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Health Board



<b>Meeting Date</b>	<b>26<sup>th</sup> November 2020</b>		<b>Agenda Item</b>	<b>5.1</b>
<b>Report Title</b>	<b>Corporate Governance Report</b>			
<b>Report Author</b>	Leah Joseph, Corporate Governance Officer			
<b>Report Sponsor</b>	Pam Wenger, Director of Corporate Governance			
<b>Presented by</b>	Pam Wenger, Director of Corporate Governance			
<b>Freedom of Information</b>	Open			
<b>Purpose of the Report</b>	To report on corporate governance matters arising since the previous meeting.			
<b>Key Issues</b>	<p>There are a number of corporate governance matters which have to be reported to the board as a regular item in-line with standing orders. This report encompasses all such issues as one agenda item.</p> <p>The Board is asked to receive the updates in relation to :</p> <ul style="list-style-type: none"> <li>• Matters considered In-Committee;</li> <li>• Affixing the Common Seal;</li> <li>• Welsh Health Circulars;</li> <li>• Business Cycle;</li> <li>• Standing order review report;</li> <li>• Board and Committee arrangements;</li> <li>• Stakeholder Reference Group</li> </ul>			
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the report;</li> <li>• <b>APPROVE</b> the proposal to revise the board and committee arrangements as a result of the second wave of Covid-19;</li> <li>• <b>APPROVE</b> the specified changes to standing orders to create a full suite of documents;</li> <li>• <b>APPROVE</b> the proposed amendments to the Standards of business conduct for implementation;</li> <li>• <b>RATIFY</b> the chair and vice-chair roles for the Stakeholder Reference Group.</li> </ul>			

## CORPORATE GOVERNANCE REPORT

### 1. INTRODUCTION

To report on corporate governance matters arising since the previous meeting.

### 2. BACKGROUND

There are a number of corporate governance matters which have to be reported to the board as a regular item in-line with standing orders. This report encompasses all such issues as one agenda item.

### 3. GOVERNANCE AND RISK ISSUES

#### (i) Matters Considered In-Committee

In accordance with standing orders, the health board is required to report any decisions made in private session, to the next available public meeting of the board.

The following items during the in-committee board session in September 2020:

- **Key Issues Report from In-Committee Board Committee meetings** - a report on key issues discussed at recent meetings was received for assurance;
- **WHSSC Joint Committee** - the minutes of the in-committee of the Welsh Health Specialised Services Committee (WHSSC) joint committee were received;
- **Chair's Actions** – four separate actions were received for ratification;
- **Staffside update** – a verbal update was received in respect of the role of the Director of Primary Care, Community, Mental Health and Learning Disabilities.

#### (ii) Affixing the Common Seal

In-line with standing orders, a routine report on documents to which the common seal has been affixed is required. Attached at **appendix 1** are details taken from the seal register. The Corporate Governance Team are currently reviewing the process regarding affixing the common seal.

#### (iii) Welsh Health Circulars (WHCs)

Welsh Government issues WHCs around specific topics. The WHCs set out in **appendix 2** have been received since the last meeting and are available via the Welsh Government website, where further details as to the risks and governance issues are available.

#### (iv) Board Business Cycle

At each meeting, the board receives copy of its business cycle which outlines the business planned for each meeting. This is at **appendix 3**.

#### (v) Board and Committee arrangements

As the health board starts to move into the second wave, it was proposed and agreed that in order to reduce the pressure on the organisation, Executive Director attendance at committees was to be reduced and agendas to focus on Covid-19 and essential

services. It is now proposed that board and committee arrangements follow the schedule (set out below) and for committee meetings to last no more than two hours with the exception of Audit Committee which will be three hours.

Date	Committee	Proposal
<b>November 2020</b>		
5 <sup>th</sup> November 2020	Mental Health Legislation Committee	Minimise attendance by Executive Directors ( <i>Director of Nursing and Director of Corporate Governance</i> )
12 <sup>th</sup> November 2020	Audit Committee	Minimise attendance by Executive Directors ( <i>Director of Finance and Director of Corporate Governance. Others to attend only for their items</i> )
24 <sup>th</sup> November 2020	Performance and Finance Committee ( <i>Focused agenda on finance, performance and risk</i> )	Minimise attendance by Executive Directors ( <i>Director of Finance and Chief Operating Officer</i> )
24 <sup>th</sup> November 2020	Quality and Safety Committee ( <i>Focused agenda on COVID issues</i> )	Minimise attendance by Executive Directors ( <i>Director of Nursing, Medical Director, Director of Corporate Governance</i> ) Other Directors to attend for their specific items.
26 <sup>th</sup> November 2020	Health Board Meeting	Continue as planned.
<b>December 2020</b>		
1 <sup>st</sup> December 2020	Health and Safety Committee	Minimise attendance by Executive Directors ( <i>Director of Nursing, Director of Workforce and OD, Director of Corporate Governance</i> ) Other Directors to attend for their specific items.
10 <sup>th</sup> December 2020	Workforce and OD Committee ( <i>Focused on workforce risks related to COVID</i> )	Minimise attendance by Executive Directors ( <i>Director of Workforce and OD, Medical Director</i> )
14 <sup>th</sup> December 2020	Charitable Funds Committee ( <i>Focused agenda on NHS Charities funds</i> )	Consider Executive Director attendance – maintain if possible
15 <sup>th</sup> December 2020	Performance and Finance Committee	Minimise attendance by Executive Directors ( <i>Director of Finance and Chief Operating Officer</i> )

	<i>(Focused agenda on finance, performance and risk)</i>	
15 <sup>th</sup> December 2020	Quality and Safety Committee <i>(Focused agenda on COVID issues)</i>	Minimise attendance by Executive Directors ( <i>Director of Nursing, Medical Director, Director of Therapies (or Deputy) Director of Corporate Governance</i> ) Other Directors to attend for their specific items.
17 <sup>th</sup> December 2020	Board Development	Cancel but retain date in the diary in case required for Board Business
<b>January 2021</b>		
12 January 2021	Audit Committee	Continue as planned review at end of November 2020
14 January 2021	Health and Safety Committee	Cancel as meeting in December 2020
28 <sup>th</sup> January 2021	Board Meeting	Continue as planned review at end of November 2020

#### **(vi) Standing Orders**

Minor changes were made to standing order in July 2020 following recommendations from welsh Government to respond to Covid-19 however there is an annual requirement to review the documents in full. A number of changes were approved by the Audit Committee on 12<sup>th</sup> November to bring standing orders fully up-to-date and to make them more accessible for staff. The full revised set is available on request from the head of corporate governance but has not been appended to the report for ease. The changes are as follows:

<b>Schedule</b>	<b>Changes</b>
Standing Orders (main)	<ul style="list-style-type: none"> <li>- 'Board Secretary' amended to 'Board Secretary/Director of Corporate Governance' to reflect correct job title;</li> <li>- The reference to the standing financial instructions at schedule 2.1 changed to schedule six as per the correct order;</li> <li>- Contents updated to show the schedules are separate documents as opposed to included in the main document;</li> <li>- The need for written summary within two days of the board</li> </ul>

	meetings removed as this was in response to the exclusion of the public from meetings during the pandemic. As livestreaming is now in place, the need for a summary is null and void.
Glossary of Terms	<ul style="list-style-type: none"> <li>- Assembly Government changed to Welsh Government;</li> <li>- 'Board Secretary' amended to 'Board Secretary/Director of Corporate Governance' to reflect correct job title;</li> <li>- Health board name changed to Swansea Bay University Health Board.</li> </ul>
Schedule One: Scheme of Delegation	<ul style="list-style-type: none"> <li>- 'Board Secretary' amended to 'Board Secretary/Director of Corporate Governance' to reflect correct job title;</li> <li>- Wales Audit Office changed to Audit Wales;</li> <li>- The delegated matter of health and safety changed from the head of the service to the assistant director;</li> <li>- Service directors changes to service group directors;</li> <li>- Delivery unit director updated to NHS Wales Delivery Unit Director to establish it is that of the hosted agency;</li> <li>- The process for the procurement of pharmaceutical products added as an appendix to the scheme of delegation rather than a separate schedule.</li> </ul>
Schedule Two: Key Guidance	<ul style="list-style-type: none"> <li>- Amended to remove schedules seven, eight, nine, 10 and 11.</li> </ul>
Schedule Three: Board Committee Arrangements	<ul style="list-style-type: none"> <li>- The terms of reference of the Audit Committee, Quality and Safety Committee, Mental Health Legislation Committee and Performance and Finance Committee have been updated as previously agreed by the board.</li> </ul>

Schedule Four: Joint Committee Arrangements	<ul style="list-style-type: none"> <li>- The latest versions of the Welsh Health Specialised Services Committee (WHSSC), Emergency Ambulance Service Committee (EASC) and NHS Wales Shared Services have been included;</li> <li>- In January 2020, the Joint Regional Planning and Delivery Group was stood down therefore these terms of reference have been removed.</li> </ul>
Schedule Five: Advisory Group Arrangements	<ul style="list-style-type: none"> <li>- The latest versions of the stakeholder reference group, local partnership forum and health professionals' forum have been included.</li> </ul>
Schedule Six: Standing Financial Instructions	<ul style="list-style-type: none"> <li>- The all-Wales directors of finance group is currently revising the model standing financial instructions for review and ratification by board secretaries and Welsh Government. An updated version of the model standing financial instructions is expected to be issued by Welsh Government for 2021-22 for approval;</li> <li>- In the interim, the current version has been updated to reflect the new name of the organisation and to incorporate schedule nine (contracts code – building engineering works).</li> </ul>
Schedule Seven: Standards of Business Conduct	<ul style="list-style-type: none"> <li>- As this is a policy and procedure to support staff as to how to conduct themselves as employees of the health board, it is proposed to remove this from the standing orders and make it a standalone document. This is in-line with other health boards.</li> </ul>
Schedule Eight: Procurement of Pharmaceutical Products	<ul style="list-style-type: none"> <li>- This sets out the scheme of delegation in terms of the procurement of pharmaceutical products therefore it is proposed that it is incorporated into the main scheme of delegation to be read in context with the rest of the</li> </ul>

	processes. This is in-line with other health boards.
Schedule Nine: Contracts Code – Building and Engineering Works	- As the document sets out the way in which contracts are tendered and progressed, this aligns with the standing financial instructions therefore it is proposed to include it in the main document to be read in context with the rest of the processes. This is in-line with other health boards.
Schedule 10: Counter Fraud Policy and Response Plan	- As this is a policy and procedure as to the counter fraud service, it is proposed to remove this from the standing orders and make it a standalone document. This is in-line with other health boards.
Schedule 11: Capital Projects Control Manual	- In September 2018, it was discussed at Audit Committee the potential removal of schedule 11 as it is an operational document, rather than one for governance and assurance. Members were content with the suggestion, but asked that it be agreed by the executive team before it was agreed. This was completed in October 2018 but due to changes in personnel, there was an omission to re-present it to Audit Committee for ratification, therefore it is proposed here to remove it for completeness.

**(vii) Standards of Business Conduct Policy (Incorporating Declarations of Interest, Gifts and Hospitality and Sponsorship)**

Following review, the Policy has been strengthened in a number of key areas. Changes are summarised as follows;

- Declaration of Interest Form

Within the policy, the Declaration of Interest form (**appendix 2**) has been updated to include a section on mitigating actions under each of the interest categories. Employees and Independent Members are required to advise what they are doing to avoid a conflict of interest.

Section (j) Review - has also been included and this provides further assurance that forms have been reviewed and countersigned by the Head of Corporate Governance.

- Gifts and Hospitality

As the health board received a high volume of gifts during the pandemic, the guidance for accepting gifts (**appendix 3i**) has been updated in order to provide clarity on the process.

There are now two separate declaration forms for Gifts and Hospitality (**appendix 3ii and appendix 3iii**).

- Section 6.0 – Roles and Responsibilities

The role of Director of Corporate Governance has been strengthened to incorporate recommendations from the Capital Assurance Internal Audit Follow-Up Report.

- Section 6.7 – NWSSP Procurement

This section has been strengthened to reflect the responsibility of NWSSP in ensuring that all procurement and health board staff complete declaration of interest forms during procurement exercises.

The health board will also seek assurance on the effectiveness of the checks and controls in place via the bi-monthly STA/SQA report to Audit Committee. The Corporate Governance Team will also annually request the complete declaration of interest forms from NWSSP Procurement.

- Section 9.2 - Gifts from Service Users and Relatives

The following amendments have been made to ensure consistency with NHS England Guidance and NHS Wales.

- The value of gifts that can be accepted has been revised from £100 to £25;
- The value of gift vouchers for acceptance has been removed from £25 to £0.

- Section 9.16 Honoraria/Miscellaneous payments

The policy has been updated in line with the current HM Revenue and Customs guidance states that fees earned by individuals must not be directly allocated to an NHS charitable funds, instead if the fee earner wishes to make a charitable donation the follow the process set out in section 9.16 of the policy.

