DECLARATIONS POLICY

POLICY NO & CATEGORY	CG 04	Corporate Governance
VERSION NO & DATE	4 Final Updated August 2017 to Fit Policy Template	27 June 2017
RATIFYING COMMITTEE or EXECUTIVE DIRECTOR	Workforce Committee approval followed by receipt at the Audit Committee for information	
DATE RATIFIED	27 th June 2017	
NEXT ANTICIPATED REVIEW DATE:	June 2018	
POLICY LEAD	Deborah Lawrenson C Legal Services	ompany Secretary and Head of
POLICY AUTHOR (if different from above)	Deborah Lawrenson	
Governance approval	Approved at Workforce	e Committee
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POLICY CONTEXT:

- As a public sector organisation the Trust has a duty to ensure that it is impartial and honest in the conduct of its business and employees. This policy provides guidance to ensure that staff and independent contractors are clear about the systems and processes in place when seeking sponsorship and the receipt of gifts and hospitality and around declarations of interest.
- The aim of the policy is to provide guidance around declarations
- It defines responsibilities
- It details the process for investigations and management of issues where a 'conflict of interest' has arisen

POLICY REQUIREMENT

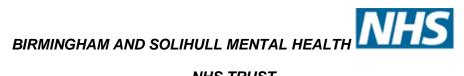
This policy applies to all staff (including Board members) employed by Birmingham and Solihull Mental Health NHS Trust including those holding honorary positions, and also extends to secondees and trainees. As a point of clarification it should be noted that Non-Executive Directors are paid office holders rather than employees, and therefore restrictions around secondary employment do not apply to them. They are required to make declarations of their other relevant employment.

No activity by members of staff or Non-Executive Directors should conflict with the principles set out in paragraph 3.2– Code and Standards of Behaviour.

This policy should be read in conjunction with:

The Code of Practice for the promotion of NHS-funded services (Department of Health, 2008), specifically paragraphs 42-45 (sponsorship)

Commercial Sponsorship: Ethical Standards for the NHS (Department of Health, 2000). Other associated documentation includes the Freedom of Information Act 2000, ABPI Code of Practice for the Pharmaceutical Industry (2014); ABHI Code of Business Practice; NHS Code of Conduct and Accountability (2004); the Trust Standing Orders and Standing Financial Instructions, the Trust Constitution, Intellectual Property Policy, the Counter Fraud and Anti Bribery Policy CG 22; Pay Policy HR10 and other relevant HR policies. NHSE new policy guidance 'Managing Conflicts of Interest in the NHS' came into force on 1st June 2017.



NHS TRUST SPONSORSHIP, GIFTS AND HOSPITALITY, POLICY

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1. <u>Introduction</u>

Health staff, have an obligation to work together and in collaboration with other agencies outside the NHS, with the aim of improving the health of patients being treated and the services provided for them. Accordingly, collaborative partnerships with commercial organisations may have a number of benefits. This policy provides guidance upon the process to be followed should sponsorship, gifts and/or hospitality be offered to any member of staff employed by the Trust by such organisations or generally in the course of the performance of their duties.

The NHS Code of Conduct for Managers 2002

<u>(http://www.nhsemployers.org/SiteCollectionDocuments/Code_of_conduct_for</u> <u>NHS_managers_2002.pdf</u>) emphasises three crucial public service values which must underpin the work of the health service:-

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

Probity – There should be an absolute standard of honesty in dealing with the assets of the NHS; integrity should be the hallmark of all personal conduct in decisions affecting patients, staff and suppliers, and any news or information acquired in the course of NHS duties.

Openness - There should be sufficient transparency about NHS activities to promote confidence between the NHS Authority or Trust and its staff, patients and the public.

If any member of staff is unclear as to whether or not a proposed activity is governed by this policy they should seek advice from the Head of the Legal Department/ Company Secretary

2. Policy

This policy applies to all staff (including Board members) employed by Birmingham and Solihull Mental Health NHS Trust including those holding honorary positions, and also extends to secondees and trainees. As a point of clarification it should be noted that Non-Executive Directors are paid office holders rather than employees, and therefore restrictions around secondary employment do not apply to them. They are required to make declarations of their other relevant employment.

No activity by members of staff or Non-Executive Directors should conflict with the principles set out in paragraph 3.2– Code and Standards of Behaviour.

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3. <u>Procedure</u>

3.1 Code and Standards of Behaviour

- 3.1.1 All staff working at Birmingham and Solihull Mental Health NHS Trust are expected to:
 - act impartially in all their work;
 - comply all times with the terms of The Bribery Act 2010;
 - not misuse their official position or information acquired in the course of their official duties to further their private interests or those of others (please refer to guidelines on confidentiality);
 - ensure that professional registration (if applicable) and/or status are not used in the promotion of commercial products or services;
 - respond to all offers sponsorship for attendance at, travel to or accommodation at a course or conference in compliance with this policy under to processes outlined at paragraphs 3.3 below
 - declare and record financial or personal interests in compliance with this policy under to processes outlined at paragraphs 3.6 below
 - declare and record gifts and hospitality offered and / or received in compliance with this policy under to processes outlined at paragraphs 3.4 and 3.5 below
 - neither agree to practise under any conditions which compromise professional independence or judgement, nor impose such conditions on other professionals.
- 3.1.2 Individuals at Band 8C and above (including senior medical staff) are required to make an annual declaration of interests, relationships with pharmaceutical companies, gifts, hospitality and sponsorship, category 2 work and private practice, outside employment, patents, involvement in Charitable fundraising activity, and involvement in strategic decision making groups and procurement, as outlined in the policy, to the Company Secretary on the forms available in the appendices.

- 3.1.3 Individuals at Band 8C and above (including senior medical staff) are required to keep local registers detailing the same matters, in respect of those staff reporting into them <u>between bands 7 and 8B</u> (or equivalent) using the forms attached. These should be available to view on request for audit purposes.
- 3.1.4 Declarations should be made within 28 days of them arising, and should be made:
 - on appointment with the Trust
 - when staff move to a new role or their responsibilities change significantly
 - at the beginning of a new project/piece of work
 - As soon as circumstances change and new interests arise (for instance in a meeting when interests staff hold are relevant to the matters in discussion)
 - Note Annual declarations will be requested, so if there have been no other declarations made during the course of the year this may be the only declaration some members of staff will need to make
- 3.1.5 Interests will remain on the register(s) for a minimum of 6 months and a private record of historic interests will be retained for a minimum of 6 years. The register of interests of Board members is published on the website and updated regularly through reports to Trust Board in publicly available Board papers. The register of interests for staff at 8c and above is available via the office of the Company Secretary for inspection upon request. Staff are asked to explain, to the Company Secretary, if they have substantial grounds for believing publication of their interests should not take place.
- 3.1.6 Management of interests general

If an interest is declared but there is no risk of conflict arising then no action is warranted. However, if a **material interest** is declared then the general management actions that could be applied include:

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

In these circumstances the Trust will clarify the circumstances and issues with the individual involved, and a written audit trail of information considered and actions taken will be held.

