

# **Gifts, Hospitality Sponsorship Policy (and Guidance)**

**Document Control Sheet**

**TITLE: Gifts, Hospitality and Sponsorship Policy**

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<b>LEAD AUTHOR'S NAME</b>	<b>Jane Downes</b>
<b>LEAD AUTHOR JOB TITLE</b>	<b>Company Secretary</b>
<b>ACCOUNTABLE DIRECTOR</b>	<b>Chief Executive</b>
<b>APPROVED BY (1)</b>	<b>Executive Directors Group</b>
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## 1. INTRODUCTION

- 1.1. As a public sector organisation, Airedale NHS Foundation Trust (ANHST) has a duty to ensure its resources are utilised effectively; it must be impartial, honest and transparent in the conduct of its business and all of its staff must be beyond suspicion in every decision made and action taken.
- 1.2. The issue of accepting and offering **gifts, hospitality, entertainment, corporate and charitable donations and sponsorship (referred to hereafter simply as 'gifts and hospitality')** can leave both individuals and organisations vulnerable to accusations of unfairness, impropriety, partiality and deceit. This can lead to accusations, investigations, financial damage, untold reputational damage and public distrust.
- 1.3. It is imperative that decisions made by ANHST staff in relation to the offering and accepting (or declining) of gifts and hospitality must be approached in an open, transparent, proportionate, reasonable and accountable manner and, importantly, must be able to withstand both internal and external scrutiny.
- 1.4. This policy is intended to provide clear advice and assurance to staff, patients, clients, those whom we do business with and any other relevant or interested parties that we have in place and adhere to proper procedures in relation to gifts and hospitality.
- 1.5. This should:
  - limit individuals being put in a position where they may be accused or questioned personally or professionally in relation to their conduct;
  - limit the Trust's risk to reputational damage;
  - minimise the risk of bribery and corruption; and,
  - avoid offending business associates, patients and their families, and others who may occasionally offer us gifts and hospitality in the course of our work.

## 2. SCOPE

- 2.1. This policy applies to all Trust employees, including:
  - the Council of Governors;
  - Executive and Non-Executive Directors; Associate Directors
  - Directorate Managers;
  - Departmental Managers;
  - all clinical and administrative staff;
  - students;
  - temporary/agency/contract staff;
  - seconded employees; and,
  - non-employees who are acting for, or on behalf of, ANHST such as contractors, consultants and volunteers.

For ease of reference, this policy will refer to this group simply as 'staff' or 'personnel'.

- 2.2. This policy is intended to cover the decisions and actions of this staff grouping in relation to gifts and hospitality, as well as to offers or the acceptance of corporate gifts, donations and commercial sponsorship, and also to any gifts or hospitality made to the Trust's own charity.

## 3. KEY PRINCIPLES

- 3.1 The Trust, as referred to throughout its Corporate Governance Manual, complies with the 7 Nolan Principles on Standards in Public Life, as well as

- the NHS Code of Conduct and NHS Standards of Business Conduct, which require that Trusts maintain explicit and robust procedures covering gifts and hospitality and that personnel act with honesty and integrity at all times.
- 3.2 All ANHST staff must apply these principles during the course of their NHS employment. Similarly, all other parties, both voluntary and those under contract, when entering into a relationship with the NHS are expected to abide by the same requirements

#### 4 POLICY STATEMENT

- 4.1 This policy's guiding principle is that you must not accept gifts, hospitality or other benefits of any kind from a third party which might be seen to compromise your own personal or professional integrity and judgement, or the reputation of ANHST.
- 4.2 In practice, the range of potential situations is so wide and diverse that judgement as to whether or not to accept a gift or hospitality can be difficult; however the guiding principle is that a common-sense approach should be applied at all times. The sub-sections below should help to provide guidance where issues may not be clear-cut.
- 4.3 There is no 'de minimis' limit prescribed in relation to offers or acceptance of gifts and hospitality within the NHS; it is the responsibility of individual health bodies to put in place common-sense arrangements. Consequently, **it is the policy of ANHST that any offer or acceptance of a gift or hospitality perceived to exceed £25 must be declared on the declaration form at Appendix A, which will be entered onto the ANHST Gifts and Hospitality Register** (the 'Register') by the nominated Register Administrator within the Executive Office.
- 4.4 **Personal acceptance of cash or gift vouchers (or the equivalent) is not acceptable and ANHST does not permit such practice.**
- 4.5 Gifts or hospitality should never be solicited or requested. The acceptance of any gifts or hospitality must not give rise to any perception that the recipient's judgement or integrity has been compromised.
- 4.6 Although acceptance of gifts and hospitality perceived to exceed £25 may be permitted, subject to approval, careful consideration needs to be made before acceptance. The recipient must make it clear that no obligation, or perception of any obligation, is placed upon them by the acceptance of any gift or hospitality.
- 4.7 If it is difficult to assess the monetary value of a gift or hospitality then any offer or acceptance of such must also be recorded in the Register.
- 4.8 Regardless of value, the responsibility is on you to make sure that if you do accept a gift or hospitality in the course of your work, that it is appropriate, reasonable and justifiable in the circumstances and cannot be misconstrued. ***You are accountable for the decisions that you make and the actions you take.***
- 4.9 You must think about the following:
- the context in which the offer has been made;
  - the person or organisation offering the gift or hospitality;
  - its value and nature;
  - the possible effect on your position;
  - whether the gift or hospitality could influence you, or be seen by a third person as likely to influence you, in any way;
  - would embarrass you or the Trust if anyone found out about the gift, or if it was made public; and,
  - how you would feel if you read about it in a newspaper?

### **Approval and Acceptance of Gifts and Hospitality**

- 4.10 All gifts and hospitality over £25 require appropriate Senior Manager, General Manager or Director approval. This must be prior to acceptance unless circumstances make this impractical, in which case the gift or hospitality must be reported and registered at the earliest opportunity thereafter (and no later than one week (7 days) after the gift or hospitality was received) for appropriate consideration and, if warranted, retrospective approval.
- 4.11 In respect of the Board and Council of Governors:
- Executive Directors will obtain approval from the Chief Executive
  - Non-Executive Directors and the Chief Executive will obtain approval from the Chair of the Board
  - The Chair of the Board will obtain approval from the Chair of the Audit Committee
  - The Council of Governors will obtain approval from the Chair of the Council of Governors

### **Timing of Gifts and Hospitality**

- 4.12 The timing of gifts and hospitality must be taken into account and particular attention paid to offers of gifts and hospitality made at times when they could improperly affect, or be perceived to improperly affect, the outcome of an actual or potential business transaction.
- 4.13 Therefore, ANHST do not permit the offer or acceptance of any gift or hospitality to or from any interested party at the time of tenders (not even small low value items which may otherwise be deemed acceptable in different circumstances). This applies to both staff and their immediate family.

### **Offers Refused**

- 4.14 Please remember, it is important to declare and have inserted in the Register offers of gifts and hospitality even if you have declined them, e.g. because they were of an inappropriate or lavish nature. This allows the Trust to monitor frequency and value issues which we may need to be aware of and, also openly indicates to others that we turn down any inappropriate and disproportionate gestures.