- Section 18 and Appendix 10 – Secondary Employment

This section has been strengthened following advice from Counter Fraud Service and Workforce colleagues.



Declarations of secondary employment will need to be made to both Workforce and Corporate Governance. Workforce colleagues will require declarations in terms of the statutory requirement of the Working Time Directive and Corporate Governance will require declarations as part of the Declarations of Interest Register. Appendix 10 has been amended to reflect these requirements also.

- Section 23 - Training and Awareness

In line with the recommendation from the Capital Assurance Internal Audit Follow-Up Report, this section has been strengthened to highlight the responsibility of the Units and Departments to ensure all staff are sufficiently aware of their obligations under the policy.

The Director of Corporate Governance will facilitate awareness sessions which will cover the key principles of the policy.

- Section 26 – Distribution

In order to strengthen this area, the following has been added to the policy;

*‘On a bi-annual basis, the Director of Corporate Governance will circulate a reminder to staff, together with a link to the policy. Staff will also be reminded during login to their PCs and laptops, the need to read and accept the terms of the Standards of Business Conduct Policy and to declare any interests and report offers of gifts, hospitality, honoraria and sponsorship.’*

## **Further Developments**

- Electronic Declarations of Interest and Hospitality Registers

A priority for the Director of Corporate Governance is the implementation of an electronic register for both DOI's and Gifts and Hospitality.

Work is underway with colleagues in Betsi Cadwaladr University Health Board to procure and utilise the electronic system which they have in place. A demo presentation was recently provided to All Wales Board Secretaries and the health board is in the process of establishing the cost commitment of utilising both their system and the use of their IT support for the system.

The proposed implementation for this work will be April 2021.

### **vii. Stakeholder Reference Group**

A new chair and vice-chair of the Stakeholder Reference Group have been elected. Alison James, who has been re-elected to the group as the mental health representative, will takeover as chair once more with the representative for carers taking on the role of vice-chair. Members are asked to ratify this decision.

#### 4. FINANCIAL IMPLICATIONS

There are no financial implications arising within this report.

#### 5. RECOMMENDATIONS

Members are asked to:

- **NOTE** the report
- **APPROVE** the proposal to revise the board and committee arrangements as a result of the second wave of Covid-19
- **APPROVE** the specified changes to standing orders to create a full suite of documents;
- **APPROVE** the proposed amendments to the Standards of business conduct for implementation;
- **RATIFY** the chair and vice-chair roles for the Stakeholder Reference Group.

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> (please choose)	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
<b>Health and Care Standards</b>		
(please choose)	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
The common seal is applied to legal and official documents which develop services, buildings, processes and systems to enhance the way in which the health board functions and support and patients. In addition, Welsh health circulars provide advice, guidance and information relating to changes in process or services which work to enhance services.		
<b>Financial Implications</b>		
There are no financial implications associated with this report.		
<b>Legal Implications (including equality and diversity assessment)</b>		
The common seal is primarily used to seal legal documents such as transfers of land, lease agreements and other important/key contracts. The seal may only be fixed to a document if the board or committee of the board has determined it shall be completed under seal, or if a transaction to which the document relates has been approved by the board or committee of the board. Any legal implications relating to Welsh health circulars would be identified in the individual documents.		
<b>Staffing Implications</b>		
There are no staffing implications contained within this report.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
Welsh health circulars provide advice, guidance and information relating to changes in process or services which work to enhance the way in which NHS Wales organisations function and would therefore potentially have individual long-term impacts.		
<b>Report History</b>	This report is a standard item on the board's business cycle.	
<b>Appendices</b>	Appendix 1 - Affixing of the common seal Appendix 2 – Welsh Health Circulars Appendix 3 – Board business cycle	

**REGISTER OF SEALINGS**

<b>Document Number</b>	<b>Date Signed</b>	<b>Document Details</b>
42/20	09.09.20	Collaboration Agreement. Relating to the Provision of a field/surge hospital at Elba / building, Bay Studios at Fabian Way
43/20	20.10.20	CT Simulator at Singleton Hospital (work stage 4 – 7 only)
44/20	20.10.20	Calorifier Steam Controls to Pathology Rehab West Ward at Singleton Hospital
45/20	20.10.20	Morrison Catering Island 1
46/20	20.10.20	Cimla Refurbishment/Internal Alterations
47/20	28.10.20	Sale of Resolven Health Centre

## Appendix 2

WHC number and title	Date received	Recipients
WHC (2020) 15 Policy on single-use laryngoscopes	14/09/2020	Board levels & operation level decontamination lead – for transmission to all relevant colleagues including for example, theatre staff and unscheduled care staff.  Medical directors  Nurse executive directors  Directors of therapies & healthcare science  NWSSP – specialist estates services
WHC (2020) 014 Ear Wax Management Primary Care and Community Pathway	29/09/2020	Health boards & NHS trusts
WHC (2020) 005 Recording of dementia read codes	30/09/2020	GP Practices, General Practitioner Committee Wales, Royal College of General Practitioners, Royal College of Psychiatrists, Royal College of Nursing, Directors of Primary Community and Mental Health, Assistant Medical Directors, Mental Health General Managers, Improvement Cymru PHW, Memory Clinics, British Geriatric Society (Cymru), Care of the Elderly Medicine, All Wales Senior Nurses Advisory Group, Prison health leads.
WHC (2020) 018 Last Person Standing	01/10/2020	All Health Boards

WHC (2020) 019 Expectations for NHS Health Boards and Trusts to Ensure the Health and Wellbeing of the Workforce During the Covid-19 Pandemic	30/10/2020	Chief Executives and Chief Operating Officers of Health Boards and Trusts
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# Health Board Work Programme

Topic	Lead	May	June	July	August	September	November	January	March
<b>Preliminary Matters</b>									
Patient Story	Director of Nursing and Patient Experience								
Minutes of the Previous Meeting	Director of Corporate Governance								
Action Log	Director of Corporate Governance								
Chair's Report	Director of Corporate Governance								
Chief Executive's Report	Chief of Staff								
<b>Quality, Safety and Performance</b>									
Covid-19 Update	Director of Public Health								
Quartely Plans	Director of Strategy	Q1		Q2		Q3			
Committee Key Issue Reports	Director of Corporate Governance								
Financial Position	Director of Finance								
Performance Report	Director of Finance								
Nurse Staffing Levels (Wales) Act 2016	Director of Nursing and Patient Experience								
Annual Quality Statement	Director of Nursing and Patient Experience								
TAVI	Medical Director								
Annual Accounts	Director of Finance								
<b>Strategic Items</b>									
Transformation Programme	Director of Transformation								
Digital Services	Associate Director of Digital Services								
Discretionary Capital Plan	Director of Strategy								
Budget and Financial Allocations	Director of Finance								
NHS Wales Partnerships	Director of Strategy								
External Partnerships	Director of Strategy								
Local Partnership Forum Report	Director of Workforce and OD								
Health Professionals' Forum Report	Director of Therapies and Health Science								
Stakeholder Reference Group Report	Director of Nursing and Patient Experience								
Partnership Framework	Director of Strategy								
Emergency Planning	Director of Strategy								
<b>Governance</b>									
Risk Register	Director of Corporate Governance								
Committee Key Issue Reports	Director of Corporate Governance								
Corporate Governance Issues	Director of Corporate Governance								
Welsh Language Services	Director of Corporate Governance								
Review of Standing Orders	Director of Corporate Governance								
Organisational Annual Report	Director of Corporate Governance								
Accountability Report	Director of Corporate Governance								
WAO Structured Assessment and Audit Letter	Director of Corporate Governance								
SIRO Annual Report	Director of Corporate Governance								
Primary Care Annual Report	Chief Operating Officer								
Carers Annual Report	Director of Nursing and Patient Experience								
Research and Development Annual Report	Medical Director								
Director of Public Health Annual Report	Director of Public Health								



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## **Standards of Business Conduct Policy** **(Incorporating Declarations of Interest, Gifts, Hospitality** **& Sponsorship)**

<b>Date to be reviewed:</b>	March 2023	<b>No of pages:</b>	53
<b>Author job title(s):</b>	Director of Corporate Governance		
<b>Responsible Dept/Director:</b>	Director of Corporate Governance		
<b>Approved by:</b>	Audit Committee		
<b>Date approved:</b>			
<b>Effective Date (live):</b>			
<b>Version:</b>	9.		



Version	Summary of Changes/Amendments	Issue Date
6	<ul style="list-style-type: none"> <li>• The Policy has been strengthened in respect of Roles and Responsibilities, Secondary Employment &amp; Private Practice and Gifts and Hospitality.</li> <li>• The Policy has been updated to ensure consistency across Health Boards in NHS Wales.</li> <li>• With regard to Gifts from Service Users or their Relatives, the value of gift cards/vouchers for acceptance has been removed (from £25 to £0, in-line with NHS England Guidance and NHS Wales).</li> </ul>	

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# Standards of Business Conduct Policy (Incorporating Declarations of Interest, Gifts, Hospitality & Sponsorship)

## 1. Purpose

The health board is committed to ensuring that its employees and independent members practice the highest standards of conduct and behaviour. This policy sets out those expectations and provides supporting guidance.

## 2. Introduction

The Welsh Government's Citizen-Centred Governance Principles apply to all public bodies in Wales. These principles integrate all aspects of governance and embody the values and standards of behaviour expected at all levels of public services in Wales.

The health board has developed its own values and behaviour framework:

caring for each other	working together	always improving
in every human contact in all of our communities and each of our hospitals.	as patients, families, carers, staff and communities so that we always put patients first.	so that we are at our best for every patient and for each other.
We are <b>friendly, kind, compassionate</b> and <b>welcome others</b> with a smile.	We <b>communicate openly</b> and <b>honestly</b> and <b>explain things clearly</b> .	We keep people <b>safe</b> and provide an <b>efficient</b> and <b>timely</b> service.
We <b>do the right thing for every person</b> and treat everyone with <b>dignity and respect</b> .	We take time to <b>listen, understand</b> and <b>involve people</b> . We <b>value everyone's contribution</b> and we work with our partners to join things up for people.	We are <b>professional</b> and <b>responsible</b> and <b>hold ourselves and each other to account</b> .
We <b>see people as individuals</b> . We are <b>patient, empathetic, helpful</b> and <b>attentive</b> to the needs of others.	We are <b>open to, and act on, feedback</b> . We speak up if we are concerned.	We <b>choose a positive attitude, seek out learning, and continually develop</b> our skills and services.
We won't ignore people, be dismissive, rude, abrupt or leave anyone to suffer or feel neglected.	We won't let each other down, exclude or criticise people.	We won't accept second best or choose a negative attitude.

The board is strongly committed to SBUHB being value-driven, rooted in Nolan principles and high standards of public life and behaviour, including openness, customer service standards, diversity and engaged leadership.

It expects all independent members and employees to practice high standards of corporate and personal conduct, based on the recognition that the needs of service users must come first.

The "Seven Principles of Public Life" or the "Nolan Principles" form the basis of the health board's standards of business conduct requirements for its employees and independent members. These are:-

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

In support of these principles, independent members and employees must be impartial and honest in the way that they go about their day-to-day functions. They must remain beyond suspicion at all times. They can achieve the seven principles by:

- Ensuring that the interests of service users remain paramount;
- Being impartial, honest and transparent in the conduct of their official business;
- Using public funds to the best advantage of the service and the service users, always seeking to ensure value for money;
- Not abusing/using their official position for personal gain or to benefit family or friends;
- Not seeking or knowingly accepting preferential rates or benefits in kind for private transactions carried out with companies, with which they have had, or may have, official dealings on behalf of the health board.

This policy re-states and builds on the provisions included in SBU Health Board's standing orders. It re-emphasises the commitment of the health board to ensure that it operates to the highest standards, the roles and responsibilities of those employed by the organisation and the arrangements for ensuring that declarations can be made.

The policy is supported by a short guide (**Appendix 1**) that provides a summary of expected conduct. It is intended to compliment the various professional codes of conduct relevant to employees of the health board.

### **3. Bribery Act**

The Bribery Act 2010 came into force on 1st July 2011. NHS organisations across the UK are subject to the provisions of the Act, as they are considered to be corporate bodies. The Act reformed the criminal law of bribery, making it easier to tackle this offence proactively in both the public and private sectors, and its implications are wider than those of the Foreign and Corrupt Practices Act 1977 (FCPA).

Broadly, the act defines bribery as:

*"Giving or receiving a financial or other advantage in connection with the "improper performance" of a position of trust, or a function that is expected to be performed impartially or in good faith"*

The Bribery Act 2010 abolished all existing UK anti-bribery laws and replaced them with a suite of new offences markedly different to what has gone before. 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 increased the maximum penalty for bribery to 10 years imprisonment, with an unlimited fine.

