

## Managing Conflicts of Interest

(Based on the NHS England Model Policy – issued April 2017)

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## Amendments Summary:

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1		Whole document	Document re-written to comply with NHS England model template, launched April 2017.  Supersedes Standards of Business Conduct - Register of Interests, Gifts & Hospitality Policy	April 2017
2	May 2019	Pg 15	New section added, 10.9 regarding sponsorship for training, development and education  Appendix B also updated with new telephoned numbers	May 2019
3	Nov 2019	Pg 24	Appendix A - New Declaration of Interest form added	Nov 2019
4	March	Pg 7	Section 5.2 – Decision Making staff amended	March 2020
		Pg 7	Section 6.1.1 – requirement for decision makers to make an annual return (linked to appraisal process)	
		Pg 11	Section 10.3.1 – further description of outside employment provided	
5	April	26	Updated disclaimer within Form	April 2020
6	August 2020	8	Section 7.2.1 re: publication of registers for decision makers via Trust public website	August 2020 (CFO and DoF approval)
		12	Section 10.3.1 ref to outside employment inc. bank and zero hour contracts	
		Pg 26	Appendix A – updated disclaimer on form to highlight publication of register for decision makers via Trust public website	
7	Nov 2020	Section 1.7  Section 10.11.1  Section 10.13	<ul style="list-style-type: none"> <li>New section added - enhanced ref. to Bribery Act 2020 included on advice from LCFS</li> <li>Updated titles and names of governance infrastructure</li> <li>additional detail regarding consideration of Sponsored posts (inc. ref to Ethics Panel considerations)</li> </ul> New section added re: adverse press/media	November 2020

## Review Log:

Version Number	Review Date	Lead Name	Ratification Process	Notes
7	Nov 2020	Rachel Cheal	PSG, Clinical Executive Group	3 yearly document review

## SUMMARY OF POLICY

From 1 June 2017 guidance from NHS England on Managing Conflicts of Interest in the NHS (the ‘guidance’) comes into force. The guidance:

- introduces common principles and rules for managing conflicts of interest
- provides simple advice to staff and organisations about what to do in common situations
- supports good judgement about how interests should be approached and managed
- Sets out the issues and rationale behind the policy.

This policy (which is based on the NHS England model policy) provides a practical interpretation of the guidance to help with implementation.

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...
<ul style="list-style-type: none"> <li>• Familiarise yourself with this policy and follow it. Refer to the guidance for the rationale behind this policy <a href="https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf">https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf</a></li> <li>• Use your common sense and judgement to consider whether the interests you have could affect the way taxpayers’ money is spent</li> <li>• Regularly consider what interests you have and declare these as they arise. If in doubt, declare.</li> <li>• <b>NOT</b> misuse your position to further your own interests or those close to you</li> <li>• <b>NOT</b> be influenced, or give the impression that you have been influenced by outside interests</li> <li>• <b>NOT</b> allow outside interests you have to inappropriately affect the decisions you make when using taxpayers’ money</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that this policy and supporting processes are clear and help staff understand what they need to do.</li> <li>• Identify a team or individual with responsibility for:               <ul style="list-style-type: none"> <li>○ Keeping this policy under review to ensure they are in line with the guidance.</li> <li>○ Providing advice, training and support for staff on how interests should be managed.</li> <li>○ Maintaining register(s) of interests.</li> <li>○ Auditing this policy and its associated processes and procedures at least once every three years.</li> </ul> </li> <li>• <b>NOT</b> avoid managing conflicts of interest.</li> <li>• <b>NOT</b> interpret this policy in a way which stifles collaboration and innovation with our partners</li> </ul>

## Table of Contents

Item	Contents	Page
1	INTRODUCTION AND PURPOSE	5
2	SCOPE AND DEFINITION	5
3	KEY TERMS	6
4	INTERESTS	6
5	DECISION MAKING STAFF	7
6	IDENTIFICATION, DECLARATION AND REVIEW OF INTERESTS	7
7	RECORDS AND PUBLICATION	8
8	WIDER TRANSPARENCY INITIATIVES – INCLUDING WORKING WITH PRIVATE COMPANIES AND PHARMACEUTICAL INDUSTRIES	9
9	MANAGEMENT OF INTERESTS – GENERAL	9
10	MANAGEMENT OF INTERESTS – COMMON SITUATIONS	10
10.1	Gifts	10
10.2	Hospitality	11
10.3	Outside employment	12
10.4	Shareholdings and other ownership issues	12
10.5	Patents and Intellectual Property	13
10.6	Loyalty interests	13
10.7	Donations	14
10.8	Sponsored events	15
10.9	Sponsored research	15
10.10	Sponsored roles	17
10.11	Sponsored posts	17
10.12	Clinical private practice	18
10.13	Media and Press	19
11	MANAGEMENT OF INTERESTS – ADVICE IN SPECIFIC CONTEXTS	20
12	DEALING WITH BREACHES	21
13	ROLES AND RESPONSIBILITIES	23
14	TRAINING	24
15	EQUALITY IMPACT ASSESSMENT & MENTAL CAPACITY ACT	24
16	SUCCESS CRITERIA AND MONITORING EFFECTIVENESS	24
17	REVIEW	24
18	REFERENCES AND LINKS TO OTHER DOCUMENTS	24
	APPENDIX A – FORM	26
	APPENDIX B – CONTACT DETAILS	29
	APPENDIX C – EQUALITY IMPACT ASSESSMENT	30

# Managing Conflicts of Interest

Staff are expected to adhere to the processes and procedures detailed within this policy. During times of national or 'Gold command' emergency Solent NHS Trust may seek to suspend elements of this policy in order to appropriately respond to a critical situation and enable staff to continue to work in a way that protects patient and staff safety. In such cases Quality Impact assessments will be completed for process changes being put in place across the organisation. The QIA will require sign off by the Solent NHS Ethics Panel, which is convened at such times, and is chaired by either the Chief Nurse or Chief Medical Officer. Once approved at Ethics panel, these changes will be logged and the names/numbers of policies affected will be noted in the Trust wide risk associated with emergency situations. This sign off should include a start date for amendments and a review date or step down date when normal policy and procedures will resume.

