

Standards of Business Conduct Policy

Version Control Sheet

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1 Introduction

- 1.1 As public sector bodies, NHS Kirklees Clinical Commissioning Group (the CCG) must be impartial and honest in the conduct of business and employees should remain beyond suspicion. The CCG operates within an environment of mutual openness, honesty and transparency. This policy has been developed to protect both staff and the CCG against contention or allegations of misconduct.
- 1.2 This policy sets out the standards of business conduct for NHS Kirklees Clinical Commissioning Group, hereafter referred to as “the CCG”, and provides guidance. It should be read in conjunction with the CCG’s Conflicts of Interest Policy.

2 Purpose

- 2.1 The CCG’s Constitution, at section 6, Provisions for Conflict of Interest Management and Standards of Business Conduct, confirms that all employees, members, Committee members and sub-committee members of the CCG and members of the Governing Body should act in good faith in the interests of the CCG, follow the Seven Principles of Public Life (Nolan Principles) and comply with the CCG’s policy on business conduct.
- 2.2 The supplementary guidance in this policy seeks to ensure a consistent and transparent approach to standards of business conduct throughout the organisation.
- 2.3 This policy:
- provides guidance to ensure that employees, members of the CCG, co-opted members and members of the Governing Body and its committees do not misuse their official position or information acquired in their official duties for personal gain or to benefit their family or friends or seek to advantage or further private business or other interests, in the course of their official duties.
 - signposts the Conflicts of Interests Policy, which provides guidance on offers of gifts, hospitality and commercial sponsorship.
 - highlights staff responsibilities to declare outside interests and employment outside of the organisation, ensuring that outside interests are in no way detrimental to the CCG and signposting the Conflicts of Interests Policy.
 - provides guidance on charitable fundraising.

- provides guidance regarding the award of contracts, ensuring there is no unfair advantage of one competitor over another or show favouritism in awarding contracts in line with CCG and national policy.
- raises awareness that the Bribery Act makes it an offence to give, promise, or offer a bribe; and to request, agree to receive or accept a bribe.

3 Definition of Terms

- 3.1 A **“gift”** is defined as any item of cash or goods, or any service, which is provided for personal benefit, free of charge or at less than its commercial value. Full guidance on declaring offers of gifts is contained in section 7.1 of the Conflicts of Interest Policy.
- 3.2 **“Hospitality”** is defined as food, drink, accommodation or entertainment offered to an individual employee or CCG member 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 offered on an organisation-wide basis will be dealt with as “sponsorship”. Full guidance on declaring offers of hospitality is contained in section 7.2 of the Conflicts of Interest Policy.
- 3.3 **“Sponsorship”** is defined within DH guidance¹ 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.
- Full guidance on declaring offers of commercial sponsorship is contained in section 7.3 of the Conflicts of Interest Policy.

4 Scope of the Policy

- 4.1 The CCG expect this policy to be complied with by:
- all employees
 - members of the CCG
 - co-opted members
 - members of the Governing Body and its committees

¹ [Commercial Sponsorship – Ethical Standards for the NHS](#) (DH, 2000)

- those on temporary or honorary contracts, secondments, pool staff, contractors and students.
- 4.2 Staff are responsible for ensuring that they are not placed in a position which risks conflict between their private interests and their NHS duties. Every member of staff is responsible for ensuring that he/she complies with this policy on standards of business conduct. Some staff may additionally be required to adhere to a code of conduct of their own professional body.
- 4.3 **Member practices** are responsible for the management of standards of business conduct within their own practices.
- 4.4 Any non-compliance with the policy may lead to disciplinary action which could result in dismissal for gross misconduct.
- 4.5 Breaches of the provisions of the legislation referred to in **section 2** may render individuals liable to criminal prosecution and may lead to dismissal, loss of NHS employment and superannuation rights.

5 Policy Details

5.1 Gifts

All offers of gifts must be declared in accordance with the Conflicts of Interest Policy. Full guidance on declaring offers of gifts is contained in section 7.1 of that policy.

