

Standards of Business Conduct, Bribery, Gifts, Hospitality and Outside Employment Policy & Procedure

The 5 key messages the reader should note about this document are:

1. It covers all business activities of employees or others acting on behalf of the Trust.
2. It provides guidance and advice on the offer and/or receipt of gifts, hospitality, sponsorship, or the provision gifts, hospitality or sponsorship to others in connection with business activities.
3. It provides guidance on the application of the Bribery Act 2010.
4. It covers the receipt of gifts and hospitality, and declaration of interests for staff members and Trust Board members by making declarations utilising the attached forms.
5. It will enable individual staff of the Trust to work without fear of allegations of corruption. It will protect the Trust from criticism from external bodies.



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This document has been approved and ratified. Circumstances may arise where staff become aware that changes in national policy or statutory or other guidance (e.g. National Institute for Health and Care Excellence (NICE) guidance and Employment Law) may affect the contents of this document. It is the duty of the staff member concerned to ensure that the document author is made aware of such changes so that the matter can be dealt with through the document review process.

NOTE: All approved and ratified policies and procedures remain extant until notification of an amended policy or procedure via Trust-wide notification, e.g. through the weekly e-Update publication or global e-mail and posting on the Intranet (Connect).

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1 INTRODUCTION

As a public sector organisation, BDCFT has a duty to ensure that its resources are utilised effectively. It must be impartial and honest in the conduct of its business and employees must be beyond suspicion.

All decisions by Trust staff on the provision or acceptance of gifts and hospitality must be able to withstand both internal and external scrutiny. They must be defensible as being in the direct interest of the organisation, as being proportionate to that interest and within limits that are acceptable to BDCFT Board.

There have been numerous attempts to reform dated and much criticised UK legislation on bribery. The 1995 Nolan Committee's Report of Standards in Public Life was a response to concerns about unethical conduct by those in public office and, in 1998, precipitated proposals by the Law Commission to reform bribery laws.

The Bribery Act 2010 reforms and repeals existing legislation with a new anti-bribery code. It received Royal Assent in April 2010 and came into force on 1 July 2011. The Act makes it a criminal offence to give, promise or offer a bribe and to request, agree to receive or accept a bribe either at home or abroad. It will increase the maximum penalty for bribery to 10 years' imprisonment, with an unlimited fine.

The Bribery Act's definition of a 'relevant commercial organisation' includes a body that is incorporated under the law of any part of the UK which carries on a 'business' in any part of the UK or elsewhere. NHS Trusts will be subject to the provisions of the Act by virtue of section 5(5)(a) of the NHS Community Care Act 1990, which stipulates that 'every Trust shall be a body corporate'

For the purpose of the Bribery Act, a 'trade' or 'profession' is considered a business. This means that, whether individually or in partnership, GP's, pharmacists, dental practitioners, opticians, finance professionals, etc. will also be subject to and personally liable under the Bribery Act.

All organisations must demonstrate that they have 'adequate procedures' in place to (i) prevent bribery and (ii) ensure that all employees or, indeed, anyone doing business with BDCFT, are aware of these procedures and share the philosophy.

2 SCOPE

This policy covers all business activities of, and employees or others acting on behalf of BDCFT. The policy provides guidance and advice on the offer and or receipt of gifts, hospitality, sponsorship, or the provision gifts, hospitality or sponsorship to others in connection with business activities and outside employment. It also provides guidance on the application of the Bribery Act 2010.

This policy applies to the following:

- All staff employed by BDCT including Non-Executive Directors
- Agency staff

- Independent contractors
- Staff on honorary contracts whose payroll costs are partially or fully funded by a third party under a formal arrangement
- Trainee professionals and students hosted by BDCFT for the provision of work or vocational experience

It covers the receipt of gifts and hospitality, and declaration of interests for staff members and Trust Board members.

The policy of BDCFT is to ensure that the actions of its staff will not give rise to, or foster suspicion that outside individuals or organisations have gained favour or advantage, by any member of staff accepting gifts or hospitality from any such person or organisation. It will ensure that staff do not abuse their official position for personal gain and do not seek to advantage any private business or other interests in the course of their duties.

It will enable individual staff of BDCFT to work without fear of allegations of corruption. It will protect BDCFT from criticism from external bodies and ensure that there is no embarrassment to BDCFT from accusations and proven cases of wrongdoing. The policy will reassure the public that ethical standards are in place for all staff when dealing with the offers of gifts and hospitality.

3 DEFINITIONS

Term	Definition
Bribery	The “Compact Oxford English Dictionary” defines “to bribe” as to “dishonestly persuade (someone) to act in one’s favour by paying them or giving other inducement.”
Employee	The Employment Rights Act 1996 section 230 (1) defines an employee as an ‘individual who has entered into or works under a contract of employment’. This is usually permanent, fixed term or temporary.
EMT	Executive Management Team. Team made up of the Directors within Bradford District Care Trust.
Fraud	The Fraud Act 2006 created specific offences of fraud rather than using the Theft Act 1968. Each offence has its own complex legal definition, but fraud generally involves an individual or individuals unlawfully obtaining NHS money or property, or attempting to do so. Such acts might or might not involve attempts to falsify records to hide the fraud. Fraud must be intentional and is, therefore quite distinct from negligence or accidental error.
Gifts	Gifts includes, for example, offers of cash or cash equivalents (e.g. gift vouchers, lottery tickets, or trade cards) and non-cash gifts e.g. pens, diaries, wine and spirits, hampers, electrical goods by suppliers, contractors, service users/patients or their relatives.
Hospitality	Hospitality includes, for example, offers of food, refreshments, transport, accommodation and the use of facilities, equipment or services.
Sponsorship	Events for which sponsorship is received from any non-NHS source or events organised by other parties which are sponsored

	by BDCFT
Staff Side	Representatives from recognised trade unions.
Trust Board	The team of Directors and Non-Executive Directors responsible for Trust services.
Worker	Where an individual undertakes to perform any work or services but whose status is not that of an employee. This includes agency or NHSP workers.

