accepted and need not be declared
- Of a value between £25 and £75[4] - may be accepted and must be declared
- Over a value of £75 - should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept
- A common-sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or a reasonable estimate).

Travel and accommodation:

- Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared

3. The £6 value has been selected with reference to existing industry guidance issued by the ABPI: http://www.pmcpa.org.uk/thecode/Pages/default.aspx
4. The £75 value has been selected with reference to existing industry guidance issued by the ABPI http://www.pmcpa.org.uk/thecode/Pages/default.aspx

- Offers which go beyond modest or are of a type that the organisation itself might not usually offer, need approval by senior staff, should only be accepted in exceptional circumstances, and must be declared. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
    - offers of business class or first-class travel and accommodation (including domestic travel)
    - offers of foreign travel and accommodation.

What should be declared
- Staff name and their role with the organisation
- The nature and value of the hospitality including the circumstances
- Date of receipt
- Any other relevant information (e.g., action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)
- The declaration should be made using Declare.

12.3 Outside Employment (including directorships and officer appointments)

- Staff should declare any existing outside employment on appointment and any new outside employment when it arises
- Where a risk of conflict of interest arises, the general management actions outlined in this policy should be considered and applied to mitigate risks
- Where contracts of employment or terms and conditions of engagement permit, staff may be required to seek prior approval from the organisation to engage in outside employment.

The organisation may also have legitimate reasons within employment law for knowing about outside employment of staff, even when this does not give rise to risk of a conflict. Staff should refer to the ICB policies on recruitment and their individual staff contract. If in doubt staff should discuss the matter with their line manager and/or the Director of Governance and Corporate Affairs.

The ICB has determined that individuals may not hold dual employment where they may be asked to undertake tasks which would assist the provider to meet the requirements of their contract with the ICB.

The ICB has further determined that individuals cannot be employed in a position of 'significant influence' in a provider organisation and the ICB at the same time. 'Significant influence' is defined as Board level (or equivalent) position in any provider organisation. Specifically, a Board level role can only be held in either the ICB or a provider organisation.

However, it is recognised that provider Board members may be involved in ICB committees and in such instances the appropriate declaration should be made. (For the purposes of clarity this is not intended to apply to roles held in organisations providing services under GMS contracts).

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

12.4 Shareholdings and other ownership issues

- Staff should declare, as a minimum, any shareholdings and other ownership interests in any publicly listed, private or not-for-profit company, business, partnership, or consultancy which is doing, or

might be reasonably expected to do, business with the organisation
- Where shareholdings or other ownership interests are declared and give rise to risk of conflicts of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks
- There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

What should be declared
- Staff name and their role with the organisation
- Nature of the shareholdings/other ownership interest, including the percentage shareholding
- Relevant dates
- Other relevant information (e.g., action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)
- The declaration should be made using Declare

12.5 Patents
- Staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are ongoing, which are, or might be reasonably expected to be, related to items to be procured or used by the organisation
- Staff should seek prior permission from the organisation before entering into any agreement with bodies regarding product development, research, work on pathways etc, where this impacts on the organisation's own time, or uses its equipment, resources, or intellectual property
- Where holding of patents and other intellectual property rights give rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

What should be declared
- Staff name and their role with the organisation
- A description of the patent
- Relevant dates
- Other relevant information (e.g., action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)
- The declaration should be made using Declare

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

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

- The declaration should be made using Declare

12.7 Donations

- Donations made by suppliers or bodies seeking to do business with the organisation should be treated with caution and not routinely accepted. In exceptional circumstances they may be accepted but should always be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value
- Staff should not actively solicit charitable donations unless this is a prescribed or expected part of their duties for the organisation, or is being pursued on behalf of the organisation's own registered charity or other charitable body and is not for their own personal gain
- Staff must obtain permission from the organisation if in their professional role they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign for a charity other than the organisation's own
- Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued
- Staff wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

What should be declared

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

12.8 Sponsored events

- Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in clear benefit the organisations and the NHS
- During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation
- No information should be supplied to the sponsor from whom they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied
- At the organisation's discretion, sponsors or their representatives may attend or take part in the event, but they should not have a dominant influence over the content or the main purpose of the event
- The involvement of a sponsor in an event should always be clearly identified
- Staff within the organisation involved in securing sponsorship of events should make it clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event

- Staff arranging sponsored events must declare this to the organisation prior to the event
- Any sponsorship should be approved in advance by the Director of Governance and Corporate Affairs. Disputes regarding whether sponsorship should be accepted will be referred to the ICB Chair for resolution.

