

## Standards of Business Conduct Policy

Policy Reference: MECCG112

<b>Target Audience</b>	The Board, employees of Mid Essex Clinical Commissioning Group and contractors engaged on its behalf.
<b>Brief Description (max 50 words)</b>	This policy sets out the code of conduct that Board members and CCG staff are expected to follow in order to ensure that public service values remain at the heart of the CCG.
<b>Action Required</b>	To approve the updated version of the Policy and disseminate to staff.

### Document Information

<b>Version Number</b>	4.2
<b>Accountable Director</b>	Director of Governance & Performance
<b>Responsible Officer</b>	Head of Corporate Governance
<b>by Audit Committee</b>	4 September 2019
<b>Adopted by Board</b>	26 September 2019
<b>Review Date</b>	March 2022 (Agreed at Audit Committee 23 Feb 2021 to extend the review date for this policy to March 2022)
<b>Stakeholders engaged in review</b>	Director of Governance and Performance Head of Corporate Governance Local Counter Fraud Specialist Audit Committee
<b>Equality Impact Assessment</b>	<p style="text-align: center;"><b>EQUALITY IMPACT ASSESSMENT</b></p> <p>This document has been assessed for equality impact on the protected groups, as set out in the Equality Act 2010. This Policy is applicable to the Board, every member of staff within the CCG irrespective of their age, disability, sex, gender reassignment, pregnancy, maternity, race (which includes colour, nationality and ethnic or national origins), sexual orientation, religion or belief, marriage or civil partnership, and those who work on behalf of the CCG</p>

## Amendment History

Version	Date	Reviewer Name(s)	Comments
2.0	30 <sup>th</sup> August 2013 presented to Audit Committee – not discussed and re-presented in November 2013)	Kerry Franklin Assistant Director of Quality Assurance and Governance Support	Version 2 is an update on the policy approved in August 2012. (now presented in November 2013)
3.0	July 2015	Director of Corporate Services and Head of Corporate Governance	Renamed 'Standards of Conduct Policy' and revised to take account of NHS Commissioning Board: Standards of Business Conduct
3.1	August 2016	Director of Corporate Services	Amendments to sections on Declarations of Interest and Gifts & Hospitality to reflect revised statutory guidance for CCGs on Managing Conflicts of Interest
3.2	19 August 2016	Local Counter Fraud Specialist (LCFS)	Policy amended to take account of LCFS comments.
4.0	25 August 2017	Head of Corporate Governance and final review by Director of Corporate Services	Revised to reflect the revised statutory guidance for CCGs on Managing Conflicts of Interest, June 2017
4.1	31 July 2018	Head of Corporate Governance	Minor amendments to update revised job titles, etc.
4.2	28 August 2018	Audit Committee	Approved, subject to minor amendment.

### Related Policies.

- CCG Constitution (particularly Standing Orders and Standing Financial Instructions)
- [Managing Conflicts of Interest: Statutory Guidance for CCGs, June 2017](#)
- [Conflicts of Interest Policy \(MECCG003\)](#)
- [Anti-Fraud and Bribery Policy \(MECCG008\)](#)
- [Whistleblowing Policy \(MECCG012\)](#)
- [Gifts & Hospitality Policy \(MECCG041\)](#)
- [Procurement Policy \(MECCG042\)](#)
- [Close Personal Relations at Work Policy \(MECCG122\)](#)
- [Defining the Boundaries between NHS and Private Healthcare \(MECCG142\)](#)
- [Reimbursement of Staff Expenses and Travel Policy \(MECCG137\)](#)

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Approved: 27 September 2018

Review date: March 2022

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## 1. Introduction

- 1.1. This policy seeks to describe the public service values, which underpin the work of the NHS and to reflect current guidance and best practice to which all individuals within the CCG must have regard in their work for the CCG.
- 1.2. The CCG aspires to the highest standards of corporate behaviour and responsibility. All CCG staff and officers are required to comply with this policy.
- 1.3. The Code of Conduct and Code of Accountability in the NHS (second revision July 2004) sets out the following three public service values which are central to the work of the CCG:
  - Accountability - everything 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, officers and members and suppliers, and in the use of information acquired in the course of NHS duties.
  - Openness - there should be sufficient transparency about NHS activities to promote confidence between the CCG and its staff, patients and the public.
- 1.4. In addition, all individuals within the CCG must abide by the Seven Principles of Public Life as set out by the Committee on Standards in Public Life - see Appendix A of this policy.