4 DUTIES

The responsibilities and duties included in the policy are set out below:

4.1 *Trust Board*

BDCFT Board is committed to ensure that this policy and procedure is fully implemented in a fair and consistent manner and approvals are made, declined and recorded as appropriate.

4.2 *Managers/Directors*

Managers are responsible for:

- Ensuring dissemination and compliance of this policy within their areas of responsibility.
- Ensuring that staff, contractors, customers, service users/patients are advised of this policy and procedure and that appropriate processes and support mechanisms are in place.
- Ensuring any breaches of the policy are dealt with appropriately.

4.3 *Employees*

Employees will:

- Ensure they adhere to the policy and associated guidance and encourage others to do so.
- Report any breaches in the policy to their line manager or through the correct procedures.

4.4 *Human Resources*

Human Resources will:

- Provide advice and support on the implementation of this policy and procedure.
- HR is responsible for the development and review of this document.

4.5 Staff Side Representatives

Staff side representatives will:

- Support managers and staff to adhere to the policy.
- Provide support to staff appropriately when requested to do so.
- Work in partnership with BDCFT and its managers/staff to resolve any issues at the earliest opportunity.

4.6 HR Policy Group

HR Policy Group, comprising representatives from managers and the Staff Partnership Forum (SPF) are consulted on policy and the procedure, and approve the procedure.

5 PROCEDURE

The intention of this policy is to outline the behaviours required to maintain the highest standards of probity and provide assurance that any relationships entered into lead to a clear benefit for the NHS, and represent value for money. This policy is also intended to contribute to maintaining the highest standards of business conduct and ensure compliance with the seven principles of public life drawn up by the Nolan Committee (see appendix 1).

All employees and others acting on behalf of Bradford District Care Trust (BDCFT) must apply the following principles:

- Not accepting gifts, hospitality or benefits of any kind from a third party which might be perceived as compromising their personal judgment or integrity;
- Not using their official position to further their private interests or those of others;
- Declaring any private interests relating to their public bodies;
- Base all procurement decisions and negotiations of contracts solely on achieving best value for money for the tax payer;
- Refer to their line manager when faced with a situation for which there is no adequate guidance;
- If in any doubt, seek advice from the appropriate deputy director or director.

5.1 Legal and statutory responsibilities

Under the Bribery Act (2010) it is an offence for an officer in his or her official capacity to;

- Corruptly accept any gift or consideration as an inducement or reward for doing, or refraining from doing, anything in that capacity;
- Show favour or disfavour to any person; or
- Receive money, gifts or consideration from a person or organisation holding or seeking to obtain a Government contract.

All of these are deemed by the courts to have been received corruptly unless it can be proven otherwise.

The Act also provides that a person is guilty of an offence where:

“They offer, promise or give a financial advantage to another person with the intention of causing that other person to improperly perform, or rewarding that other person for improperly performing, a public or commercial function in any jurisdiction; and there is an expectation that the relevant function is carried out in good faith or where the person performing it is in a position of trust.”

The Act also creates a specific offence of directly or indirectly offering, promising or giving a bribe to a foreign public official. To commit this offence a person must intend the bribe to influence the actions of the foreign public official.

5.2 Counter Fraud Measures

All BDCFT staff are expected not to use their position to gain advantage. BDCFT is keen to prevent fraud and encourages staff with concerns or reasonably held suspicions about potentially fraudulent activity or practice, to report these. In accordance with BDCFT’s Fraud, Bribery and Corruption Policy staff should inform the nominated Local Counter Fraud Specialist (LCFS) or the Director of Finance immediately, unless the Director of Finance or LCFS is implicated. If that is the case, they should report it to the Chair or Chief Executive, who will decide on the action to be taken.

An employee can contact any Executive or Non-Executive Director of BDCFT to discuss their concerns if they feel unable, for any reason, to report the matter to the LCFS or Director of Finance.

Employees can also call the NHS Fraud and Corruption Reporting Line on free phone 0800 028 40 60. This provides an easily accessible and confidential route for the reporting of genuine suspicions of fraud within or affecting the NHS. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so.

Anonymous letters, telephone calls, etc. are occasionally received from individuals who wish to raise matters of concern, but not through official channels. While the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern and will always be taken seriously. The LCFS will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised. An employee should not ignore their suspicions, investigate themselves or tell colleagues or others about their suspicions.

5.3 Hospitality – offered or received offered by BDCFT and its employees or others acting on its behalf

The organisation or individual receiving the hospitality should never put themselves in a position where there could be any suspicion that their business decisions could have been influenced by accepting hospitality from others.