What should be declared

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

12.9 Sponsored research

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

nature of the services to be provided and the payment for those services
- The study must not constitute an inducement to prescribe, supply, administer, recommend, buy, or sell any medicine, medical device, equipment, or service
- Staff should declare involvement with sponsored research to the organisation.

What should be declared
- The organisation will retain written records of sponsorship of research, in line with the above principles and rules
- Staff should declare:
  - Their name and their role with the organisation
  - Nature of their involvement in the sponsored research
  - Relevant dates
  - Other relevant information (e.g., what, if any, benefit the sponsor derives from the sponsorship, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)
  - The declaration should be made using the Declare system.

12.10 Sponsored posts

- External sponsorship of a post requires prior approval from the organisation. The matter should be referred initially to the Director of Governance and Corporate Affairs
- Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate
- Sponsorship of a post should only happen where there is written confirmation that the arrangements will have no effect on purchasing decisions or prescribing and dispensing habits. This should be audited for the duration of the sponsorship. Written agreements should detail the circumstances under which organisations have the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise
- Sponsored post holders must not promote or favour the sponsor's products, and information about alternative products and suppliers should be provided
- Sponsors should not have any undue influence over the duties of the post or have any preferential access to services, materials or intellectual property relating to or developed in connection with the sponsored posts.

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

12.11 Clinical private practice

- Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises[5] including:
  - Where they practise (name of private facility)
  - What they practise (specialty, major procedures)
  - When they practise (identified sessions/time commitment).

- Clinical staff should (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):
  - Seek prior approval of their organisation before taking up private practice

5. Hospital Consultants are already required to provide their employer with this information by virtue of Para.3 Sch. 9 of the Terms and Conditions – Consultants (England) 2003: https://www.bma.org.uk/- /media/files/pdfs/practical advice at work/contracts/consultanttermsandconditions.pdf

- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work[6]
- Not accept direct or indirect financial incentives from private providers other than those allowed by Competition and Markets Authority guidelines: https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/N on-Divestment_Order_amended.pdf

Medical staff should not initiate discussions about providing their private professional services for NHS patients, nor should they ask other staff to initiate such discussionson their behalf.

What should be declared

- Staff name and their role with the organisation
- A description of the nature of the private practice (e.g., what, where and when staff practise, sessional activity, etc)
- Relevant dates
- Any other relevant information (e.g., action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)
- The declaration should be made using Declare

13 Management of interests – advice in specific contexts

13.1 Strategic decision-making groups

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

- Entering into (or renewing) large scale contracts
- Awarding grants
- Making procurement decisions.
- Selection of medicines, equipment, and devices.

The interests of those who are involved in these groups should be well known so that they can be managed effectively. For this organisation these groups include:

- The Integrated Care Board
- The ICS Partnership
- The Primary Care Commissioning Committee
- The People Committee
- The Quality Committee
- The Finance and Performance Committee
- The Appointments and Remuneration Committee
- The Audit Committee

These groups should adopt the following principles:

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

6. These provisions already apply to Hospital Consultants by virtue of Paras.5 and 20, Sch. 9 of the Terms and Conditions – Consultants (England) 2003: https://www.bma.org.uk/-/media/files/pdfs/practical advice at work/contracts/consultanttermsandconditions.pdf)

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

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

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

13.2 Procurement

Procurement should be managed in an open and transparent manner, compliant with procurement and other relevant law, to ensure there is no discrimination against or in favour of any provider. Procurement processes should be conducted in a manner that does not constitute anti-competitive behaviour, which is against the interest of patients and the public.

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

The ICB will publish registers of procurement decisions, which will include any actions that have been taken to manage conflicts of interests.

Advice on managing conflicts of interests in relation to procurement decisions can be obtained from the procurement team at Arden and GEM CSU or from the Director of Governance and Corporate Affairs.