## 2. Scope

- 2.1. This policy applies to:
  - CCG Board members and the members of its committees and sub-committees;
  - Members of the Mid and South Essex CCG Joint Commissioning Team who are employed by Mid Essex CCG
  - GPs or staff from member practices performing a CCG role
  - Permanent and temporary CCG employees;
  - third parties acting on behalf of the CCG under a contract;
  - students and trainees (including apprentices);
  - contracted staff;
  - agency staff engaged by the CCG; and
  - secondees.

(referred to collectively in this policy as 'CCG Staff').

- 2.2. It is the responsibility of managers to ensure that this policy is brought to the

attention of all employees.

2.3. It is the responsibility of all employees to ensure that:

- They do not place themselves in a position that risks or appears to risk conflict between their private interests and their CCG duties;
- They are familiar with and adhere at all times to the principals set out within this policy and any other related documents which may be issued. They should seek clarification from their line manager on any points which they are not clear.
- They report any known or suspected deviations from the procedure to their manager or to the Director of Governance & Performance.

### 3. Prevention of corruption

3.1. The Bribery Act 2010 came into effect on 1 July 2011 and its provisions apply to all MECCG business.

The Act strengthens previous UK anti-bribery legislation and creates an offence which can be committed by organisations which fail to have adequate provisions in place to prevent bribery from occurring.

Bribery involves offering, promising or giving a payment or benefit in order to influence someone’s decision or action. This can take the form of ‘a financial or other advantage’ – it does not have to be cash. Offering and requesting constitutes an offence – it does not have to be paid. It does not have to go directly to the person being influenced – it can be a donation to a chosen organisation. It does not have to be substantial – there is no materiality threshold in the Act.

In addition to the corporate offence, there are three offences which individuals could be found guilty of.

A summary of the offences is as follows:

	Section	Offence	Detail	Sanction
Individuals	Section 1	Bribing another person	Offering, promising or giving a bribe in the UK or abroad, in the public or private sector.	Individuals could face a 10 year prison sentence and unlimited fines.
	Section 2	Receiving a bribe	Requesting, agreeing to receive or accepting of a bribe in the UK or abroad, in the public	

	Section	Offence	Detail	Sanction
			or private sector.	
	Section 6	Bribery of foreign public officials	Bribery of a foreign public official in order to obtain or retain business.	
Organisations	Section 7	Failure to prevent bribery	Failure by an organisation to prevent a bribe being paid by those who perform services for, or on behalf of the organisation (“associated persons”).	Organisations could face unlimited fines and reputational damage could be significant.

Conviction under the Act is punishable by imprisonment for a maximum term of 10 years. The CCG can also be given an unlimited fine if found guilty of failing to have adequate measures in place to prevent bribery.

- 3.2. All members of CCG staff are required to be aware of the Bribery Act 2010 and should also refer to paragraph seven below for further guidance in relation to this.

#### 4. Raising concerns

- 4.1. It is the duty of every member of staff to speak up about genuine concerns in relation to criminal activity, breach of a legal obligation (including negligence, breach of contract or breach of administrative law), miscarriage of justice, danger to health and safety or the environment, and the cover up of any of these in the workplace. The CCG’s [Whistleblowing Policy](#) sets out the arrangements for raising and handling staff concerns. The procedure for reporting specific concerns relating to fraud, bribery and corruption are described in paragraph five.