There is a need to distinguish between simple, low cost hospitality of a conventional type, for example, a working lunch or evening meal compared with more expensive and elaborate hospitality. There is clearly a need for a sense of balance. Modest hospitality is an accepted courtesy of a business relationship. As a general principle, the frequency and/or scale of any hospitality accepted should not be significantly greater than what BDCFT would normally provide for others in similar circumstances. There is concern that acceptance of frequent, regular or annual invitations to events or functions, particularly from the same source and where a considerable degree of hospitality is involved, may severely test the principles stated earlier and should be refused. However, there may be instances where staff receive invitations to events run by voluntary organisations such as annual conferences or dinners. Attendance at such events is considered an integral element in building and maintaining relationships with these sectors and any hospitality received is likely to be reasonable and proportionate, and therefore acceptable.

It is not necessary for simple low cost hospitality received e.g. tea, coffee, and buffet lunches to be recorded, nor is it necessary to record items of an advertising nature received at training courses, conferences, seminars or part of a “promotional” exercise, e.g. pens, books, folders, etc. The offer and/or acceptance of hospitality which goes beyond simple low cost or conventional type refreshments provided at meetings should be recorded in the gifts, hospitality and sponsorship register (Appendix 2).

The main point is that in accepting hospitality staff need to be aware of, and guard against, the dangers of misrepresentation or perception of favouritism.

It is easier to justify meetings which relate directly to work, but where these happen outside working hours and on purely social occasions then they need to be justified as not being a personal gift or benefit. Where a contract is being negotiated, hospitality of any kind, including attendance of staff at seasonal events hosted by suppliers or contractors, should not be accepted.

5.4 Hospitality offered by BDCFT to others

This would be in circumstances where hospitality is provided to other organisations. The use of NHS funds for hospitality should be carefully considered. All expenditure on these items should be capable of justification to both internal and external auditors as reasonable in the light of accepted practice in the public sector. Any hospitality provided would need to be recorded in the gifts, hospitality and sponsorship registers.

5.5 Gifts

5.5.1 Cash or cash equivalents

Offers of cash or cash equivalents made by suppliers, contractors, service users/patients or their relatives to employees or individuals acting on behalf BDCFT should be declined. Instead, the supplier, contractor, patient/service user or relative should be made aware of the charitable fund to receive cash donations for general or specific purposes. Details of the charitable fund are available from the Director of Finance.

5.5.2 Non cash gifts

Gifts of a small or inexpensive nature of below approximately £25, such as calendars, pens or diaries or other simple or inexpensive items such as flowers and chocolates can be accepted.

It is not necessary to record items of an advertising nature received at training courses, conferences, seminars or part of a “promotional” exercise, e.g. pens, books, folders, etc.

Gifts valued at more than £25 would be considered expensive and/or substantial items which cannot on any account be accepted. These should be firmly but politely declined. If there is any doubt as to whether the acceptance of such an item is appropriate, the matter should be referred to the relevant deputy director.

All offers of any gifts, whether accepted or declined, should be recorded using Appendix 2 and returned to the HR Service Desk at HR Solutions@bdct.nhs.uk.

5.5.3 Exceptional cases

It is recognised that there are exceptional cases where refusal of a gift will clearly offend a donor, cause embarrassment or appear discourteous. In these cases the donor should be advised that the permission of management will have to be sought as to whether or not the gift can be accepted. The employee should complete Appendix 4 prior to receipt and submit to the relevant deputy director who will decide whether to:

- Allow the recipient to accept the gift; or
- Return the gift to the donor with a suitably worded letter explaining why the gift cannot be accepted; or
- Use or dispose of it, if possible, in BDCFT

All offers of any gifts, whether accepted or declined, should be recorded using Appendix 2 and returned to the HR Service Desk at HR Solutions@bdct.nhs.uk.

5.6 Sponsorship

Where BDCFT organises events, seminars, conferences etc. for which sponsorship is received from any non-NHS source, the organiser of the event must record details of the sponsorship received, including the date and title of the event, the name of the sponsoring organisation and the nature and extent of sponsorship received in the gifts, hospitality and sponsorship register. Where there is any possibility of an impression being created of improper influence on policies or decision making, a director and/or the chief executive must be consulted.

5.7 Pharmaceutical partners

There is clear approach in relation to potential pharmaceutical industry partners. The aim is to enable the creation of ongoing relationships with the pharmaceutical industry that:

- Benefit the local population by improving and maintaining the quality of healthcare;

- Develop education, training and service opportunities for local healthcare professionals;
- Are transparent and open to public scrutiny and challenge;
- Meet the highest standards of financial, professional and ethical probity. Any such sponsored events must be agreed by the relevant director and recorded in the gifts, hospitality and sponsorship register.

5.8 Lectures, conferences and broadcasts

Where gifts by the way of fees, *ex gratia* payments or book tokens or gift vouchers for lectures, broadcasts or similar occurrences are offered, their acceptance should be based on how much of the preparatory work for the event was done in the employee's own time, including annual leave, how much in official working time and the extent to which the resources, other than for example, use of an officially issued laptop at home, were used in the preparation. The guiding principle would be to seek to recover the costs of publicly funded resources used for any non-NHS related events. The following illustrations are by way of example:

- If the preparation was carried out entirely in the individual's own time (for example outside fixed sessional commitments for medical or other clinical staff) and the event took place in the individual's own time at no expense to BDCFT, it would be acceptable for the individual to retain the whole fee, token or other gift and observe appropriate inland revenue guidelines;
- If the preparation was performed wholly in work time, with the use of work related resources, the director of finance should be consulted to determine the need to charge the organisation or body a fee based on the salary costs of the individual and or the use of resources. If the event is carried out in the individual's own time then in addition to any charge for the use of resources, the individual may retain any fee, token or other gift for presenting at the event. It is the employee's responsibility to declare any taxable benefits received to the Inland Revenue.
- If the preparation was carried out and the presentation, delivered in the individual's own time but work related facilities or equipment were used, then the director of finance services should be consulted to determine the need to charge the organisation or body a fee based on the use of resources. In addition to any charge for use of any work related resources, the individual may retain any fee, token or other gift for presenting at the event. If further guidance is needed in this area, the Director of Finance should be contacted.