5.2 Hospitality

All offers of hospitality must be declared in accordance with the Conflicts of Interest Policy. Full guidance on declaring offers of hospitality is contained in section 7.2 of that policy.

5.3 Commercial Sponsorship

All offers of commercial sponsorship must be declared in accordance with the Conflicts of Interest Policy. Full guidance on declaring offers of commercial sponsorship, including attendance at training events sponsored by pharmaceutical companies, is contained in section 7.3 of that policy.

5.4 Rewards for Initiative

As a general principle, any financial gain resulting from any external work undertaken and connected with CCG business, whether undertaken in work or private time, will be due to the CCG. Employees are required to speak to their Head of Service before undertaking any work.

Any patent or copyright resulting from the work of a CCG employee in the course of their duties shall be the property of the CCG.

Consideration will be given to rewarding employees who, within the course of their work, have produced innovative work of outstanding benefit to the CCG.

5.5 Declarations of Outside Interests

All employees, members and co-optees must ensure that public confidence in their integrity is not compromised or damaged in any way by maintaining high standards of conduct at all times.

Whilst the off duty hours of employees are their own concern, employees should ensure that their private interests do not come before their job and they should not put themselves in a position where their private interests conflict with their job.

Staff must declare any interest they, their immediate family, partner or close associate may have in a contract or other similar matter under consideration by the CCG by declaring this matter in accordance with the Conflicts of Interest Policy. Full guidance on declaring interests is contained in section 4 of that policy. Staff should familiarise themselves with the policy and ensure they adhere to it.

The interests of members of the Governing Body and its committees, staff and the CCG's membership are registered and reported to the Audit Committee on a quarterly basis. They are also recorded in the appropriate minutes when issues giving rise to possible conflicting interests are discussed.

5.6 Declarations of Outside Employment/Private Practice

Staff must inform and obtain prior permission from the CCG by notifying their line manager if they wish to engage in outside employment in addition to their work with the CCG. The purpose of this is to ensure that the CCG is aware of any potential conflict of interest with their CCG employment. The process for declaring outside employment (along with examples of work which might conflict with the business of the CCG) is set out in section 6.2 of the Conflicts of Interest Policy.

Private Practice

Employees may undertake private practice or work for outside agencies, provided they **do not** do so within the time they are contracted to the NHS, and they observe the conditions set out above and in the Conflicts of Interest Policy.

Agreements with medical staff regarding private practice are as specified in their terms and conditions of service/employment. Relevant professional guidance, e.g. "A guide to the Management of Private Practice in the NHS", should be adhered to.

5.7 Financial References

Organisations or individuals external to the NHS have on occasion approached members of staff requesting the provision of references to support their application for funding from sources internal or external to the CCG.

The CCG will support such applications where appropriate. However, such references must be signed off at Chief Officer or Chief Finance Officer level. This is because the CCG may carry liability should the organisation or individual develop financial problems.

5.8 Contracts

Members of the Governing Body, its committees and CCG employees who are in contact with suppliers and contractors (including external consultants) and in particular, those who are authorised to sign purchase orders, or place contracts for goods, materials or services, must adhere to the standards of behaviour expected that are set out in this policy and:

- the CCG Constitution
- Standing Financial Instructions
- Procurement Policy
- Conflict of Interests Policy

Fair and open competition between prospective contractors or suppliers for NHS contracts is a statutory requirement. This means that:

- No private, public or voluntary organisation or company which bids for NHS business should be given any advantage over its competitors, such as advance notice of NHS requirements. This applies to all potential contractors, whether or not there is a relationship between them and the CCG, such as a long running series of previous contracts.
- Each new contract should be awarded solely on merit, taking into account the requirements of the CCG and the ability of the contractors to fulfil them.