#### 5. Counter fraud measures

- 5.1. All members of CCG staff are required not to use their position to gain financial advantage or avoid a loss. The CCG is keen to prevent fraud and encourages staff

with concerns or reasonably held suspicions about potentially fraudulent activity or practice, to report these. CCG staff should reported their concerns to the Local Counter Fraud Specialist (LCFS) or the Chief Finance Officer immediately, unless the LCFS or the Chief Finance Officer is implicated. If that is the case, they should report their concerns to the NHS Fraud and Corruption Reporting Line (FCRL) on freephone 0800 028 4060 or at <https://cfa.nhs.uk/home>, who will decide on the action to be taken. Any suspected fraud or bribery can also be reported to NHS Protect using the NHS Fraud and Corruption Reporting Line on 08000 28 40 60 or by filling in an online form at <https://cfa.nhs.uk/reportfraud>). The latter provides an easily accessible and confidential route for the reporting of genuine suspicions of fraud within or affecting the NHS. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so.

- 5.3. Anonymous letters, telephone calls, etc. are occasionally received from individuals who wish to raise matters of concern, but not through official channels. While the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern and will always be taken seriously. The Accountable Officer will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised.
- 5.4. CCG staff should not ignore their suspicions, investigate themselves or tell colleagues or others about their suspicions. Staff should make a note of when they became aware of their suspicions, who they involve and how. Staff should also report the matter as soon as possible as any delay can hinder the investigation.

## **6. Standing orders (SOs), Standing Financial instructions (SFIs) and Scheme of Delegation (SoD)**

- 6.1. All CCG staff must carry out their duties in accordance with the CCG's SOs, SFIs and SoD. These documents set out the statutory and governance framework in which the CCG operates and there is considerable overlap between the contents of this policy and the provisions of the SOs, SFIs and SoD. CCG staff must at all times refer to and act in accordance with the SOs, SFIs and SoD to ensure current CCG process is followed. In the event of doubt, CCG staff should seek advice from their line manager. In the event of any conflict arising between the details of this policy and the SOs, SFIs and SD, the provisions of the SOs, SFIs and SoD shall prevail.

## **7. Declaration of interests**

- 7.1. The CCG needs to have in place principles and procedures for minimising, managing and registering potential conflicts of interests which could be deemed or assumed to affect the decisions made by those involved in the CCG. These decisions could include awarding contracts, procurement, policy, employment and

other decisions.

- 7.2. CCG staff should not allow their judgement or integrity to be compromised. They should be, and be seen to be, honest and objective in the exercise of their duties and should understand fully their terms of appointment, duties and responsibilities.
- 7.3. This section summarises the CCG's policy in relation to the identification and management of conflicts of interest for staff. Adherence to these provisions is mandatory in order to identify and manage current or potential conflicts which may arise between the interests of the CCG and the personal interests, associations and relationships of its staff or representative family members.
- 7.4. Failure to adhere to these provisions relating to the declaration of interests may constitute the criminal offence of fraud, as an individual could be gaining unfair advantages or financial rewards for themselves or a family member/friend or associate. Any suspicion that a relevant personal interest may not have been declared should be reported to the Director of Governance and Performance.
- 7.5. All CCG staff must declare any interest, either on appointment or when the interest is acquired, which may directly or indirectly give rise to an actual or potential conflict of interest or duty. Such interests, and potential conflicts of interest, include financial interests (e.g. a director, non-executive director, shareholder, partner, owner or senior employee in an organisation which is or might do business with the NHS or a management consultant for a provider); non-financial professional interests (e.g. a member of a particular specialist professional body); non-financial personal interests (e.g. a voluntary sector champion or volunteer for a provider, a member of a voluntary sector board or a member of a lobby or pressure group with an interest in health); and indirect interests where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision; acceptance of hospitality from current or prospective business contacts; and acceptance of gifts.
- 7.6. A close association with an individual may include:
  - a partner (someone who is married to, a civil partner or someone with whom the CCG staff member lives in a similar capacity);
  - a parent or parent in law;
  - a son or daughter or stepson or step daughter;
  - the child of a partner;
  - a brother or sister;
  - a brother or sister of the staff member's partner;
  - a grandparent and/or a grandchild;
  - an uncle or aunt;
  - a nephew or niece;