**Remember:** in cases of doubt, ALWAYS seek the advice of your Senior Manager, General Manager or a Director.

## **5. POLICY GUIDANCE**

### **5.1 GIFTS**

#### **You may accept**

- 5.1.1. Gifts which are trivial and of low intrinsic value, which do not have to be declared on the Register, such as:
- Low value promotional gifts such as pens, diaries, calendars etc inscribed with the provider's name, which staff may keep for their personal use.
  - Conventional small value tokens of gratitude from patients or their families such as chocolates, fruit or flowers (or similar).
- 5.1.2. These types of gift can easily be distinguished from more expensive or substantial items which normally should not be accepted. If you are in any doubt, or feel uncomfortable accepting such items, you

should consult your Senior Manager, General Manager or Director as to an appropriate course of action or response.

#### **You should not accept**

- 5.1.3. gifts on a larger scale or value than those described above (excluding exceptional circumstances, as detailed below);
- 5.1.4. goods or services provided by a business contact or Trust supplier/contractor, for personal benefit, at nil or reduced cost, e.g. building or maintenance work on your own or close relative's house. In such circumstances, notification must be made to the Director Finance in the first instance. The Chief Executive will hear any unresolved dispute with their decision being final.
- 5.1.5. any gifts which may be construed as inappropriate (i.e. alcohol-based gifts offered to staff on a substance dependency unit). See below for further guidance.
- 5.1.6. In cases of doubt, staff must seek Senior Manager, General Manager or Director advice.

#### **Exceptional Circumstances**

- 5.1.7. It is recognised that there may be exceptional circumstances to the general rules and principles of this policy, e.g. where refusal of a gift will clearly offend a donor, cause embarrassment or appear discourteous; or, where an expensive or perishable gift has arrived without prior warning. In such cases, the appropriate Senior Manager, General Manager or Director (and, if judged necessary, taking instruction from the Director of Finance) may decide whether the offer of a particular non-conventional gift can be accepted and/or disposed of in an appropriate and suitable manner.
- 5.1.8. The Senior Manager, General Manager or Director must decide on the course of action, for example:
  - thank the donor indicating that a recipient is allowed to accept the gift;
  - return the gift to the donor with a suitable, politely worded letter explaining the terms of this policy and stating that the gift cannot be accepted; or,
  - use or dispose of it, if possible, by ANHST or via its charity, e.g. share out perishables that are impractical to return to the donor or donate a bottle of champagne to the Trust charity for raffling etc.

***Decisions must be documented to enable subsequent scrutiny.***

#### **Personal Gifts from Business Contacts to Staff**

- 5.1.9. Where a business relationship has developed into personal friendship, which exists outside the Trust's business environment, personal gifts may be exchanged on occasions such as birthdays, Christmas, retirements. This is acceptable provided that the person giving the gift, and not their employer, pays for any gift made to you. If in any doubt, you may wish to discuss the position with your Senior Manager, General Manager or Director.

### **Trust Gifts to Business Contacts or Staff**

5.1.10 Similarly, the Trust's resources may not normally be used to make personal gifts to business contacts or staff. However, if in exceptional circumstances it is proposed to make a gift (e.g. to a staff member who is recuperating after an illness, or as a small gesture of appreciation to a member of staff who has perhaps undertaken out-of-hours work to organise an event), your Senior Manager, General Manager or Director should approve any proposal in advance. It should be made clear that there is no element of inducement involved and that the gift should not be reciprocated.

### **Cash Gifts and Gift Vouchers**

5.1.11 Personal acceptance of cash or gift vouchers (or the equivalent) is not acceptable and ANHST does not permit such practice. It is easier to conceal cash gifts and they are more likely to be viewed as a bribe or inducement rather than fair business practice, or a trivial/conventional gift.

5.1.12 If the donor agrees, their cash offer or vouchers - up to a maximum of £25 only - may be approved and accepted only by a Senior Manager, General Manager or Director and must be sent to the Cash Office without delay to be donated to the ANHST charitable funds (cash) or next suitable charity raffle (gift vouchers). In either case, the donor must be provided with a receipt.

5.1.13 The Senior Manager, General Manager or Director who approved the acceptance - and not their staff - will be held accountable for the safe-keeping and delivery to the Cash Office of any accepted cash or gift vouchers. All offers or acceptance of cash or gift vouchers must be declared and placed in the Register.

5.1.14 If any offers of cash or gift vouchers above £25 are made, then the donor should be informed of how they are able to make a contribution to the ANHST charity if they so wish. Details of how to donate to ANHST's charity are available from the Company Secretary or Charity Treasurer on request and any donations will be dealt with by Charitable Funds Committee.

5.1.15 Inappropriate gifts are not acceptable even if they fall below the £25 acceptable threshold limit as indicated in this policy. *'Inappropriate'* may include gifts offered by a patient who is believed not to be of sound mind; gifts of a nature that are socially unacceptable or not in keeping with NHS or specifically the Trust's aims, principles and standards; or, gifts which could cause offence to a reasonable person. Staff must use their judgement on a case-by-case basis although they should always seek the advice of their Senior Manager, General Manager or Director if in any doubt as to what is, or could be construed as, inappropriate.

### **Repeated Small Gifts**

5.1.16 Repeated small gifts from the same source under the threshold of £25 could cumulatively be deemed inappropriate, or a bribe, and therefore once the £25 threshold has been reached (or estimated to have been reached) within any 12 month period then all such gifts/hospitality must be declared to the employee's Senior Manager, General Manager or Director and registered. It is the responsibility of the individual employee to exercise their judgement with regard to when the repetitious giving of small gift items becomes an issue warranting disclosure and registration.

### **Trade or Discount Cards**

5.1.17 Trade or discount cards (other than those negotiated corporately by the Trust on behalf of its staff) by which a staff member might benefit from the purchase of goods or services at a reduced price are classified as gifts and should be politely declined and, if already accepted, returned to the sender. If in doubt seek Senior Manager, General Manager or Director advice.

### **ANHSFT Promotional Items**

5.1.18 The purchase and distribution of approved ANHSFT promotional items for visitors/guests at events and such like are not considered to be gifts in relation to this policy.

### **Borderline Cases and Disputes**

5.1.19 All borderline cases which cannot be decided by agreement with the Senior Manager, General Manager or Director should be reported by that Senior Manager, General Manager or Director to, and decided by, the Director of Finance. Further disagreement, dispute or uncertainty should be made to the Chief Executive whose decision will be final.

5.1.20 All decisions relating to borderline cases and disputes must be adequately documented and records retained for subsequent scrutiny.

## **5.2 HOSPITALITY**

5.2.1. Modest hospitality is an accepted courtesy of a business relationship, whether with regard to an organisation's own staff or to third parties; however, hospitality can also be used as an influential marketing and promotional activity and may be deemed inappropriate for a public body to provide or accept.

5.2.2. Consequently, this is an area where staff must exercise careful judgement and a sense of balance and, if in any doubt, must always seek the advice of their Senior Manager, General Manager or Director, or the Trust Director of Finance before offering or accepting any hospitality.

5.2.3. The key principle to be applied in the decision-making process is that the **hospitality must have a clear business reason** and not just be for staff, their colleagues' or their family's personal enjoyment.

5.2.4. **Hospitality should:**

- ✓ be justifiable and able to withstand internal and external scrutiny – apply the 'newspaper test', i.e. what would you think if you read about it in a newspaper?
- ✓ have a clear business reason;
- ✓ be secondary and proportionate to the business reason requiring it;
- ✓ be socially acceptable and appropriate in the circumstances;
- ✓ be of a conventional nature and be reasonable, e.g. conventional working lunches or light refreshments in the course of a business meeting, or simple evening meal;
- ✓ be of a scale and frequency that the NHS would reasonably provide (to third parties), i.e. modest and occasional;

- ✓ constitute good value for money when being provided by ANHST.