5.9 Trade or discount cards

Trade or discount cards (other than those negotiated by BDCFT on behalf of its staff) by which an individual might benefit from the purchase of goods or services at a reduced price are classified as gifts and should be politely declined and, if already accepted, returned to the sender.

5.10 Bribery

It is an offence for a person to request, agree to receive or accept (either directly or through any other party) a financial or other advantage in connection with the improper performance of a relevant function, irrespective of whether the recipient of the bribe is the same as the person who is to perform, or has performed, the relevant function.

A company or partnership, incorporated or operating in the UK, may be guilty of bribery if a person associated with that organisation takes the offending action. A person performing any services for an organisation (for example, as employee or agent) may be associated with that organisation.

Any member of staff suspected of any activity outlined previously investigated and where appropriate, may be prosecuted in accordance with the Bribery Act 2010.

On summary conviction, the penalties for these offences include a fine of up to £5,000 and (in the case of individuals) imprisonment for up to 12 months. On conviction on indictment, these penalties increase to an unlimited fine and (in the case of individuals) imprisonment for up to 10 years.

All members of staff have a responsibility to report any instances of bribery, or suspected bribery, as outlined previously, to their line manager.

5.11 Gifts, hospitality and sponsorship register

A gift, hospitality and sponsorship register has been established and is held by Human Resources. An example register is shown in Appendix 2.

The register is used to record all offers of and acceptance of gifts, hospitality or sponsorship in accordance with this policy, whether accepted or declined.

It is not necessary for small or inexpensive gifts or simple low cost hospitality received e.g. tea, coffee, and buffet lunches to be recorded, nor is it necessary to record items of an advertising nature received at training courses, conferences, seminars or part of a “promotional” exercise, e.g. pens, books, folders, etc.

All other offers or receipts of gifts, hospitality or sponsorship, referred to previously, whether accepted or declined need to be recorded using Appendix 2 and returned to the HR Service Desk at HRsolutions@bdct.nhs.uk.

The employee should complete Appendix 4 preferably prior to the event for gifts, hospitality or sponsorship valued in excess of £25 and submit to the relevant deputy director who will decide whether to:

- Allow the recipient to accept the gift; or
- Return the gift to the donor with a suitably worded letter explaining why the gift cannot be accepted; or
- Use or dispose of it, if possible, in BDCFT

Where in doubt about whether an offer or receipt of a gift, hospitality or sponsorship is acceptable, advice should be sought from the relevant deputy director or Trust Secretary.

5.12 *Declarations of Interest*

A Declaration of Interest and Outside Employment register has been established and is held by Human Resources. An example register is shown in Appendix 3.

All Trust staff should declare any interests that arise in the course of conducting Trust business which are relevant and material to BDCFT Board. BDCFT is required to maintain a register of interests to record formally declarations of interests of members of the Board and Executive members.

All staff must declare any interest, either on appointment or when the interest is acquired, which may influence, or may be perceived to influence, their judgment. Such interests include personal direct and indirect financial interests and those of close family members e.g. spouse, sibling; if in doubt staff are encouraged to declare and / or seek advice from HR.

The declaration should be made by completing the attached form (Appendix 5) for Non-Executive and Executive Directors and sending it to BDCFT Secretary. The information supplied will be held on a register of interests, which will, if requested, be made available for public scrutiny. Non-Executive and Executive Directors who do not have any interests to declare are required to send a nil return. All submissions must be made directly by the Non-Executive and Executive Directors and not via a Personal Assistant.

All Trust staff other than Non-Executive and Executive Directors (who shall submit returns as set out above, will also be required to complete a declaration of interest (Appendix 6) to be sent to Human Resources. Declaration of Interests should be reviewed and submitted annually to HR. All staff on Agenda for Change pay bands 8A and above and Medical and Dental staff are required to send a nil return. Any outstanding returns will be escalated to Trust deputy directors at the end of the revalidation period which will be clearly communicated.

HR should be informed of the end date of any declared interests as soon as possible.

All forms should be shared with the employee's line manager prior to submission to HR in order that any declared interests can be reviewed to ensure outside interests can be discussed and managed by BDCFT as appropriate. Managers who require advice / guidance on outside interests should speak with Human Resources. All completed forms submitted to HR will be reviewed by the HR team; any forms relating to Medical personnel will be reviewed by the Medical Director.

5.13 *Outside Employment and Private Practice*

A Declaration of Interest and Outside Employment register has been established and is held by Human Resources. An example register is shown in Appendix 3.

Employees of BDCFT are required to inform BDCFT if they are engaged in or wish to engage in outside employment in addition to their work with BDCFT (Appendix 6). The

purpose of this is to ensure that BDCFT is aware of any potential conflict of interest with their Trust employment. Examples of work which might conflict with the business of BDCFT include:

- Employment with another NHS body.
- Employment with another organisation which might be in a position to supply goods / services to BDCFT.
- Self-employment, including private practice, in a capacity which might conflict with the work of BDCFT or which might be in a position to supply goods/services to BDCFT.