Where there are disputes about the most appropriate management action to take, these should be raised with the line manager in the first instance; and thereafter if required, the relevant HR policy will be followed.

The following sections outline the principles and rules to be followed by staff in common situations, and provides guidance on what information should be declared. Guidance is also provided on the declaration forms.

3.2 Sponsorship

- 3.2.1 The Trust and staff need to ensure they are not put under any undue obligation to a sponsor (or that they become open to accusation), that core business functions are not affected and that they remain impartial. Sponsors should be informed that there should be no overt commercial advantage to them in terms of the direct sale of products or brands as a result of their association with the Trust and their involvement should be seen as secondary to the aims of the Trust. It should be understood that sponsorship does not equate to endorsement, and this should be clear on any promotional materials. Staff responsible for arranging sponsored events are required to ensure these declarations happen.
- 3.2.2 A record of all commercial sponsorship is therefore included in the formal Register of Declarations, Gifts and Hospitality of the Trust, and must be declared to the Company Secretary, who will make the Register available for inspection on request through the Trust's Freedom of Information Act Publication Scheme. This includes any sponsored posts in the Trust. See **appendix 1** for the declaration of interest form, **appendix 2** for declaration of gifts, hospitality and sponsorship and **appendix 3** for the declaration for category 2/fee paying work.
- 3.2.3 A written contract should be put in place to underpin any significant commercial sponsorship over £5,000 in value. The Chief Executive should have prior approval of all such contracts. Before developing any contract, the Trust should undertake a formal assessment to ensure that the intended benefits outweigh the time and resources to manage the sponsorship, and that any risks have been identified (with a plan in place to mitigate principle risks). This should include the risk of being overly dependent on funding, including the possibility that the sponsor withdraws support. The contracts should also include a break clause enabling termination at short notice if necessary.
- 3.2.4 Commercial sponsorships below the level of £5,000 will require approval at Clinical Director or Associate Director level and should be declared to the Company Secretary, by them, through the annual declaration process see **Appendix 2**.

3.2.5 Considerations Prior to Entering a Sponsorship Agreement

Prior to staff entering into any sponsorship agreement there must be a consideration of the following:

• Ensure there are no potential irregularities which may affect a company's ability to satisfy the conditions of the agreement or impact upon it in any

way. This would include checking the company's financial standing and referring to the company's accounts.

- Consider the costs and benefits in relation to alternative options where appropriate. The decision making process must be transparent and defensible.
- Disclosure of confidential information must be legally and ethically appropriate. Additionally, for research purposes, disclosure should not take place without approval of the Head of Research and Innovation, whose team take all research studies through a centrally managed NHS Ethics Committee or the relevant University Ethics committee for student projects.
- Monitor clinical and financial outcomes and ensure break clauses are built in to enable the Trust to terminate the agreement if it becomes apparent that it is not providing expected value for money/clinical outcomes.
- No sponsorship will be accepted from external organisations or bodies who have goals or values in conflict with those of the Trust and the NHS as a whole. This includes organisations "associated with matters that are damaging to health or associated with gambling, alcohol, tobacco, weight control (with the exception of bona fide health promotion and public health interventions such as healthy walks and green gyms'.) or politics", which are specifically proscribed by the Code of Practice.
- Commercial sponsorship from the following sectors requires discretion. Express permission must be sought from the Company Secretary/Head of Legal Services for commercial sponsorship by:
 - Companies potentially in competition with services that we currently provide, or that we may seek to provide in future.
 - Personal financial services.
 - Other legal services
 - Independent sector care homes
- Sponsored posts
 - External sponsorship of a post requires prior approval from the Trust
 - Rolling 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 the Trust has the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise
 - Sponsored post holders must not promote or favour the sponsor's products and information about alternative products and suppliers should be provided
 - Sponsors should not have any undue influence over the duties of the post or have any preferential access to services, materials or

intellectual property relating to or developed in connect with, the sponsored posts.

3.2.6 Inappropriate Sponsorship/Hospitality

All staff must notify the Head of the Legal Department/Company Secretary of any inappropriate offers of sponsorship (i.e. any offer which may cause the member of staff to break any element of the Code of Conduct) within 2 weeks of the offer being made. The Trust Board will be made aware of the inappropriate offer at its next formal Board meeting.

3.3 Gifts

3.3.1 Due to the risk of non-compliance with the Bribery Act 2010, the Trust distinguishes between gifts offered by patients, relatives and service users, and gifts offered by contractors. Staff should not accept gifts that may affect, or be seen to affect, their professional judgement and should not ask for gifts.

3.3.2 Donations offered by patients, relatives and other users of services

Monetary donations from patients, relatives of other users of services may be accepted provided that the procedure contained in the Charitable Funds user guidance is followed. Such donations should be for the benefit of the Trust or specific wards or departments. Monetary donations offered on a personal basis to individual members of staff must without exception be politely but firmly declined.

3.3.3 Gifts under £50 offered by patients, relatives and other users of services

Gifts under the value of £50 offered to individuals by patients or relatives of other users of the service may be accepted. Judgement should be used by the line manager in terms of keeping a record on the Monthly Patient Appreciation and Gifts Monitoring Form given the requirements outlined in 3.4.6. It should be noted that this requirement is simply to ensure the Board is appraised of the positive feedback from service users in the same way that received feedback of complaints made to provide a balanced picture.

3.3.4 Gifts over £50 offered by patients, relatives and other users of services

Gifts over £50 may only be accepted if they are for the benefit of the Trust or specific wards of departments and must be reported to the Line Manger and Company Secretary using the form available at **Appendix 2.** If in doubt guidance can be sought from the Company Secretary before making a declaration.

3.3.5 <u>Gifts offered by potential or actual contractors or suppliers of services /</u> products

Gifts offered by suppliers or contractors doing business (or likely to do business) with the Trust, should be declined, with the exception of low cost branded promotional aids such as pens, diaries or post-it notes, which do not need to be declared unless they are considered to be over the value of £6 in total. A pragmatic approach should be taken to such declarations by line managers, with any gifts declared using the form provided at **Appendix 2**

3.3.6 Gifts should be declared if the value of several small gifts, from the same, or from a closely related source, total £50 over a 12 month period. Staff are expected to inform their manager of any gifts received and if in doubt should consult the Company Secretary for advice on whether or not something should be declared.