In addition, the Act introduced a 'corporate offence' of failing to prevent bribery by an organisation not having adequate preventative procedures in place. An organisation may avoid conviction if it can show that it had such procedures and protocols in place to prevent bribery. The 'corporate offence' is not a standalone offence, but always follows from a bribery and/or corruption offence committed by an individual associated with the organisation in question.

The "advantage" referred to in the Act does not have to involve cash or an actual payment exchanging hands and can take many forms such as a gift, lavish treatment during a business trip or tickets to an event.

Some simple examples follow:

- Bribery in order to secure or keep a contract;
- Bribery to secure an order;
- Bribery to gain any advantage over a competitor;
- Bribery of a local, national or foreign official to secure a contract;
- Bribery to turn a blind eye to a health and safety issue or poor performance or substitution of materials or false labour charges;
- Bribery to falsify an inspection report or obtain a certificate.

The Ministry of Justice has published guidance that sets out measures all organisations can put in place to prevent bribery. The health board also has its own bribery policy which sets out its responsibilities and the responsibilities of its employees in preventing bribery and corruption. It also provides

information and guidance to those working within the organisation on how to recognise and deal with bribery and corruption issues.

#### **4. Scope**

This policy is applicable across the whole of the health board including hosted organisations. It applies to all employees and independent members. The term “employees” includes all those who have a contract of employment or honorary contract with the health board, as well as bank and agency workers.

#### **5. Aims and Objectives**

Swansea Bay Health Board is committed to ensuring that all employees and Independent Members practice the highest standards of conduct and behaviour based on the recognition that the needs of service users must come first.

The aim of this policy is to ensure that arrangements are in place to support employees to act in a manner that upholds the standards of business conduct. It also sets out specific arrangements for the appropriate declarations of interests and acceptance/refusal and record of offers of gifts, hospitality and sponsorship.

The policy aims to capture public acceptability of behaviours of those working in the public sector so that the health board can be seen to have exemplary practice in this regard. It also seeks to clarify the relative responsibilities of individuals/committees in the discharging of this policy and adhering to the standards of business conduct.

#### **6. Roles and Responsibilities**

##### **6.1 Chair**

The Chair should;

- Ensure that Independent Members are aware of the requirements contained within this policy and the Standards of Behaviour Framework
- Lead by example and ensure they personally declare any relevant interest or the offer of gifts, hospitality or sponsorship
- Approve (or not) the acceptance of gifts, hospitality and sponsorship that have been offered to Independent Members prior to the event.

##### **6.2 Chief Executive**

The Chief Executive is the “accountable officer” with overall responsibility for ensuring that the health board operates efficiently, economically and with probity. He/she will ensure a policy framework is set and that arrangements are in place to support the delivery of that framework.

### 6.3 Director of Corporate Governance (Board Secretary)

The Director of Corporate Governance has delegated responsibility for ensuring the health board is provided with competent advice and support regarding the contents and application of this policy and the standing orders.

He/she, supported by the Head of Corporate Governance, will scrutinise the declaration forms when received to ensure appropriate declarations and acceptances have been made in compliance with the policy.

He/she will ensure that:

- A register of interests is established and maintained as a formal record of interests declared by employees and independent members. The register will include details of directorships, pecuniary (financial) and non-pecuniary interests in organisations that may have dealings in the NHS and members of professional committees and third sector bodies. Where relevant it will also include details of interest of close family members or civil partners;
- The register be updated in a timely and more specifically within a fortnight of a new interest being declared;
- Arrangements are in place to prompt specific groups of employees and independent members to complete a declaration of interest form (**Appendix 2**) on initial employment with the health board and at periodic intervals thereafter as follows:

Independent members / trustees	Annually
Executive directors	Annually
Service unit directors; directors of hosted organisations and members of the Senior Leadership Team, Medical and Clinical Directors and Assistant Directors	Annually
Staff in specified "high risk" areas; Procurement, Estates, Capital Planning, Pharmacy	Annually

**Note:** It is the individual employee's responsibility to make a declaration should their circumstances change within these timescales.

- A review is undertaken following receipt of declaration forms to ensure all staff specified as 'high risk' have been identified.
- A register of gifts, hospitality, honoraria and sponsorship, whether accepted or declined, is maintained;
- All declarations of interest will be scrutinised on receipt by the Corporate Governance team to ensure appropriate declarations and acceptances have been made;
- Appropriate information from the registers of declarations of interests and gifts, hospitality, honoraria and sponsorship is available on request;



- A regular report detailing the declarations of interests, gifts, hospitality, honoraria and sponsorship received and the effectiveness of the arrangements in place is provided to the Audit Committee and Executive Team to review the content of register.
- The forms employees should complete when making a declaration of interest or when advising of gifts, hospitality, honoraria or sponsorship have been accepted or declined are available as **Appendices 2, 3 and 4**. Further guidance on making declarations and the acceptance of gifts is available in **Appendices 2i, 3i and 3ii**.

#### **6.4 Executive and Unit Directors**

Executive and unit directors must ensure that:

- Employees are aware of the requirements contained within this policy;
- They lead by example and ensure that they personally declare any relevant interest or the offer of gifts, hospitality, honoraria or sponsorship;
- Approve or decline the acceptance of gifts, hospitality and sponsorship that have been offered within their Department/unit **prior** to the event;
- Ensure any acceptances of gifts, hospitality, honoraria or sponsorship complies with the standards of conduct outlined in this policy. Unit directors are responsible for approval within unit and executive directors are responsible for approval within corporate functions;
- It is their responsibility to review the contents of the registers of declarations of interest and gifts, hospitality, honoraria and sponsorship to assist with the verification of the accuracy of the information contained within it;
- During periods of annual leave and prolonged absence they will ensure that they delegate the responsibilities to their deputy.

#### **6.5 Line/Departmental Managers**

Line/departmental managers will:

- Ensure that this policy and the standards of business conduct are brought to the attention of employees for whom they are responsible, and that they are aware of its implications for their work;
- Ensure that employees are aware of the requirement to follow and comply with the policy and the standards of business conduct and actively seek declarations at regular intervals in respect of interests, secondary employment and gifts/hospitality from employees. The standards of business conduct will be discussed and declarations sought at performance reviews, consultant appraisals and as part of the consultant job plan reviews as appropriate;
- Support their employees in the application of the policy and the standards of business conduct, seeking advice from the Director of Corporate Governance if required.

#### **6.6 Employees and Independent Members Staff Conduct of Employees**

The requirements of staff as public servants are to:

- Ensure that the interest of service users remains paramount at all times;
- Be impartial, and honest and transparent in the conduct of their official business;
- Use the public funds entrusted to them to the best advantage of the service, always ensuring value for money.

**Staff must not:**

- Abuse their official position for personal gain or to benefit their family or friends;
- Seek to advantage further private business or other interests in the course of their official duties;
- Seek or knowingly accept preferential rates or benefits in kind for private transactions carried out with companies with which they have had or may have official dealing with on behalf of the health board.

*"It is in keeping with these requirements that staff must consider carefully any offers of gifts or hospitality."* (Standards of Business Conduct for NHS staff (DGM(93)84) Welsh Office Circular)

All employees, including those on honorary contracts will ensure that they:

- Understand and abide by this policy and the standards of business conduct, consulting their line manager if they require clarification;
- Are not in a position where their private interests and NHS duties may conflict;
- Declare to the health board for recording in the register of interests any relevant interests at the commencement of employment, whenever a new interest arises, and if asked to do so at periodic intervals by the health board.

"Relevant interests" will include:

- a) Directorships, including independent member directorships held in private companies or public limited companies likely or possibly seeking to do business with the health board, with the exception of dormant companies;
- b) Ownership or part-ownership, of private companies, businesses or consultancies likely or possibly seeking to do business with the health board. This includes shareholdings, debentures or rights where the total nominal value is £50,000 or one hundredth of the total nominal value of the issued share capital of the company or body, whichever is the less;
- c) A personal interest or departmental interest in any part of the pharmaceutical/healthcare industry that could be perceived as having an influence on decision making or on the provision of advice to members of the team;
- d) Sponsorship or funding from a known NHS supplier or associated company/subsidiary;
- e) A position of authority in a charity or voluntary body in the field of health and social care;

- f) Any other connection with a voluntary, statutory, charitable or private body that could create a potential opportunity for conflicting interests;
- g) Self-employment or employment by any other body. This is particularly relevant where there could be a perceived or actual conflict with NHS duties. This includes the undertaking of Agency work and/or private practice.

**It is recommended that where there is doubt, a declaration of interest should be made.**

- Employees should inform service users and their relatives as appropriate, when referring them for treatment, investigation, or any aspect of their care if they have a material interest in an organisation to which they plan to refer a service user (see a) and g) above). The fact that the service user has been informed must be recorded appropriately;
- Verbally declare any relevant interest when a potential for conflict arises for example at board and committee meetings, during procurement processes and other meetings where appropriate;
- Declare to the health board for recording in the register of gifts, hospitality, honoraria and sponsorship any offer of a gift, hospitality or sponsorship which requires recording (see Section 9);
- Obtain permission from their executive/unit director prior to accepting gifts, hospitality, honoraria or sponsorship which require recording;
- Observe the standing orders, standing financial instructions and procurement procedures of the health board;
- Before engaging in any self-employment or outside employment you must first discuss it with your departmental/line manager. This will ensure that your position in the health board is not compromised. Agreement to such employment will not be unreasonably refused.

Note: Employees Staff should also refer to appropriate professional codes of conduct and documents issued by the Welsh Government which will complement this policy and the standards of business conduct.

**It is recommended that where there is doubt, a declaration of interest should be made.**

## **6.7 NHS Wales Shared Services Partnership (NWSSP) Procurement Services**

NWSSP will ensure that all procurement staff and health board staff complete declaration of interest forms in line with their procedures. NWSSP will advise the health board, through the Director of Corporate Governance, of any such interests impacting on health board services and this will be reported via the Audit Committee. The health board will seek assurance on the effectiveness of the controls in place and will annually request the completed declaration of interest forms of procurement and health board staff as above.

## **6.8 Other Partnerships**

The health board has a number of partnership arrangements including West Glamorgan Regional Partnership, A Regional Collaboration for Health (ARCH) as well as staff holding joint contracts with Welsh Government. These should be dealt with in-line with declarations of interest – see paragraph eight.

## **7. Register of Interests**

The Director of Corporate Governance will maintain registers of declarations of interests and gifts, hospitality, honoraria and sponsorship. Appropriate information from these registers will be available upon request. Enquiries should be made to the Director of Corporate Governance via email [SBU.inquiries@wales.nhs.uk](mailto:SBU.inquiries@wales.nhs.uk) or on 01639 683323. A summary of the register for independent members and executive directors and highlighted in section 6.3 will be reported to the Audit Committee annually. As this information will be made public through the publishing of the papers on the health board's website, declarations of interest from other staff will not be included.

## **8. Declarations of Interest**

### **8.1 Declarations at Meetings**

It is a requirement that at the beginning of every board, committee or decision making/formal meeting members and those in attendance will be invited to declare their interests in relation to any items on the agenda.

Where a potential conflict is material or the member has a financial/pecuniary interest in the matter under discussion, that person shall withdraw from discussions pertaining to that agenda item and shall not vote upon it. The potential conflict and the action will be recorded in the minutes of the meeting and the register of interests will be updated if required. Where it becomes evident part way through a meeting that there may be a potential conflict the individual must declare their interest immediately.

Under certain circumstances the chair may choose to waive the need for the individual to leave the meeting. The advice of the Director of Corporate Governance should always be sought prior to such a decision being made.

From time to time, staff may need to declare interests at other NHS organisations or partnership meetings. Such declarations will be recorded as if it were a board or committee meeting and the individual will be asked to withdraw from discussions pertaining to that agenda item.

### **8.2 Staff Declarations of Interest**

All members of staff should declare, to the best of their knowledge, if they, or a close relative, or associate, have a controlling or financial interest in a

business, which could impact on the activities of the health board. All such interests should be declared on starting employment, by completing **Appendix 2** at the time, or subsequently on acquisition of the interest. All staff shall be under a contractual obligation to declare such interests. These will be kept in a register by the Director of Corporate Governance and reported to the Audit Committee.

If any member of staff has a financial/commercial interest in an organisation to which he/she plans to refer a patient for treatment or investigation, he/she must tell the patient about that interest. If the patient is a NHS patient, the members of staff must also tell the commissioning authority.

All staff must declare to the Chief Executive, all private interests which could potentially result in personal gain as a consequence of their position within the health board.

## **9. Gifts, Hospitality, Sponsorship and Honoraria**

### **9.1 Gifts**

A 'gift' is defined as any item of cash or goods, or any service, which is provided for personal benefit by a third party e.g. a patient or a supplier. at less than its commercial value. The definition includes prizes, draws and raffles at sponsored events/conferences.