HR will send an annual reminder to all staff about this requirement. Permission to engage in outside employment/private practice will be required and BDCFT reserves the right to refuse permission where it believes conflict will arise. This should be requested and reviewed by the line manager using Appendix 6. Individuals have the option to work more than 48 hours per week and should complete Section D of Appendix F if they so wish. Consideration should be given to the number of hours worked so that individuals are not potentially endangering themselves, service users or colleagues. Employees and managers should refer to the Working Time Directive Policy and Procedure for more guidance.

Directors and Consultants in Public Health Medicine employed under the Terms and Conditions of Community Medical and Dental Officers and members are permitted to carry out private practice in NHS hospitals subject to the conditions outlined in the handbook 'A Guide to the management of Private Practice in the NHS' and PM(79) 11.

All forms should be shared with the employee's line manager prior to submission to HR in order that any declarations can be reviewed to ensure outside employments can be discussed and managed by BDCFT as appropriate. Managers who require advice / guidance on outside employment should speak with Human Resources. All completed forms submitted to HR will be reviewed by the HR team; any forms relating to Medical personnel will be reviewed by the Medical Director.

All declarations of outside interest are to be reviewed on an annual basis and end dates supplied as soon as practicable.

5.14 Raising Concerns

Trust staff who wish to report suspected or known breaches of this policy should inform the relevant director; this can also be done via your line manager, Human Resources or your Staff Side representative. All such notifications will be held in the strictest confidence and the person notifying the relevant director can expect a full explanation of any decisions taken as a result of any investigation. For further information and guidance staff should refer to the Hearing Concerns of Workers Policy.

6 DOCUMENT DEVELOPMENT

The Senior HR Team is responsible for the development and subsequent review of this policy.

7 EQUALITY IMPACT ASSESSMENT

BDCFT has no intent to discriminate and endeavours to develop and implement policies that meet the diverse needs of our workforce and the people we serve, ensuring that none are placed at a disadvantage over others. Our philosophy and commitment to care goes above and beyond our legal duty to enable us to provide high-quality services. Our Equality Analysis and equality monitoring is a core service improvement tool which enables the organisation to address the needs of disadvantaged groups. The aim of Equality Analysis is to remove or minimise disadvantages suffered by people because of their protected characteristics.

An impact assessment has been undertaken to consider the need and assess the impact of this policy and is evidenced at Appendix B of this template.

8 TRAINING NEEDS ANALYSIS

BDCFT is committed to high quality targeted training and effective communication to support this policy. BDCFT recognises that training capacity can fluctuate and will depend on resources available. As such based on an assessment of capacity and risk, the training needs analysis will identify the high priority groups for training. The objective of the training to implement this policy is to meet training to this group over the time frequency stated. The focus of Trust monitoring will be on this group over the agreed period or lifetime of the policy.

Issues relating to capacity to meet training needs for the high priority group will be escalated by the policy lead to the relevant Director for action to mitigate the risk and inclusion on the appropriate risk register.

For a detailed account of training numbers, costs and action plan please refer to BDCFT's Training and Study Leave Policy.

9 CONSULTATION, APPROVAL AND RATIFICATION

9.1 Consultation

The following groups have and will continue to be consulted about the development and review of this policy:

Stakeholder	Level of involvement
West Yorkshire Audit Consortium	Audit recommendations & action plan
HR Policy Group	Comment and agree
Staff Side	Comment and agree
Non-Clinical Policy Group	Approval and ratification

9.2 Approval

This document was provided to the HR Policy Group for approval and was approved on the date set out on its front sheet.

9.3 Ratification

This document was provided to the Non-Clinical Policy Group for ratification and was ratified on the date set out on its front sheet.

10 REVIEW

The HR Policy Group will undertake a review of this document 3 years following its ratification unless new national policy or statutory guidance is issued in the interim that significantly affects it. It is the duty of Trust staff to ensure that the document author is made cognisant of any such changes they become aware of so that the matter can be dealt with through the policy review process.

11 DISSEMINATION AND IMPLEMENTATION

The Standards of Business Conduct, Bribery, Gifts, Hospitality and Outside Employment Policy & Procedure will be disseminated via the policies pages on Bradford District Care Trust's 'Connect'.

Staff new to BDCFT will be directed to this policy and procedure on appointment and an initial declaration required as part of the recruitment process.

Further responsibilities for dissemination are listed on page 2 of this document and for implementation in the duties section.

12 MONITORING COMPLIANCE AND EFFECTIVENESS

Criteria	Evidence identified to indicate compliance with policy	Method of monitoring, i.e. how/where will this be gathered?	Frequency of monitoring	Lead responsible for monitoring
Duties	EMT: Annual Report & Accounts	Annual report	Annually	Head of HR performance and planning

13 REFERENCES

- Declaration of Interests, Gifts & Hospitality Audit; December 2014; West Yorkshire Audit Consortium.
- The 1995 Nolan Committee's Report of Standards in Public Life
- Bribery Act 2010

14 ASSOCIATED DOCUMENTATION

In respect of this policy, specific related Procedural Documents / Trust documents are:

- BDCFT's Corporate Governance Manual
- Code of Conduct for Managers
- Hearing Concerns of Workers Policy and Procedure
- Disciplinary Policy and Procedure
- Corporate Governance Codes of Conduct and Accountability
- Consultant Job Planning Policy & Procedure
- Working Time Directive Policy & Procedure
- Recruitment & Selection Policy & Procedure
- Fraud, Bribery and Corruption Policy