14 Dealing with breaches

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

14.1 Identifying and reporting breaches

Staff who are aware of actual breaches of this policy, or who are concerned that there has been, or may be, a breach, should report these concerns to one or all of the following:

- The Conflicts of Interest Guardian
- The Director of Governance and Corporate Affairs
- The ICB’s Local Counter Fraud Specialist (richard.loydall@nhs.net) .

To ensure that interests are effectively managed staff are encouraged to speak up about actual or suspected breaches. Every individual has a responsibility to do this. For further information about how concerns should be raised please refer to the Freedom to Speak Up Policy, available on the ICB intranet.

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

14.2 Following investigation, the organisation will:

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

14.3 Taking action in response to breaches

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

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

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

Inappropriate or ineffective management of interests can have serious implications for the organisation and staff. There will be occasions where it is necessary to consider the imposition of sanctions for breaches.

Sanctions should not be considered until the circumstances surrounding breaches have been properly investigated. However, if such investigations establish wrong- doing or fault then the organisation can and will consider the range of possible sanctions that are available, in a manner which is proportionate to the breach. This includes:

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

14.4 Learning and transparency concerning breaches

A report on any breaches, the impact of these, and action taken will be considered by the Audit Committee at the meeting following identification of the breach.

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

15 Implementation and review

The policy will be available on the organisations intranet site in the master Policy area. A communication will be issued to staff to inform them that the policy has been launched and additional communications sent when the document has been reviewed/ updated.

This policy will be brought to the attention of all staff. Managers should also share the policy with new starters, and highlight how it applies to their area of work.

The policy will be reviewed every three years by the Director of Governance and Corporate Affairs, to ensure that it remains fit for purpose. It will also be updated when necessary to reflect any changes in legislation or national policy.

16 Document control

The approved version of this document will be sent to the Corporate Services Department for uploading onto the ICB intranet. A copy of the previous version of this document will be retained by the Corporate Services Department for archiving purposes.

17 Monitoring and Review

Minimum Policy Requirement to be monitored	Process for monitoring	Responsible Individual/ Group/ Committee	Frequency of monitoring	Responsible individual/group/ committee for review of results
Non adherence to policy	Via Declare- Conflicts of Interest	Director of Governance and Corporate Affairs	Quarterly	Audit Committee
	Via Declare- Gifts and Hospitality	Director of Governance and Corporate Affairs	Quarterly	Audit Committee

18 Associated documentation

Freedom of Information Act 2000

ABPI: The Code of Practice for the Pharmaceutical Industry (2014) ABHI Code of Business Practice

NHS Code of Conduct and Accountability (July 2004)

ICB Freedom to Speak Up Policy

ICB Standards of Business Conduct Policy

ICB Constitution

Policy and Guidance for Joint Working with the Pharmaceutical Industry and other Commercial Organisations

ICB Counter Fraud, Bribery and Corruption Policy

Annex 1

Type of Interest	Description
Financial Interests	This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being: • A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations. This includes involvement with a potential provider of a new care model; • 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; • A management consultant for a provider; or • A provider of clinical private practice. This could also include an individual being: • In employment outside of the ICB (see paragraph 79-81); • In receipt of secondary income; • In receipt of a grant from a provider; • In receipt of any payments (for example honoraria, one-off payments, day allowances or travel or subsistence) from a provider; • In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and • Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider).
Non-Financial Professional Interests	This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is: • An advocate for a particular group of patients; • A GP with special interests e.g., in dermatology, acupuncture etc.; • An active member of a particular specialist professional body (although routine GP membership of the Royal College of General Practitioners (RCGP), British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared); • An advisor for the Care Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE); • Engaged in a research role; • The development and holding of patents and other intellectual property rights which allow staff to protect something that they create, preventing unauthorised use of products or the copying of protected ideas; or • GPs and practice managers, who are members of the ICB Board or committees, should declare details of their roles and responsibilities held within their GP practices.
Non-Financial Personal Interests	This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit. This could include, for example, where the individual is: • A voluntary sector champion for a provider; • A volunteer for a provider; • A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation; • Suffering from a particular condition requiring individually funded treatment; • A member of a lobby or pressure group with an interest in health and care.
Indirect Interests	This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest, or a non-financial personal interest in a commissioning decision (as those categories are described above) for example, a: • Spouse / partner; • Close family member or relative e.g., parent, grandparent, child, grandchild or sibling; • Close friend or associate; or • Business partner.