It is an offence to accept any money, gift or consideration as an inducement or reward from a person or organisation holding or seeking to hold a contract with the health board. Such gifts should be refused and if they have already been received they should be returned clearly advising why they cannot be accepted.

Any acceptance of a gift needs to be justified. The onus is to make sure the acceptance of a gift will not be misconstrued.

In respect of gifts, this section does not apply to private patient activity unless it is considered that services may be provided by the NHS at any point.

### **9.2 Gifts from Service Users or their Relatives**

Staff may accept, subject to not contravening their professional codes of conduct, gifts up to the value of £25 from service users and relatives as a mark of their appreciation for the care that has been provided. This does **not** include gift vouchers/cards. Gift vouchers should be politely declined or returned.

Where a gift or gift voucher is offered by service users or their relatives that is likely to be over £25 in value it should be politely declined. In some cases the gift may have been delivered and it may be difficult to return it or it may

be felt that the bearer may be offended by the refusal. Under such circumstances the gift can be accepted, and the bearer advised that it will be utilised for the benefit of charitable funds, for example, used as a prize in a raffle.

Where gifts are provided to a group of staff, it is the responsibility of the line manager to declare the gift if over the value of £25.

Acceptances of gifts are subject to the discretion of the Unit Directors or Clinical Leads and gifts and hospitality forms (**appendix 3ii and appendix 3iii**) declaring that a gift or hospitality has been received must be completed.

Personal gifts of cash from service users or their relatives are not acceptable. It may only be accepted as a donation to an appropriate charitable fund and recorded as such. The finance department will provide advice regarding the mechanism for appropriately receipting such items.

This policy does not apply to gifts received from private patients as this is considered to be private patient activity outside the NHS. However, if the patient is likely to be treated on the NHS at an SBUHB site at any point in the future the provisions of this policy should be adhered to in order to avoid future challenge.

### **9.3 Gifts from Suppliers/Commercial Organisations**

No gifts, unless they are of low intrinsic value for example diaries, calendars, etc. are to be accepted from suppliers, contractors and other commercial organisations. Gifts outside this definition should be politely declined.

While it is not necessary to declare gifts of low intrinsic value, where other items are offered and declined a gifts and hospitality form should be completed. This will allow the health board to monitor when such organisations are inappropriately offering gifts or potential inducements.

Under some circumstances suppliers may send gifts to all of its clients as custom and practice such as hampers at Christmas. Whilst such practices should be discouraged and it is not acceptable for staff to personally accept these gifts, following discussion with the supplier/commercial organisation and the appropriate director it may be considered appropriate to accept the gift and use it for the benefit of charitable funds.

### **9.4 Gifts from Dignitaries / Overseas Organisations**

There may be occasions when visits are made by dignitaries or overseas organisations who consider it "culturally custom and practice" to exchange gifts. In such cases employees should seek guidance from the Director of Corporate Governance and declare these gifts on a gifts and hospitality form. A decision will then be jointly made as to the most appropriate way to manage the gift. This will depend on the nature of the "gift culture" and may include

decisions to “keep and display in public”, “donate to an internal user group”, “auction for charity” etc.

### **9.5 Bequests left in Service User Wills**

On occasions staff are left bequests in a service user’s will which they become aware of before the service user is deceased or because they have been informed by the deceased service user’s legal representative. In such circumstances the member of staff must immediately inform both their manager and the Head of Accounting & governance on behalf of the Director of Finance. It should be borne in mind that staff cannot benefit from a bequest by virtue of their position as a health board employee, undertaking their duties.

### **9.6 Sporting Events**

On occasions staff are offered tickets for sporting events, the health board does not consider accepting tickets as acceptable. However they can be accepted as raffle prizes for charitable funds.

### **9.7 Hospitality**

Hospitality is where there is an offer of food, drinks, accommodation, entertainment or entry into an event or function by a third party, regardless of whether provided during or outside normal working hours, for example, cheque presentations in respect of fundraising events, or tickets/seats for a show or sporting event. .

Employees and Independent Members should refuse hospitality which may compromise or may be seen to compromise their professional judgement or integrity, or which seeks to exert influence to obtain a preferential consideration.

Employees in contact with contractors should be particularly mindful of accepting any hospitality that might later be misconstrued as impacting on strict independence and impartiality.

**Any acceptance of hospitality needs to be justified. Think about the context in which the offer has been made, and the effect on the employee’s position. For example, is the hospitality likely, or could it be seen as likely, to influence? The onus is to make sure that the acceptance of hospitality will not be misconstrued.**

### **9.8 Acceptable Hospitality**

Offers of food and non-alcoholic drink, provided it is equivalent to that offered in similar circumstances by the NHS, can be accepted during working visits

and does not need to be recorded in the gifts, hospitality and sponsorship register.

Other hospitality that may be accepted but will need to be declared includes instances where:

- There is a genuine need to impart information, or represent the organisation at stakeholder community events for example local authority or charitable organisations which have an association with the health board;
- An employee has been invited to receive an award or prize in connection with the work of the organisation or their role within it;
- An employee is invited to a society or institute dinner or function which is to be funded by a commercial organisation and where there is a genuine benefit to the professional standing of the individual or the health board;
- Attending events to receive cheque presentations on behalf of SBUHB.

These types of hospitality must be authorised prior to their acceptance by an executive or unit director and a gifts, hospitality, sponsorship and honoraria must be completed. The hospitality should be proportionate - it should not be of significant value and only the minimum number of employees to achieve the purpose of representing the health board should attend.

The health board has agreed "hospitality principles" for providing hospitality and these are included at **appendix 8**.

## **9.9 Unacceptable Hospitality**

Unacceptable hospitality includes the following examples as a general guidance:

- A holiday or weekend/overnight break;
- Offers of hotel accommodation when this is not associated with an approved sponsored course or conference;
- Use of a company flat or hotel suite;
- Attendance at a function or event restricted to employees which is not for the purpose of training or organisational development;
- Lunch or dinner provided by a private company or their representative which does not form part of a training or development event;
- Entertainment and/or tickets/hospitality at sporting and other corporate entertainment events.

If employees are not clear whether an offer falls into one of these categories advice should be sought from their line manager, unit director or Director of Corporate Governance.

Employees should report any case where an offer of hospitality is pressed which might be open to objection. They should also declare on the appropriate form any offers of hospitality which are declined.



## 9.10 Sponsorship

Sponsorship is an offer of funding to an individual, team or to the health board from an external source, whether in cash, goods, services or benefits.

Sponsorship is sometimes provided by organisations to allow members of staff to attend conferences or working visits to view equipment. It may also include sponsorship of posts and research and development.

No sponsorship should be accepted without the prior agreement of the appropriate executive/unit director. A sponsorship form (appendix 4) should also be completed prior to the acceptance of any sponsorship. If sponsorship is inappropriately offered and/or declined this should also be declared.

**Any acceptance of sponsorship needs to be justified. Think about the context in which the offer has been made, and the effect on the employee's position. For example, is the sponsorship likely, or could it be seen as likely, to influence? The onus is to make sure that the acceptance of any sponsorship will not be misconstrued.**

More detail is provided below regarding the many forms that sponsorship may take. This list is not exhaustive and offers of other sponsorship will need to be considered on a case-by-case basis.

## 9.11 Sponsorship for Attendance at Courses / Conferences

Employees may accept sponsorship for attendance at relevant conferences and courses, but only where they seek permission in advance from their executive/unit director. The sponsorship should only be extended to the number of employees who would have normally attended if funded by the health board. The employee and the executive/unit director must be satisfied that acceptance will not compromise purchasing or any future decisions making in any way.

## 9.12 Post Graduate Education

Any sponsorship/hospitality related to postgraduate education will be co-ordinated and managed by the relevant post-graduate centre manager.

## 9.13 Sponsorship – “Linked Deals”

Pharmaceutical companies and other suppliers may offer to sponsor, wholly or partially, a post or equipment for the health board. The health board will not enter into such arrangements, unless it has been made abundantly clear to the company concerned that the sponsorship will have no effect on purchasing decisions within the health board.

Linked deals must be approved and managed within an agreed process so that there are appropriate monitoring arrangements established to ensure that purchasing decisions are not being influenced by the sponsorship agreement.

Under no circumstances should managers of the health board agree to “linked deals” whereby sponsorship is linked to the purchase of particular products, or to supplies from particular sources.

Sponsored posts are posts that are funded, in whole or in part, by organisations external to the NHS. Sponsored posts can offer benefits to the delivery of care, providing expertise, extra capacity and capability that might not otherwise exist if funding was required to be used from the NHS budget. However, safeguards are required to ensure that the deployment of sponsored posts does not cause a conflict of interest between the aims of the sponsor and the aims of the organisation, particularly in relation to procurement and competition.

The following should be considered when sponsored posts are offered:

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

#### **9.14 Sponsorship of Events in the context of Partnership Arrangements with the Pharmaceutical Industry or Other Commercial Organisations**

The pharmaceutical industry and allied commercial sector representatives may organise meetings in support of specific functions or specialities within the healthcare sector. Under such arrangements they are permitted to fund the hiring of accommodation, meet any reasonable actual costs which may have been incurred and to provide appropriate hospitality. If no hospitality is required, there is no obligation or right to provide it, or indeed any benefit of equivalent value.

The pharmaceutical industry is expected to adhere to the ABPI Code of Practice for the Pharmaceutical Industry which clearly specifies what is and is not acceptable: this is available via the following link:

<http://www.pmcpa.org.uk/thecode/Pages/default.aspx>

### **9.16 Honoraria / Miscellaneous Payments**

Members of staff may be invited to give presentations at conferences, provide responses to surveys or attend professional meetings where a one-off payment or honoraria is offered.

If this activity is to be undertaken during hours when the member of staff is contracted to work the payment should be made to the health board.

Individuals may accept payment for activities that they undertake in their own time, subject to the provisions regarding outside employment contained within the various employee contracts and terms of service.

There are tax implications relating to honoraria that are explained below:

The activity should be reported using a gifts, hospitality, Sponsorship and Honoraria form and it should be authorised by the appropriate Executive or Unit Director.

#### **i. Honoraria received for work undertaken during health board hours**

When **appropriate authorisation** has been granted to permit an employee to be involved in activity outside their normal contract **during** health board hours, any honoraria paid must be received back to the health board's revenue budget to reimburse the organisation for the member of staff's time.

To ensure good governance, the honoraria must be paid into a revenue budget that is **not** managed by the member of staff who has provided their services during health board time.

To avoid personal tax implications, the health board member of staff is urged to request the honoraria are paid **directly to the health board**. This is then seen as reimbursement to the health board to cover the loss of the member of staff's time, and not honoraria. This money will then be transferred into the health board revenue budget. The member of staff who has undertaken the work must not be the budget holder for the budget receiving the funds in lieu of the honorarium due to a conflict of interest.

If the member of staff receives the honoraria directly and then reimburses the health board, the **member of staff remains liable for the payment of both**

**tax and national insurance contributions (NIC)**, regardless of the final destination of the honoraria.

**ii. Honoraria received for work undertaken in an individual's own time (out of normal working hours or on authorised annual leave)**

Individuals are **personally liable for the payment of both tax and NICs** on any honoraria payments received. Following their first honoraria declaration individuals will be asked to sign a "declaration statement" (**Appendix 6**) confirming that they understand their responsibilities and this will be held on file by the Director of Corporate Governance.

In line with current HM Revenue and Customs guidance, fees earned by individuals must not be allocated directly to the health board charity. Instead, if the fee earner wishes to make a charitable donation the following process should be followed;

1. The monetary donation is made directly to the charity of the individual's choice at any time during the current tax year
2. If the donor is a higher rate tax payer, at the end of the tax year the donor should declare the total amounts paid over to all charities on his/her self- assessment tax return under the section on 'charitable giving'. The actual total amounts paid in that tax year should be entered so that the correct amount of tax relief can be calculated by HM Revenue and Customs.
3. Alternately, if the donor is not a higher rate tax payer but a basic rate taxpayer, there is no need to show charitable payments on tax returns, as basic rate tax relief is automatically given to the charity (rather than the taxpayer) under the Gift Aid scheme.

In cases of doubt, staff should seek advice from the Director of Finance/Director of Corporate Governance and should report any case where an offer of sponsorship or honoraria is pressed which might be open to objection. Instances where honoraria has been offered and declined should still be declared.

## **10. Approval Process**

Prior to the acceptance of any gifts, hospitality, honoraria and sponsorship as detailed above, members of staff should seek approval from the relevant executive/unit director.

If the unit director is in any doubt or the activity is complex and/or of high value advice should be sought from the Director of Corporate Governance prior to approval.