## 1. INTRODUCTION & PURPOSE

- 1.1 Solent NHS Trust (the 'organisation'), and the people who work with and for us, collaborate closely with other organisations, delivering high quality care for our patients.
- 1.2 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.
- 1.3 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 the highest standards of integrity and that NHS monies are used wisely so that we are using our finite resources in the best interests of patients.
- 1.4 This policy will help our staff manage conflicts of interest risks effectively.
- 1.5 The policy;
  - 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
- 1.6 A number of additional resources to aid the implementation process of this policy have been published by NHS England, including 'Frequently Asked Questions' – you can access this information here: [www.england.nhs.uk/ourwork/coi](http://www.england.nhs.uk/ourwork/coi)
- 1.7 The Bribery Act 2010 came into force on 1 July 2011 and made it a criminal offence to give promise of or offer a bribe or request, agree or receive a bribe. When receiving a bribe or bribing another (including a foreign official) individuals can be prosecuted. The maximum penalty is 10 years imprisonment and an unlimited fine. It is important to note that there is no need for the transfer of goods and/or money to have taken place to be classed as bribery, the intention is sufficient to qualify. Solent NHS Trust has in place adequate procedures to mitigate bribery risk. The Trust will not tolerate acts of bribery and will treat the giving or receiving of bribes as gross misconduct and may result in disciplinary action and/or criminal

proceedings. Employees who have concerns should raise them with the Chief Finance Officer (the Senior Bribery Compliance Officer), and the Local Counter Fraud Specialist.

## 2. SCOPE

- 2.1 At Solent NHS Trust we use the skills of many different people. This includes people on differing employment terms, who for the purposes of this policy we refer to as ‘staff’ and are listed below:
- All salaried employees
  - All prospective employees – who are part-way through recruitment
  - Contractors and sub-contractors
  - Volunteers
  - Apprentices and Students
  - Bank and Agency staff;
  - Non-Executive Directors, Associate Hospital Managers, Governors and
  - Committee, sub-committee and advisory group members (who may not be directly employed or engaged by the organisation)
- 2.2 This document also applies to all directly and indirectly employed staff within Solent NHS Trust and other persons working within the organisation in line with Solent NHS Trust’s Equality, Diversity and Human Rights Policy. This document is also recommended to Independent Contractors as good practice

## 3. KEY TERMS

- 3.1 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 could be, impaired or influenced by another interest they hold.”
- 3.2 A conflict of interest may be:
- Actual - there is a material conflict between one or more interests
  - Potential (or perceived) – there is the possibility of a material conflict between one or more interests in the future
- 3.3 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.

## 4. INTERESTS

- 4.1 Interests fall into the following categories:

**Financial interests:** Where an individual may get direct financial benefit<sup>1</sup> from the consequences of a decision they are involved in making.

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<sup>1</sup> This may be a financial gain, or avoidance of a loss.

**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<sup>2</sup> 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.

4.2 All staff are expected to adhere to the Nolan Principles (the seven principles of Public Life); Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty and Leadership. In accordance with these principles, staff must therefore be open and transparent in their declarations.

## 5. DECISION MAKING STAFF

5.1 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 guidance these people are referred to as 'decision making staff.'

5.2 Decision making staff in this organisation are:

- **Executive and non-executive directors** who have decision making roles which involve the spending of taxpayers' money
  - All **Band 8C and above staff**
  - All staff who have **expenditure approval authorisation** and those who have **payroll responsibilities**
  - Members of the **Commercial and Procurement team**
  - **Medics**
- and
- any **other administrative and clinical staff involved in:**
    - **decision making concerning the commissioning of services** (ie where Solent subcontracts with other organisations),
    - **purchasing of goods,**
    - **medicines**
    - **medical devices or equipment, and**
    - **formulary decisions**
- or**
- **who have the power to enter into contracts and/or agreements with other organisations on behalf of their organisation**

(The above staff to be determined by the Executive team, Clinical Directors, Operational Directors and Associate Directors)

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<sup>2</sup> 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. Appropriate procedures should be enacted to mitigate any potential conflicts, for example, by avoiding such circumstances e.g. by abstaining from discussions and meetings where there may be a personal or commercial connection

## 6. IDENTIFICATION, DECLARATION AND REVIEW OF INTERESTS

### 6.1 Identification & declaration of interests (including gifts and hospitality)

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

- On appointment with the organisation (forms will be issued by HR as part of the recruitment process)
- 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)
- For decision makers identified within section 5.2, an annual declaration must be provided (including NIL return) and will be linked to the appraisal process

6.1.2 A declaration of interest form is available at Appendix A.

6.1.3 Declarations must be made to the Corporate Affairs Team, at Trust Headquarters or electronically via: [declarations@solent.nhs.uk](mailto:declarations@solent.nhs.uk)

6.1.4 Contact details are located in Appendix B

6.1.5 In accordance with the NHS England guidance, after expiry, an interest will remain on register(s) for a minimum of 6 months and a private record of historic interests will be retained for a minimum of 6 years.