3.4 Hospitality

- 3.4.1 Modest hospitality provided it is normal, reasonable and secondary to the purpose of the meeting may be accepted. This is likely to be valued at under £25 and need not be declared. The costs involved must not exceed the level which the recipients would normally accept when paying for themselves at such an event and that which could be reciprocated by the NHS. This includes refreshments, meals, travel and accommodation.
- 3.4.2 Offers of hospitality valued at between £25 and £75 may be accepted but must be declared to the Company Secretary using the form provided at **Appendix 2**.
- 3.4.3 All offers of hospitality exceeding levels outlined above, should be declined, unless there are exceptional circumstances, in which case senior approval is required and a clear reason why it is acceptable should be recorded on the register. Where there is a doubt whether or not to accept the Company Secretary should be consulted.
- 3.4.4 Individuals at Band 8C or above should also include the hospitality on the Annual Declaration form at **Appendix 2.**
- 3.4.5 Any member of staff who has been in receipt of hospitality, is responsible for ensuring the procurement department are made aware of the hospitality, if the company or organisation involved is participating, at that time, in any procurement processes and their involvement should be limited as appropriate.
- 3.4.6 Individuals at 8c and above (including senior medical staff) are required to make an annual declaration of interests, relationships with pharmaceutical companies, gifts, hospitality and sponsorship, category 2 work and private practice, and so on as outlined in this policy, to the Company Secretary, and to keep local registers in respect of those staff reporting into them below 8c level.
- 3.4.7 Modest offers to pay some or all travel and accommodation costs related to attendance at events may be accepted and must be declared. Offers beyond modest or which are of a type the organisation itself might not usually offer (such as business or first class travel and accommodation including domestic travel and **all offers** of foreign travel and accommodation), should only be accepted in exceptional circumstance and need senior approval with a reason provided to the Company Secretary on why it was permissible. Where there is doubt the Company Secretary should be consulted.

3.5 Declarations of Interest

- 3.5.1 Staff must not engage in any other employment or have any outside business interests, whether financial or otherwise, which are prejudicial to the interests of the Trust, which *may* cause a conflict of interest, or which *may* bring the Trust into disrepute. See contracts of employment for further information.
- 3.5.2 A central register will be held by the Company Secretary. The aim of a staff register is to identify those activities and interests which are relevant because they might be interpreted as carrying a risk of bias in the individual's duties.
- 3.5.3 An interest need only be declared if it is relevant to their duties and there is therefore a risk of it being *reasonably* perceived as biasing their decisions while conducting those duties. The following notes are designed to assist those making declarations to decide as impartially as possible whether to declare an interest:
 - The test which applies is whether "an external observer, knowing the facts of the situation, would reasonably think that the person might be influenced by the interest";
 - In case of doubt, the presumption is always in favour of declaring an interest: if a person is in doubt whether to register an interest, that means they should register it;
- 3.5.4 The exact nature of the interest will vary according to personal circumstances but the following paragraphs provide examples of interests which should be declared
 - prejudice the interests of the Trust,
 - cause a conflict of interest, and/or
 - bring the Trust into disrepute.
- 3.5.5 Company: Any relationship held by you or any close family connection with a named company with which the Trust might do business, including the Trust's own subsidiaries. Such interests would include:
 - ownership or part ownership;
 - share-holdings or other beneficial interest such as options, warrants etc. (Only share-holdings above the 3% notifiable level need be declared);
 - directorships
 - paid employment
 - partnerships, consultancy
 - companies involved in procurement processes with the Trust
 - patents

- 3.5.6 Other relevant employments;
 - Any position of authority held in another public body, trade union, charity, voluntary body; professional bodies, or other association, or external bodies;
 - Any connection with a voluntary or other body contracting for NHS services;
 - Any involvement in joint working arrangements with Clinical (or other) Suppliers;
 - Self-employment: names of any relevant client with whom the Trust might do business which accounts for more than 5% of your total annual earned income.
- 3.5.7 In all of the above, staff are not expected to quantify the extent of a financial interest, merely the fact that one exists.
- 3.5.8 Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises including:
 - Where they practice (name of private facility)
 - What they practice (speciality, description of the nature of the private practice)
 - When they practice (identified sessions/time commitment)
 - Action taken to mitigate against any conflict

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

- Seek prior approval of the Trust before taking up private practice
- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work (these provisions already apply to Hospital Consultants by virtue of paras. 5 and 20, Sch.9 of the terms and conditions – consultants (England) 2003.

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

3.5.9 Patents or intellectual property rights held (either individually or by virtue of association with a commercial or other organisation), should be declared, including where applications to protect have started, or are ongoing, which are, or might reasonably be expected to be, related to items to be procured or used by the organisation. Staff should seek prior permission from the Trust before entering into any agreement with bodies regarding product development, research and work on pathways for example, where this impacts on the organisation's own time, or uses its equipment, resources or intellectual property. Where holding of patents and other intellectual property

rights gives rise to a conflict of interest then the general management actions outlined in the Declarations policy should be considered and applied to mitigate the risks.

3.6 Charitable Funding

- 3.6.1 Charitable trust fund accounts must not contain non charitable monies. Trustees should ensure that items which do not have charitable status are removed from charitable trust fund accounts. Further guidance on charitable funding can be obtained from "NHS Charities Guidance 2012 and the Executive Director of Finance
- 3.6.2 Donations made by suppliers or bodies seeking to do business with the Trust should be treated with caution and not routinely accepted. If, in exceptional circumstances there is senior agreement to a donation being accepted a clear reason should be recorded
 - Staff should not actively solicit charitable donations unless this is a prescribed or expected part of their duties at the Trust, or it is being pursued on behalf of the Trust's registered charity or other charitable body and is not for their own personal gain
 - Staff must obtain permission, if in their professional role, they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign for a charity other than the Trust's own
 - Donations, when received, should be to a specific charitable fund (never to an individual) and a receipt issued
 - Staff wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring they take personal responsibility for ensuring any tax liabilities related to such donations are properly discharged and accounted for

The Trust has processes in place in respect of the management of the Trust Charity and a Charitable Funds Committee overseeing this on behalf of the Board.