✓

#### 5.2.5. **Hospitality should not:**

- ✗ be just for staff, their colleagues' or their family's personal enjoyment;
- ✗ be lavish, extravagant, or out of proportion to the occasion;
- ✗ cause any embarrassment to the recipient or risk reputational damage to ANHST;
- ✗ pose any frequency patterns that may give rise to suspicion;
- ✗ be solely to reciprocate hospitality offered or received on some previous occasion;
- ✗ be considered the 'norm' when conducting business;
- ✗ be deemed by others to have been influential in making any business decision as a consequence of giving or receiving the hospitality.

#### **Inappropriate Hospitality or Entertainment**

- 5.2.6. Inappropriate hospitality or entertainment is not acceptable even if it falls below the £25 acceptable threshold limit as indicated in this policy. *'Inappropriate'* may include hospitality or entertainment offered by a patient or their family; hospitality or entertainment of a nature that is socially unacceptable or not in keeping with either NHS principles and standards or the Trust's objectives; or, hospitality and entertainment which could cause offence to a reasonable person. Staff must use their judgement on a case-by-case basis although they should always seek the advice of their Senior Manager, General Manager or Director if in any doubt as to what is, or could be construed as, inappropriate.
- 5.2.7. Visits to contractors or potential contractors (or similar) must be made at the Trust's expense and not the contractor's. Exception to this rule may be granted by the Director of Finance or Chief Executive, and documented, where reasonable. Otherwise, only minimal hospitality should be accepted from a contractor or potential contractor and an immediate explanation must be given to the Director of Finance or Chief Executive if a breach of the rules occurs.

#### **Internal and External Hospitality**

- 5.2.8. ANHST does not maintain a separate central corporate hospitality budget. Responsibility and discretion for providing internal and external hospitality is devolved to individual budget holders, i.e. Departmental Heads and Directorate. Expenditure is monitored by ANHST Finance Managers for appropriateness, and any concerns raised with the Director of Finance. Any such hospitality that staff receive that is of a value exceeding £25 must be declared and recorded on the Register for transparency.
- 5.2.9. Internal hospitality should only be considered in limited circumstances where, for example, meetings or short courses are required through lunch with no break or outside of normal working hours. Hospitality should follow the above principles and be limited to proportionate light refreshment. The provision of alcohol is not permitted.

- 5.2.10. Similarly, the provision of external hospitality by ANHST to representatives of other organisations should be modest and appropriate to the circumstances. In all instances, the expenditure involved must constitute good value for money. The use of public monies for hospitality purposes at meetings, conferences and seminars etc should be carefully considered. The Trust needs to be able to demonstrate good value and transparency in committing public funds.
- 5.2.11. In all circumstances, whether ANHST provides hospitality to staff or visitors/guests internally or externally, the **event organiser** on behalf of all attendees/delegates must make a declaration to the Register recording the necessary details. **Appendix B** is the form which should be used for this type of declaration. The event organiser must also maintain records supplementary to the Register which clearly document who attended the event and received the hospitality that has been recorded.

#### **Invitations to Attend Events and Functions**

- 5.2.12. Events organised wholly or mainly of a social or sporting nature would usually be deemed unacceptable, e.g. theatre evenings, football match tickets, holiday accommodation. The acceptance of frequent, regular or annual invitations to events, functions or parties, particularly from the same source and where a considerable degree of hospitality is involved, may severely test the principles stated earlier.
- 5.2.13. It would be easier to justify meetings which relate directly to the work of ANHST, but where these happen outside working hours and on social occasions then they need to be fully justified as not being a personal gift or benefit.
- 5.2.14. There may be instances where staff receive invitations to events and functions run by voluntary organisations or official public bodies, such as annual conferences, dinners or educational events. Attendance at such events may be considered an integral element in building and maintaining relationships with these other organisations and sectors and any hospitality received is likely to be reasonable and proportionate, and therefore acceptable. There is an important difference between staff attendance at events such as these and those invitations from a private individual or firm who may stand to benefit from the goodwill of ANHST
- 5.2.15. Particular care must be taken when dealing with developers, suppliers, firms and individuals in a comparable position. However, hospitality may be deemed acceptable if in the justifiable interests of ANHST business, as a learning or development exercise or as an effective and desirable networking tool for senior staff.
- 5.2.16. Any invitations to events/functions/conferences and such like must be declared to the relevant Senior Manager, General Manager or Director in advance who will decide whether the staff member's attendance may be acceptable in the circumstances, i.e. that there is a clear business or personal development benefit from its acceptance and not simply for personal enjoyment.

### **Hospitality on Training Courses**

- 5.2.17. Hospitality provided as a routine part of an approved externally-provided staff training or development course i.e. non-alcoholic beverages, biscuits, pastries and a light lunch would not normally need to be declared. However, any lavish or food or drink, or extravagant 'freebies' for delegates to take away with them, should be declared in accordance with this policy. Individuals should use their own judgement and common sense in such circumstances.
- 5.2.18. Senior Managers, General Manager and Directors need to exercise careful consideration in such circumstances and may seek the advice of the Company Secretary if in any doubt as to the appropriateness of acceptance.

### **Guest Invitations**

- 5.2.19. Any offers of hospitality which extend to a staff member's spouse, partner or other guest must be declared and registered in advance and appropriate consideration to any approval by given the Director of Finance and documented.

### **Travel and Accommodation**

- 5.2.20. Travel and accommodation in relation to accepted events must be paid for by ANHST in accordance with the Trust's expenses policy and procedures. Any exceptions to this must be agreed by the Director of Finance and documented

## **5.3 SPONSORSHIP**

- 5.3.1 All personnel including independent contractors and locum practitioners, are covered by 'commercial sponsorship – ethical standards for the NHS' document, attached in Appendix 3.
- 5.3.2 All personnel must adhere to the requirements of commercial sponsorship as specified in Part B of the Standards of Business Conduct for NHS Staff, documented in the Trust's Corporate Governance Manual. For the purposes of this policy commercial sponsorship is defined as including
- NHS funding from an external source, NHS research, staff, training, pharmaceuticals, equipment, meeting rooms, costs associated with meetings, meals, gifts, hospitality, hotel and transport costs (including trips aboard) provision of free services (speakers), buildings or premises.

### **Individual / Personal**

- 5.3.3 Personal sponsorship should be restricted to individual employees seeking fundraising for undertaking various charitable activities, both for the Trust's Charity and others. This is not necessarily limited to a £25 limit, however, all such personal charitable sponsorship must be measured against the criteria specified at 4.8 above and be recorded in the Register. If there is any doubt, advice must be sought from your Senior Manager, General Manager or a Director.

### **Corporate**

- 5.3.4 All requests for, or offers of, corporate sponsorship of any size, type or nature must be referred to the Director Finance for formal recording, consideration and response.

## **5.4 CORPORATE GIFTS & DONATIONS**

- 5.4.1 For the purposes of this policy, a 'corporate' gift or donation is defined as being:
- a) a gift made not to any individual but to the Trust as a whole, or to a particular department, ward or other clinical/administrative entity; and,
  - b) made by a corporate or commercial body, rather than by a private individual (i.e. former patient or member of the public – see 5.4.5 below).
- 5.4.2 Any offer of a corporate gift or donation to the Trust must be notified to the Director of Finance for recording, consideration and response.
- 5.4.3 The principles and criteria recorded throughout this policy, and within the Corporate Governance Manual, must be followed at all times and any decision made to accept or refuse a gift or donation made to the Trust itself must be adequately documented and be capable of standing up to any subsequent scrutiny.
- 5.4.4 It is at the discretion of the Director of Finance as to whether any corporate gifts or donations made to the Trust itself are appropriately re-directed to the Trust's own charity for use or disposal.
- 5.4.5 Significant or material gifts or donations made to ANHST by former patients or members of the public should follow the same process as with corporate gifts and donations.