### 6.2 Proactive Review of Interests

6.2.1 Decision making staff will be prompted annually to review declarations they have made and, as appropriate, update them or make a nil return.

## 7. RECORDS AND PUBLICATION

### 7.1 Maintenance

7.1.1 Solent NHS Trust will maintain a Register of Interests and a separate Register of Gifts and Hospitality

7.1.2 All declared interests that are material will be promptly transferred to the register by the Corporate Affairs team.

### 7.2 Publication

7.2.1 We will:

- Publish the interests declared by decision making staff in the Register of Interests on the Trusts' public website in accordance with NHSE requirements and the requirements of the NHS Standard Contract
- Refresh this information annually



- Board of Directors interests will be published on an annual basis within the Annual Report.

7.2.2 If decision making staff have substantial grounds for believing that publication of their interests should not take place then they should contact the Corporate Affairs Team 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 be the exception and information will not be withheld or redacted merely because of a personal preference.

## 8. WIDER TRANSPARENCY INITIATIVES - INCLUDING WORKING WITH PRIVATE COMPANIES AND THE PHARMACEUTICAL INDUSTRY

8.1 Solent NHS Trust fully supports wider transparency initiatives in healthcare, and we encourage staff to engage actively with these.

8.2 Relevant staff are strongly encouraged to 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 (including lecturing) and chairing events
- 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 – including being in receipt of free equipment or funding to support staff, being in receipt of an educational / research grant for self or department from a private / pharmaceutical company
- Being a shareholder in any private company (including pharmaceuticals)
- Have taken part in any equipment, device or drug trials.
- Any other interest which could be seen as influencing views

8.3 Further information about the scheme can be found on the ABPI website:

<http://www.abpi.org.uk/our-work/disclosure/about/Pages/default.aspx>

**\*\*Any money (including that received as lecture fees, for example) must only be earned during an individual’s free time, which could include annual leave. Staff may, by exception and only with prior agreement from their line manager, be permitted to participate in activities within work time - any financial benefit received by the private company/pharmaceutical company must be paid back to the Trust and not the individual in such cases\*\***

## 9. MANAGEMENT OF INTERESTS – GENERAL

9.1 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 then 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

9.2 Each case will be different and context-specific, and Solent NHS Trust will always clarify the circumstances and issues with the individuals involved. Staff should maintain a written audit trail of information considered and actions taken.

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

9.4 In the case of disputes, advice can be sought from the Corporate Affairs Team who will consult with relevant parties, for example, Executive Directors, the People Services (Human Resources Team) and or legal advisors to identify the most appropriate action.

## 10. 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.

### 10.1 Gifts

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

10.1.2 Money, alcohol, tobacco or other intoxicating substances (that are against the ethics of the Trust) must not personally be accepted in any circumstances. It is permissible for staff to accept cash donations to the Trust's Charitable Funds, see section 10.7.

10.1.3 Any donated assets (for example physical equipment) should be dealt with via the Associate Director of Estates and Facilities Management and the Chief Financial Officer should be informed prior to acceptance.

10.1.4 Registration of 'free prize' draw gifts/prizes - The Trust acknowledges that sometimes staff members may be entered into 'free prize' draws when they are representing the organisation in a business capacity (for example when attending a conference). In such cases, any gifts/prizes over £6 in value should be registered in the same way as other gifts.

#### 10.1.5 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<sup>3</sup> in total, and need not be declared.

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<sup>3</sup> 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>

#### 10.1.6 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 £15 should be treated with caution and only be accepted on behalf of Solent NHS Trust and not in a personal capacity; such gifts must be declared.
- Modest gifts accepted under a value of £15 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 £15 where the cumulative value exceeds £15.
- Information regarding donations to Solent NHS Charity are found in section 10.7

#### 10.1.7 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).

### 10.2 Hospitality

10.2.1 Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.

10.2.2 Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event.

10.2.3 Particular caution should be exercised when hospitality is offered by actual or potential commercial suppliers or contractors. This can be accepted, and must be declared, if modest and reasonable. Senior approval must be obtained.

#### 10.2.4 Meals and refreshments

- Under a value of £25 - may be accepted and need not be declared.
- Of a value between £25 and £75<sup>4</sup> - 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 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).
- See section 10.8 regarding sponsored events

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<sup>4</sup> 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>

### 10.2.5 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.
- 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 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.

### 10.2.6 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).

## 10.3 Outside Employment

10.3.1 Staff should declare any existing outside employment on appointment and any new outside employment when it arises. Employment includes paid or unpaid work - either as Pay As You Earn (PAYE), voluntary, bank, consultancy and/or self-employment and zero hours contract.

10.3.2 Where a risk of conflict of interest arises, the general management actions outlined in this policy should be considered and applied to mitigate risks.

10.3.3 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.

10.3.4 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.

10.3.5 Where the staff member undertakes other employment that adversely affects their performance within the Trust or is considered fraudulent; this could be a disciplinary matter under the Improving and Managing Conduct Policy and/or dealt with via the Local Counter Fraud Specialist under the terms of the Anti-Fraud, Corruption and Bribery Policy.

### 10.3.6 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).

## 10.4 Shareholdings and Other Ownership Issues

10.4.1 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.

10.4.2 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.

10.4.3 There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

### 10.4.4 What should be declared

- Staff name and their role with the organisation.
- Nature of the shareholdings/other ownership 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).

## 10.5 Patents and Intellectual Property

10.5.1 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.

10.5.2 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.

10.5.3 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.

