




DECLARATIONS OF INTEREST POLICY

Policy number and category	CG04	Corporate Governance
Version number and date	3	March 2024
Ratifying committee or executive director	FPP approval & ratification by the Audit Committee	
Date ratified	March 2024	
Next anticipated review	March 2027	
Executive director	Executive Director of Finance	
Policy lead	Associate Director of Corporate Governance	
Policy author (if different from above)	As above	
Exec Sign off Signature (electronic)		
Disclosable under Freedom of Information Act 2000	Yes	

Policy context

- In response to mounting pressure for greater transparency on declaration of interests within the NHS, in October 2016, NHS England released a consultation document for 'Managing Conflicts of Interest'.
- In February 2017 NHS England followed up and published 'Managing Conflicts of Interest in the NHS, Guidance for Staff and Organisations', which sets down guidance for all NHS Organisations to follow as from 1st June 2017.
- As a public sector organisation, the Trust has a duty to ensure that it is impartial and honest in the conduct of its business and employees. This policy provides guidance to ensure that staff and independent contractors are clear about the systems and processes in place when seeking sponsorship and the receipt of gifts and hospitality and around declarations of interest.
- The aim of the policy is to provide guidance around declarations and improve efficiency on the process and clarify an expectation that **all staff are required to declare any secondary working or interests**; additionally, staff who are Band 8 and above (as well as those who are Band 7 and above in certain services highlighted below) are required to make an annual declaration, inclusive of nil returns.
- It defines responsibilities for all staff and managers including HMP Birmingham Staff.

Policy requirement (see Section 2)

- For the protection of staff and the Trust's reputation, it is important that interests are declared, and any offers gifts and hospitality are reported, whether or not they are accepted. This Policy should be read in association with: - Anti-Fraud and Anti-Bribery Policy
 - Standing Financial Instructions
 - BSMHFT Pay Policy
 - Disciplinary Policy
 - Grievance Policy
 - Freedom to Speak Up Policy

Contents

1	Introduction.....	3
1.1	Rationale	3
1.2	Scope	3
1.3	Principles	4
2	Policy.....	4
2.1	What is a `Conflict of interest?`	4
2.2	Type of Interests	4
2.3	Staff	5
2.4	Decision-making staff and those involved in second employment	5
2.5	How does this Policy apply to?	6
3	Procedure.....	6
3.1	How will this Policy be implemented?.....	6
3.2	Proactive review of interests.....	6
3.3	Records and Publication.....	7
3.4	Management of interests - general	8
3.5	Management of interests – common situation	8
3.6	What should be declared?	9
3.7	Management of interests – advice in specific contexts	16
3.8	Procurement	17
3.9	Dealing with Breaches	17
3.10	Taking action in response to breaches	18
3.11	Learning and transparency concerning breaches	19
3.12	Managing conflict of interests during meetings	19
4.	Responsibilities	19
5.	Development and Consultation process	20
6.	Reference documents	20
7.	Bibliography.....	20
8.	Glossary	21
9.	Audit and Assurance.....	21
10.	Appendices.....	22

1: Introduction:

As an organisation, BSMHFT, and the people who work with and for us, collaborate closely with other organisations in delivering high quality care for our patients. These partnerships have many benefits and should help ensure that public money is spent efficiently and wisely. But there is a risk that conflicts of interest may arise, and these need to be managed effectively to protect the Trust, its patients and staff.

Providing best value for taxpayers and ensuring that decisions are taken transparently, honestly and clearly, which are key principles in the NHS Constitution and aligned to our Trust values: - compassionate, inclusive and commitment. We are committed to maximising our resources for the benefit of the whole community. As an organisation and as individuals, we have a duty to ensure that all our dealings are conducted to the highest standards of integrity, probity, transparency, and that NHS monies are used wisely in the best interests of patients.

1.1 Rationale (why):

Adhering to this policy will help to ensure that we use NHS money wisely, providing best value for taxpayers and accountability to our patients for the decisions we take.

1.2 Scope (when, where and who):

Birmingham and Solihull Mental Health NHS Foundation Trust (BSMHFT) and the people, who work with and for us, collaborate closely with other organisations, delivering high quality care for our patients.