15 APPENDIX A: COMPLIANCE CHECKLIST

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

	Title of document being reviewed:	Yes/No/Unsure	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Is the method described in brief?	Yes	
	Are people involved in the development identified?	Yes	
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have the requirements of the following been taken into account where applicable: Mental Health Act Mental Capacity Act Care Programme Approach (CPA) Guidance	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are the references cited in full?	Yes	
	Are supporting documents referenced?	Yes	
6.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes	
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how this will be done?	Yes	

	Title of document being reviewed:	Yes/No/Unsure	Comments
	Does the plan include the necessary training/support to ensure compliance?	Yes	
	Is the Training Needs Analysis completed	Yes	
8.	Document Control		
	Does the document identify where it will be held?	Yes	
	Have archiving arrangements for superseded documents been addressed?	Yes	
9.	Process to Monitor Compliance and Effectiveness		
	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes	
	Is there a plan to review or audit compliance with the document?	Yes	
	Does the above plan include the minimum NHSLA monitoring requirements (if applicable)	N/A	
10.	Review Date		
	Is the review date identified?	Yes	
	Is the frequency of review identified? If so is it acceptable?	Yes	
11.	Overall Responsibility for the Document		
	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes	

Individual Approval

If you are happy to approve this document, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

Name		Date	
Signature			

Committee Approval

If the committee is happy to approve this document, please sign and date it and forward copies to the person with responsibility for disseminating and implementing the document and the person who is responsible for maintaining the organisation's database of approved documents.

Name		Date	
Signature			

16 APPENDIX B: EQUALITY IMPACT ASSESSMENT

Area	Response
Policy	Standards of Business Conduct, Bribery, Gifts, Hospitality and Outside Employment
Manager	Claire White
Directorate	Human Resources
Date	21 May 2015
Review date	21 May 2018
Purpose of Policy	This policy covers all business activities of, and employees or others acting on behalf of BDCFT. The policy provides guidance and advice on the offer and or receipt of gifts, hospitality, sponsorship, or the provision gifts, hospitality or sponsorship to others in connection with business activities and outside employment. It also provides guidance on the application of the Bribery Act 2010.
Associated frameworks e.g. national targets NSF's	None
Who does it affect	All staff
Consultation process carried out	With HR policy group including managers, staff side representatives and service user and carer representatives
QA Approved by	Wendy Harrison

Equality protected characteristic	Impact Positive	Impact Negative	Rationale for response
Age	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.
Disability	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.
Gender Reassignment	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.
Race	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.
Religion or Belief	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and

Equality protected characteristic	Impact Positive	Impact Negative	Rationale for response
			operated in a manner that is laid within this document. We have had no feedback of any concern.
Pregnancy & Maternity	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.
Sex	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.
Sexual Orientation	Yes		There is currently no information that indicates that this document will disadvantage or have a negative impact on this group if implemented and operated in a manner that is laid within this document. We have had no feedback of any concern.

Equality Analysis SIGN – OFF		
Have any adverse impacts been identified on any equality groups which are both highly significant and illegal?		No
Are you satisfied that the conclusions of the EqIA Screening are accurate?		Yes
BDCFT will publish a summary of the impact analysis carried out to meet the duty and make this available to the public on BDCFT Internet site.		
Completed by Manager	Claire White	
Q A approved	Wendy Harrison	
Director approved	Sandra Knight	

17 APPENDIX C: TRAINING NEEDS ANALYSIS

17.1 Training Profile & Training Plan

This document is not intended to be part of the final approved version of the policy or procedure, but in order for the document to be ratified a copy must be included for approval purposes. After approval it will be removed from the published version and forwarded to the Training and Development Manager for inclusion in BDCFT Training Needs Analysis Policy.

	Total No of Trust Staff	Policy Awareness	
		Essential	Achievable
Refresher Period		3 yr co-terminus with policy review	
Staff Group			
Medical & Dental - Consultants	47	47	47
Medical & Dental - Other	64	64	64
Nursing, Midwifery & Health Visiting (NM&HV)	1046	1046	1046
NM&HV support staff	398	398	398
Allied Health Professionals (AHP)	378	378	378
AHP support staff	18	18	18
Senior managers	63	63	63
Managers	62	62	62
Administrative Staff	508	508	508
Estates	37	37	37
Facilities	257	257	257
Total	2878	2878	2878

- *Essential: the minimum level of training that should be in place to meet standards / assessment and legislative requirements, where it is a requirement for the role irrespective of current resources.*
- *Achievable: the level of training that can be delivered within the resources available.*

It is recognised that in some cases you may identify a 3rd category – Ideal: the number of staff it would be good to have training (which exceeds minimum / baseline requirements and might include “nice to do” aspirations). This category is not something to be reflected in your Training Profile but may form part of your decision making process and debate with your director / head of service.

Notes:

Medical & Dental - Consultants	
Medical & Dental – Other	
Nursing, Midwifery & Health Visiting (NM&HV)	Qualified HCHS nursing, midwifery and health visiting staff
NM&HV support staff	HCA's and support workers including Nursing assistants / auxiliaries who support Nursing/Health Visiting etc. staff
Allied Health Professionals (AHP)	e.g. Occupational therapists, Physiotherapists, Clinical Psychologists, etc.
AHP support staff	Scientific, Therapeutic and Technical support staff including student trainees and helper assistants, assistant practitioners, HCA's and support workers who support AHP's
Senior managers	Band 8a and above
Managers	
Administrative Staff	
Estates	NHS works & estates staff
Facilities	NHS ancillary staff. Hotel staff etc.
Pre-registration Learner	e.g. Pre-registration Diploma Nurse Training, Post 1st level Registration Learner - Health Visiting, etc.