## **5.5 CHARITABLE GIFTS & DONATIONS**

- 5.5.1 Any gifts or donations made directly to the Trust's own charity must be directed to the Company Secretary or Charity Treasurer of the Corporate Governance Manual. The principles and criteria recorded throughout this policy must be applied and adhered to.
- 5.5.2 Any doubt or uncertainty as to the acceptability or otherwise of a gift or donation must be brought to the attention of the Director of Finance for resolution.
- 5.5.3 Charitable gifts and donations in respect of individual employees should be restricted to that specified at 5.3.3 above.

## **6. POLICY IMPLEMENTATION, MONITORING & REVIEW**

### **6.1 Gifts and Hospitality Register**

- 6.1.1. The reporting and monitoring of gifts is managed with the use of the ANHST Gifts and Hospitality Register. All offers or acceptance of gifts / hospitality / entertainment / sponsorship etc not compliant with the acceptable limits as set out within this policy must be openly declared and recorded within the Register using the proforma at **Appendix A** of this document. Declarations should be completed and forwarded to the nominated Company Secretary within one week

(7 days) of the offer, or at next earliest opportunity. **Appendix B** is the form to be used to register ANHST provided hospitality, whether internally or externally.

6.1.2. The Register is held by the Company Secretary.

6.1.3. The Register will be reported to and reviewed by the Audit Committee at least on an annual basis.

## **6.2 Audit**

6.2.1. The Register may be made available to the Trust's Auditors and Local Counter Fraud Specialist at any time without prior notice.

## **6.3 Freedom of Information Requests**

6.3.1 As a public body, the ANHST Gifts and Hospitality Register may be the subject of Freedom of Information Act requests (e.g. from national newspapers, patients or the public) and any such requests will be dealt with by the Trust's Freedom of Information Officer. It is vital that ANHST is able to demonstrate adherence to proper process and policy, including appropriate escalated management responsibilities in relation to authorising or declining gifts/hospitality/entertainment etc, with documented business related explanations and justifications throughout the decision-making process.

## **6.4 Register Retention**

6.4.1. The Register will be held within the ANHST Trust Offices by the Company Secretary and will be retained securely for seven years after the last entry for each financial year.

## **6.5 Policy Awareness**

6.5.1. ANHST will communicate this policy to all staff. The following will be undertaken to raise awareness:

- Policy available on ANHST Intranet. New starters provided with a copy of the policy.
- An annual reminder from the Company Secretary.
- Copies circulated to staff via weekly staff brief

## **6.6 Responsibilities**

6.7.1. All staff are responsible for implementing and complying with this policy. Managers have a duty to ensure that all staff are aware of the policy and that it is adhered to.

6.7.2. Failure by an employee to appropriately declare and register gifts and hospitality may lead to a presumption that an individual is trying to conceal the gift or hospitality and should be treated as a disciplinary offence, and may expose them or ANHST to prosecution (see section 7.2 for further details).

## **6.7 Equality and Diversity**

6.7.1 Airedale NHS Foundation Trust is committed to the overarching principles of Equality and Diversity. The Trust is committed towards

ensuring all forms of prejudicial, unfair basis and/or actions which result in discriminatory practices are eliminated. The Trust makes this stand based not only on meeting its legislative duties but also a moral strand on ensuring equitable outcomes for all of its staff and patients.

6.7.2 The Trust is continually working towards eradicating all forms of harassment and discrimination, exclusion, victimisation, harassment and bullying to make certain it meets its legal duties by ensuring that:

- *Unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2012 are eliminated*
- *Equality of opportunity between people from different groups; is advanced and*
- *Good relationships between people from different groups are fostered*

6.7.3 The Trust treats any complaints it receives very seriously and as such any complaint received in respect of this policy or associated policies (in terms of application or adherence) will be investigated by Trust Staff. Within any investigation undertaken, the Trust will ensure that complainant/s, patients, relatives and carers are not discriminated or victimised in any form whatsoever on the grounds of their disability, gender, marital status, sexuality, colour, race, nationality, ethnic origin, religious belief or age. The Trust will ensure that no individual is treated in a detrimental manner as a result of having made a complaint.

6.7.4 The policy will be continually reviewed to ensure that there are no elements within the policy, practice or procedures that are prejudicial on any grounds in the respect of the protected equality characteristics mentioned above. Using the guidance produced under the auspices of Equality legislation, this document has also been analysed in respect of Equality and Diversity. The analysis is attached at the end of the policy document.

## **6.8 Policy Review**

6.8.1 This policy will be reviewed at least once in every 3 year period; or, as and when required to reflect any relevant legislation, NHS guidance or organisational change.

## **6.9 Related Policies, Procedures, Work Instructions and NHS Documents**

6.9.1 The following policies and documents set out further guidelines and responsibilities in relation to gifts and hospitality and should be read in conjunction with this policy:

- Standards of Business Conduct for NHS Staff
- Code of Conduct for NHS Managers
- Corporate Governance Manual
- The 7 Nolan Principles on Standards in Public Life
- Anti-Fraud, Corruption and Bribery Policy
- Whistleblowing Policy
- Disciplinary Policy
- Declaration of Interest Policy
- Standing Financial Instructions / Standing Orders
- HR policies covering expenses

Trust policies are available on the ANHST Intranet, or printed copies can be requested from your Senior Manager, General Manager or HR.

## **7. POLICY COMPLIANCE**

### **7.1 Bribery Act 2010 and Prevention of Corruption Acts 1906 & 1916**

- 7.1.1. Any member of staff who fails to comply with the requirements of this policy or applicable laws may be liable to disciplinary action including loss of employment and superannuation rights in the NHS, and/or render themselves liable to prosecution. They may also be subject to investigation by the Trust's Local Counter Fraud Specialist (LCFS).
- 7.1.2. The Bribery Act 2010 came into force on 1<sup>st</sup> July 2011, and replaces the Prevention of Corruption Acts 1906 & 1916 and the common law offence of bribery; although offences committed prior to the introduction of the Bribery Act 2010 will be subject to the old legislation.
- 7.1.3. In summary, under the Bribery Act 2010, it is an offence for someone to offer, give, promise, accept, or solicit any financial or other advantage (this would therefore include gifts, hospitality and entertainment) intending them to be an inducement or reward for someone to perform their duties improperly. Bribery can be undertaken directly or channelled through third parties such as friends, relatives or colleagues.
- 7.1.4. The Bribery Act covers a person's duties performed in relation to their work or business, including those of a public nature; it applies to all NHS organisations and, therefore, to ANHST. The duties it relates to must be those expected to either be performed in good faith and impartially, or duties performed by those placed in a position of trust to carry them out. The benchmark of what's expected by people in the course of their work is set out in the Bribery Act as the 'Expectation Test' and is deemed to be "what a reasonable person in the United Kingdom would expect in relation to the performance of the type of function or activity concerned."
- 7.1.5. The Bribery Act 2010 introduced a new criminal 'corporate offence' of failure of relevant commercial organisations to prevent bribery being committed on their behalf by anyone associated with them, unless they have in place adequate preventative procedures designed to prevent bribery. As part of these adequate preventative procedures, it is therefore important that ANHST is able to demonstrate that it has in place a clear policy which specifies acceptable boundaries for giving and receiving gifts, hospitality and entertainment and that this policy is understood and adhered to by those it relates to.
- 7.1.6. The bribery offences carry severe criminal penalties for individuals and organisations. For individuals, a maximum prison sentence of ten years and/or an unlimited fine can be imposed; for organisations, an unlimited fine can be imposed. Senior officers can also be convicted of an offence where they are deemed to have given their consent or connivance to giving or receiving a bribe.
- 7.1.7. ANHST adopts a zero-tolerance approach to bribery and expects those employed by, or associated with us, to neither offer, pay, request or accept bribes or improper inducements for any purpose. To do so is a criminal offence.