3.7. Strategic Decision Making Groups

- 3.7.1 The Trust uses a range of groups to make decisions around such things as:
 - Entering into or renewing large scale contracts
 - Awarding grants
 - Making procurement decisions
 - Selection of medicines, equipment and devices

The requirements of this policy should be applied to any group making such decisions.

3.7.2 Chairs of these groups should

- Consider any known interests of members in advance and begin each meeting by asking for declarations
- Members should take personal responsibility to declare material interests both in advance and at the start of meetings as they arise
- Any new interests should be added to the declarations register
- The vice chair or another non-conflicted person should chair all or parts of a meeting where the Chair themselves has an interest which may prejudice their judgement
- 3.7.3 Where there is an actual or potential interest the Chair will use their judgement in managing the risk but may consider whether
 - The person should be asked to not attend the meeting
 - Exclude them from receiving papers relating to their interest
 - Excluding them from all or parts of the discussion and decision
 - Noting nature of interest but deeming it appropriate for them to remain and participate
 - Removing them from the group or process altogether

3.8. Procurement

- 3.8.1 Procurement should be managed in an open and transparent way, compliant with procurement and other relevant law. The process should be conducted in a way that does not constitute anti-competitive behaviour or discrimination of or favour to any provider. Please also refer to the Standing Financial Instructions.
- 3.8.2 Those involved in procurement exercises should keep records showing a clear audit trail for how conflicts of interest have been identified and managed, as part of **any** procurement process. At every stage this should be checked to ensure the integrity of the process. If you require advice please contact the Head of Procurement or the Company Secretary.

3.9 Identifying and reporting breaches

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

- 3.9.2 Staff who are aware of actual breaches of this policy, or who are concerned that there has been or may be, a breach, should report these concerns to the Company Secretary if they require signposting to the correct policies to follow; or if they ar clear of the route should follow the appropriate policy in escalating the issue.
- 3.9.3 Please refer to processes outlined in this policy as well as the Counter Fraud and anti-Bribery Policy, raising concerns (whistleblowing policy), Relationships at Work policy, Job Planning Policy, Intellectual Property Policy, Pay Policy, approval of research projects, Relationships between BSMHFT and the Pharmaceutical Industry policy, Significant Transactions policy, Business Development Policy and other HR or governance policies as required.
- 3.9.4 The Trust will investigate each reported breach according to its own specific facts or merits and give relevant parties the opportunity to explain and clarify any relevant circumstances. Following investigation, and in line with the approaches outlined in the relevant policy being followed, the organisation will:
 - Decide if there has been or there is the potential for a breach and so its likely severity
 - Assess whether further action is required in response involving any staff member and their line manager at a mimumum
 - Consider who else inside or outside of the organisation should be made aware
 - Take appropriate action
- 3.9.5 Breaches could require action in one or more of the following ways (again this would be done in line with whichever Trust policy was deemed most appropriate to follow in each individual case):
 - Clarification or strengthening of existing policy, process and procedures
 - Consideration as to whether HR/employment law/contractual action should be taken
 - Consideration as to whether escalation to external parties is needed such as (external auditors, NHS Protect, the Police, statutory health bodies such as NHSE, NHSI or the CQC) and or health professional regulatory bodies.
- 3.9.6 Sanctions should not be considered until the circumstances surrounding the breaches have been properly investigated, however sanctions, if required, may involve:

- Informal action
- Formal disciplinary action
- Reporting incidents to external bodies for them to consider if further investigation is required
- Contractual action
- Legal action such as investigation under fraud, bribery and corruption legislation.
- 3.9.7 The Audit Committee will receive an annual anonymised report on breaches, impact of these, action taken and any learning taken forward.

4. Responsibilities

This table summarises defined responsibilities relevant to this policy.

Post(s)	Responsibilities	Ref
All Staff	To declare gifts, benefits, interests and sponsorship of any kind as required by the policy	
Clinical and Corporate Directors and Associate Directors and Heads of Services	To ensure declarations are made in accordance with the policy by themselves to the Company Secretary and to them by their staff for holding in a local register	
Chairs of decision making groups (see section 4 for the types of groups this applies to)	To ensure declarations are captured in the manner outlined in the policy and action taken as required	
Director of Finance and Heads of Finance, Estates and Procurement as well as CDs and Ads and Heads of Professions	To ensure audit trails are in place for decisions made and declarations received throughout all procurement and financial decision making processes.	
Executive Lead	Company Secretary	
Policy Lead	Company Secretary/Head of Legal Services responsible for reviewing and updating the policy; providing advice, training and support for staff on how interests should be managed; managing the register of interests for senior staff 8c and above, and ensuring registers are being held locally and auditing the policy, process and procedures relating to the national guidance requirements at least every three years.	

5. Development and Consultation process consisting of:

	Consultation	n summary	1
Date policy issued for consultation		1 st July 2016	3
Number of versions proc	luced for consultation	1	
Committees / meetings v discussed	vhere policy formally	Date(s)	
Meeting with LNC and B	MA representatives	14 July 2016	3
Meeting with LNC and B	MA representatives	28 July 2016	6
Workforce committee		30 August 2	016
Audit Committee		21 Septemb	er 2016
Trust Board (Feedback f received for information)		28 September 2016	
Joint LNC		29 September 2016	
Workforce Committee for approval		25 October	
Audit Committee for info clarification	rmation/points of	23 Novembe	er 2016
The updated policy June 2 consultation on the change nationally set. However a cplace at:	es required, as they are	th	
JNCC		7 th June 201	-
The updated polic members including	y shared with JNCC g LNC and BMA	15 th June 20	17
Executive Team m		12 th June 20	17
 Workforce Committee Audit Committee 		27 th June 20	
Audit Committee		19 th July 201	17
Where received	Summary of feed	lback	Actions / Response

6. Reference Documents

- Pay Policy
- Job Planning Policy
- Counter Fraud and Anti-Bribery Policy
- National policy Managing Conflicts in the NHS (NHSE 2017)
- Intellectual Property Policy
- Raising concerns policy
- Coe of Practice for promotion of NHS Funded Services (DOH 2008)

Commercial sponsorship – ethical standards for the NHS (DOH 2000)

7. Bibliography

None

8 Glossary

8.1 Definitions

8.1.1 For the purpose of this policy, commercial sponsorship is defined as: -

Funding provided to the Trust or its staff from an external non- NHS source for any purpose, including but not restricted to the following:funding of all or part of the cost of a member of staff, NHS research, staff training, pharmaceuticals, equipment, meeting rooms, costs associated with meetings, meals, funding for sponsored posts, gifts, hospitality, hotel and transport costs (including trips abroad), provision of free services (e.g. speakers), buildings or premises.