17.2 Training Action Plan

Responsible Director:

Plan Updated:

Responsible Officer to Monitor Training:

Name of Training	Delivery Frequency (per month/year)	Length of sessions	Numbers to be trained per session	Job titles of Trainer's identified to deliver	Current training & delivery method	Refresher frequency (e.g. 1, 2 or 3 years)	Agreed Timescale	Training attendance records held by:	Action reqd	Residual Risks and Action (Identify any Gaps in provision / resource implications etc)	Date of Review/ Completion	Risk to Trust
Policy Awareness	Ongoing updates through intranet	Nil	NA	NA	Ongoing updates through intranet	3 years	NA	NA	Upload policy to intranet / publicise policy			Nil

Costs

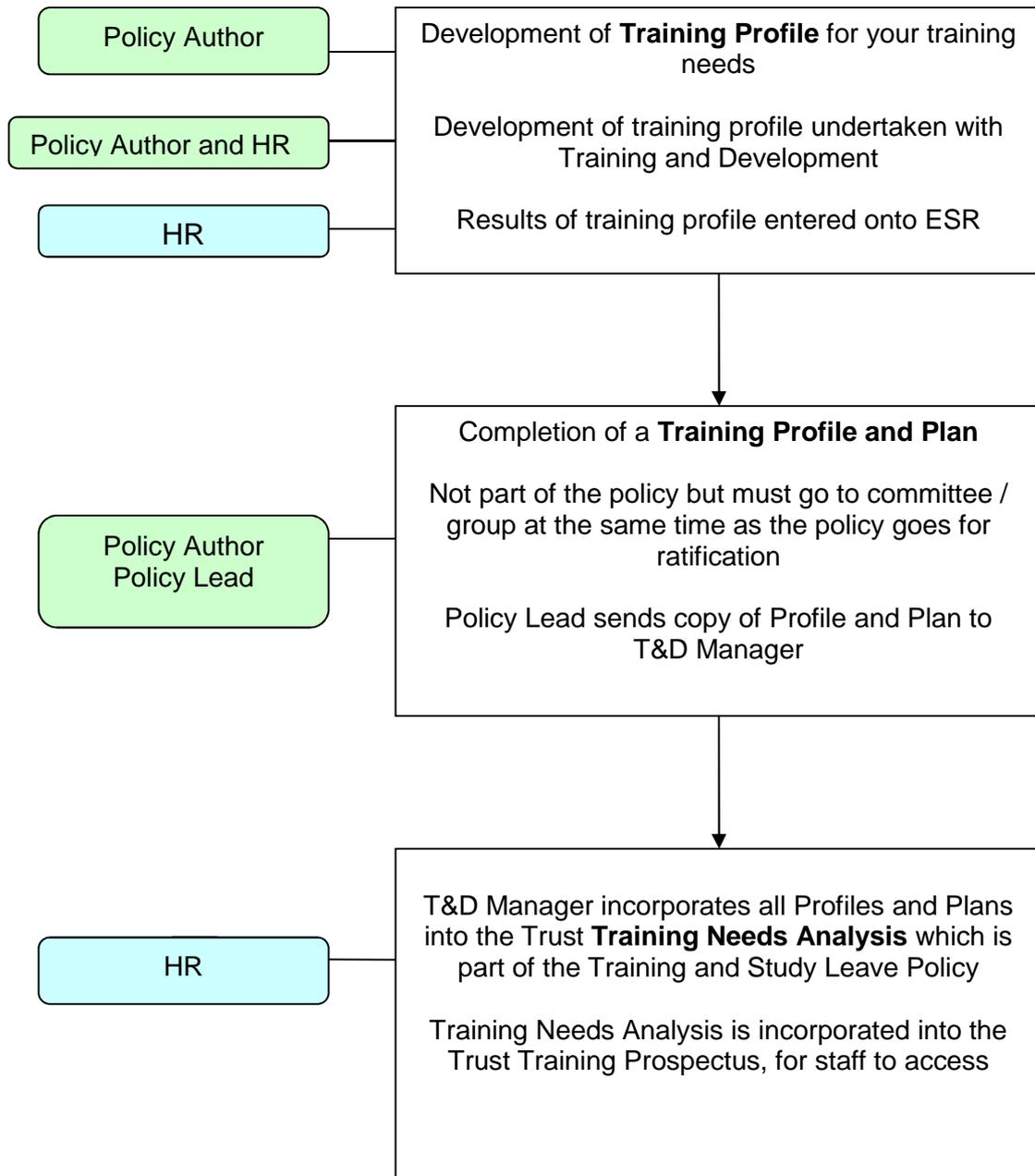
Essential: the cost of delivering training to the number of staff who actually need be trained as part of their role irrespective of currently available resources.