## **7.2 Reporting Fraud, Bribery or Corruption**

7.2.1. Anyone can report suspicions or concerns about bribery, fraud or other corruption offences in the NHS. ANHST staff should report any suspicions (e.g. if you feel you or another has been offered a gift or significant hospitality with corrupt intent; or suspect a colleague may have accepted an expensive gift or hospitality contravening this policy) via:

- Local Counter Fraud Specialist at Mersey Internal Audit Agency (MIAA) – Tel: **0151 285 4500**
- NHS Fraud & Corruption Reporting Line (Freephone Mon-Fri 8am-6pm) – Tel: **0800 028 40 60**
- NHS Fraud & Corruption Reporting Form (online):  
<http://www.reportnhsfraud.nhs.uk>
- Trust Director of Finance
- Trust Whistleblowing Policy and reporting mechanisms

7.2.2. All allegations will be thoroughly and professionally investigated. This may involve ANHST invoking its Disciplinary Policy and Anti-Fraud, Bribery & Corruption Policy; leading to potential disciplinary action and/or legal proceedings.

**Appendix 1: Gifts and Hospitality Declaration Form (offered to you)**

As an employee of Airedale NHS Foundation Trust you are required to declare gifts or hospitality offered to you, whether accepted or not, in accordance with the Gifts and Hospitality Policy. Your Senior Manager, General Manager or Director will decide whether acceptance is appropriate.

**You must complete this form in any instance that you feel appropriate. You will receive regular electronic prompts and an annual reminder of your obligation to complete this declaration.**

Details of gift or hospitality:

.....  
.....  
.....  
.....  
.....

Value (where known):

.....  
.....

Date offered:

.....

By whom (please give as much detail as possible):

.....  
.....  
.....  
.....  
.....

**Declaration**

**I have read and understood the Gifts and Hospitality Policy. I understand that failure to abide by the policy will render me liable for disciplinary action, which may include termination of employment. Any suspicions or allegations of corrupt activity in relation to the policy will be appropriately investigated and may lead to prosecution.**

**I declare that the information I have provided on this form is correct and complete.**

**Signature:**

.....

**Print Name:**

.....

**Job Title:**

.....

**Department:**

.....

**Date:**

.....

**For Line Manager / Director completion:**

I deem the gift / hospitality noted above to be **acceptable / unacceptable** (*delete as appropriate*)

The gift / hospitality has been refused by the member of staff concerned. This is duly noted by myself and will be passed on to be recorded in the Register.

Comments, including reasons for the approval or declining of gifts/hospitality:

.....  
.....  
.....  
.....

Would you like the Trust Secretary to contact you regarding any aspect of this declaration?  
If yes, please give details of your query:

.....  
.....  
.....

**Signature:**

.....

**Print Name:**

.....

**Job Title:**

.....

**Department:**

.....

**Date:**

.....

**Thank you for completing this form.**

**Please ensure that it is submitted, fully completed and signed, to the nominated Company Secretary within one week (7 days) of the offer, or next earliest opportunity.**

**Appendix 2: Gifts and Hospitality Notification Form (provided by ANHST)**

As an employee of Airedale NHS Foundation Trust you are required to notify for registration, gifts or hospitality offered by you on behalf of the Trust, either internally or externally, in accordance with the Gifts and Hospitality Policy.

Authorisation for all such expenditure must be approved in accordance with Trust SFIs. Full records identifying all beneficiaries of any gifts and hospitality provided must be maintained by the person completing this form and be available for subsequent audit and scrutiny.

Details of gift or hospitality provided by ANHST (*providing reasons for provision*):

.....  
.....  
.....  
.....  
.....

Value:

.....  
.....

Date offered:

.....

Details of recipients (*please summarise, e.g. individual or beneficiary group/dept.name or title*):

.....  
.....  
.....  
.....

**Declaration**

**I have read and understood the Gifts and Hospitality Policy. I understand that failure to abide by the policy will render me liable for disciplinary action, which may include termination of employment. Any suspicions or allegations of corrupt activity in relation to the policy will be appropriately investigated and may lead to prosecution.**

**I declare that the information I have provided on this form is correct and complete.**

**Signature:**

.....

**Print Name:**

.....

**Job Title:**

.....

**Department:**

.....

**Date:**

.....

**Thank you for completing this form.**

**Please ensure that it is submitted, fully completed and signed, to the nominated Company Secretary within one week (7 days), or next earliest opportunity.**

## Appendix 3

November 2000

# COMMERCIAL SPONSORSHIP – ETHICAL STANDARDS FOR THE NHS

### **Contact point and queries**

*Any queries on this document should, in the first instance, be directed to the Regional **Director of Finance's Office**. Subsequent enquiries should be addressed to:*

Human Resources Directorate  
NHS Employment Policy Branch  
Room 2W10, Quarry House  
Quarry Hill  
Leeds LS2 7UE  
0113 254 5758

*For additional copies of this document, non NHS callers should either write or fax:*

Department of Health  
PO Box 777  
London  
SE1 6XH  
Fax: 01623 724 524

*NHS callers should call the NHS Response line on 0541 555 455*

## Commercial Sponsorship: Ethical Standards for the NHS

- 1 *The New NHS: Modern and Dependable* places obligation on Primary Care Groups, Health Authorities, NHS Trusts and Primary Care Trusts to work together and in collaboration with other agencies to improve the health of the population they serve and the health services provided for that population.
- 2 All health professionals including independent contractors, locum practitioners, working under NHS terms and conditions are intended to be covered by the document. The guidance contained in this document should apply equally to charitable sources of funding as well as GP Co-operatives and initiatives such as PMS, NHS Direct, Walk in Centres, Health Action Zones etc.
- 3 Collaborative partnerships with industry can have a number of benefits in the context of this obligation. An important part of that joint working will be a transparent approach to any sponsorship proposed to a Primary Care Group, HA, NHS Trust or Primary Care Trust, or to independent contractors and their staff. If any such partnership is to work, there must be trust and reasonable contact between the sponsoring company and the NHS. Such relationships, if properly managed, are of mutual benefit to the organisations concerned.
- 4 A previous circular, on *Standards of Business Conduct for NHS Staff* was issued in 1993 (HSG(93)5) regarding the general standards which should be maintained by staff working in the NHS. This guidance is still extant. The purpose of the current document is to emphasise that NHS bodies and primary care contractors and their staff are accountable for achieving the best possible health care within the resources available. It advises them to consider fully the implications of a proposed sponsorship deal before entering into any arrangement. In particular it is important to seek advice when necessary from the Health Authority on the effect on other aspects of healthcare.
- 5 For the purposes of this guidance commercial sponsorship is defined as including:
  - NHS funding from an external sources, including funding of all or part of the costs of a member of staff, NHS research, staff, training, pharmaceuticals, equipment, meeting rooms, costs associated with meetings, meals, gifts, hospitality, hotel and transport costs (including trips abroad), provision of free services (speakers), buildings or premises.