These partnerships have many benefits and should help ensure that public money is spent efficiently and wisely. But there is a risk that conflicts of interest may arise, we need to be appropriately managed.

This policy applies to all staff (including full time, part time, substantive and temporary) and volunteers, non-executive directors and governors and anyone else who is doing business on behalf of BSMHFT.

This includes individuals who are:

- Employed under a contract of employment with the Trust (including HMP Birmingham Staff).
- Employed under an honorary contract with the Trust.
- Unpaid volunteers of the Trust.
- Employed or contracted by SSL or the Mental Health Provider Collaborative.
- Engaged via an agency or via a personal services company.

It sets out rules that must be followed as well as providing support and guidance.

It does not cover payments made to the Trust, for example, for research or provision of equipment. It also does not cover charitable donations made to Trust Charity.

1.3 Principles (beliefs):

The Trust positively supports individuals with learning disabilities and ensures that no-one is prevented from accessing the full range of mental health services available. Staff will work collaboratively with colleagues from learning disabilities services and other organisations, in order to ensure that service users and carers have a positive episode of care whilst in our services. Information is shared appropriately in order to support this.

2: The policy:

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

This policy will help our staff manage conflicts of interest risks effectively by: -

- Introducing consistent principles and rules.
- Providing simple advice around what to do in common situations.
- Supporting good judgement about how to approach and manage interests.

2.1 What is a `conflict of interest? 'A `conflict of interest' is:

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

A conflict of interest may be:

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

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

2.2 Type of Interests

Interests fall into the following categories:

- **Financial interests:**
Where an individual may get direct financial benefit from the consequences of a decision, they are involved in making.
- **Non-financial professional interests:**

Where an individual may obtain a non-financial professional benefit from the consequences of a decision, they are involved in making, such as increasing their professional reputation or promoting their professional career.

- **Non-financial personal interests:**

Where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit, because of decisions they are involved in making in their professional career.

- **Indirect interests:**

Where an individual has a close association (e.g. close family members and relatives, close friends and associates, and business partners) with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest and could stand to benefit from a decision they are involved in making.

- **Loyalty Interests:**

Carefully consider whether an individual's role in another organisation could result in actual or perceived conflicts of interest – could it influence the decisions they make, such as decisions on the spending of taxpayers' money? - and whether or not that outweighs the value of the knowledge they bring to the process.

2.3 Staff

The NHS England have published as a guidance some frequently asked questions for specific staff groups on the issues posed and how the guidance applies to you. These are available at www.england.nhs.uk/ourwork/coi

At BSMHFT we use the skills of many different people, all of whom are vital to our work. This includes people on differing employment terms, who for the purposes of this policy we refer to as 'staff' and are listed below:

- All salaried employees.
- Non-Executive Directors
- Governors
- All prospective employees – who are part-way through recruitment.
- Contractors and sub-contractors including bidders.
- Agency staff; and Temporary Workers via TSS.
- Committee, sub-committee and advisory group members (who may not be directly employed or engaged by the organisation).

2.4 Decision making staff and those involved in second employment.

Some staff are more likely than others to have a decision-making influence on the use of taxpayers' money, because of the requirements of their role. For the purposes of this policy these people are referred to as 'decision making staff.'

The NHS Standard Contract stipulates that all decision making staff are required to make an annual declaration, this means that they are required to declare any interests, as required by all staff, however if they have nothing to declare, they must make a 'nil declaration'.

2.5 Who does this policy apply to?

This Policy applies to:

- All decision makers (i.e. all staff from band 8B and above) irrespective of their staff group.
- Executive and Non-Executive Directors.
- All staff in the Procurement, Commissioning and Contract Management Teams irrespective of their band.
- All Doctors (Junior Doctors, ST4-ST6 etc)
- Consultant Medical Staff.
- Psychological Professionals from Agenda for Change band 7 and above.
- All nurses, Allied Health Professionals and psychiatrists on Agenda for Change band 7 and above.

Staff in the above groups are expected to make annual declaration of interests or 'Nil interest' where they hold no interest, however, **all staff**, in any role, are expected to declare any secondary employment they hold outside of the Trust. Staff employed in AFC bands lower than 8B except for those staff groups specifically identified here will **ONLY** be expected to declare any second or outside employment should they hold one.