8.1.2 A gift may be described as:

An object or item given for the benefit of a specific individual. Patient, ward or department or the service. Examples may be boxes of chocolates, a portable television or a ticket for an event.

8.1.3 A donation is:

A gift of money. Donations may only be accepted for the benefit of the ward, service or department. The procedure followed in the Charitable Funds Policy

8.1.4 Active Bribery is defined as:

'offering or giving a bribe to another person to perform an illegal, unethical or other action which breaches trust, or to reward a person for performing such an action'.

8.1.5 Passive Bribery is defined as:

'requesting, agreeing to receive or accepting a bribe to perform a function or activity improperly, irrespective of whether the recipient of the bribe request or receives it directly or through a third party and irrespective of whether it is for the recipient's benefit'.

8.1.6 *'Trust Resource'*, for the purposes of declarations regarding Cat 2 and fee paying work, includes use of Trust buildings, office use, printing, stationary, secretarial support (phone calls, report writing etc

– note any secretarial support for typing up reports must be done outside of Trust time), equipment or postage and accessing notes. For the avoidance of doubt the time shifting process allows for up to 4 hours per week to be time shifted for category 2 fee paying work. Ideally the work should be done in your own time or time shifted within the levels allowed, if you are intending to undertake the work during normal working hours. Otherwise the contribution fee will be payable

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

It may be:

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

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

9 Audit and Assurance consisting of:

An annual review will be undertaken and a report submitted to the Audit Committee on all aspects of the compliance with the policy.

Element to be monitored	Lead	ΤοοΙ	Frequency	Reporting Arrangements
Central Register of Declarations (for staff at 8c and above)	Company Secretary with Board Support Officer	Electronic/ Form	Annual request for declarations Quarterly for Cat 2 fee paying work declarations	Annual report to Audit Committee
Local registers of Interest for staff between bands 7 and 8c	Solicitor in Legal team to seek assurance and audit these are in place. Responsibility for ensuring they are the 8Cs or equivalent and above/line managers	Electronic/ Form	Annually Quarterly for Cat 2 fee paying work declarations	To be available on request for audit purposes
MHA assessment rota	Medical Director (via MHA team)	Electronic	Quarterly and Annually	To be provided quarterly to the Company Secretary for reference not yet in place
Central record of payments for Cat 2 and fee paying work	Deputy Director of Finance	Electronic	Quarterly and Annually	To be provided quarterly to the Company Secretary for reference

10. <u>Appendices</u>

See Appendices 1 – 4 for declaration forms and guidance and the equality assessment

Appendix 1

This form is to be used for <u>annual declarations</u> as well as for new <u>declarations</u> as they arise, within 28 days of them arising, during the financial year

You will be formally asked to make your annual declaration.

- By the Company Secretary for staff at 8c and above
- By the CD/AD or Head of Service as appropriate, for staff between bands 7 and band 8B

It is the individual staff member's responsibility, to ensure that any further declarations that arise throughout the year are declared immediately to ensure we capture them on our registers.

Declaration of material interests should be made

- On appointment with the Trust
- When staff move to a new role or their responsibilities change significantly
- At the beginning of a new project/piece of work
- As soon as circumstances change and new interests arise (for instance, in a meeting where interests staff hold are relevant to the matters in discussion)

Birmingham and Solihull Mental Health Foundation Trust

Declaration of Interest form

Name:Job Title....

Dated

	Declaration of Interests form		
Dec	laration of Interest	Details	
1	Shareholding, personal or financial interest held by yourself or an immediate family member in any publicly listed, private or not-for- profit company, business, partnership or consultancy which is doing, or might reasonably expect		

 to do business with the NHS. (Shareholdings in excess of 3% and directorships should be stated). This includes relationships with pharmaceutical companies There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts. Please state type of business, trading name and address, your role with the organisation, relevant dates, and any other relevant information such as action taken to mitigate any potential conflict. If none are held please write this in the space provided. 	(SI dir inc ph Th or inv of <i>Ple</i> <i>tra</i> <i>win</i> <i>da</i> <i>inf</i> <i>mi</i>	
 Secondary employment - Details of all secondary employment (private and fee-paying work including the provision of advice, undertaking presentations, lectures or tours of instruction). A single declaration of any weekly/regular commitment given in job planning or in review/appraisal and on this annual declaration –is sufficient). In those cases where you have a regular relationship that would need to be specifically named Please state name of employer and role, time commitment, relevant dates, name of private facility, what they practice and when (identified sessions/time commitment) and any action taken to mitigate a potential conflict. If no such work has been 	all an pro pre ins an giv rev de cas rel spe <i>Ple</i> <i>rol</i> <i>da</i> <i>the</i> <i>se</i> <i>ac</i>	2

	undertaken please write this in the	
	space provided.	
	Patents	
	T dients	
	Patents or intellectual property	
	rights held (either individually or by	
	virtue of association with a	
	commercial or other organisation),	
	should be declared, including where	
	applications to protect have started	
	••••••	
	or are ongoing, which are, or might	
	reasonably be expected to be,	
	related to items to be procured or	
	used by the organisation.	
	Please state name and role with the	
	organisation concerned, description	
	0	
	of the patent, relevant dates and	
	any action taken to mitigate a	
	potential conflict	
3	Any other interest you feel should	
Ŭ	be declared in line with section 3 of	
	this Policy including loyalty interests [see guidance note for details] or	
	which are relevant to cross referred	
	policies in section 3.9.3 such as the	
	relationships at work policy	
	If there are no such interests, please	
	write this in the space provided	

Guidance notes

Clinical private practice

Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises including:

- Where they practice (name of private facility)
- What they practice (speciality etc)
- When they practice (identified sessions/time commitment)

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

- Seek prior approval of the Trust before taking up private practice
- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work (these provisions already apply to Hospital Consultants by virtue of paras. 5 and 20, Sch.9 of the terms and conditions – consultants (England) 2003.

Patents

Patents or intellectual property rights held (either individually or by virtue of association with a commercial or other organisation), should be declared, including where applications to protect have started or are ongoing, which are, or might reasonably be expected to be, related to items to be procured or used by the organisation.

Staff should seek prior permission from the Trust before entering into any agreement with bodies regarding product development, research, work on pathways etc, where this impacts on the organisation's own time, or uses its equipment, resources or intellectual property

Where holding of patents and other intellectual property rights gives rise to a conflict of interest then the general management actions outlined in the Declarations policy should be considered and applied to mitigate the risks.