In all these cases NHS bodies, members of NHS staff and independent contractors should use local arrangements to publicly declare sponsorship or any commercial relationship linked to the supply of goods or services and be prepared to be held to account for it. a simple ledger may suffice – to avoid any unnecessary paperwork.
- 6 Where such collaborative partnerships involve a pharmaceutical company then the proposed arrangements must comply fully with the Medicines (Advertising) Regulations 1994 (regulation 21 'Inducements and hospitality' attached at annex B). Any person who contravenes regulation 21(1) is guilty of an offence, and liable, on summary conviction to a fine not exceeding £5000, and on conviction on indictment to a fine, or to imprisonment for a term not exceeding two years, or both. Anyone contravening regulation 21(5) is also guilty of an offence and liable, on summary conviction to a fine not exceeding £5000. The MCA Guidelines on Promotion and Advertising set out the standards to be followed.
- 7 Whatever type of agreement is entered into, clinicians judgement should always be based upon clinical evidence that the product is the best for their patients.

- 8 The arrangements in paragraph 5 do not apply to:
- Personal gifts of less than £25 per gift ie flowers, gifts of post-it pads, pens etc however gifts should be declared if several small gifts worth a total of over £100 are received from the same or closely related source in a 12 month period.
  - Gifts from patients to GPs which are being addressed by changes to the terms of service of GPs
  - Income generation schemes which will be logged separately at local level
  - Discounts on particular pharmaceuticals
- 9 A model code is attached at Appendix A, for use by those who do not have an existing professional code of conduct. Where an employers' code of conduct is used, this should be in addition to professional codes, or be for the benefit of those staff who are not regulated.

### Considerations

- 10 PCGs, Health Authorities and Primary Care Contractors will need to consider issues such as:
- Industry often wishes to have closer involvement with the NHS. Quite often this may be to mutual advantage, but both partners should assess and understand the costs and benefits of any such agreement;
  - Purchasing decisions, including those concerning pharmaceuticals and appliances, should always be taken on the basis of best clinical practice and value for money. Such decisions should take into account their impact on other parts of the health care system, for example, products dispensed in hospital which are likely to be required by patients regularly at home;
  - Hospital Trusts who are offered significant discounts on drugs may wish to consult the relevant PCGs/PCTs about possible implications for subsequent prescribing in primary care;
  - When making purchasing decisions on products which originate from NHS intellectual property, ethical standards must ensure that the standard is based on best clinical practice and not whether royalties will accrue to an NHS body;
  - Details whereby sponsorship is linked to the purchase of particular products, or to supply from particular sources, are not allowed, unless as a result of transparent tender for a defined package of goods and services, (see Annex C on research and development);
  - Patient information attracts a legal duty of confidence and is treated as particularly sensitive under Data Protection legislation. Professional codes of conduct also include clear confidentiality requirements. It is extremely important therefore that NHS bodies assure themselves, taking advice when necessary, that sponsorship arrangements are both lawful and meet appropriate ethical standards;
  - Where a sponsorship arrangement permitting access to patient information appears to be legally and ethically sound (eg where the sponsor is to carry out or support NHS functions, where patients have explicitly consented), a contract should be drawn up which draws attention to obligations of confidentiality, specifies security standards that should be applied, limits use of the information to purposes specified in the contract and makes it clear that the contract will be terminated if the conditions are met;
  - Where the major incentive to entering into a sponsorship arrangement is the generation of income rather than other benefits, then the scheme should be properly governed by income generation principles rather than sponsorship arrangements. Such schemes should be managed in accordance with income generation

requirements ie they must not interfere with the duties or obligations of the Trust. A memorandum trading account should be kept for all income generation schemes.

- As a general rule, sponsorship arrangements involving NHS Trusts, Primary Care Trusts, Health Authorities and Primary Care Groups should be at a corporate rather than individual level.

### **Hospitality and Meetings**

- 11 Industry representatives organising meetings are permitted to provide appropriate hospitality and/or meet any reasonable, actual costs, which may have been incurred. If none is required, there is no obligation, or right, to provide any such hospitality, or indeed any benefit of equivalent value.
- 12 Hospitality must be secondary to the purpose of the meeting. The level of hospitality offered must be appropriate and not out of proportion to the occasion; and the costs involved must not exceed that level which the recipients would normally adopt when paying for themselves, or that which could be reciprocated by the NHS. It should not extend beyond those whose role makes it appropriate for them to attend the meeting.
- 13 Where meetings are sponsored by external sources, that fact must be disclosed in the papers relating to the meeting and in any published proceedings.

### **Research and Development**

- 14 Guidance on research and development is contained in Annex C.

### **Charitable Funding**

- 15 Trustees should take steps to remove any non-charitable items within Charitable Trust Fund accounts. Examples include drug trials undertaken directly by a consultant and supported by funding from non official sources (ie not part of the R&D programme managed by the provider). Not all consultant drug trials are non charitable (see "NHS Charitable Funds: A Guide", published by the Charity Commission), but, where they do not have charitable status, they should be removed from the Charitable Trust Fund accounts. If the drug trial contract is made between industry and the NHS Trust or Primary Care Trust, then the transaction should be recorded as a normal income generation scheme. In other cases, the NHS Trust or Primary Care Trust should consider other options including the transfer of responsibility back to the consultant concerned.

### **Examples of Potential Conflict**

- 16 Some examples of potential conflict are set out at Annex D.

### **Monitoring Arrangements**

- 17 Employers should ensure that monitoring arrangements are established to ensure that staff register any sponsorship and are held accountable for it. This may be through scrutiny by an appropriate committee eg local audit or ethics committees, as part of their normal activity, as well as through publication of the Annual Report, where this is practicable. An official register of interests should be established as part of the monitoring arrangements. At corporate level, employers should ensure that contract negotiations are conducted according to high ethical standards.

- 18 Employers finding evidence of unapproved sponsorship should act swiftly to deal with the situation and bring it within their local arrangements.

### Action

- 19 Employers (eg NHS Trusts, Primary Care Trusts, HA, Primary Care Groups) and independent contractors should:
- Make all staff aware of NHS guidance, the legal position and appropriate professional codes of conduct, eg GDC, GMC, RCN, RPSGB, UKCC and Prescription Medicines Code of Practice Authority (PMCPA) codes;
  - Take responsibility for ensuring that they and their staff adhere to their professional code, or for unregulated staff a code devised by the organisation. The code should contain clear guidance around offers of sponsorship;
  - Ensure all sponsorship deals are documented through use of a register or simple ledger, held by the employer eg the Health Authority, NHS Trust or Primary Care Trust, which can be audited as appropriate. In order to demonstrate openness, it is essential that the register should be available upon request to the public and made available at all HA Board meetings;
  - Make it a matter of policy that offers which could possibly breach the code must be reported to the relevant Board (NHS Trusts/Primary Care Trusts/HAs/Primary Care Groups) or Health Authority (independent contractors). Minimum standards for the reporting system should be determined locally, but ideally should include some time limit (eg two weeks) for the reporting of any such offers;
  - Ensure that all staff with their HA, in the interests of transparency, any financial interest in organisations (eg company shares or research grant) which impact upon funding, whether through contracts, sales or other arrangements that they may make with non NHS organisations.
- 20 **Before** entering into any sponsorship agreement, HAs, NHS Trusts, Primary Care Trusts PCG staff independent contractors should:
- Satisfy themselves, with reference to information available, that there are no potential irregularities that may affect a company's ability to meet the conditions of the agreement or impact on it in any way eg checking financial standing by referring to company accounts;
  - Assess the costs and benefits in relation to alternative options where applicable, and to ensure that the decision making process is transparent and defensible;
  - Ensure that legal and ethical restrictions on the disclosure of confidential patient information, or data derived from such information, are complied with. Additionally, disclosure for research purposes should not take place without the approval of the appropriate research ethics committee;
  - Determine how clinical and financial outcomes will be monitored;
  - Ensure that the sponsorship agreement had break clauses built in to enable the NHS Trust, Primary Care Trust, PCG, independent contractor to terminate the agreement if it becomes clear that it is not providing expected VFM/clinical outcomes.
- 21 Existing contracts, which include any element of sponsorship agreement, should be reviewed and any clauses which do not follow the recommendations set out above should, where possible, be renegotiated to ensure that real patient need is being met.