3: The procedure:

All staff should identify and declare material interests at the earliest opportunity (and in any event within 28 days). If staff are in any doubt as to whether an interest is material then they should declare it, so that it can be considered. Declarations should be made:

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

3.1 How will this Policy be implemented?

As the remit of this Policy has been widened to include colleagues who were not previously explicitly covered, the following steps will be taken to ensure smooth implementation:-

- Greater publicity including comms will be sent out to all staff across the Trust.
- Policy will be disseminated to colleagues via local CGC and Directorate meetings and other existing network of meetings.
- A launch will be publicised.
- Targeted publicity for staff groups like Nurses, AHPs and Psychology.

During appraisals, Managers are advised to check with their supervisees if they hold any interests or second jobs and if they have declared them on the 'Declare System'?

Managers should encourage all staff to **declare any interests and/or second jobs they may hold or to make a nil declaration if they don't hold any interest, by reminding them to: -**

Visit our Declarations of Interests Website to via the link below:-

<https://bsmhft.mydeclarations.co.uk/login>

In the case where you need to reset your password, please follow the password reset link below:

<https://bsmhft.mydeclarations.co.uk/reminder> (your username is your NHS email address)

Further online guidance and prompts are accessible via the system.

Every Managers, Heads of Service and the members of the Corporate Governance team have responsibility to ensure this Policy is widely publicised in the Service, Department or Division.

It is every staff members responsibility to ensure they are fully compliant where applicable.

The Company Secretary has responsibility for monitoring compliance, maintaining and publishing the registers of declared interests including outside or second employments, Gifts, Hospitality and Sponsorships.

After expiry, an interest will remain on register(s) for a minimum of 6 months and although some information may need to be redacted, this is a requirement of the 16/17 NHS Standard Contract. However, a private record of historic interests will be retained for a minimum of 6 years.

3.2 Proactive review of interests

Decision making staff will be prompted on a quarterly basis via internal comms as a result of any checks carried out by the Company Secretary or Associate Director of Corporate Governance to review declarations they have made and, as appropriate, update them or make a nil return. Heads of Services will review the Register at least annually ensuring that all decision-making staff have updated their interests in the previous 12 months (or made a nil return) and will consider any conflicts (potential or actual) as they arise and determine how these are to be dealt with.

3.3 Records and Publication

Maintenance

The organisation will maintain a Register of Interests.

Publication

We will:

- Publish the interests declared by decision making staff AfC Bands 8A and above; Consultant medical staff, Board of Directors, Governors and members of the Procurement Team.
- Refresh this information at least annually.
- Make this information available via the Trust's website.

If decision making staff have substantial grounds for believing that publication of their interests should not take place then they should contact the Company Secretary to explain why. In exceptional circumstances, for instance where publication of information might put a member of staff at risk of harm, information may be withheld or redacted on public

registers. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.

Wider transparency initiative

BSMHFT fully supports wider transparency initiatives in healthcare, and we encourage staff to engage actively with these.

Relevant staff are strongly encouraged to give their consent for payments they receive from the pharmaceutical industry to be disclosed as part of the Association of British Pharmaceutical Industry (ABPI) Disclosure UK initiative. These “transfers of value” include payments relating to:

- Speaking at and chairing meetings.
- Training services.
- Advisory board meetings.
- Fees and expenses paid to healthcare professionals.
- Sponsorship of attendance at meetings, which includes registration fees and the costs of accommodation and travel, both inside and outside the UK.
- Donations, grants and benefits in kind provided to healthcare organisations.

Further information about the scheme can be found on the ABPI website:

<http://www.abpi.org.uk/our-work/disclosure/about/Pages/default.aspx>

3.4 Management of Interests – general

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

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

Each case will be different and context-specific, and BSMHFT will always clarify the circumstances and issues with the individuals involved. Staff should maintain a written audit trail of information considered and actions taken.

Staff who declare material interests should make their line manager or the person(s) they are working to aware of their existence. However, as part of good practice, openness and transparency, the Company Secretary should be made aware of any material conflicts as assurance will be provided to the Board and Audit Committee on how these are being managed.

3.5 Management of Interests – common situation

This section sets out the principles and rules to be adopted by staff in common situations, and what information should be declared.