- No special favour must be shown to current or former employees or Governing Body members, or their close relatives or associates, in awarding contracts to private or other businesses run by them, or employing them in a senior relevant managerial capacity. Contracts may be awarded to such businesses where they are won in fair competition against other tenders.
- Employees, Governing Body and committee members with a relevant interest must play no part in the selection, and scrupulous care must be taken to ensure that the selection process is conducted impartially.
- All invitations to potential contractors to tender for CCG business must include a tender notice warning tenderers of the consequences of engaging in any corrupt practices involving employees of public bodies. All tenderers are routinely required to sign a form relating to canvassing in respect of collusive tendering.

5.9 Commercial Confidentiality

Employees should, at all times, guard against using or making public, information on the operations of the CCG which might provide a commercial advantage to any organisation in a position to supply goods and/or services to the CCG in line with the CCG's Procurement Policy and Freedom of Information Policy.

5.10 Research and Development

Any research, as opposed to audit, or service evaluation undertaken must first be approved by a Local Research Ethics Committee and be given approval by the CCG as part of the Research Governance Framework.

The CCG works in partnership with the West Yorkshire Research and Development (WY R&D) team to ensure that all research activity that takes place within the CCG and its member practices is undertaken in accordance with current governance and regulatory requirements,

Anyone planning to undertake a Research and Development project should seek advice on the proposed project from research@bradford.nhs.uk

5.11 Charitable Fundraising

The CCG support the raising of funds for donation to a charitable organisation or appeal. To ensure that these funds are raised in the spirit of this policy, the following process must be followed by anyone intending to raise more than £100 from a fundraising event, sponsorship or sale of raffle tickets:

- All individuals wishing to raise money must complete the Charitable Fundraising form at Appendix 2 and send the completed form to the Head

of Corporate Governance who, in consultation with **the relevant Head of Service**, will decide if this is appropriate.

- The Head of Corporate Governance will keep a record of all CCG staff raising money for charity.
- If the Head of Service or Head of Corporate Governance has any concern about the proposal then they will raise the matter with the **Chief Finance Officer** and inform the member of staff of the outcome.
- The fundraiser is responsible for organising the event and any indemnity insurance as required if members of the public attend an event which is something other than the normal working interface with such groups of public. The CCG does not guarantee to provide any resources to assist in the process, unless a request was made in the initial submission and agreed at that point.
- After the fundraising activity, the fundraiser must inform the Head of Corporate Governance in writing, detailing the amount of money raised at the event, together with a receipt from the charity to indicate that they have received the money.

6 Accountabilities and Responsibilities

6.1 Duties within the Organisation

Standards of Business Conduct state that all employees and officers of the NHS must be impartial and honest in the conduct of their business and do not place themselves in a position which risks or appears to risk conflict between their private interest and NHS duties. High standards of corporate and personal conduct are a requirement throughout the NHS and, since it is publicly funded, it must be accountable to Parliament for the services it provides and for the effective and economical use of taxpayers' money.

The CCG endorses the three crucial public service values that must underpin the work of the NHS:

a. Accountability

Everything done by those who work in the NHS must be able to stand the test of Parliamentary scrutiny, public judgements on propriety and professional codes of conduct.

b. Probity

There should be an absolute standard of honesty in dealing with the assets of the NHS. Integrity should be the hallmark of all personal conduct in decisions

affecting patients, staff and suppliers, and in the use of information acquired in the course of NHS duties.

c. **Openness**

There should be sufficient transparency about NHS activities to promote confidence between any NHS body and its staff, service users and the public.

NOLAN PRINCIPLES OF CONDUCT IN PUBLIC LIFE

In addition to the public service values described above, principles of conduct in the NHS and codes of conduct detailed in the Codes of Conduct and Accountability Framework, CCG staff should adopt the seven Principles of Public Life (the “Nolan Principles”) published and subsequently updated by the Committee for Standards in Public Life, which aim to ensure the highest standards of propriety in public life.

These are:

- i. **Selflessness**
Holders of public office should act solely in terms of the public interest.
- ii. **Integrity**
Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.
- iii. **Objectivity**
Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.
- iv. **Accountability**
Holders of public office are accountable to the public for their decisions and actions must submit themselves to the scrutiny necessary to ensure this.
- v. **Openness**
Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.
- vi. **Honesty**
Holders of public office should be truthful.
- vii. **Leadership**
Holders of public office should exhibit these principles in their own

behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour whenever it occurs.