Loyalty Interests

Loyalty interests should be declared by staff involved in decision making where they:

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

Appendix 2

Birmingham and Solihull Mental Health Foundation Trust Declaration of Gifts, Hospitality and Sponsorship form

Name:Job Title....

Dated

This form is to be used for annual declarations as well as for declarations as they arise during the financial year

Annual Declarations of Gifts/ Hospitality and Sponsorship NOTE This must include any received or offered and declined from pharmaceutical companies	
Declaration of Gifts	Details
Gifts valued at over £50 offered by patients, relatives and other users of services, whether accepted or declined <i>Please state description and value of gift and</i> <i>name of donor, date accepted/declined and</i> <i>any action taken to mitigate against a conflict</i> <i>and details on any approvals given to depart</i> <i>from the terms of the declarations policy</i> <i>(continue on a separate sheet if necessary).</i> <i>If none please write this in the space</i> <i>provided.</i>	
Gifts valued at over £6, in total, offered by potential or actual contractors or suppliers of services/products, should be declared and in some circumstances declined. A pragmatic approach should be taken to such declarations by line managers	
Please state description and value of gift and name of donor, date accepted/declined (continue on a separate sheet if necessary. If none please write this in the space	

provided.	

Note

Gifts of low value, from the same or a closely related source, which have accumulated across the year to a total of approximately £50 in value, should be declared to the line manager to log locally, and to advise if a formal declaration is needed. If in doubt consult the Company Secretary

Declaration of Hospitality	Details
Hospitality received valued at between £25 and £75, whether accepted or declined should be declared. Hospitality over £75 should be declined unless there are exceptional circumstances and this requires senior approval to be given, and recorded on the register.	
If there is nothing to declare write none in the space provided.	
Travel and accommodation	
Modest offers to pay some or all of the travel and accommodation costs of attendance at events may be accepted but must be declared.	
Offers which are beyond modest (i.e. of a type the Trust would not normally offer) need senior approval and should only be accepted in exceptional circumstances and must be declared with a clear reason given on the register as to why this is acceptable. A non-exhaustive list of examples includes:	
 Offers of business or first class travel and accommodation including domestic travel Offers of foreign travel and accommodation 	
Also see guidance note below	
Declaration of Sponsorship	Details

Sponsorship for attendance at a course or conference, whether accepted or declined. Detail on any sponsored posts.	
Please state description and value of sponsorship and name of sponsor, date accepted/declined (continue on a separate sheet if necessary).	
If none please write this in the space provided.	
Also see guidance note below	

Guidance notes

When considering whether or not acceptance of an offer of sponsorship or hospitality is appropriate ask yourself the following questions:

- Can you confirm that neither you, the Trust nor the sponsoring organisations will receive any undue inducement as a result of this if the answer is No then do not continue
- Have you ensured best value by approaching several potential sponsors (if value >£5000)?
- Is a contract in place to cover this arrangement? (Yes please provide a copy If NO, explain how the reputation of the Trust and any income from this partnership will be safeguarded)
- Will there be sponsors from the Excluded or Discretionary list in this scheme
- What are the details of the project, will it involve sharing patient data, will it lead to higher costs elsewhere in the Trust, what are the termination arrangements?
- Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event.
- Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. This can be accepted, and must be declared if modest and reasonable. Approval of line manager is required and should be noted as having been received.
- If in doubt seek advice from the Company Secretary.

Extract from The Medicines (Advertising) Regulations 1994 as amended

Inducements and Hospitality

21. (1) Subject to paragraphs (2) and (4), where relevant medicinal products are being promoted to persons qualified to prescribe or supply relevant medicinal products, no person shall supply, offer or promise to such persons any gift, pecuniary advantage or benefit in kind, unless it is inexpensive and irrelevant to the practice of medicine or pharmacy.

"(2) The provisions of paragraph (1) shall not prevent any person offering hospitality (including the payment of travelling or accommodation expenses) at events for purely professional or scientific purposes to persons qualified to prescribe or supply relevant medicinal products, provided that—

(a) Such hospitality is strictly limited to the main scientific objective of the event, and professionals.

(3) Subject to paragraph (4), no person shall offer hospitality (including the payment of travelling or accommodation expenses) at a meeting or event held for the promotion of relevant medicinal products unless—

(A) Such hospitality is strictly limited to the main purpose of the meeting or event, and

(b) The person to whom it is offered is a health professional."

(4) Nothing in this regulation shall affect measures or trade practices relating to prices, margins or discounts which were in existence on the 1st January 1993.

(5) No person qualified to prescribe or supply relevant medicinal products shall solicit or accept any gift, pecuniary advantage, benefit in kind, hospitality or sponsorship prohibited by this regulation.

Commercial sponsorship checklist

1. Excluded Advertisers

Advertising from the following sectors is excluded in **all** circumstances:

- Organisations "associated with matters that are damaging to health or associated with gambling, alcohol, tobacco, weight control or politics."
- The promotion of prescription-only drugs to the general public or other promotion that contravenes that ABPI Code of Practice to the Pharmaceutical Industry.
- Pornography or other companies involved in sexual exploitation of adults or children
- Firearms
- Legal services which overtly promote compensation and personal injury services, and claims management companies acting on their behalf

2. Discretionary Advertisers

Advertising from the following sectors may only be considered on a case-by-case basis with the approval of the Head of Legal Services

- Companies potentially in competition with services that we provide, or may seek to provide in future.
- Personal financial services.
- Other legal services.
- Independent sector care homes

3. Approval Procedure

Please:

- Complete go through the above and discuss with your Director before commencing any discussions regarding commercial sponsorship on behalf of the Trust.
- Ensure permission is sought from the Company Secretary/Head of Legal services in advance if you intend to seek sponsorship from "discretionary advertisers".
- Sponsored posts
- External sponsorship of a post requires prior approval from the Trust
- Rolling 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 the Trust has the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise
- Sponsored post holders must not promote or favour the sponsor's products and information about alternative products and suppliers should be provided
- Sponsors should not have any undue influence over the duties of the post or have any preferential access to services, materials or intellectual property relating to or developed in connect with, the sponsored posts.

With regard to relationships with Pharmaceutical companies you should include:

- Detail on shares, salary, retainers, consultancy fees, advisory boards (dates and duration of the interest)
- Fees for speaking at or chairing any meetings on behalf of the pharma company
- Fees for provision of training services
- Payments related to attendance at Advisory Board meetings

- Any fees or expenses paid
- Attendance at sponsored educational events (including registration fees, costs of accommodation and travel, both inside and outside of the UK)
- Educational grants/sponsorship study leave
- Research grants
- Hospitality
- Donations, grants and benefits in kind provided to either yourself as an individual or to the organisation

Members of the Pharmacological Therapies Committee are also required to provide a declaration to the Chair of that committee and those declarations will be accepted by the Company Secretary. There is no need to declare twice but a cross reference should be provided on this annual form.