Cost Of Training days x 7.5 hours @ £18 ph (cost of staff time diverted from paid duties to be trained)	Sub Total	NA
Cost of Backfill days x 7.5 hours @£10 ph	Sub Total	NA
Cost of Admin	Sub total	NA
Additional Costs: materials etc	Sub Total	NA
	Total	

Achievable: the cost of delivering training to the number of staff who can be trained in line with the currently available resources

Cost Of Training days x 7.5 hours @ £18 ph (cost of staff time diverted from paid duties to be trained)	Sub Total	NA
Cost of Backfill days x 7.5 hours @£10 ph	Sub Total	NA
Cost of Admin	Sub total	NA
Additional Costs: materials etc	Sub Total	NA
	Total	

17.3 Updated 3 Step Process



18 APPENDIX 1: SEVEN NOLAN PRINCIPLES OF PUBLIC LIFE

The seven Nolan principles of public life [taken from First Report of the Committee on Standards in Public Life (1995)]

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

19 APPENDIX 2: GIFTS & SPONSORSHIP REGISTER

Date	Name	Job Title	Description and details of any offer, including an estimated cost	Name and address of organisation, person making the offer	Reason for accepting or declining the offer	Name, Job Title & Date of Authorising Manager (embed any written / email approval)

The completed form and any related correspondence must be forwarded the HR Service Desk at HRsolutions@bdct.nhs.uk

20 APPENDIX 3: DECLARATION OF INTEREST & OUTSIDE EMPLOYMENT REGISTER

Name	Job Title	Dept	Employee Number	Name of Organisation	Position held or nature of interest	Work Type (Paid / Voluntary)	Any other relevant information	Who holds the Interest (Employee / Family member)	Date Interest / Employment Acquired	Date Interest / Employment Ceased

APPENDIX 4: REQUEST OF AN OFFER OR ACCEPTANCE OF GIFTS, HOSPITALITY OR SPONSORSHIP

Name _____

Job Title _____

Date _____

Person or organisation making the gift or providing the hospitality or sponsorship, and costs involved.

Circumstances of the offer.

Reason for acceptance of the offer.

Any other information which the receiver of the gift, hospitality or sponsorship feels it appropriate to provide.

Agreed by Deputy Director

.....

Date

21 APPENDIX 5: DECLARATION OF INTERESTS BY THE CHAIR, NON EXECUTIVE DIRECTORS AND EXECUTIVE DIRECTORS

The Codes of Conduct and Accountability require the above to declare interests which are relevant and material to BDCFT. Please complete the declaration below:

Directorships, including Non-Executive Directorships held in private companies or PLCs (with the exception of those dormant companies):
Ownership, or part ownership, of private companies, business or consultancies likely or possibly seeking to do business with the NHS:
Majority or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS:
A position of authority in a charity or voluntary body in the field of health and social care:
Any connection with a voluntary body or other body contracting for NHS service:

NOTE REGARDING THE USE OF THIS INFORMATION

The information you have provided on this form will be recorded in BDCFT's Annual Report and drawn to the attention of BDCFTs internal and external auditors. The declaration will also be included in a Register of Interests which will be available to the public on request.

Any changes to the information you have provided should be declared within four weeks of the change occurring. Such a change will be recorded in BDCFT's Board minutes and in the Register of Interests.

If a conflict of interest is established during the course of a Board meeting, the Board member concerned is required to withdraw from the meeting and play no part in the relevant discussion or decision.

I declare that the information I have given on this form is correct and complete. I understand that if I have knowingly provided false information I may be subject to disciplinary and/or criminal proceedings.

Name:

Signature:

Date:

Please return this form to:

Trust Secretary

BDCT NHS

New Mill

Victoria Road

Saltaire

ShIPLEY

BD18 3LD

22 APPENDIX 6: DECLARATION OF INTERESTS & SECOND EMPLOYMENT

SECTION A: STAFF DETAILS (if nothing to declare move to Section F)					
Name					
Role					
Department / Work Location					
Line Manager					
Contact Details					
SECTION B: DECLARATION OF INTEREST					
Nature of Interest	Role Performed	Date Interest Started	Any potential conflict of interests between this Interest and Trust Employment		
SECTION C: OTHER EMPLOYMENT (Please complete in full)					
Information given is treated in the strictest confidence but is required to ensure compliance with the Working Time Regulations.					
Employer	Role Performed	Average Weekly Hours Worked	Opt Out Signed for this Employer Yes / No	Any potential conflict of interests between this Employment and Trust Employment	

SECTION D: WORKING TIME OPT OUT

Individuals have the option to choose to work more than 48 hours per week if they so wish. Consideration should be given to the number of hours worked so that individuals are not potentially endangering themselves, service users or colleagues. Individuals have a responsibility to:

- inform their manager if they exceed 48 hours per week
- complete an Opt Out Form
- ensure compliance with Health & Safety
- not work such excessive hours where their ability to perform their role is adversely affected

I (name)..... wish to confirm my choice to work more than an average of 48 hours per week.

The effective date of this Opt Out Agreement is:

The review date of this agreement is:

Should I change my mind I shall give 1 months' notice in writing.

SECTION E: DECLARATION / APPROVAL

Manager comments:

I declare that the information I have given on this form is correct and complete. I understand that if I have knowingly provided false information I may be subject to disciplinary and/or criminal proceedings.

Signed:	Print:	Date:
(Employee)		

Signed:	Print:	Date:
(Manager)		

Signed:	Print:	Date:
(HR / Medical Director)		

SECTION F: NOTHING TO DECLARE

I CONFIRM THAT I HAVE NO INTERESTS OR SECONDARY EMPLOYMENT TO DECLARE.

I declare that the information I have given on this form is correct and complete. I understand that if I have knowingly provided false information I may be subject to disciplinary and/or criminal proceedings.

Signed:	Print:	Date:
(Employee)		

The completed form should be copied and the individual should retain a copy for their own records. The completed form should be returned to the HR Service Desk at HRsolutions@bdct.nhs.uk.