All staff are expected to adopt these principles when conducting official business for and on behalf of the CCG so that appropriate ethical standards can be demonstrated at all times.

Senior Management Team

The **Chief Officer** is the organisation's designated 'Accountable Officer' and has overall responsibility for ensuring the CCG operates in a transparent and open manner.

The **Chief Finance Officer** is responsible for ensuring this policy is in place.

Officers, Lay Members and Heads of Service

All **officers and lay members**, must act in accordance with this policy and lead by example in acting with the utmost integrity and ensuring adherence to all relevant regulations, policies and procedures.

Clinical Leads, Officers, Heads of Service and Line Managers are responsible for assisting employees in complying with this policy by:

- ensuring that this policy and its requirements are brought to the attention of employees for whom they are responsible, and that those employees are aware of its implications for their work.
- ensuring that members of staff have a thorough understanding of the CCG's governance arrangements.

Head of Corporate Governance

The **Head of Corporate Governance** is responsible for administering this policy and ensuring reporting to the Audit Committee. The **Head of Corporate Governance** will maintain registers covering:

- a. Gifts and Hospitality
- b. Outside employment and interests
- c. Sponsorship
- d. Charitable Fundraising

Staff

All staff are expected to ensure that the interests of patients remain paramount at all times:

- be impartial and honest in the conduct of their official business;
- use the public funds entrusted to them to the best advantage of the service, always ensuring value for money;
- not abuse their official position for personal gain or to benefit their family or friends;
- not seek to gain advantage or further private business or other interests, in the course of their official duties;
- be aware that it is both a serious criminal offence (the Bribery Act 2010, the Theft Act 1968 and the Fraud Act 2006) and disciplinary matter to corruptly receive or give any fee, loan, gift, reward or other advantage in return for doing (or not doing) anything or showing favour (or disfavour) to any person or organisation;
- understand that failure to follow this policy may damage the CCG and its work and so may be viewed as a disciplinary matter.

All staff must:

- act honestly and with integrity at all times and to safeguard the organisation's resources for which they are responsible;
- ensure that they read, understand and comply with this policy;
- comply with the spirit, as well as the letter, of the laws and regulations of all jurisdictions in which the organisation operates, in respect of the lawful and responsible conduct of activities;
- adhere to all relevant regulations, policies and procedures;
- raise concerns as soon as possible if they believe or suspect that a conflict with this policy has occurred, or may occur in the future.

Should members or staff wish to report any concerns or allegations, they have a number of options available to them:-

- Report all suspected irregularities to the Chief Finance Officer who is also the contact point for NHS Counter Fraud Authority, the Police and External Audit.
- Contact your Local Counter Fraud Specialist: rosie.dickinson1@nhs.net 07825 228175
- Contact the NHS Counter Fraud Authority Fraud and Corruption Reporting Line 0800 028 4060 or <https://cfa.nhs.uk/reportfraud>

- Contact the Public Concern at Work line on 0207 404 6609
- Follow the CCG's own Whistleblowing Policy guidelines

The consequences of non-compliance with this policy are set out in section 4.

Audit Committee

The Audit Committee will review the policy regularly on behalf of the Governing Body, and recommend amendment whenever there is a material change in legislation or guidance underpinning the policy.

The committee will receive reports on declarations in line with this policy on a regular basis.

7. Public Sector Equality Duty

- 7.1 The CCG, as a public body, have to demonstrate **due regard** to the general duty. This means active consideration of equality must influence the decision(s) reached that will impact on patients, carers, communities and staff.
- 7.2 The CCG aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none is placed at a disadvantage relative to others.
- 7.3 An Equality Impact Assessment (EIA) has been carried out for this policy – no impact was identified.

8. Consultation

Consultation on this policy has been undertaken via the Senior Management Team and Counter Fraud Team.

9. Training

The Head of Corporate Governance will identify staff groups who require training on this policy and decide how this training need will be met.