To be returned to:

Deborah Lawrenson, Company Secretary/Head of Legal Services

Chief Executives Office, Unit 1, B1 Trust HQ, 50 Summer Hill Road, Ladywood, Birmingham, B1 3RB.

Appendix 3

Birmingham and Solihull Mental Health Foundation Trust

This form is to be used for QUARTERLY DECLARATIONS

CATEGORY 2 (and other fee paying work) DECLARATION FORM

Mental Health Act (MHA) and Other Fee Paying (OFP) work which needs to be declared at the end of every quarter, and recorded locally in Job Planning or through RMS

- MHA undertaken during rota time no fee payable even if Trust resource used; where an assessment is required outside of the 9 – 5 rota, which would normally have been picked up through the rota, and where an assessment has to take place on Trust premises, Trust resources may be used and no fee will be payable
- MHA / OFP work undertaken in own time (evenings, annual leave) no Trust resource used (other than accessing notes as required) – no fee payable
- MHA / OFP work undertaken in own time but Trust resource used Fee payable therefore include on the form
- MHA /OFP work undertaken in Trust time (time-shifting) no Trust resource used – no fee payable – we DO however need this to be recorded on the form so we have a central record of how much time shifting is taking place
- MHA /OFP undertaken in Trust time (time-shifting) Trust resource used fee payable and declared on form.

Note

'Trust Resource', for the purposes of declarations regarding Cat 2 and fee paying work, includes use of Trust buildings, office use, printing, stationary, secretarial support (phone calls, report writing etc – note any secretarial support for typing up reports must be done outside of Trust time), equipment or postage and accessing notes (if the work is being undertaken outside of Trust hours and requires access to notes the fee will not be payable). Similarly if the work is being undertaken outside of Trust hours but **must** take place on Trust premises, resources may be used and the

fee will not be payable.

For the avoidance of doubt the timeshifting process allows for up to 4 hours per week to be time shifted for category 2 fee paying work. Ideally the work should be done in your own time or time shifted within the levels allowed, if you are intending to undertake the work during normal working hours. Otherwise the contribution fee will be payable as outlined.

Other fee paying work (OFP) could include payments for other activity undertaken during Trust time and using Trust resource, which has not been time shifted, such as drafting of court reports etc

If a staff member is asked to deliver a lecture during Trust time, the lecture fee should be paid directly to the Trust. Consent should be sought in advance from the relevant line manager and this will not be unreasonably withheld.

Time shifting can take place for up to 4 hours per week but will need to be recorded on job plans or in supervision meetings. Exceptions for further time can be agreed with the line manager, if appropriate, for example where it is in the interest of justice for a staff member to attend court to give evidence or if they are undertaking an assessment required by the court or if they are visiting prisons to undertake assessments.

NAME			
JOB TITLE			
ADDRESS			

Period covered

Please insert the relevant dates

For the time period above please insert detail of each Category 2 or other fee paying activity undertaken (where fees to the Trust would be payable), the fees received and the fees payable to the Trust.

There is a flat fee of £50.00 for use of Trust Resources for each episode, where this is due. You are only required to pay this if you have earned above the di-minimus level of £150 for the episode concerned. Fee(s) due (please detail below):

I confirm that the number of Category Two reports or fee paying episodes declared above is an accurate record for the period of time indicated and request that an invoice be drafted in order that I may provide a cheque for payment of the fee required.

The number and nature of the declarations made is consistent with detail recorded as part of my job plan and appraisal, and requirements of the Pay Policy. I understand that this return may be selected for an Audit Review.

Signed

Print

Date

Clinical Director or Executive Director Confirmation (as appropriate)

The above declaration appears to be reasonable and is consistent with the declarations made to me during the year in line with the requirements of the Pay Policy.

Signed

Print

Date

To be returned to:

Deborah Lawrenson, Company Secretary/Head of Legal Services

Chief Executives Office, Unit 1, B1 Trust HQ, 50 Summer Hill Road, Ladywood, Birmingham, B1 3RB.

The Company Secretary will pass a copy of this form to the Deputy Director of Finance for processing receipt of payment.

FINANCE USE ONLY

Date received	Selected for Audit	YES / NO
Cheque on C/S		
No.		

Equality Analysis Screening Form

A word version of this document can be found on the HR support pages on Connect <u>http://connect/corporate/humanresources/managementsupport/Pages/default.aspx</u>

Title of Proposal	Dec	Declarations Policy						
Person Completing this pro	posal Deb	Deborah Lawrenson Role or title Company Secretary						
Division	Chi	ef Executive's	Office	Service Area	Corporate			
Date Started	lun	e 1 st 2017		Date completed	Updated and approved at Workforce Committee June 27			
Date Started	June 1 2017 Date completed		2017					
Main purpose and aims of the proposal and how it fits in with the wider strategic aims and objectives of the organisation.								
This policy was already in pl	ace. It has been update	d to reflected	national rec	quirements which came	e into force in June 2017			
Who will benefit from the J	proposal?							
The organisation and staff								
Impacts on different Person	nal Protected Character	r <mark>istics –</mark> Helpfu	Il Questions.	<u>.</u>				
Does this proposal promote	equality of opportunity	?		Promote good com	munity relations?			
Eliminate discrimination?				Promote positive at	ttitudes towards disabled people?			
Eliminate harassment?				Consider more favo	ourable treatment of disabled people?			
Eliminate victimisation?				Promote involveme	ent and consultation?			
	Protect and promote human rights?							
Please click in the relevant impact box or leave blank if you feel there is no particular impact.								
Personal Protected	No/Minimum	Negative	Positive Please list details or evidence of why there might be a positive, negative or no					
Characteristic	Impact	Impact	Impact	ct impact on protected characteristics.				
Age								
Including children and peop		•						