- 22 Existing corporate governance policies and disciplinary procedures should be reviewed to ensure that they cover the need for open declaration and to enable sanctions against those failing to comply. In the event that they do not do so, the policies should be strengthened or amended. Corporate and or clinical governance policies should address the ethical implications of commercial sponsorship.

### **Summary**

- 23 Employers should take action as set out in paragraphs 19-22 having taken account of considerations in paragraph 10.

Department of Health – November 2000

## **Annex A**

### **Code of Conduct**

Staff and independent contractors working in the NHS should follow existing codes of conduct. Staff who are not covered by such a code are expected to:

- Act impartially in all their work;
- Refuse gifts, benefits, hospitality or sponsorship of any kind which might reasonably be seen to compromise their personal judgement or integrity, and to avoid seeking exert influence to obtain preferential consideration. All such gifts should be return and hospitality refused;
- Declare and register gifts, benefits, or sponsorship of any kind, in accordance with time limits agreed local, (provided that they are worth at least £25), whether refused or accepted. In addition gifts should be declared if several small gifts worth a total of over £100 are received from the same or closely related source in a 12 month period;
- Declare and record and financial or personal interest (eg company shares, research grant) in any organisation with which they have to deal, and be prepared to withdraw from those dealings if required, thereby ensuring that their professional judgement is not influenced by such considerations;
- Make it a matter of policy that offers of sponsorship that could possibly breach the Code be reported to their Board (NHS Trusts/Primary Care Trusts/Health Authorities/Primary Care Groups) or the Health Authority (independent contactors);
- Not misuse their official position or information acquired in the course of their official duties, to further their private interests or those of others;
- Ensure professional registration (if applicable) and/or status are not used in the promotion of commercial products or services;
- Beware of bias generated through sponsorship, where this might impinge on professional judgement and impartiality;
- Neither agree to practice under any conditions which compromise professional independence or judgement, nor impose such conditions on other professionals.

## **Annex B**

### Extract from The Medicines (Advertising) Regulations 1994

#### **Inducements and Hospitality**

- 21 (1) Subject to paragraphs (2) and (4), where relevant medicinal product 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 relevant 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 at a reasonable level
  - (b) It is subordinate to the main scientific objective of the meeting, and
  - (c) It is offered only to health 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 reasonable in level
  - (b) It is subordinate to the main purpose of the meeting or event, and
  - (c) 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 1<sup>st</sup> January 1993.
- (5) No person qualified to prescribe or supply relevant medicinal product shall solicit or accept any gift, pecuniary advantage, benefit in kind, hospitality or sponsorship prohibited by this regulation.

## Annex C

### Research and Development

- 1 Exceptionally, in the case of non-commercial research and development (R&D) originated or hosted by NHS providers, commercial sponsorship may be linked to the purchase of particular products, or to supply from particular sources. This should be in accordance with the guidance at paragraph 28 of HSG(97)32 *Responsibilities for meeting Patient Care Costs Associated with Research and Development in the NHS*. Where there is industry collaboration in such studies, companies may alternatively make a contribution towards the study's costs, rather than supply of product.
- 2 Any funding for research purposes should be transparent. There should be no incentive to prescribe more of any particular treatment or product other than in accordance with the peer reviewed and mutually agreed protocol for the specific research intended. When considering a research proposal, whether funded in whole or part by industry, NHS bodies will wish to consider how the continuing costs of any pharmaceutical or other treatment initiated during the research will be managed once the study has ended.
- 3 Separate guidelines exist for pharmaceutical company sponsored Safety Assessment of Market Medicines (SAMM) which remain in force.
- 4 Where R&D is primarily for commercial purposes, NHS providers are expected to recover the full cost from the commercial company on whose behalf it is carried out. (HSG(97)32, paragraph 7). An industry sponsored trial should not commence until an indemnity agreement is in place; see the guidelines in HSC(96)48 *NHS Indemnity, Arrangements for Clinical Negligence Claims in the NHS*. A standard form of indemnity agreement, agreed with ABPI, can be found at Annex B of that guidance.
- 5 The NHS should benefit from commercial exploitation of intellectual property derived from R&D that the NHS has funded, or for which it has been funded, even where the intellectual property itself is owned by people outside the NHS. NHS bodies should ensure that an agreement to this effect is included in any contracts concerning R&D. The guidelines in HSC 1998/106 *Policy Framework for the Management of Intellectual Property within the NHS* should be followed.

## Annex D

### Examples of Potential Conflict

It may be helpful to give some examples of the sorts of situation you should encounter and how they could be dealt with. These are given below:

- A *A clinician wishes to include a new drug, manufactured by a company with which he has links eg company shares, research grant, in the Trust Formulary.* Trust committee (eg Drug and Therapeutics Committee) should require declarations of interest from clinician submitting proposals for new products to be added to formularies and ensure the decision is based on clinical and cost effective information;
- B *A pharmaceutical industry representative wishes to present the case for a new product being included on a Trust Formulary.* The Trust should establish and adopt a reasonable policy on approaches from industry representatives. Industry representatives should be required to sign up to compliance with such a policy before being given access to any meetings;
- C *Offer from a company to provide training for staff.* Employers should be careful to ensure that staff are not pressurised by sponsors of training, or alter their own activity to accord with sponsors' wishes, where these are not backed up by appropriate evidence. Training provided by industry may be above board if it is unbiased and has mutual benefit for both the NHS and the sponsoring company, is evidence bases and the hospitality appropriate. However participants should assess whether they may be influenced unduly and also bear in mind what benefits the company might derive (eg exposure to NHS, professional contacts, potential allies to use later, names of who to influence, often without the participants realising);
- D *A manufacturer of ostomy equipment offers to sponsor a stoma nurse post in an NHS Trust.* The Trust should not accept the sponsorship if it would require the stoma nurse to recommend the sponsors in preference to other clinically appropriate appliances, nor if it requires the Trust to recommend patients to use a particular dispensing service or withhold information about other products. Existing contracts containing any such provisions should, where possible, be urgently renegotiated.
- E *A manufacturer of a particular type of nicotine replacement therapy offers to provide their product at a reduced rate to a Health Action Zone or HA.* This arrangement is acceptable **provided that** there is a clear clinical view that these products are appropriate to particular patients **and** there is no obligation to also prescribe these products to other patients for whom an alternative product would be at least as beneficial.
- F *A pharmaceutical company offers to provide starter packs at a discounted price.* This type of sponsorship is acceptable, but should always be declared in order to avoid any suspicion that subsequent prescribing might be inappropriate and linked to the provision of starter packs.
- G *A catering company offers to provide discounted products to an NHS Trust.* This agreement is acceptable, but should be routinely declared to the Health Authority.
- H *High tech home health care provider offers to supply equipment at a reduced rate in return for business linked to a specific product.* Health Authority contract negotiators

should advise the company that any contract will not prejudice the provision of the most appropriate service to patients, and will not bear any relation to other contracts.