### **11. Preferential Treatment in Private Transactions**

Individual staff must not seek or accept preferential rates or benefits in kind for private transactions carried out with which they have, or may have, official dealings with on behalf of the health board. This does not apply to concessionary agreements negotiated with companies by NHS management, or by recognised staff interests, on behalf of all staff, for example, NHS staff benefits schemes.

### **12. Contracts**

All staff in contact with suppliers and contractors, particularly if authorised to sign purchase orders or place contracts for goods, materials or services, shall adhere to accepted professional standards.

### **13. Favouritism in Awarding Contracts**

Fair and open competition between prospective contractors or suppliers for contracts is a requirement of the standing orders and of European directives on public purchasing for works and supplies. This means that:

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

Senior managers should ensure that no special favour is shown to current or former staff or their close relatives or associates in awarding contracts to private or other businesses run by them or employing them in a senior or relevant managerial capacity.

Contracts may be awarded to such businesses where they are won in fair competition against other tenderers, but scrupulous care must be taken to ensure that the selection process is conducted impartially, and that staff who are known to have a relevant interest play no part in the selection.

### **14. Warnings to Potential Contractors**

The health board will ensure that all invitations to potential contractors to tender for business includes a notice warning tenderers of the consequences of engaging in any corrupt practices involving staff of public bodies.

## **15. Research and Development**

All research and development sponsored by commercial companies, including those sponsored by the pharmaceutical industry must be approved by the appropriate mechanisms. It will be governed by specific policies and procedures. The research and development department should be contacted in these circumstances and will also be able to offer advice and support in this area.

## **16. Use of the SBUHB Logo**

Permission needs to be obtained from the Director of Corporate Governance on all occasions where approaches are made by an outside organisation seeking to use the health board's logo in connection with an event or function. Any member of staff wishing to use the logo in connection with any non-health board related matter / event should also seek permission.

## **17. Charitable Funds**

There may be occasions when commercial organisations offer to pay monies into the health board's charitable funds as a way of funding attendances at courses or conferences. Monies can only be paid into charitable funds if the monies constitute a donation and the monies can only be used to fund expenditure within the fund purpose, which may include staff training. The donation cannot specify that the donation be used to fund a specific member of staff, as this constitutes sponsorship. Sponsorship for specific staff to attend commercial courses does not constitute charitable income and all such sponsorship must be received and accounted for through revenue funds. Expenditure from charitable funds does not fall within the remit of this policy; however, there may be a close association. For further information, contact the Director of Corporate Governance or Director of Finance.

## **18. Secondary Employment & Private Practice**

### **18.1 Secondary Employment (Paid, Unpaid or Self Employed)**

Employees should inform their line manager of any secondary employment (this includes paid, unpaid or self-employment) and ensure that this does not affect their health board employment. Declarations should be made using the Declaration Form at **Appendix 10** upon commencement, or at the time that the second employment commences. Managers should ensure that they actively seek declarations at regular intervals, using opportunities such as Performance Appraisal Development Reviews, Consultant Appraisals and Job Planning meetings.

There should be no conflict with their normal contractual employment obligations to the health board, and such work should not involve the use of

any confidential or commercial information obtained in the course of their employment with the health board.

Failure to notify their line manager of secondary employment and/or private practice may invoke the health board's Disciplinary Policy.

Where employees have or are contemplating other employment, they must ensure this does not compromise their availability or physical or mental fitness to carry out their duties as an employee of the health board. Employees must also ensure this does not place them in a position where their judgement or actions might be influenced by considerations arising from their other employment.

Employees have a responsibility to ensure that their line manager is made aware of the dates and times of any hours worked in order that the health board fulfils its statutory requirement of the Working Time Directive; this is available via the following link.

<http://www.hse.gov.uk/contact/faqs/workingtimedirective.htm>

An employee, absent because of sickness, is regarded as unfit to work and should not undertake any paid or unpaid work in any capacity (including self-employment) during a period of sickness absence from the organisation, unless it is deemed jointly by their manager and the Occupational Health Department to be therapeutically beneficial to their recovery. The manager in advance in all such cases must grant express written permission.

An employee found to be undertaking other work during sickness absence without the prior written consent of the manager may be considered in breach of contract, and may be subject to disciplinary action that may result in the involvement of the Counter Fraud Department, the possibility of criminal investigation and/or dismissal.

## **17.2 Private Practice**

There are codes for good private patient practice which clearly include the fact that private practice should not adversely affect NHS duties.

The time spent in private practice does not count towards the 48 hours of the Working Time Directive Regulations, however, health and safety law indicates that no employee of the health board should work in a way detrimental to their health and performance.

Failure to notify their line manager of secondary employment and/or private practice may invoke the health board's Disciplinary Policy.

For medical staff, the amendment to the consultant contract in Wales clarifies the relationship between NHS work, private work and fee-paying work; in that it sets out that an NHS consultant's first responsibility is to the NHS. Participation in private medical services or fee-paying services should not result in detriment to NHS patients or services or diminish the public resources available for the NHS.

Employees should:

- Seek prior approval before taking up private practice.
- Declare where they practice (name of private facility); what they practice (specialty, major procedures); when they practice (identified sessions/time commitment).
- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.

Medical staff must seek prior approval from the relevant senior clinician before undertaking any private work during times when their Job Plan shows a NHS commitment (DCC or SPA).

## **18. Commercial in Confidence**

Members of staff should be particularly careful of using, or making public, internal information of a "commercial in confidence" nature, particularly if its disclosure would prejudice the principle of a purchasing system based on fair competition, whether private competitors or other NHS providers are concerned.

## **19. Rewards for Initiative**

The health board will ensure that potential intellectual property right (IPR) are identified, as and when they arise, in order to protect and exploit them properly, and thereby ensure that the health board receives any rewards or benefits (such as royalties) in respect of work commissioned from third parties, or work carried out by its staff in the course of their duties.

Most IPR are protected by statute for example, patents are protected under the Patents Act 1977 and copyright (which includes software programmes) under the Copyright Designs and Patents Act 1988. To achieve this, senior managers should build appropriate specifications and provisions into the contractual arrangements which they enter into before the work is commissioned or begins. They should always seek legal advice if in any doubt in specific cases. Advice will be provided from the research and development department.

With regard to patents and inventions, in certain defined circumstances the Patents Act gives staff a right to obtain some reward for their efforts, and



senior managers should agree a suitable reward for individual circumstances as appropriate. Other rewards may be given voluntarily to staff who, within the course of their employment, have produced innovative work of outstanding benefit to the NHS. Similar rewards should be voluntarily applied to other activities such as giving lectures and publishing books and articles.

In the case of collaborative research and evaluative exercises with manufacturers, senior managers should see that the health board obtains a fair reward for the input staff provide. If such an exercise involves additional work for a member of staff outside that which is paid for by the health board under his or her contract of employment, arrangements should be made for some share of any rewards or benefits to be passed on the employee(s) concerned from the collaborating parties.

Care should however be taken that involvement in this type of arrangement with a manufacturer does not influence the purchase of other supplies from that manufacturer.

## **20. Failure to Adhere to Standards of Business Conduct**

Anyone who has cause to believe that an employee has failed to comply with any of the requirements of this Policy is encouraged to report their concerns to one of the following in the first instance:

- Director of Corporate Governance
- Local Counter Fraud Specialist (LCFS)

If any health board employee fails to declare an interest, gifts, hospitality, honoraria, sponsorship, or secondary or private employment as defined within this policy, disciplinary action may follow. The action taken will depend on the individual circumstances and will be in accordance with the appropriate policy. Under certain circumstances, failure to follow this policy may be considered gross misconduct.

This also extends to include the inappropriate acceptance of any gifts, hospitality, honoraria and sponsorship.

In addition to any potential disciplinary action being taken if there is any suspicion that fraud, corruption and/or bribery has been or is being committed, all such cases will be reported at the earliest possible opportunity to the LCFS, and investigated in line with the Health Board's Counter Fraud Policy and Response Plan.

Where necessary and appropriate, such breaches will also be reported to the appropriate professional/registration body (e.g. Health Professions Council (HPC), General Medical Council (GMC), Nursing and Midwifery Council (NMC)), for consideration in line with their codes of conduct/ethics or other relevant

policy or procedures. This may result in restrictions being applied, and/or registrations suspended or revoked.

## **21. Equality**

The health board is committed to ensuring that, as far as is reasonably practicable, the way it provides services to the public and the way it treats its employees reflects their individual needs and does not discriminate against individuals or groups.

The health board has undertaken an equality impact assessment and received feedback on the standards of business conduct and the way it operates. The health board wanted to know of any possible or actual impact that this procedure may have on any groups in respect of gender (including maternity and pregnancy as well as marriage or civil partnership issues) race, disability, sexual orientation, Welsh language, religion or belief, transgender, age or other protected characteristics.

The assessment found that there was no impact to the equality groups mentioned. Where appropriate the health board will make plans for the necessary actions required to minimise any stated impact to ensure that it meets its responsibilities under the equalities and human rights legislation.

## **22. Training and Awareness**

All staff are required to comply with this Standards of Business Conduct Policy and it is the responsibility of Units and Department ensure all staff are sufficiently aware of their obligations under the policy. Each executive director, unit director and head of department must also ensure that managers and all staff, clinical and non-clinical, are made aware of the policy provisions and that they are adhered to at all times.

Awareness Sessions which will cover the key principles of the policy will be facilitated by the Director of Corporate Governance upon request.

Awareness of the importance of compliance will require reference to the policy in induction programmes, during Performance Appraisal Development Reviews, Consultant Appraisals, Consultant Job Plan Reviews and at times when members of staff are invited to make declarations.

## **23. Resources**

The implementation and management of the arrangements associated with the policy do not present any significant resource implications to the health board.

## **24. Implementation**

The standards of business conduct will be maintained by the Director of Corporate Governance. Executive directors , unit directors , service and departmental managers need to be aware of their responsibilities for advising employees accountable to them in connection with the policy and the code of conduct.

## **25. Audit and Monitoring**

The Director of Corporate Governance will review the operation of the policy as necessary and any review findings will be submitted to the Audit Committee.

NWSSP – Procurement Services will monitor and audit declarations of interest obtained in accordance with the procurement process outlined in **Appendix 7**.

## **26. Distribution**

The standards of business conduct will be available via the intranet and internet\_sites. Where staff do not have access to the intranet their line manager must ensure that they have access to a copy of this policy.

On a bi-annual basis, the Director of Corporate Governance will circulate a reminder to staff, together with a link to the policy. Staff will also be reminded during login to their PCs and laptops, the need to read and accept the terms of the Standards of Business Conduct Policy and to declare any interests and report offers of gifts, hospitality, honoraria and sponsorship.

Managers also have a responsibility to bring this policy to the attention of their staff. New members of staff will be made aware of this policy as part of the Staff Handbook.

## **27. Review**

Review of this policy will be undertaken no later than three years after the date of approval.

## **28. Further Information**

Further information can be obtained through the documents outlined in section 30 and via the Director of Corporate Governance.

## **29. Acknowledgements**

This policy was based on those in use at Powys Teaching Health Board, Hywel Dda University Health Board, Cwm Taf Morgannwg University Health Board, Cardiff and Vale University Health Board, Velindre NHS Trust and University Hospitals Bristol NHS Foundation Trust. Cardiff and Vale University Health Board and Velindre NHS Trust.

## **30. Further Reading and Sources**

Health board policies and documents which are integral part of the standing orders and standing financial instructions comprise:

- Values and Behaviours Framework;
- Bribery Policy;
- Counter Fraud Policy
- Whistle-blowing Policy

Sources

- DGM (93)84: Standards of Business Conduct for NHS Staff;
- DGM(95)5: Detailed Guidance on Implementing a Code of Conduct and Accountability Finance Guidance Note F35: Guidance on Standards of Conduct for LHB Staff;
- Commercial Sponsorship-Ethical Standards for the NHS, Department of Health;
- Code of Conduct and Accountability, Welsh Assembly Government, 2003;
- WHC (2005) 016 The NHS & Sponsorship by the Pharmaceutical Industry;
- Swansea Bay University Health Board Counter Fraud Policy and Response Plan;
- WHC(2006)090 The Codes of Conduct and Accountability for NHS Boards and the Code of Conduct for NHS Managers Directions 2006



## APPENDIX 1 – STANDARDS OF BUSINESS CONDUCT

The board has described the values which underpin the way that services are provided so that SBUHB will be a flagship health organisation in Wales, with an international reputation for excellence and innovation. To support this intent, all employees must ensure they carry out their roles with dedication and commitment to the health board and its core values.

All staff must have the highest standards of corporate and personal conduct and behave in an exemplary manner based on the following seven principles:

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

To uphold these principles employees and independent members must:-

- Ensure the interests of service users and the public remain paramount;
- Be impartial and honest in the conduct of official business;
- Use NHS resources to the best advantage of the service and the service users, always seeking to ensure value for money;
- Not abuse an official position for personal gain or to benefit family or friends;
- Not seek advantage or to further private business or other interests in the course of official duties, and;
- Not seek or knowingly accept preferential rates or benefits in kind for private transactions carried out with companies, with which they have had, or may have, official dealings on behalf of the health board.