- the partners of the above and
- Any other close relationship

*(This list is comprehensive but not exhaustive)*

- 7.7. Further examples of relevant interests are set out in the [CCG's Conflict of Interests Policy](#). If in doubt CCG staff should take advice from the Head of Corporate Governance and/or Director of Governance & Performance.
- 7.8. The CCG is required to maintain a register of interests of all CCG employees, members of its Board and committees/sub-committees and all partners/directors of member GP practices. Further guidance on the declaration of interests is set out in the [CCG's Conflict of Interests policy](#).
- 7.9. The CCG's register(s) of interests will be published on its website and within its Annual Report and Annual Governance Statement.
- 7.10. All Declarations of Interest made by CCG staff will be reviewed upon receipt and updates requested at least annually. Managerial sign off will be required as to how any material conflicts of interest are to be handled.

## **8. Personal conduct**

### **8.1. Lending or borrowing**

8.1.1. The lending or borrowing of money between staff should be avoided, whether informally or as a business, particularly where the amounts are significant.

8.1.2. It is a particularly serious breach of discipline for any member of staff to use their position to place pressure on someone in a lower pay band, a business contact, or a member of the public to loan them money.

### **8.2. Gambling**

8.2.1. No member of staff may bet or gamble when on duty or on CCG premises, with the exception of small lottery syndicates or sweepstakes related to national events such as the World Cup or Grand National among immediate colleagues.

### **8.3. Trading on official premises**

8.3.1. Trading on official premises is prohibited, whether for personal gain or on behalf of others. Canvassing within the office by, or on behalf of, outside bodies or firms (including non-CCG interests of staff or their relatives) is also prohibited. Trading does not include small tea or refreshment arrangements solely for staff. Official email accounts and official documentation such as letter headed paper

should not be used for private enterprise and may constitute an offence of fraud.

#### 8.4. Collection of money

8.4.1. Charitable collections must be authorised by the Director of Governance & Performance. Other flag day appeals are not permitted, and collection tins or boxes must not be placed in offices. With line management agreement, collections may be made among immediate colleagues and friends to support small fundraising initiatives, such as raffle tickets and sponsored events. Permission is not required for informal collections amongst immediate colleagues on an occasion like retirement, marriage or a new job.

#### 8.5. Bankrupt or insolvent staff

Any member of staff who becomes bankrupt or insolvent must inform their line management and Human Resources as soon as possible. Staff who are bankrupt or insolvent may not be eligible to work in posts that involve duties which might permit the misappropriation of public funds or involve the handling of money.

#### 8.6. Criminal Proceedings

A member of staff who is the subject of any criminal proceedings, including, but not restricted to:

- driving offences
- being interviewed under caution by any investigative agency including (but not limited to) the Police, National Crime Agency, Department of Work and Pensions, HMRC, UK Border Agency and Local Authorities
- receiving a caution/conditional caution
- being fined
- being issued with a fixed penalty notice
- being reprimanded
- being issued with a cannabis warning
- being issued with a Community Resolution
- being arrested
- being convicted of any criminal offence
- Receiving a summons to appear at any Court\*

must inform their line management and Human Resources as soon as the member of staff is made aware of the proceedings.

\*This list is not exhaustive.