### 10.5.4 What should be declared

- Staff name and their role with the organisation.
- A description of the patent/intellectual property
- 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)

10.5.5 Advice should be sought from the Associate Director of Research and Clinical Effectiveness with regards to any research related interests. Staff should also refer to the Intellectual Property Rights Policy.

## 10.6 Loyalty Interests

10.6.1 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.
- hold a political position or are running for parliamentary office
- 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.

10.6.2 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).

## 10.7 Donations

10.7.1 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.

10.7.2 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.

10.7.3 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.

10.7.4 Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued 10.7.7.

10.7.5 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.

10.7.6 What should be declared

- The organisation will maintain records in line with the above principles and rules and relevant obligations under charity law. Donations will be registered by the Finance Team.
- Staff should refer to the Donation and Charitable Gift Policy

#### 10.7.7 Donations to Charitable Funds

Patients, public and companies wishing to donate to the organisation can do so via the Trusts Charitable Funds either by cash or cheques made payable to Solent NHS Trust. Monies received are paid into the Charitable Funds and are specific to the service donated to. Staff should refer to the Donation process outlined within the Donation and Charitable Gift Policy with regards to the receipt of cash/cheques.

Any staff member retaining cash donations meant for the Trusts Charity will be dealt in accordance to the Trusts Improving and Managing Conduct Policy and Anti-Fraud, Corruption & Bribery Policy.

### 10.8 Sponsored Events

10.8.1 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.

10.8.2 During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.

10.8.3 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.

10.8.4 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.

10.8.5 The involvement of a sponsor in an event should always be clearly identified.

10.8.6 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. Advice can be sought from the Communications team.

10.8.7 Staff arranging sponsored events must declare this to the organisation prior to the event being held and seek endorsement from the Corporate Affairs Team. It may be necessary for the Corporate Affairs team to seek advice as necessary with regards to the appropriateness of the event/sponsorship.

#### 10.8.8 What should be declared

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

### 10.9 Sponsorship for training, development and education

10.9.1 In accordance with the Learning & Development Policy, to avoid any conflict or perceived conflict of interest, staff must discuss all potential opportunities with their line manager **before** any contact is made between external organisations including pharmaceutical industries to seek funding/sponsorship for training, development or education. Approval

from the Line Manager must be sought **before** proceeding – and a Declaration of Interests form completed (Appendix A of the Conflicts of Interest Policy).

10.9.2 Similarly, any individuals must inform their line manager, discuss any implications and seek approval **before** proceeding with any opportunities if a direct approach is made by any external organisations (including pharmaceuticals). If there is the potential for any perceived or actual conflict of interest the offer **must be declined**.

10.9.3 **Transparency is key** – individuals must **declare any acceptances or declines** via the Declaration of Interest form - this approach could protect the individual and the Trust with regards to any potential suggestions of improper behaviour. This will ensure that a record to mitigate any potential future challenge is held.

10.9.4 If Line Managers have any queries / concerns in relation the above they should contact their Clinical Director (or Executive Director if concerning corporate service lines) in the first instance. Escalations should then be made to the Chief Medical Officer and / or Chief Nurse as necessary.

10.9.5 Any training and/or continued personal development to achieve professional qualifications aimed at enabling staff to fulfil their job requirement(s) must be discussed and agreed with the individual’s line manager and the Learning and Development Team. Such discussions are normally held as part of the annual appraisal process, or in year depending on appraisal timing and should be formally recorded as part of this process.

10.9.6 It is acknowledged, that attendance at external events (such a conferences) to supplement understanding, or, to enable staff members to be briefed on latest practice, can be beneficial – again, any such proposed attendance must be discussed and agreed with the individuals line manager in advance, and declarations made accordingly to ensure transparency.

10.9.7 Examples of acceptable/ non acceptable practice is summarised below:

<p>Attendance at event or conference sponsored / hosted by an external organisation <i>(where no professional accreditation or qualification is gained)</i></p>	<p>Staff should seek to clarify and/or have a conversation with the sponsor and record the sponsor’s expectation from providing the sponsorship with regards to attendance.</p> <p>If there is no known expectations from the sponsor the attendance can be acceptable but must be agreed by line manager in advance and declaration form completed.</p> <p>If it is subsequently identified that the sponsor’s intention is to pay for an individual’s attendance on the provision that the attendee will be required to promote a company or product, or undertake any other action that will associate the Trust and/or individual with a company or product, then attendance would not be appropriate and should be immediately declined. This must be reported to line management and recorded on a declaration form.</p>
<p>Offers of individual funding ( e.g. personal investment made to the individual , as opposed to</p>	<p>Such instances must be discussed with the individuals Line Manager immediately.</p>



open events that are accessible to others) to allow staff member to attend educational courses / obtain professional qualification / accreditation	<p>If there is the potential for any perceived or actual conflict of interest the offer must be declined – and a declaration made via completion of the Declaration of Interest Form (Appendix A of the Conflicts of Interest Policy).</p> <p>If there are no perceived or actual conflicts, approval from the Line Manager must be sought <b>before</b> proceeding – and a declaration made via completion of the Declaration of Interest Form (Appendix A of the Conflicts of Interest Policy).</p>
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10.9.8 Before accepting any sponsorship, staff are asked to; stop, consider, check with their manager and make a declaration before attending/accepting – and, if in any doubt ask.

10.9.9 Any proposal for a formal sponsorship commercial agreement (i.e. not for training, development or educational purposes) must be considered via the Commercial Team and executive team as appropriate, prior to being approved. Any existing arrangements already in place should be reviewed by the appropriate executive director and recorded at Commercial Group.