Is it easy for someone of any age	to find out about y	our service o	r access you	r proposal?		
Are you able to justify the legal or lawful reasons when your service excludes certain age groups						
Disability						
Including those with physical or se	ensory impairment	ts, those with	learning dis	abilities and those with mental health issues		
Do you currently monitor who has	s a disability so tha	nt you know h	iow well you	r service is being used by people with a disability?		
Are you making reasonable adjust	ment to meet the	needs of the	staff, service	e users, carers and families?		
Gender						
This can include male and female	or someone who l	nas complete	d the gende	r reassignment process from one sex to another		
Do you have flexible working arra	ngements for eithe	er sex?				
Is it easier for either men or wom	en to access your J	proposal?				
Marriage or Civil Partnerships						
People who are in a Civil Partners	hips must be treat	ed equally to	married cou	ples on a wide range of legal matters		
Are the documents and information	on provided for yo	ur service ref	lecting the a	appropriate terminology for marriage and civil partnerships?		
Pregnancy or Maternity						
This includes women having a bab	This includes women having a baby and women just after they have had a baby					
Does your service accommodate t	he needs of expec	tant and pos	t natal moth	ers both as staff and service users?		
Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?						
Race or Ethnicity						
Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees						
What training does staff have to respond to the cultural needs of different ethnic groups?						
What arrangements are in place to communicate with people who do not have English as a first language?						
Religion or Belief						
Including humanists and non-believers						
Is there easy access to a prayer or quiet room to your service delivery area?						
When organising events – Do you take necessary steps to make sure that spiritual requirements are met?						
Sexual Orientation						

Including gay men, lesbians and b	isexual people						
Does your service use visual imag	es that could be people fi	rom any backgrour	nd or are the image	es mainly heterosexua	l couples?		
Does staff in your workplace feel	comfortable about being	'out' or would offi	ce culture make th	em feel this might not	t be a good idea?		
Transgender or Gender	gender or Gender						
Reassignment							
This will include people who are in	n the process of or in a ca	ire pathway chang	ing from one gend	er to another			
Have you considered the possible	e needs of transgender sta	aff and service use	rs in the developm	ent of your proposal c	or service?		
Human Rights							
Affecting someone's right to Life,	Dignity and Respect?						
Caring for other people or protect	ting them from danger?						
The detention of an individual ina	dvertently or placing som	neone in a humiliat	ing situation or po	sition?			
If a negative or disproportionate	impact has been identifi	ed in any of the ke	ey areas would thi	s difference be illegal	/ unlawful? I.e. Would it be		
discriminatory under anti-discrim	nination legislation. (The	Equality Act 2010	, Human Rights Ac	t 1998)			
	Yes No – it would not						
What do you consider the level	²¹ High Impact Medium Impact Low Impact No Impact						
of negative impact to be?							
If the impact could be discriminatory in law, please contact the Equality and Diversity Lead immediately to determine the next course of action. If the negative							
impact is high a Full Equality Analysis will be required.							
If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the Equality and							
Diversity Lead before proceeding.							
If the proposal does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with							
any required redial actions, and fo	orward to the Equality an	d Diversity Lead.					

Action Planning:

How could you minimise or remove any negative impact identified even if this is of low significance?

Discussions took place with unions in development of the policy

How will any impact or planned actions be monitored and reviewed?

The implementation of the policy will be reviewed at Workforce Committee and at Audit Committee

How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.

This is not relevant. The policy is applicable to staff regardless of personal protected characteristics.

Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at <u>hr.support@bsmhft.nhs.uk</u>. The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.

Full Equality Analysis Form

Title of Proposal	Declarations policy (updated)					
Person Completing this proposal	Deborah Lawrenson Role or title Company Secretary					
Division/Department	Chief Executive's Office	Service Area	Corporate			
Date Started August 2 nd 2017		Date completed	August 2 nd 2017			
Looking back at the screening tool, in what areas are there concerns that the proposal treats groups differently, unfairly or disproportionately as a						
result of their personal protected chara	acteristics?					
There should be no issues in terms of this. The policy applies to all staff indicated within the policy regardless of personal protected characteristics						
Summarise the likely negative impacts		Summarise the likely	positive impact			
NA		NA				

What previous or planned consultation or research on this proposal has taken place with groups from different sections of the community?						
			provide list of s consulted.	Summary of consultation / research carried out or planned. If already carried out, what does it tell you about the negative impact?		
Group(s) (Community, service user, stakeholders or carers		JNCC EXECUTIVE WORKFORCE AUDIT COMMITTEE				
Staff Group(s)		The ori	ginal policy			
		was co	nsulted upon in			
		2017 v	ia connect			
What up-to-date	information or data is available about the different g	roups t	he proposal may	y have a negative impact on?		
None						
Are there any ga	os in your previous or planned consultations, resea	rch or ir	nformation? If so	o are there any other experts, groups that		
could be contact	ed to get further views or evidence?					
Yes		No	No			
If yes please list below						
As a result of this Full Equality Analysis and consultation, what changes need to be made to the proposal? (You may wish to put this						
information into an action plan and attach to the proposal)						

Will any negative impact now be: Low: Legal: Justifiable: Will the changes made ensure that any negative impact is lawful or justifiable? Yes Yes Have you established a monitoring system and review process to assess the successful implementation of the proposal? Please explain how this will be done below. Yes via workforce committee Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic? By offering to speak to staff groups about implementation of the policy	None						
Will the changes made ensure that any negative impact is lawful or justifiable? Yes Have you established a monitoring system and review process to assess the successful implementation of the proposal? Please explain how this will be done below. Yes via workforce committee Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Will any negative impact nov	v be:					
Yes Have you established a monitoring system and review process to assess the successful implementation of the proposal? Please explain how this will be done below. Yes via workforce committee Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Low:	Legal:	Justifiable:				
Have you established a monitoring system and review process to assess the successful implementation of the proposal? Please explain how this will be done below. Yes via workforce committee Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Will the changes made ensu	re that any negative impact is law	ful or justifiable?				
how this will be done below. Yes via workforce committee Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Yes						
Yes via workforce committee Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Have you established a mon	itoring system and review proces	s to assess the successful imp	lementation of the proposal? Please explain			
Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	how this will be done below.						
Through discussions at workforce committee and if needed with JNCC How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Yes via workforce committee						
How will any impact or planned actions be monitored and reviewed? Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Action Planning: How could	you minimise or remove any nega	ative impact identified even if the	his is of low significance?			
Through quarterly and annual reporting through workforce committee and audit committee How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	Through discussions at workforce committee and if needed with JNCC						
How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?	How will any impact or planned actions be monitored and reviewed?						
How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic?							
result of their personal protected characteristic?	Through quarterly and annual reporting through workforce committee and audit committee						
	How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a						
By offering to speak to staff groups about implementation of the policy	result of their personal protected characteristic?						
	By offering to speak to staff groups about implementation of the policy						

Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at hr.support@bsmhft.nhs.uk. The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.