## 9. **Gifts and hospitality**

- 9.1. Gifts of low value (up to £6) from suppliers or contractors can be accepted and do not need to be declared.
- 9.2. Gifts of under £50 can be accepted from non-suppliers and non-contractors and do not need to be declared.
- 9.3. Gifts with a value of over £50 can be accepted on behalf of the CCG, for example to contribute towards a team event or providing gifts for an organisational raffle, but not in a personal capacity.
- 9.4. Any personal gift of cash or cash equivalents (including but not limited to vouchers, tokens, offers of remuneration to attend meetings whilst in a capacity working for or representing the CCG, and offers of alcohol, tobacco and tobacco products) must be declined whatever their value and whatever their source.
- 9.5. CCG staff should:
  - report immediately all offers of unreasonably generous gifts to the Head of Corporate Governance. The Head of Corporate governance will then consult with the LCFS to consider if a criminal offence of bribery is suspected. If an offence is suspected, the gift will be retained by the CCG as it may be evidence in a criminal investigation. If an offence of bribery is not suspected, staff should return promptly any unacceptable gifts, with a letter politely explaining the terms of this policy and stating why the gift cannot be accepted; and
  - with the exception of the items of small value described in 9.1 above, make a written declaration of all gifts, whether accepted or declined, to the Head of Corporate Governance for recording in the register of gifts and hospitality
- 9.6. CCG staff should exercise discretion in accepting offers of hospitality from contractors, other organisations or individuals concerned with the supply of goods or services. Modest hospitality provided in normal and reasonable circumstances during the course of working visits may be acceptable, although it should be on a similar scale to that which the CCG might offer in similar circumstances, e.g. hospitality provided at meetings, events, seminars. In cases of doubt, advice should be sought from the Head of Corporate Governance and/or Director of Governance & Performance.
- 9.7. Modest hospitality under the value of £25 provided in normal and reasonable circumstances may be acceptable, although it should be on a similar scale to that which the CCG might offer in similar circumstances (e.g. tea, coffee, light refreshments at meetings). A common sense approach should be adopted as to whether hospitality offered is modest or not. Hospitality of this nature does not need to be declared nor recorded on the register, unless it is offered by suppliers or contracts linked (currently or prospectively) to the CCG's business.

- 9.8. Hospitality of a value between £25 and £75 may be accepted and must be declared. The receiver should seek evidence to retain that the value of the hospitality is under £75. If in any doubt, the receiver must declare the offer.
- 9.9 CCG staff should be especially cautious of accepting small items of value, or hospitality over that afforded in a normal meeting environment (i.e. beverages) during a procurement process or from bidders/potential bidders. This avoids any potential claim of unfair influence, collusion or canvassing.
- 9.10 Offers of hospitality which go beyond modest or are of a type that the CCG itself would not offer should be politely refused, e.g. hospitality of a value above £75, offers of foreign travel and accommodation, subject to the exceptions outlined within the Gifts & Hospitality policy
- 9.11 Care should be taken when providing hospitality. Avoid providing hospitality at non-business locations unless there is a clear need to do so – this should be agreed in advance by the responsible budget holder. Any hospitality provided should be modest.

## **10. Outside employment and private practice**

- 10.1. Employees of the CCG are required to inform the CCG if they are engaged in or wish to engage in outside employment in addition to their work with the CCG. The purpose of this is to ensure that the CCG is aware of any potential conflict of interest with their CCG employment. Examples of work which might conflict with the business of the CCG include:
  - employment with another NHS body;
  - employment with another organisation which might be in a position to supply goods/services to the CCG, including paid advisory positions and paid honorariums which relate to bodies likely to do business with the CCG;
  - Directorships e.g. of a GP federation or non-executive roles, and
  - self-employment, including private practice, charitable trustee roles, political roles and consultancy work, in a capacity which might conflict with the work of the CCG or roles which might be in a position to supply goods/services to the CCG.
- 10.2. An annual reminder will be sent to all CCG staff about this requirement and all declared activities will be reviewed by line managers and the Director of Governance and Performance to ensure that any conflicts are being actively managed.
- 10.3. Agreement to engage in outside employment/private practice will be required from line management and approved by the Director of Governance and Performance.