## 10.10 Sponsored Research

10.10.1 Funding sources for research purposes must be transparent.

10.10.2 Any proposed research must go through the relevant Health Research Authority or other approvals process, in accordance with the Research Governance Framework for Health & Social Care.

10.10.3 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.

10.10.4 The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.

10.10.5 Staff must declare involvement with sponsored research to the Trust's Research Department regardless of the organisation they are conducting their research in.

### 10.10.6 What should be declared

- The organisation, via the Research Team, 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).

10.10.7 Advice should be sought from the Associate Director of Research and Clinical Effectiveness with regards to any research related interests.

## 10.11 Sponsored Posts

10.11.1 External sponsorship of a post requires prior approval from the organisation. Approval should be sought via the People Services Team (Human Resources) and in consideration of any Commercial Processes (if applicable). It may also be necessary for such considerations to be taken via the Trust's Ethics Panel, prior to any sponsored posts being agreed.

10.11.2 Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate.

10.11.3 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.

10.11.4 Sponsored post holders must not promote or favour the sponsor's products, and information about alternative products and suppliers should be provided.

10.11.5 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.

### 10.11.6 What should be declared

- The organisation will retain written records of sponsorship of posts, in line with the above principles and rules via the People Services Team (Human Resources).
- 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.
- People Services (Human Resources) must be notified in the case of any sponsored post.

## 10.12 Clinical Private Practice

10.12.1 Clinical staff must declare all private practice on appointment, and/or any new private practice when it arises<sup>5</sup> including:

- Where they practise (name of private facility).
- What they practise (specialty, major procedures).
- When they practise (identified sessions/time commitment).

10.12.2 Clinical staff must (unless existing contractual provisions require otherwise or unless emergency treatment for private patients is needed):

- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.<sup>6</sup>

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<sup>5</sup> 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](https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf)

<sup>6</sup> 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](https://www.bma.org.uk/-/media/files/pdfs/practical_advice_at_work/contracts/consultanttermsandconditions.pdf)

- 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/Non-Divestment\\_Order\\_amended.pdf](https://assets.publishing.service.gov.uk/media/542c1543e5274a1314000c56/Non-Divestment_Order_amended.pdf)

10.12.3 Professionals should not initiate discussions about providing their Private Professional Services for NHS patients, nor should they ask other staff to initiate such discussions on their behalf.

10.12.4 Regarding private practice the following principles apply

- Staff must not self-refer or deliver private care for patients who are being treated within their NHS service. Staff must not gain private work directly from a patient being treated within their service and must not solicit directly or indirectly (for example via a colleague) their private practice to such patients, whilst being treated in service.
- If a staff member is approached by a patient currently being treated within their service, about the provision of private services, the staff member must only provide details of the relevant professional body and where to find details of a range of private providers, or advise the client to speak to their GP. The staff member is not permitted to make arrangements to provide private services, nor ask colleagues to make such arrangements on their behalf.
- Staff should refer to their respective professional codes and the Department of Health 'A Code of Conduct for Private Practice' for further information.

10.12.5 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).

## 10.13 Media and Press

10.13.1 All Trust staff should be mindful of any local or national media and press reports published (online or otherwise) in the public domain in which they, their family members or other people or companies they are connected to are named; and of which refer to the Trust or the wider NHS in a potentially adverse way.

10.13.2 Staff are encouraged to report such matters to line management, at the earliest possible opportunity, with the aim of documenting the impact of such reports and putting in place measures to mitigate reputational risk to the Trust and wider NHS.

10.13.3 The declaration form should be completed by any person making such a declaration within the miscellaneous section and returned to the Corporate Services team to enable the Trust to respond to any possible external scrutiny.

## 11. MANAGEMENT OF INTERESTS – ADVICE IN SPECIFIC CONTEXTS

### 11.1 Strategic decision making groups

11.1.1 In common with other NHS bodies Solent NHS Trust 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.

11.1.2 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 are

- Solent NHS Trust Board of Directors (Trust Board)
- Executive Officers Group Meeting (directors meetings)
- Clinical Executive Group
- Finance & Infrastructure Committee
- Commercial and Finance Group
- Medicines Management Group
- Medical Devices Group
- And related decisions in accordance with the Trusts' Scheme of Delegation

11.1.3 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.

11.1.4 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.

11.1.5 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.

### 11.2 Procurement

11.2.1 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.

11.2.2 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.

11.2.3 Advice regarding procurement should be sought from the Head of Procurement.

### 11.3 Integrated Care Systems (ICS)

11.3.1 It is recognised that under the ICS related initiatives (including New Care Models) staff and officers may be increasingly placed in conflicted situations where they are required to act in the best interests of Solent NHS Trust and the wider health and social care system, which may, at times, be at odds.

11.3.2 As a consequence a pragmatic approach should be taken to support good judgement, allowing staff to raised conflicts within their respective organisations and partnership forums, and where necessary individuals and chairs of groups should consider the points raised within sections 11.1.3 and 11.1.4. Concerns should be raised as appropriate to the executive lead within Solent NHS Trust at the earliest opportunity.

## 12. 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'.

### 12.1 Identifying and reporting breaches

12.1.1 Staff who are aware about actual breaches of this policy, or who are concerned that there has been, or may be, a breach, should report these concerns to their Line Manager and/or the Corporate Affairs Team or they may choose to discuss it with their Freedom to Speak Up Guardian.

12.1.2 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 can be found in the Freedom to Speak Up Policy.

12.1.3 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.