- I *Manufacturer offers to pay the travelling costs or accommodation costs for clinicians invited to a conference to view medical products.* Only clinicians with a specific interest in the products should attend and the travel costs incurred should be paid for by the Trust unless the Chief Executive/Director of Finance gives approval for the potential supplier to take responsibility for the costs. Such decisions should be taken at least at Director of Finance level.

## Appendix 4

### Equality Impact Analysis Form



Trust Headquarters, [Airedale General Hospital](#), Skipton Road Steeton, KEIGHLEY. West Yorkshire. BD20 6TD. Telephone: 01535 29273

Please ensure that the completed Equality analysis form is forwarded with the associated document being assessed to the Head of Equality and Diversity

*In carrying out the Impact Analysis please check for statements, conditions, rules or requirements which when applied could exclude or cause an adverse impact upon patients and/or staff in respect of the “protected characteristics” – (Race, Gender, Disability, Sexual Orientation, Age, Religion/ Faith, Trans). The process will help in identifying;*

- *Overall improvements required to ensure the service is provided equitably*
- *Those areas the service needs to address and / or improve, which have an impact upon patients and members of staff*
- *Specific actions needed to ensure equitable provision for all concerned.*

<b>Name of Document</b>	<b>Gifts Hospitality and Sponsorship Policy (and Guidance)</b>		
<b>Department</b>			
<b>Effective From</b>	<b>September 2012</b>	<b>Review date</b>	<b>September 2015</b>

<b>Please ✓ the appropriate box(s) to indicate appropriate nature of document</b>		<b>Which elements of the document being assessed pertain to the NHS constitution Please ✓ the appropriate box(s)</b>	
<b>Function of the service</b>		<b>1. The NHS provides a comprehensive service, available to all.</b>	
<b>Policy</b>	✓	<b>2. Access to NHS services is based on clinical need, not an individual's ability to pay.</b>	
<b>Procedure</b>		<b>3. The NHS aspires to the highest standards of excellence and professionalism.</b>	✓
<b>Strategy</b>		<b>4. NHS services must reflect the needs and preferences of patients, their families and their carers.</b>	
<b>Other (please state)</b>		<b>5. The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.</b>	
		<b>6. The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources.</b>	
		<b>7. The NHS is accountable to the public, communities and patients that it serves.</b>	

Does the document being assessed impact: (Please ✓ as appropriate)

<b>Directly upon staff</b>	✓	<b>Indirectly on staff</b>		<b>Directly upon patients</b>		<b>Indirectly on patients</b>	✓
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<p><b>In relation to the assessment of this document which EDS Goals will be addressed?</b></p> <p><b>Click on following link for the EDS</b></p>	<p><a href="http://www.airedale-trust.nhs.uk/About/equalitydiversity/edframework.pdf">http://www.airedale-trust.nhs.uk/About/equalitydiversity/edframework.pdf</a></p>	<p><b>EDS Goal:</b> Goal 3</p> <p><i>Empowered, engaged and well-supported staff</i></p>
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***Please provide brief details of the main aims, objectives and intended outcomes/benefits from the document being assessed***

The purpose of this policy is to provide guidance to staff on the action that can, or should, be taken in the event that they are offered gifts and/or hospitality. There is a limited set of exceptions and this policy sets out the standards and procedures that staff should follow to protect both them and the organisation.

***From the document being assessed and taking into consideration the EDS goal/s who will benefit and in what way***

This policy supports a culture of openness and transparency in the Trusts business transactions. The policy should be read in conjunction with the following documents, which also set out generic guidelines and responsibilities for NHS Trusts in relation to gifts and hospitality:

- Standards of Business Conduct for NHS Staff<sup>1</sup>
- Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions<sup>2</sup>
- Code of Conduct for Managers<sup>3</sup>
- Commercial Sponsorship – Ethical Standards for the NHS
- Whistleblowing Policy
- Declarations of Interest Policy
- Corporate Governance
- The 7 Nolan Principles on Standards in Public Life
- Anti-Fraud, Bribery and Corruption Policy
- Disciplinary Policy

<sup>1</sup> Standards of Business Conduct for NHS Staff – HSG(39)5, Department of Health, Jan 1993

<sup>2</sup> Airedale NHSFT Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions -

<sup>3</sup> Code of Conduct for NHS Manager, Department of Health, Oct 2002

This policy applies to all employees of Airedale NHSFT and any staff who are seconded to the Trust, contract and agency staff and any other individual working on Trust premises.

The policy also applies to members of the Board and its Committees

***What consultation was/ has been undertaken in relation to the document being assessed. Please also list operational / policy groups where the document has been tabled.***

The policy was tabled at the Executive Directors Group

***Bearing in mind the NHS constitution above and the EDS Goals, what evidence can be provided to demonstrate show that application of information within the document being assessed does not have any detrimental impact in respect of each of the protected characteristic mentioned below. Please do not just type in N/A.***

	<b>Y</b>	<b>N</b>	<b>Possible adverse impact upon patients</b>	<b>Possible adverse impact upon staff</b>
<b>1.Race</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of race.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of race.
<b>2.Gender</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of gender.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of gender.
<b>3.Disability</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in

			any group of individuals, in respect of disability.	respect of disability.
<b>4. Sexual Orientation</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of sexual orientation.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of sexual orientation.
<b>5. Age</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of age.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of age.
<b>6. Religious Belief</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of religious belief.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of religious belief.
<b>7. Dependants / Caring Responsibilities</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of Dependants / Caring Responsibilities	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of Dependants / Caring Responsibilities
<b>8. Transgendered or Transsexual</b>		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of Trans gendered or Transsexuals	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of Trans gendered or Transsexuals

<b><i>If there has been a differential impact identified above, could this lead to an adverse impact in the delivery of the service in respect of the document being assessed? (please tick)</i></b>	<b>Y</b>	<b>N</b>
		✓
<b><i>Comments (Irrespective of “Yes” or “No” please explain)</i></b>		
<p>As indicated in the policy, proactive consideration will be made to ensure that all aspects pertinent to receipt of any form of “gift” is assessed and documented to ensure that a culture of transparency is in operation. As per our commitment anyone found to breaching this policy will be liable to disciplinary action, loss of employment and pension rights in the NHS, prosecution, fine and possible imprisonment.</p>		

<b><i>Please indicate if there any actions that need to be undertaken to mitigate risks, minimise any adverse impact and ensure equity for all equality groups indicated above</i></b>			
<b><i>Proposed action in relation to the equality strands above</i></b>	<b><i>Timeframe</i></b>	<b><i>Resource implications</i></b>	<b><i>Lead</i></b>
<ul style="list-style-type: none"> <li>• <i>Ensure that all staff are made aware of the policy and its implications.</i></li>   <li>• <i>Ensure that senior managers explain to their members of staff the appropriate procedures that need to be undertaken when and if they were to receive any gift/s.</i></li> </ul>	<b>June 2012</b>	Existing communication methods to be utilised.	Board lead  Director of Finance/ Company Secretary
<b><i>Completed by and Date of Impact Assessment</i></b>	<b>6<sup>th</sup> June 2012</b>		
<b><i>Date approved by Head of Equality and Diversity</i></b>	<b>6<sup>th</sup> June 2012</b>		

<b>Please attach this assessment with the document being Assessed</b>	
<b>Signed (completing officer)</b>	<b>Signed: Head of Equality and Diversity</b>  <b>K Sohanpal</b>