The CCG reserves the right to refuse permission where it believes a conflict will arise.

## **11. Political activities**

- 11.1. Any political activity should not identify an individual as an employee of the CCG. Conferences or functions run by a party political organisation should not be attended in an official capacity, except with prior written permission from the Director of Governance and Performance.

## **12. Commercial sponsorship**

- 12.1. CCG staff may accept commercial sponsorship for courses, conferences, post/project funding, meetings and publications if they are reasonably justifiable and in accordance with the principles set out in this policy. In cases of doubt advice should be sought from a line manager. Permission (with details of the proposed sponsorship) must be obtained from the Director of Governance and Performance in writing in advance.
- 12.2. Acceptance of commercial sponsorship should not in any way compromise commissioning decisions of the CCG or be dependent on the purchase or supply of goods or services.
- 12.3. Sponsors should not have any influence over the content of an event, meeting, seminar, publication or training event.
- 12.4. The CCG should not endorse individual companies or their products. It should be made clear that the fact of sponsorship does not mean that the CCG endorses a company's products or services.
- 12.5. During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection legislation.
- 12.6. No information should be supplied to a company for their commercial gain unless there is a clear benefit to the NHS. As a general rule, information which is not in the public domain should not normally be supplied.

## **13. Suppliers and contractors**

- 13.1. All CCG staff who are in contact with suppliers and contractors (including external consultants), and in particular those who are authorised to sign purchase orders or enter into contracts for goods and services are expected to adhere to professional standards in line with those set out in the [Code of Ethics of the Chartered Institute of Purchasing and Supply](#).

- 13.2. All CCG staff must treat prospective contractors or suppliers of services to the CCG equally and in a non-discriminatory way and act in a transparent manner.
- 13.3. During any procurement process the CCG needs to maintain a register of procurement decisions taken, including:
- the details of the decision;
  - Supporting documentation;
  - who was involved in making the decision (i.e. governing body or committee members and others with decision-making responsibility); and
  - a summary of any conflicts of interest in relation to the decision and how this was managed by the CCG.

The register will be maintained by the Head of Contracts and will be updated whenever a procurement decision is taken.

- 13.4 CCG staff involved in the awarding of contracts and tender processes must take no part in a selection process if a personal interest or conflict of interest is known. Such an interest must be declared to the Head of Corporate Governance and/or Director of Governance and Performance as soon as it becomes apparent. CCG staff should not at any time seek to give undue advantage to any private business or other interests in the course of their duties.
- 13.5. The CCG has duties under European and UK procurement law and CCG staff must comply with standing financial instructions (SFIs) in relation to all contract opportunities with the CCG.
- 13.6. CCG staff must not seek, or accept, preferential rates or benefits in kind for private transactions carried out with companies with which they have had, or may have, official dealings on behalf of the CCG. This does not apply to officers' and members' benefit schemes offered by the NHS or trade unions.
- 13.7. CCG staff invited to visit organisations to inspect equipment (e.g. software or training aids) for the purpose of advising on its purchase will be reimbursed for their travelling expenses in accordance with the travel expenses policy laid down by the CCG. Such expenses should not be claimed from other organisations to avoid compromising the purchasing decisions of the CCG.
- 13.8. Every invitation to tender to a prospective bidder for CCG business must require each bidder to give a written undertaking, not to engage in collusive tendering or other restrictive practice and not to engage in canvassing the CCG, its employees or officers concerning the contract opportunity tendered.
- 13.9 Offers of pro bono work from prospective bidders for CCG business should be

politely refused. The Head of Corporate Governance should be informed of any such offers so that these may be recorded