12.1.4 Following investigation the organisation will:

- Decide if there has been or is potential for a breach and if so the what 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.

## 12.2 Taking action in response to breaches

12.2.1 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 Specialists), members of the management or executive teams and organisational auditors.

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

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

12.2.3 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.

12.2.4 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/or guidance).
  - Formal disciplinary action (such as formal warning, the requirement for additional 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.
- 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.

## 12.3 Learning and transparency concerning breaches

12.3.1 Reports on breaches, the impact of these, and action taken will be considered by the Audit & Risk Committee.

12.3.2 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 made available for inspection by the public upon request.

## 13. ROLES & RESPONSIBILITIES

### 13.1 The Chief Executive

13.1.1 The Chief Executive is responsible for ensuring that staff as outlined in section 2 are aware of this policy and that systems are in place for implementing the requirements effectively. This includes ensuring that Registers of Staff Interests and Register of Gifts and Hospitality are maintained.

### 13.2 The Chief Finance Officer

13.2.1 The Chief Finance Officer is responsible for ensuring that staff are aware of Trust's Standing Financial Instructions and that there are appropriate financial controls and processes embedded within the Trust to protect and safeguard Trust assets.

### 13.3 Line Managers

13.3.1 Line Managers must ensure that copies of forms are retained on personnel files for two years following the last declaration and ensure that the form is shared with the People Services Team (HR). For new starters, People Services will retain copies of forms completed.

13.3.2 Line Managers must ensure that they are appropriately assured of the implications concerning the declarations made by staff members and make any additional enquiries as necessary.

13.3.3 Line Managers must also ensure that a copy of any completed forms is sent to the Corporate Affairs Team as soon as the interest, gift, and hospitality/sponsorship is declared.

### 13.4 Associate Director of Corporate Affairs and Company Secretary

13.4.1 The Associate Director of Corporate Affairs and Company Secretary will maintain a Register of Interests and a Register of Gifts and Hospitality.

13.4.2 The Corporate Affairs team will also:

- conduct annual proactive audits
- retain associated correspondence/ completed forms in accordance with Information Governance requirement
- maintain the publishable register of Decision Maker declarations

### 13.5 Staff

13.5.1 It is the personal responsibility of staff to ensure that they are not placed in a position which risks, or appears to risk, conflict between their private interests and their NHS duties. This applies to all Trust staff, including those who hold honorary contracts, bank & agency staff, and students. Staff are expected to be impartial and honest in the conduct of their business and should remain above suspicion.

13.5.2 It is the responsibility of staff to openly declare interests, gifts and hospitality and ensure that their declarations are updated and notified accordingly. Staff should be reminded to complete a disclaimer regarding declarations as part of their annual appraisal process and medical appraisal process.

13.5.3 If staff are concerned or have any suspicions about activities, they can contact the Trust's Local Counter Fraud Specialist or the confidential reporting line (see Appendix B).

13.5.4 Staff should understand that by openly declaring this does not exempt them from being investigated should allegations be made regarding improper conduct.

### 13.6 People Services (Human Resources)

13.6.1 The People Services Team will retain copies of the Interests Form returned at the point of appointment and keep on e-personnel files in accordance with Information Governance records retention protocols.

## 14. TRAINING

14.1 This document will be accessible to staff via the intranet and should be included as part of the local induction provided by line management and Data Custodians. An annual reminder regarding the principles of this policy will be cascaded centrally via the relevant communications functions.

## 15. EQUALITY IMPACT ASSESSMENT AND MENTAL CAPACITY

15.1 In accordance with the Policy on Policies, an Impact Assessment was completed (see Appendix C) highlighting no negative impact.

## 16. SUCCESS CRITERIA / MONITORING EFFECTIVENESS

16.1 Any issues arising as a result of the implementation of this policy will be considered and incorporated if necessary into the next version of this document.

16.2 Where issues of a disciplinary matter are concerned that relates to interests, gifts or hospitality, any necessary changes/issues arising from the matter will also be incorporated into a policy review as directed by the Human Resources Team.

## 17. REVIEW

17.1 This document may be reviewed at any time at the request of either staff side or management, but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.

## 18. REFERENCES AND LINKS TO OTHER DOCUMENTS

18.1 This policy should be read in conjunction with the following:

- 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)
- Improving and Managing Conduct Policy
- Standing Orders
- Standing Financial Instructions
- Scheme of Delegation
- Anti-Fraud, Corruption & Bribery Policy
- Freedom to Speak Up Policy



- Department of Health 'A Code of Conduct for Private Practice'
- Donation and Charitable Gift Policy
- Procurement Policy
- Supplier Representatives Policy

## APPENDIX A - Declaration of Interest Form

### Declaration of Interests, Gifts, Hospitality and Sponsorship Form

<b>Name:</b>			
<b>Job Title:</b>		<b>Department and Service Line:</b>	
<b>Contracted hours with Solent NHS Trust per week:</b>			

### Gifts, Hospitality and Sponsorship

<b>Please tick:</b> <input type="checkbox"/> Gift <input type="checkbox"/> Hospitality <input type="checkbox"/> Sponsorship Please provide full details, including approximate cost, description, circumstances surrounding the gift and date received/planned of the gifts, hospitality and/or Sponsorship. Include any action taken to mitigate against a conflict.			
Date		Provider	
Description			
Value (£)		Reason	
Was gift/ hospitality / sponsorship accepted or declined?		Measures taken to resolve conflicts if they exist	