The standards of business conduct outlines the arrangements within the health board to ensure staff comply with these requirements, including recording and declaring potential conflicts of interest and handling of gifts, hospitality and sponsorship (even if these are declined). Further guidance is available via the health board's standing orders.

It is your responsibility to ensure that you are familiar with the requirements of the policy and supporting guidance. The relevance of this information will vary depending on your role within the health board and your interests outside of your employment.

In summary:

**Do:**

- Make sure that you are not in a position where your private interests and NHS duties may conflict.
  - Declare any relevant interests such as:
    - Directorships, including non-executive directorships held in private companies or public limited companies (PLCs);
    - Ownership or part-ownership, of private companies, businesses or consultancies likely or possibly seeking to do business within the health board;
    - A position of authority in a charity or voluntary body in the field of health and social care;
    - A personal or departmental interest in any part of the pharmaceutical or healthcare associated industries that could be perceived as an influence on decision making or on the provision of advice to members of the team;
    - Sponsorship or funding from a known NHS supplier or associated company/subsidiary;
    - Employment where there could be a perceived or actual conflict with NHS duties. This includes the undertaking of private practice;
  - Anything else that could cause a potential for conflict.

**If in doubt declare it!**

- Remember the need to declare an interest also includes those of your close family and possibly friends;
- Seek your line manager's permission before undertaking secondary employment / outside work, in accordance with the employment terms and conditions;
- Obtain your executive director or unit director's permission before accepting any commercial sponsorship to hospitality;
- Declare offers of gifts, hospitality or sponsorship using the appropriate form where required.

**Do not:**


- Accept any gifts from suppliers or commercial organisations unless they are of low value e.g. pens, diaries;
- Accept any gifts over the value of £100 from service users or their relatives, these should be politely declined;
- Accept any inappropriate hospitality or sponsorship from suppliers or commercial organisations;
- Abuse/use your position to obtain preferential rates for private deals;
- Unfairly advantage one competitor over another or show favouritism in your dealings with commercial organisations;
- Use NHS resources for your own private use.

If you need any further guidance please contact the Director of Corporate Governance.





## APPENDIX 2 – DECLARATION OF INTEREST FORM

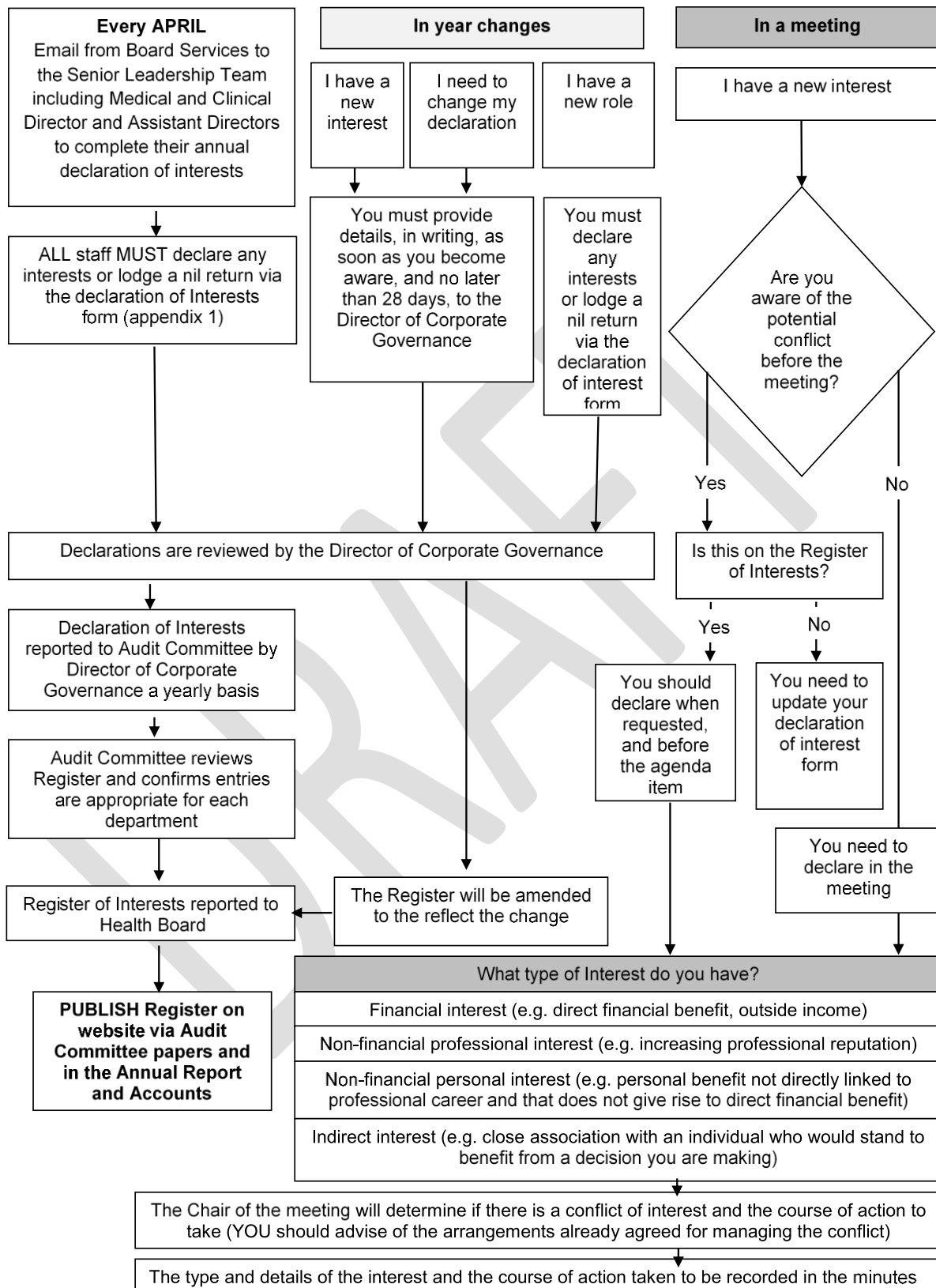
 <p>Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board</p>	<b>Declarations of Interest Form</b>		
<b>Full Name: (Please Print)</b>			
<b>Contact Address:</b>			
<b>Tel No:</b>			
<b>Position Held in Health Board</b>			
<p>In accordance with the Code of Conduct and Accountability, Standing Orders and Standing Financial Instructions. I list below my relevant interests and those of my family for inclusion in the Register of Members' Interests. <b>If in doubt, declare! Proceed to Section h) after noting section f) if you have nothing to declare.</b></p>			
<b>Declaration</b>	<b>Nature of Relationship</b>	<b>Period of Involvement</b>	<b>Financial Transactions or Benefits in Kind</b>
<p>a) <b>DIRECTORSHIPS</b> Public or private appointments, employment or consultancies. Company directorships in private or limited companies</p>	Personal:		
	Spouse/Partner or other Relationship Specific to a Contract or Series of Contracts		
<p>Mitigating Actions (Please tell us what you are doing to avoid a conflict of interest )</p>			

b) <b>INTEREST IN COMPANIES AND SECURITIES</b> Substantial interest is ownership or part ownership, more than 1/100 <sup>th</sup> (i.e. share) of private companies, businesses or consultancies	Personal:		
	Spouse/Partner or other Relationship Specific to a Contract or Series of Contracts		
Mitigating Actions (Please tell us what you are doing to avoid a conflict of interest)			
c) <b>OTHER POSITIONS OF AUTHORITY</b> (Not included in a.) A position of authority (i.e. Director, Chairman. Trustee etc.) in a charity or voluntary body in the field of health and social care	Personal:		
	Spouse/Partner or other Relationship Specific to a Contract or Series of Contracts		
Mitigating Actions (Please tell us what you are doing to avoid a conflict of interest)			

d) <b>PERSONAL OR DEPARTMENTAL SPONSORSHIP</b> a personal or departmental interest in any part of the pharmaceutical industry or Sponsorship or funding from a known NHS supplier or associated company/subsidiary, e.g. Baxter funding research, staff or equipment	Personal:		
	Spouse/Partner or other Relationship Specific to a Contract or Series of Contracts		
Mitigating Actions (Please tell us what you are doing to avoid a conflict of interest)			
e) <b>ANY OTHER INTEREST</b> Any other connection with a voluntary, statutory, charitable or private body that could create a potential opportunity for conflicting interests	Personal:		
	Spouse/Partner or other Relationship Specific to a Contract or Series of Contracts		
Mitigating Actions (Please tell us what you are doing to avoid a conflict of interest)			

f) I undertake to notify the health board of any changes which may occur within four weeks from the date of the change, in writing to the <b>Director of Corporate Governance, SBUHB Headquarters, Baglan.</b>	
g) I confirm that the list accurately reflects my interests and those of my close family and understand that these declarations will be included in the register available <b><i>public inspection</i></b>	
Signed:	Date:
h) I confirm a <b><i>nil declaration</i></b>	
Signed:	Date:
i) <b>Authorisation – To be authorised by relevant line manager/head of service/director as appropriate.</b> <i>(a countersignature is included to confirm that this form has been reviewed by the line manager or unit director and that appropriate safeguards have been indentified to address any conflict of interest that may have been identified)</i>	
Signed:	Date:
j) <b>Review – To be reviewed by Head of Corporate Governance</b>	
Signed:	Date:

## Appendix 2i - Declaration of Interest Flowchart

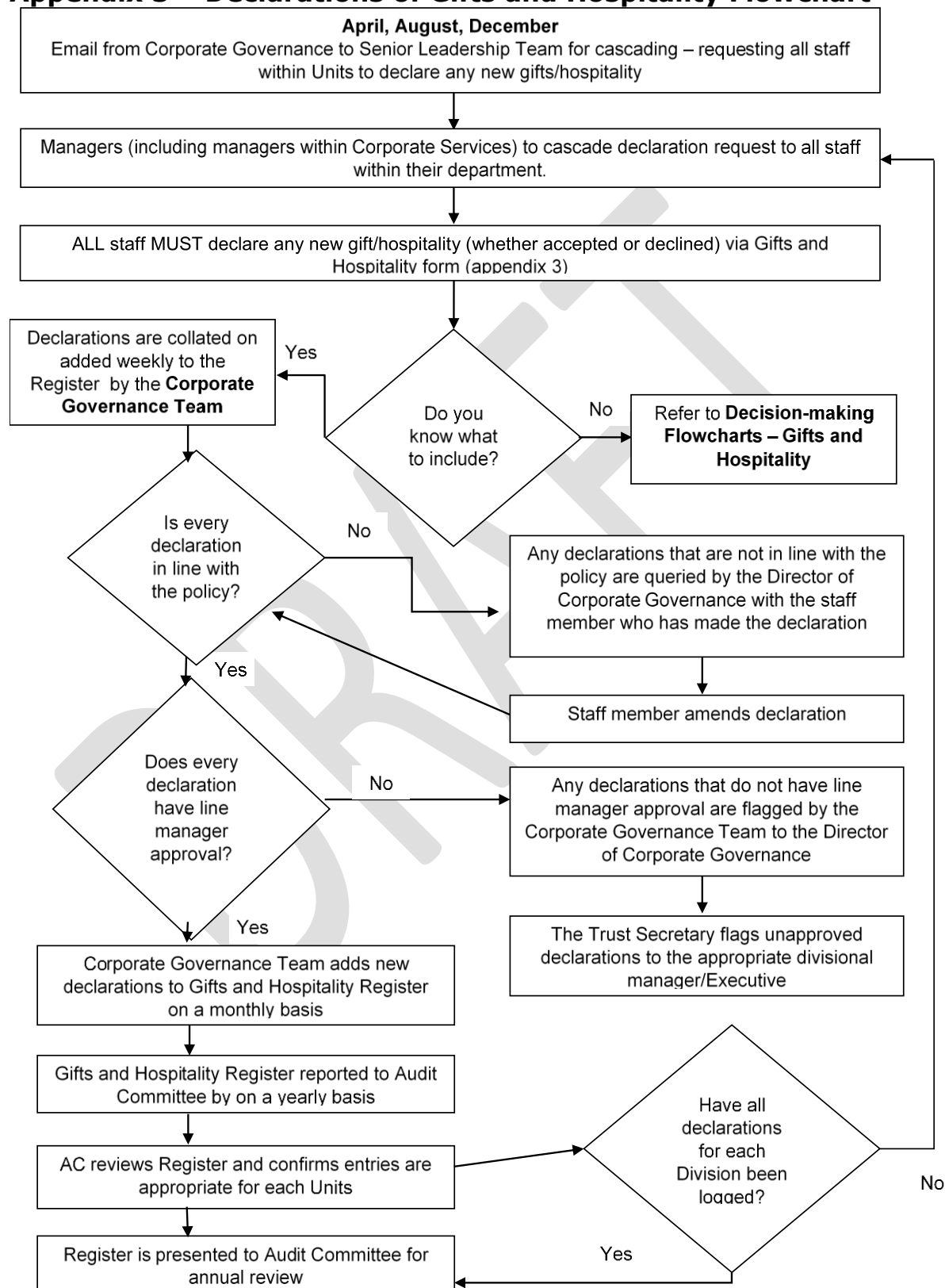




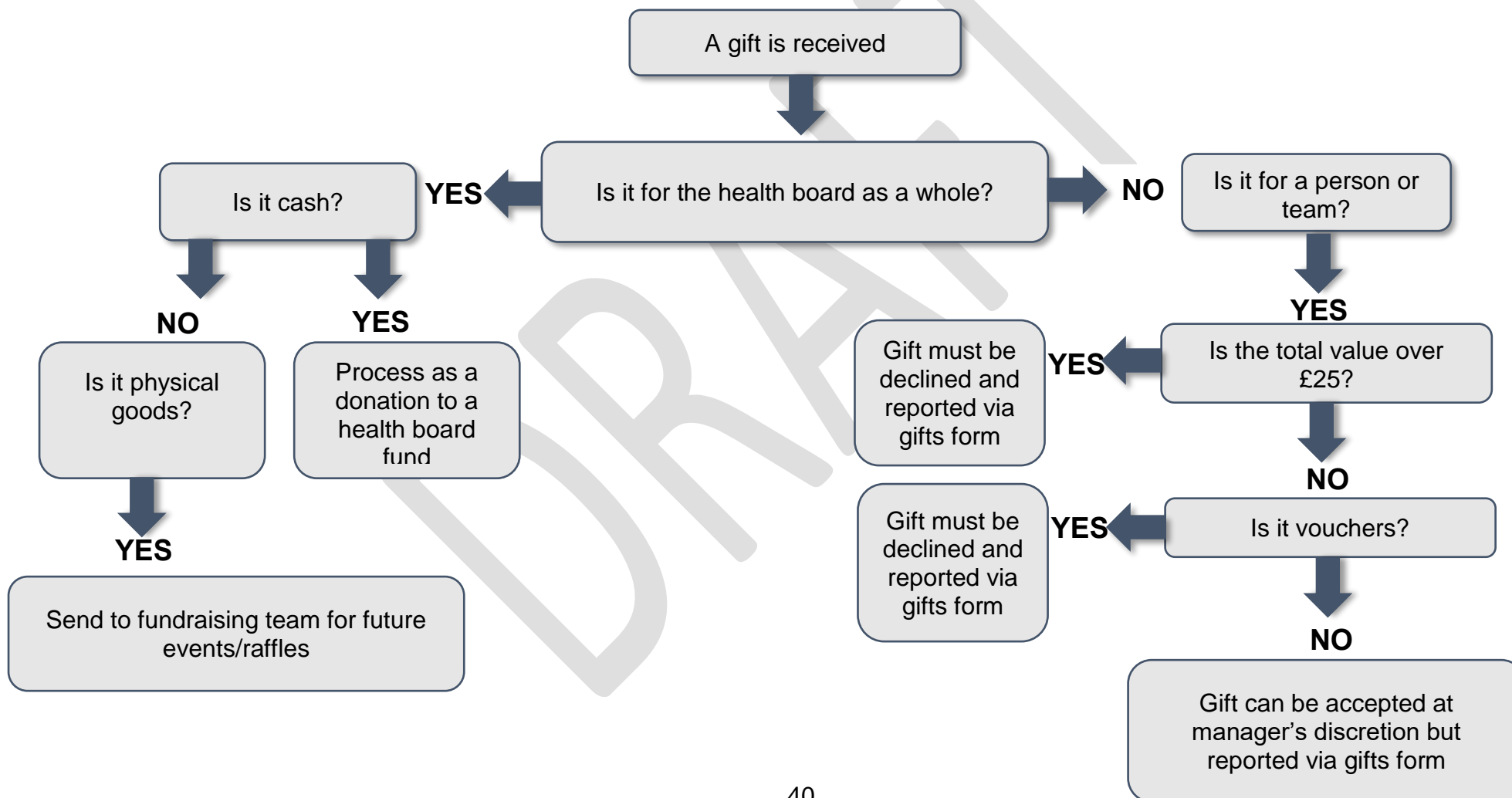
GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board

### Appendix 3 – Declarations of Gifts and Hospitality Flowchart



### Appendix 3i – Guidance for receiving Gifts



	Yes/No	Action Taken
Are there clearly places where gifts/donations can be received?		
Are there procedures in place to distinguish between donated and ordered goods?		
Do staff understand gifts are freely given with no expectation?		
Is there clear documentation for accepting gifts?		
Can the intended recipients be identified?		
Has it been agreed if the health board is accepting gifts?		
Is there a criteria for distribution of goods especially perishable?		
Is there storage available?		
Is there a process to read the benefits of donations		
Can staff refuse if not appropriate?		
Have agreements been set up for staff to bid/request for items subsequent distribution?		



## APPENDIX 3ii.

### SWANSEA BAY UNIVERSITY HEALTH BOARD

#### Form for registering Gifts

This form should be completed by any member of staff who accepts or is offered gifts. The Standards of Business Conduct for Health Board Staff should be referred to for further guidance on gifts and hospitality.

<b>Name (BLOCK CAPITALS)</b>		
<b>Position/Job Title:</b>		
<b>Directorate/Department:</b>		
<b>Donor's Details</b>		
<b>Description of Gift:</b>		
<b>Intended Recipient:</b>		
<b>Date of Offer:</b>		
<b>Value:</b>	£ (approx value or exact value – delete as appropriate)	
<b>Accepted/Declined Offer</b>	Y/N	
<b>If accepted, how was the donation used:</b>		
<b>Signed</b>		Date:
<b>Line Manager Name (BLOCK CAPITALS)</b>		
<b>Signature</b>		Date:
<b>Clinical/Unit Director Name (BLOCK CAPITALS)</b>		
<b>Signature</b>		Date:

Once completed, this form must be forwarded to the Head of Corporate Governance at Health Board HQ (x 3376), for inclusion in the Gifts and Hospitality Register.



### APPENDIX 3iii.

#### SWANSEA BAY UNIVERSITY HEALTH BOARD Form for registering Hospitality

This form should be completed by any member of staff who accepts or is offered hospitality. The Standards of Business Conduct for Health Board Staff should be referred to for further guidance on gifts and hospitality.

<b>Name (BLOCK CAPITALS)</b>		
<b>Position/Job Title:</b>		
<b>Directorate/Department:</b>		
<b>Source of Hospitality:</b>		
<b>Description of Hospitality:</b>		
<b>Date of Hospitality:</b>		
<b>Date of Offer:</b>		
<b>Value of Hospitality:</b>	£ (approx value or exact value – delete as appropriate)	
<b>Accepted/Declined Offer</b>	Y/N	
<b>Signed</b>		Date:
<b>Line Manager Name (BLOCK CAPITALS)</b>		
<b>Signature</b>		Date:
<b>Clinical/Unit Director Name (BLOCK CAPITALS)</b>		
<b>Signature</b>		Date:

Once completed, this form must be forwarded to the Head of Corporate Governance at Health Board HQ (x 3376), for inclusion in the Gifts and Hospitality Register.

## APPENDIX 4

### Request to Receive Permission to Receive Commercial Sponsorship to Attend a Course or Conference

#### 1. Declaration by Member of Staff

##### (a) Details of Course/Conference

Course/Conference title	Date	Location	Cost: £
Brief description of content and benefits of attending: -			

##### (b) Details of Sponsor

Name of Sponsors	Amount of Proposed Sponsorship	Description of fees included in sponsorship	Reasons for Sponsoring

I confirm that sponsorship to attend this course/conference will not in any way influence any recommendations regarding purchasing decisions I need to make.

Name **(please print)**: .....

Post Title: .....

Signature:.....Date:.....

#### 2. To be completed by Clinical/Unit Director

I am writing to confirm that: - *(delete as appropriate)*

- (a) I am satisfied there is no potential conflict of interest, sponsorship may be accepted.
- (b) I am not satisfied there is no potential conflict of interest, sponsorship may not be accepted.

Name **(please print)**: .....

Post Title: .....

Signature:.....Date:.....

**On completion please advise the applicant and forward this form together with the authorised study leave form to the Training Dept and a copy of this form to the Corporate Administration Manager, Health Board HQ (x 3312) for entry into Gifts/Hospitality Register.**

## APPENDIX 5 – Honoraria Declaration Statement



### DECLARATION STATEMENT TAX AND NATIONAL INSURANCE CONTRIBUTIONS IN RESPECT OF HONORARIA

I confirm that I am aware of the personal tax and national insurance contributions responsibilities associated with receiving honoraria payments, as outlined in the health board's standards of business conduct.

I understand that where honoraria is received for events undertaken in my own time (out of normal working hours or on authorised leave) I am **personally liable** for the payment of both tax and national insurance contributions on any honoraria payments received and it is my responsibility to personally declare this income to the inland revenue.

Where an honorarium is received for events undertaken in work time/and or whilst on study leave I will advise the sponsor that the payments should be paid direct to the health board. These funds will then be reimbursed to the appropriate revenue budget.

<b>Print Name:</b>	
<b>Position:</b>	
<b>Signature:</b>	
<b>Date:</b>	

## **APPENDIX 6**

### **PROTOCOL FOR USE OF DECLARATIONS OF INTEREST REGISTER IN THE PROCUREMENT PROCESS**

#### **1. INTRODUCTION**

It is recommended that the health board make active use of the information collected on declarations of interest in order to avoid undue influence and ensure probity in the procurement process.

This protocol details the process to be followed in that regard and should be read in conjunction with relevant procurement policies and procedures which can be found at the NHS Wales Shared Services Partnership – Procurements Services website:

<http://www.procurement.wales.nhs.uk/serviceusers/procurement-services-policies-and-procedures>

The following sections apply to contracts above £5k managed by procurements services. For contracts less than £5k or activities dealt with under devolved procurement the same process should be applied and the relevant procurement policies and procedures adhered to in order to ensure good governance arrangements.

#### **2. INFLUENCE ON PROCUREMENT PROCEDURE**

Interests declaration forms must be issued for contracts above £5k where competitive quotations or tenders are undertaken at relevant stages within the procurement process as defined in the procurement procedures.

The completed form will be held by the procurement lead and will be kept on the procurement tender/contract file, for audit purposes.

Where the procurement lead has concerns about a declared interest, they should refer to the unit director whose options will include:

- To determine whether a conflict of interest exists;
- Seek advice from Director of Corporate Governance or Director of Finance and confirm decision with the procurement lead.

Where a conflict has been identified of a significant or serious nature, the following process must be followed:

- Reference to procurement lead and unit director;
- Referral to Director of Corporate Governance or Director of Finance for immediate decision on appropriateness of inclusion of the “interested party” in the procurement process.

All necessary steps will be taken in order to reach a decision and all decisions will be communicated to the procurement lead in writing within seven days.

A record of all decisions will be retained on the procurement file for audit purposes.

It is recognised that in some cases, the “interested party” will be vital to the procurement process/decision and in these circumstances a senior independent colleague should also be present during the process.



## Interests Declaration Form (Procurement)

The health board, including all hosted organisations, is obliged to ensure that the procurement process is carried out in accordance with the public procurement rules, NHS Guidance and the instructions of the District Auditor's office.

Accordingly, employees/ individuals will not be permitted to participate in any aspect of the procurement, as set out in the table below, or making recommendations in respect of the procurement named below unless they confirm, by signing this form, that they agree to be bound by those rules and instructions and that the statements set out below are correct.