#### **14. Initiatives**

- 14.1. As a general principle any financial gain resulting from external work where use of CCG time or title is involved (eg, speaking at training events/conferences, writing articles etc, even when done in own time) and/or which is connected with CCG business will be paid to the CCG.
- 14.2. Any patents, designs, trademarks or copyright resulting from the work (eg, research) of an employee of the CCG carried out as part of their employment by the CCG shall be the Intellectual Property of the CCG.
- 14.3. Approval from the Director of Governance and Performance should be sought prior to entering into an obligation to undertake external work connected with the business of the CCG, eg writing articles for publication, speaking at conferences.
- 14.4. Where the undertaking of external work, gaining patent or copyright or the involvement in innovative work benefits or enhances the CCG's reputation or results in financial gain for the CCG, consideration will be given to rewarding employees subject to any relevant guidance for the management of Intellectual Property in the NHS issued by the Department of Health.

#### **15. Confidentiality**

- 15.1. Information concerning the CCG which is not in the public domain must not at any time be divulged to any unauthorised person. Similarly, patient data or personal data concerning staff must not be divulged, in line with the Data Protection Act, 1998. This duty of confidence remains after termination of employment and applies to all individuals working within CCG.
- 15.2. Care should be taken that confidentiality is not breached inadvertently by, for instance discussing confidential matters in public places, such as whilst travelling by train, or by leaving portable IT equipment containing confidential information where it might easily be stolen, such as on full view in a parked car. Data should only be distributed using mechanisms with an appropriate level of security.
- 15.3. CCG staff must maintain confidentiality of information at all times, both commercial data and personal data, as defined by the Data Protection Act 2018.
- 15.4. CCG staff should guard against providing information on the operations of the CCG which might provide a commercial advantage to any organisation (private or NHS) in a position to supply goods or services to the CCG. For particularly sensitive procurements/contracts CCG staff may be asked to sign a nondisclosure

agreement.

## **16. Management arrangements**

- 16.1. CCG staff should be aware that a breach of this policy could render them liable to prosecution as well as leading to the termination of their employment or position with the CCG.
- 16.2. CCG staff who fail to disclose any relevant interests, outside employment or receipt of gifts or hospitality as required by this policy or the CCG's SOs and SFIs may be subject to disciplinary action which could, ultimately, result in the termination of their employment or position with the CCG.
- 16.3. The Director of Governance and Performance, supported by the Head of Corporate Governance, will be responsible for maintaining the register of interests, holding the hospitality register and reviewing the implementation of this policy.

## **17. Complaints**

- 17.1. CCG staff who wish to report suspected or known breaches of this policy should inform the Director of Governance and Performance, who is also the Executive Director for Whistleblowing. All such notifications will be held in the strictest confidence and the person notifying the Director of Governance and Performance can expect a full explanation of any decisions taken as a result of any investigation.
- 17.2. Any member of CCG staff who feels they have been unreasonably refused permission to undertake an activity under the auspices of this policy may refer their case to the Accountable Officer, who will review the decision with the Lay Board Member for Governance.

## **18. Review**

- 18.1. The Standards of Business Conduct policy will be reviewed annually.

## **19. References**

- Managing Conflicts of Interest: Revised Statutory Guidance for CCGs, June 2017
- Nolan Principles on Conduct in Public Life (Appendix A)
- Standards for members of NHS Boards and Clinical Commissioning Group

- governing bodies in England (The Professional Standards Authority)
- Code of Conduct for NHS Managers;
  - NHS Codes of Conduct and Accountability (NHS Appointments Commission & Department of Health – amended July 2004)
  - Code of Practice on Openness in the NHS
  - Code of Ethics of the Chartered Institute of Purchasing and Supply
  - Data Protection Act 2018
  - Bribery Act 2010
  - Fraud Act 2006

## Appendix A

### The seven principles of public life set out by the Committee on standards in public life (the Nolan principles)

#### 1. Selflessness

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

#### 2. Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

#### 3. Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for awards or benefits, holders of public office should make choices on merit.

#### 4. Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

#### 5. Openness

Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

#### 6. Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

#### 7. Leadership



1 Holders of public office should promote and support these principles by leadership and example.