### Registerable Interests (See guidance at end of form)

<b>Outside Employment Declaration</b>			
Appointment date		Outside employer	
Outside employment description			
Has approval been obtained		If so, by whom (state name)	
<b>Clinical Private Practice Declaration</b>			
Date private practice commenced		Private practice name	
Speciality / procedures undertaken		Sessions undertaken, i.e. days, times, regularity	
<b>Loyalty interests</b>			
Date Loyalty interest commenced		Body/organisation/individual name	
Description of loyalty interest			
<b>Shareholdings declaration</b>			
Date shares were obtained		Type/number	
Name of Company name shares held with			
<b>Patents / Intellectual property declaration</b>			
Date patent granted			
Description			
<b>Directorships, Appointments, Company ownerships and offices held</b>			
Appointment date		Organisation / Company name	
Title held			

<b>Membership</b>			
Date membership commenced		Professional body	
<b>Miscellaneous</b>			
Any other declaration			
<b>For all declarations made above</b>			
State what measures are being taken to manage /mitigate the conflict			
<b>Nil Declaration</b>	Please tick here for Nil Declaration <input type="checkbox"/>		

**Approval process -to be completed by the Line Manager)**

*I hereby confirm my acceptance of the above named individual receiving the gift/hospitality as described*

Name:		Job Title:	
Signature:		Date:	

Please see information contained on the following sheet on how to populate the above boxes.

The information submitted will be held by Solent NHS Trust 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 2018. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that Solent NHS Trust holds in accordance with the Managing Conflicts of Interest Policy. (Please note we are mandated (state legal basis – under what act / requirement) to include both your name and job title and a summary of your declaration – we will not publish any information that would be considered personal to you e.g. income). Information declared will be published on the Trust's public website in accordance with NHSE and the NHS Standard Contract requirements for those staff classified as 'Decision Makers' (for further detail please refer to the Managing Conflicts of Interest Policy).

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

I do / do not [delete as applicable] give my consent for this information to published on registers that Solent NHS Trust holds.

If consent is NOT given please give reasons:

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<b>Signed</b>		<b>Date</b>	
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If completing at the point of joining the Trust- return this form to HR.

If you are updating an original declaration or informing the Trust of a new 'interest' as described above, please complete and return to your Line Manager. Line Managers - to send a copy of the form to [declarations@solent.nhs.uk](mailto:declarations@solent.nhs.uk) and to the HR department

## GUIDANCE NOTES FOR COMPLETION OF DECLARATION OF INTERESTS FORM

- Description of Interest:** Provide a description of the interest that is being declared. This should contain enough information to be meaningful. That is, the information provided should enable a reasonable person with no prior knowledge should be able to read this and understand the nature of the interest.
- Types of interest:
- Financial interests** - This is where an individual may get direct financial benefits from the consequences of a decision they are involved in making
- Non-financial professional interests** - This is 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 status or promoting their professional career
- 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, because of decisions they are involved in making in their professional career
- Indirect interests** - This is where an individual has a close association with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest who would stand to benefit from a decision they are involved in making  
A benefit may arise from both a gain or avoidance of a loss.
- Relevant Dates:** Detail here when the interest arose and, if relevant, when it ceased
- Comments:** This field should detail any action taken to manage an actual or potential conflict of interest. It might also detail any approvals or permissions to adopt certain course of action

### Types of declaration:

#### Outside employment

*Please state the nature of any outside employment (i.e. who it is with, a description of the duties and time commitment). Include any relevant dates. Employment includes paid or unpaid work (either as Pay As You Earn (PAYE), voluntary, bank, consultancy and/or self-employment) and zero hours contracts.*

**Shareholdings** – 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 Solent NHS Trust. Describe the nature of shareholdings/other ownership interests.

**Patents** - declare patents and other intellectual property rights 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 Solent NHS Trust. Include a description of the Patent.

#### 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.*

**Clinical Private Practice** - *Provide a description of the nature of the private practice (e.g. what, where and when you practise, sessional activity, etc).*

#### Directorships

*Details of any paid or non-paid directorships, including non-executive directorships held in any organisation - private, public or third sector*

**Appointments and Offices Held** *(E.g President, Chairman, Chief Executive, Treasurer, Secretary, Council Member).*

*Please include any details of trusteeships, directorships, local authority membership, tribunals, any office held in a professional body, speciality society, e.g. Royal College or other similar body in the public, private or voluntary sector etc.*

**Membership** *(of professional bodies/ special interest groups -including local or national community organisations) It is not necessary to declare membership to a related health / non-clinical professional body which is a requirement of your role.*

#### Company Ownership

*Please state any full or part ownership, of private companies, businesses or consultancy, likely or possibly seeking to do business with the NHS.*

#### Miscellaneous

*Any other declaration.*

## Appendix B - Contact details

### Corporate Affairs Team

Name: Rachel Cheal  
Title: Associate Director of Corporate Affairs and Company Secretary  
Contact: [Rachel.cheal@solent.nhs.uk](mailto:Rachel.cheal@solent.nhs.uk)  
Tel: 023 810 32305

Name: Jayne Jenney  
Title: Corporate Support Manager and Assistant Company Secretary  
Contact: [Jayne.jenney@solent.nhs.uk](mailto:Jayne.jenney@solent.nhs.uk)  
Tel: 023 810 32515

Email declarations to: [declarations@solent.nhs.uk](mailto:declarations@solent.nhs.uk)

### Charitable Funds

Name: Vickie O'Leary  
Title: Deputy Director of Finance  
Contact: [Vickie.O'Leary@solent.nhs.uk](mailto:Vickie.O'Leary@solent.nhs.uk)  
Tel: 023 8103 0177

### Procurement

Name: Sue Wareham  
Title: Head of Procurement  
Contact: [sue.wareham1@solent.nhs.uk](mailto:sue.wareham1@solent.nhs.uk)  
Tel: 023 810 30348

### Research

Name: Sarah Williams  
Title: Associate Director of Research and Improvement  
Contact: [Sarah.williams@solent.nhs.uk](mailto:Sarah.williams@solent.nhs.uk)  
Tel: 07767426083

### Communications

Name: Andrea Hewitt  
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## Appendix: C Equality Impact Assessment

### Equality Analysis and Equality Impact Assessment

**Equality Analysis** is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not;
- **foster good relations** between people who share a protected characteristic and people who do not.