### PROCUREMENT TITLE:

• Procurement Process	• Quotation	•
	• Mini Competition	•
	• Non OJEU Tender	•
	• OJEU Tender	•
• Extent of Involvement • (Please tick all that apply for each stage of the process)	• Market Engagement	•
	• Specification Drafting	•
	• Evaluation Stage (Selection)	•
	• Evaluation Stage (Award)	•
	• Contract Award Stage	•
	• Other	•

### ***Please confirm that the following statements are correct:***

1. Neither I, my family, friends or acquaintances, will receive any benefit or gain (financial or otherwise, directly or indirectly) if the contract is awarded to any of the bidders involved in the process as they become known. ☐

2a. I have no material interest in whether the contract is awarded or not. ☐

2b. I am not in possession of any additional Information in respect of the procurement process. (Save for the information in the 'additional information box below) ☐

3. I currently do not benefit in any way, financially or otherwise, including (but not limited to) the receipt of a grant or outside funding, that could influence my decision in respect of the procurement or any of the bidders involved in this process. ☐

4. I have not received hospitality (other than of a nominal value or that declared in the register of gifts and hospitality maintained by corporate management) or any material gifts, as outlined in the health board's standards of business conduct from any of the bidders involved in the process. ☐

5. I have read, understood and will abide by the NHS Guidance entitled "Standards of Business Conduct for NHS Staff" (DGM (93)84) and the health board's standards of business conduct. ☐

6. By signing this declaration I understand that it is my responsibility that should my circumstance change or a new relationship be established in relation to any bidding organisation, I will consult with the lead procurement contact and am aware that I may be required to complete a new declaration of interest or be required to withdraw my participation. ☐

7. I will keep the identities of the bidders, the content of the bids and procurement documents confidential.

I hereby certify that, to the best of my knowledge and belief, the statements set out above are correct. I understand that any failure on my part to declare an interest in a contract or otherwise to breach the rules and instructions mentioned above is a serious matter and could result in further legal or professional action being taken against me, including (but not limited to):

- Exclusion from the current procurement exercise and future procurement activities
- For health board employees, it could result in disciplinary proceedings being initiated.
- For non-employees of the health board we reserve the right to report the matter to their relevant employing organisation and professional body as potential professional misconduct
- Should the matter involve issues that are of a criminal nature e.g. fraud, bribery or corruption then the health board will notify the appropriate authority to take any necessary action which may include prosecution.

**Additional Information/ Updates Provided During the Process:**

Please include any additional information you feel appropriate to declare in relation to this procurement. If you have no additional information, please state N/A.

**Print Name:****Signed:****Position:****Organisation:****Date:**

## APPENDIX 7 – HOSPITALITY PRINCIPLES



### **Swansea Bay University Health Board Hospitality Principles**

- 1.** Basic hospitality (e.g. sandwiches) at working lunches should normally be reserved for meetings involving staff from outside the health board. Where staff are attending internal training events/meetings they will be expected to provide their own lunch.
- 2.** Tea and coffee will be provided for meetings.
- 3.** All hospitality request forms must be signed by the budget holder and source of funding identified prior to any booking requests being made.
- 4.** Alternative hospitality arrangements may be signed off by an executive or unit director.
- 5.** All functions/events that are funded through external sources can be provided as normal. (However, when accepting external sponsorship/hospitality care must be taken to ensure that the provider of these funds is not, nor could be, an organisation supporting aims in contradiction to those in the NHS. Refer to the health board's standards of business conduct.

## **APPENDIX 8**

### **GUIDANCE ON THE PERSONAL USE OF HEALTH BOARD RESOURCES**

#### **1. INTRODUCTION**

This document should not be seen to cast doubt on the integrity of health board staff. The health board recognises its staff as employees of a public organisation providing services to service users and doing everything they can to act with probity, integrity and openness in the performance of their functions in serving the public. However the commitment of the large majority of staff is affected by examples of poor conduct by a small minority.

The health board is committed to fostering a culture of honesty, propriety, integrity and openness.

#### **2. KEY MESSAGES**

*What is this document all about?*

All aspects of misuse of health board resources. This ranges from:

- Misappropriation of health board property, including consumable stores;
- Deliberate misrepresentation of time records, including shift working, days-off in lieu, annual leave records and sickness records;
- Misuse of health board facilities for individual benefit, including external business interests;
- taking advantage of position within the health board for personal benefit.

*Does this apply to me?*

Yes, it applies to everyone in the health board, whether you are a nurse, doctor, operational services staff, manager, board member, clerical staff or any other occupation.

*So what is the key message?*

All health board staff are expected to maintain the highest standards of honesty and integrity in all aspects of work. Resources within the health board are provided for the direct and indirect provision of service user care and must not be diverted by staff for their individual benefit.

Any level of theft or fraud cannot and will not be tolerated as it has the effect of:

- Reducing resources available for service user care;
- Creating financial pressures on the health board which, ultimately affect the jobs of staff;
- Creating a climate of suspicion and tension which is bad for staff morale and service user care.

Consequently, it is the policy of the health board to instigate an investigation, which could lead to a disciplinary matter where cases of theft or fraud are alleged or where sufficient evidence becomes available.

### **3. MISAPPROPRIATION**

*What do we mean by misappropriation?*

Misappropriation is deliberately taking something that does not belong to you with the view of permanently depriving the health board of it. Unless specifically included within terms and conditions of employment, or provided by the health board for staff use, resources should not be used for the individual benefit of staff.

*But what if the supplies are no good to anyone else?*

It could be argued that if the excess food or the out-of-date dressings are to be thrown away, why not allow staff to enjoy the benefit? However, it can be demonstrated that allowing staff to have leftovers leads to over-ordering and over-catering, which again unnecessarily increases health board expenditure.

*What if I want to take health board property home temporarily?*

This situation might arise where a member of staff has agreement to work from home and needs, say, a laptop computer to carry out the task. This is perfectly acceptable so long as permission to take the equipment off-site has been received in advance from your manager. To ensure that no misunderstandings occur, this permission should be evidenced in writing with a copy being kept with the equipment. Obviously, the equipment should be returned as soon as the task is complete.

*What about surplus equipment?*

It may be that equipment becomes surplus to the health board's requirements (e.g. an old filing cabinet, desk, etc.). In all cases managers must refer the issue to the procurement department for disposal in line with current procedures. If items are, eventually, sold to staff then the payment must be made before it is removed from the site. In their own interests, staff must obtain a receipt, which should be retained with the item when it is being removed. In all circumstances, guidance must be sought from the procurement department to ensure appropriate procedures are followed.

*What about purchasing items for personal use/consumption via health board suppliers at a reduced price?*

The health board does not permit any employee to purchase items for personal use or for personal use by others from health board suppliers.

### **4. TIME KEEPING**

*What is the potential problem?*

The time of the staff is a health board resource in the same way as the buildings and equipment. Indeed, the health board spends a significant

amount of its funding on salaries and wages so it is essential that it receives full value for this expenditure. Obviously, a member of staff may sometimes be late for work or may have to leave early - this is not a problem so long as it is discussed with the supervisor or manager concerned. What is not acceptable, is where the member of staff falsifies time records to disguise absence or to claim attendance - this may be fraud or may amount to obtaining a monetary advantage by deception

*What should I do to avoid the problem?*

Ensure that all time keeping records are accurately completed and, if you notice an inadvertent error, notify your manager immediately. The sorts of records where care should be taken are:

- On-call registers;
- Additional duty hours claims;
- Annual leave records;
- Shift registers;
- Sickness records, including "self-certification";
- Expense claims;
- Bank nurse claim forms;
- Domiciliary visit claims;
- Clock cards; and
- Flexi/time-in-lieu sheets.

## **5. PERSONAL USE OF HEALTH BOARD FACILITIES**

*Please note this section does not relate to private patient activity. There are provisions for clinical staff to use health board facilities for private patient activity which are covered in the private patients policy which staff should refer to for further advice and guidance in these circumstances.*

*What is the potential problem?*

The health board's facilities are devoted to the provision of service user care and are under pressure to meet increasing demand. Consequently, if these facilities are used for private purposes there is likely to be an adverse effect on service user care.

*Does this mean that health board facilities cannot be used for personal use?*  
Not necessarily, speak to your line manager for advice in the first instance.

## **6. IN CASE OF DOUBT**

*What should I do if I am unsure about this guidance?*

In the first instance speak with your line manager.

Further advice and guidance can be sought from the unit director, information governance manager or Director of Corporate Governance.

*What should I do if I am aware of practice that is not in accordance with this policy and/or is causing me concern?*

In the first instance speak with your line manager. If you are not satisfied you should refer to the health board's Raising Concerns (Whistleblowing) Policy where your concerns can be escalated appropriately.

By raising your concerns with your line manager or by implementing the health board's Raising Concerns (Whistleblowing Policy), the health board will ensure;

1. Your concern will be taken seriously and will be investigated;
2. There will be no adverse "come back" on anyone who raises legitimate concerns, i.e. not malicious, even if, once investigated, they prove to be unfounded;
3. Action will be taken on all tip-offs, including those made anonymously. Please refer to the health board's policies on "Raising Concerns (Whistleblowing) Policy" and "Counter Fraud Policy and Response Plan" for full guidance on 'tip-offs'.



## **APPENDIX 9**

### **STAFF CONDUCT OUTSIDE THE WORKPLACE/NORMAL WORKING HOURS**

#### **GUIDANCE NOTES**

##### **1. STATEMENT OF INTENT**

This guidance is designed to inform and remind staff of their contractual responsibilities with regard to their expected conduct whilst attending events connected with the health board that take place outside normal working hours and/or outside the workplace.

The health board would expect that its staff attend and participate normally in any such events such as those mentioned in this guidance and emphasises that these guidelines are simply a reminder to staff of their responsibility to the health board at any such event.

##### **2. RESPONSIBILITIES**

###### **2.1 Health Board Responsibility**

The health board holds vicarious liability for staff conduct during normal working hours and in the work place. This liability also applies whilst members of staff attend business or social events connected with the health board and /or where they are representing the health board at events that take place outside normal working hours and/or outside the workplace.

###### **2.2 Departmental Manager Responsibility**

Departmental managers should ensure that all staff within their department are aware of this guidance. It is advisable that all members of staff are made aware of these guidance notes, especially during times when it is known that events are taking place.

###### **2.3 Staff Responsibility**

Staff should ensure that they are familiar with and adhere to this guidance. Any queries relating to this guidance should be directed in the first instance to their departmental manager, or their local workforce and organisational development lead.

##### **3. STAFF CONDUCT OUTSIDE THE WORKPLACE/NORMAL WORKING HOURS**

When representing the health board on business or social functions, staff should be mindful of the appropriate policies and guidelines. These will include: disciplinary policy and rules, substance misuse at work policy, the dignity at work policy and policies relating to data protection and confidentiality.

These policies, along with others, apply to staff whether it is during normal working hours, in the workplace, or the occasions mentioned above.

Therefore staff have a duty to conduct themselves responsibly in all of these instances.

### **3.1 CIRCUMSTANCES WHEN HEALTH BOARD DISCIPLINARY ACTION MAY BE APPLICABLE**

Under employment law, the health board is able to take disciplinary action if necessary against a member of staff where misconduct has occurred outside the normal hours and place of employment, where it can be proved that the act of misconduct has a connection with their work place or with the employment relationship between the individual and the health board. This includes, but is not limited to, the following circumstances:

- The misconduct affects the health board's reputation or business interests;
  - The misconduct damages the employee's relationship with their colleagues;
  - The misconduct damages the employee's subsequent performance;
  - The misconduct damages the employer's trust in the employee;
  - The misconduct breaches any of the health board's existing policies such as 'disciplinary policy and rules', 'dignity at work', 'data protection and confidentiality' and 'alcohol/drug abuse at work policy and procedure'.
- This list is not exhaustive.

Where a member of staff is considered to have conducted themselves in an inappropriate manner as mentioned above, it can be dealt with through the health board's grievance policy or disciplinary policy via an appropriate investigation.

Any subsequent actions will be taken in accordance with the health board's disciplinary policy.

For further information and guidance please contact your local workforce and organisational development department.

## APPENDIX 10

### DECLARATION OF SECONDARY /SELF EMPLOYMENT

Staff must inform their line manager of any secondary paid work or self-employment, including agency, bank or private work and ensure that any such work does not conflict with their normal contractual employment obligations to the health board. Such work should not involve the use of any confidential or commercial information obtained in the course of their employment with the health board. This does not apply to voluntary work. **(Standards of Business Conduct - Section 18.1)**

<b>Name</b>	
<b>Department</b>	
<b>Job Title</b>	
<b>Assignment number</b>	
<b>Hours of Duty</b>	
<b>Line Manager</b>	

I have read and understood the Standards of Business Conduct for LHB staff, and in accordance with those standards, I hereby declare the following second/self-employment. (This should include private work, agency and/or Bank employment even within this health board).

<b>Name of Employer</b>	
<b>Nature of Business</b>	
<b>Nature of Employment</b>	

<b>Number of hours per week (regular or anticipated)</b>	
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**Declaration:**

**I declare that the information I have given on this form is correct and complete. I undertake to immediately inform the Health Board of any change in the circumstances stated. During periods of sickness absence, I understand that I must not to undertake any other work without the prior written consent of my line manager.**

**Signature.....**

**Date.....**

**Authorised (Line Manager)**

*I have considered the above, and I am satisfied that the nature of the declared second employment is **not incompatible** with the employee's Health Board position. I have explained that to continue to undertake other work during periods of sickness absence without obtaining prior written consent may be considered in breach of contract, and subject to investigation under the Health Board's Disciplinary Policy and/or Counter Fraud Policy.*

**Signature.....**

**Date.....**

***If you feel that the employment stated is not compatible with their Health Board employment, please refer the issue to your HR Team for advice. If you feel there is a potential conflict of interest, please send this form to the Corporate Governance Team.***