10. Monitoring Compliance with the Document

The CCG will monitor compliance with the policy via the Audit Committee and the Head of Corporate Governance. The Chief Officer will take any action as necessary.

11. Arrangements for Review

This policy will be reviewed in April 2022 or sooner if required.

12. Dissemination

This policy will be disseminated via internal communications and the intranet.

13. Associated Documentation

Professional Standards Authority 'Standards for Members of NHS Boards and CCG Governing Bodies in England' November 2013

HSG (93) 5 Standards of Business Conduct for NHS staff

Nolan Principles of Standards in Public Life (descriptions last revised 2013)

The Codes of Conduct and Accountability for NHS Boards 2004

The Code of Conduct for NHS Managers 2002

[CIPFA Better Governance Forum – CIPFA Networks](#)

14. References

CCG Constitution

Standing Financial Instructions

Code of Conduct for NHS Managers (2002)

Code of Accountability for NHS Boards (July 2004)

HSG (93) 5 Standards of Business Conduct for NHS Staff

Nolan Principles of Standards in Public Life (descriptions last revised 2013)

Whistleblowing Policy

Conflicts of Interest Policy

Anti-Fraud, Bribery and Corruption Policy

Discipline Policy and Procedure

Commercial Sponsorship – Ethical Standards for the NHS November 2000

The Medicines (Advertising Regulations) 1994

15. Appendices

The following appendices are attached to this policy:

Appendix 1 – Charitable Fundraising Form

Appendix 2 – Equality Impact Assessment

Appendix 1 - CHARITABLE FUNDRAISING FORM

To be completed and signed by the person intending to raise the money either individually or on behalf of a charitable organisation.

Name of Charity / Appeal for which money is to be raised	
Contact details of liaison person within the charity	
Purpose of the fundraising	
Type of fundraising – collection, cake sale, etc	
Date of event / period of fundraising	

I confirm that I have read the CCG's Standards of Business Conduct Policy, and have complied with the requirements. I confirm that this does not breach the policy.

Signed:

Dated:

Name of fundraiser (please print):

Please return completed form to the Head of Corporate Governance.

Appendix 2 - Equality Impact Assessment

Title of policy	Standards of Business Conduct Policy	
Names and roles of people completing the assessment	Laura Ellis, Head of Corporate Governance	
Date assessment started/completed	1 February 2021	1 February 2021
Reviewed		

1. Outline

Give a brief summary of the policy	The Standards of Business Conduct Policy seeks to ensure a consistent and transparent approach to standards of business conduct throughout the organisations.
What outcomes do you want to achieve?	To ensure: • the CCG remains impartial and honest in the conduct of business and employees remain beyond suspicion; • the CCG operates within an environment of mutual openness, honesty and transparency; and • both staff and the CCG are protected against contention or allegations of misconduct.

2. Analysis of impact

This is the core of the assessment. Using the information above detail the actual or likely impact on protected groups, with consideration of the general duty to eliminate unlawful discrimination; advance equality of opportunity; and foster good relations.

	Are there any likely impacts? Are any groups going to be affected differently? Please describe.	Are these negative or positive?	What action will be taken to address any negative impacts or enhance positive ones?
Age	None identified.		
Carers	None identified.		
Disability	None identified.		
Sex	None identified.		
Race	None identified.		
Religion or belief	None identified.		
Sexual orientation	None identified.		
Gender reassignment	None identified.		
Pregnancy and maternity	None identified.		
Marriage and civil partnership	None identified.		
Other relevant group	None identified.		
If any negative/positive impacts were identified are they valid, legal and/or justifiable? Please detail.		N/A	

4. Monitoring, Review and Publication

How will you review/monitor the impact and effectiveness of your actions?	Whilst no specific actions have been identified to address any equality issues, the policy will be reviewed at scheduled intervals, and the review of this assessment will form part of those reviews.		
Lead Officer:	Nick Lamper	Review date:	April 2022

5. Sign off

Lead Officer	Nick Lamper		
Senior Manager	Laura Ellis	Date approved:	1 February 2021