**Equality Impact Assessment (EIA)** is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- **considering the current situation**
- **deciding the aims and intended outcomes of a function or policy**
- **considering what evidence there is to support the decision and identifying any gaps**
- **ensuring it is an informed decision**

### Equality Impact Assessment (EIA)

#### Step 1: Scoping and Identifying the Aims

Service Line / Department	Corporate affairs	
Title of Change:	Update to policy (March 2020) – Managing Conflicts of Interest	
What are you completing this EIA for? (Please select):	Policy	<i>(If other please specify here)</i>
What are the main aims / objectives of the changes	Updates as provided in the summary table. This policy is an Internal policy for staff ensuring transparency in accordance with NHSE requirements	

#### Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: (e.g. adjustment to the policy)
Sex			x	
Gender reassignment			X	
Disability			X	
Age			X	
Sexual Orientation			X	
Pregnancy and maternity			X	
Marriage and civil partnership			X	
Religion or belief			X	
Race			X	

*If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.*

Assessment Questions	Yes / No	What evidence / mitigation plans are in place?
Is there a need for additional consultation e.g. with external organisations, service users and carers, or other voluntary sector groups? (If any, please note on the right)	No	
If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
Can we reduce the impact by taking different actions?	No	
<i>Mental Capacity Act implications</i>		
Will this document require a decision to be made by or about a service user? (Refer to MenCap Act 2005)	No	

### Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact / risk to the organisation if no action taken?	<div style="display: flex; justify-content: space-around;"> <div style="background-color: green; color: white; padding: 2px;">Low</div> <div style="background-color: yellow; color: black; padding: 2px;">Medium</div> <div style="background-color: red; color: white; padding: 2px;">High</div> </div>
What action needs to be taken to reduce or eliminate the negative impact?	n/a
Who will be responsible for monitoring and regular review of the document / policy?	Company Secretary

### Step 4: Authorisation and sign off

*I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.*

<b>Equality Assessor:</b>	<b>Date:</b>
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## Additional guidance

Protected characteristic		Who to Consider	Example issues to consider	Further guidance
1.	<b>Disability</b>	A person has a disability if they have a physical or mental impairment which has a substantial and long term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	<ul style="list-style-type: none"> <li>• Accessibility</li> <li>• Communication formats (visual &amp; auditory)</li> <li>• Reasonable adjustments.</li> <li>• Vulnerable to harassment and hate crime.</li> </ul>	Further guidance can be sought from: Solent Disability Resource Group
2.	<b>Sex</b>	A man or woman	<ul style="list-style-type: none"> <li>• Caring responsibilities</li> <li>• Domestic Violence</li> <li>• Equal pay</li> <li>• Under (over) representation</li> </ul>	Further guidance can be sought from: Solent HR Team
3	<b>Race</b>	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	<ul style="list-style-type: none"> <li>• Communication</li> <li>• Language</li> <li>• Cultural traditions</li> <li>• Customs</li> <li>• Harassment and hate crime</li> <li>• "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic</li> </ul>	Further guidance can be sought from: BAME Resource Group
4	<b>Age</b>	Refers to a person belonging to a particular age range of ages (eg, 18-30 year olds) Equality Act legislation defines age as 18 years and above	<ul style="list-style-type: none"> <li>• Assumptions based on the age range</li> <li>• Capabilities &amp; experience</li> <li>• Access to services technology skills/knowledge</li> </ul>	Further guidance can be sought from: Solent HR Team
5	<b>Gender Reassignment</b>	" The expression of gender characteristics that are not stereotypically associated with ones sex at birth" World Professional Association Transgender Health 2011	<ul style="list-style-type: none"> <li>• Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use.</li> </ul>	Further guidance can be sought from: Solent LGBT+ Resource Group
6	<b>Sexual Orientation</b>	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	<ul style="list-style-type: none"> <li>• Lifestyle</li> <li>• Family</li> <li>• Partners</li> <li>• Vulnerable to harassment and hate crime</li> </ul>	Further guidance can be sought from: Solent LGBT+ Resource Group
7	<b>Religion and/or belief</b>	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs, including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	<ul style="list-style-type: none"> <li>• Disrespect and lack of awareness</li> <li>• Religious significance dates/events</li> <li>• Space for worship or reflection</li> </ul>	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8	<b>Marriage</b>	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	<ul style="list-style-type: none"> <li>• Pensions</li> <li>• Childcare</li> <li>• Flexible working</li> <li>• Adoption leave</li> </ul>	Further guidance can be sought from: Solent HR Team
9	<b>Pregnancy and Maternity</b>	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	<ul style="list-style-type: none"> <li>• Employment rights during pregnancy and post pregnancy</li> <li>• Treating a woman unfavourably because she is breastfeeding</li> <li>• Childcare responsibilities</li> <li>• Flexibility</li> </ul>	Further guidance can be sought from: Solent HR team