Individuals are not required to declare all associations they may have outside BSMHFT, only those which relate to or could impact on the activities of BSMHFT. Individuals should

register all relevant interests and should declare any relevant interest when dealing with or discussing a matter to which it is pertinent. Relevant interests may include both financial and nonfinancial interests. The test of relevance is whether the interest might reasonably be thought by the public to affect the way in which an individual discharges his or her duties. The test therefore is not just whether an individual's action will be influenced by the interest but whether the public might reasonably think that this may be the case.

Only current interests need normally to be declared, but it is possible that on occasions a past interest will or could influence present behaviour. Individuals should assess the relevance and necessity to divulge this information and whether this interest will also need to be declared.

It is impossible to prescribe a comprehensive set of rules on interests. Examples of possible conflicts of interest can be found in Appendix 1. This list is not exhaustive. Appendices 2 and 3 contain extracts from the Constitution and define "material" interests that must be declared by Governors and Board of Directors respectively.

If individuals covered by this policy have interests not specified here but which they believe could be regarded as influencing their actions carrying out their role, they should declare them. Individuals are best placed to know their duties with other bodies and associations and where these might conflict with the objectives and business of BSMHFT. As a general rule, individuals have a personal duty and responsibility to make all necessary declarations and, if in any doubt, the individual must discuss and seek advice from their Line Manager or the Company Secretary on whether or not the issue does or does not constitute a conflict of interest.

However, neither the BSMHFT nor individuals covered by this policy are under an obligation to search out links between one company or organisation or another of which they are unaware and could not reasonably be expected to be aware.

3.6 What should be declared?

Gifts

Staff should not accept gifts that may affect, or be seen to affect, their professional judgement. However, as best practice staff should declare all gifts and hospitality that have been offered to them including where they had declined such gifts and hospitality, as this will ensure full transparency.

Gifts from suppliers or contractors:

- Gifts from suppliers or contractors doing business (or likely to do business) with the organisation should be politely declined, whatever their value.
- Low cost branded promotional aids such as pens or post-it notes may, however, be accepted where they are under the value of £6 in total, and need not be declared (The £6 value has been selected with reference to existing industry guidance issued by the ABPI: <http://www.pmcpa.org.uk/thecode/Pages/default.aspx>)

Gifts from other sources (e.g. patients, families, service users):

- Gifts of cash and vouchers to individuals should always be politely declined.
- Staff should not ask for any gifts.
- Gifts valued at over £50 should be treated with caution and only be accepted on behalf of BSMHFT as a charitable donation to BSMHFT Caring Minds and not in a personal capacity. These should also be declared by staff.

- Modest gifts accepted under a value of £50 do not need to be declared.
- A common sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value).
- Multiple gifts from the same source over a 12 month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.

What should be declared

- Staff name and their role with the organisation.
- A description of the nature and value of the gift, including its source.
- Date of receipt.
- Any other relevant information (e.g. circumstances surrounding the gift, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy). The online declaration system provides comprehensive guidance and prompts.

Hospitality

Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.

Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event.

Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. This can be accepted, and must be declared, if modest and reasonable. Senior approval must be obtained.

Meals and refreshments:

- Under a value of £25 - may be accepted and need not be declared.
- Of a value between £25 and £75 - may be accepted and must be declared. (The £75 value has been selected with reference to existing industry guidance issued by the ABPI <http://www.pmcpa.org.uk/thecode/Pages/default.aspx>)
- Over a value of £75 - should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept.

Travel and accommodation:

- Modest offers to pay some or all of the travel and accommodation costs related to attendance at events may be accepted and must be declared.
- Offers which go beyond modest, or are of a type that the organisation itself might not usually offer, need approval by senior staff, should only be accepted in exceptional circumstances, and must be declared. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept travel and accommodation of this type. A non-exhaustive list of examples includes:
- offers of business class or first class travel and accommodation (including domestic travel).

- offers of foreign travel and accommodation.

What should be declared

- Staff name and their role with the organisation.
- The nature and value of the hospitality including the circumstances.
- Date of receipt.
- Any other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy)

Outside Employment (Not including BSMHFT Bank Shifts)

All staff should declare any existing outside employment on appointment and any new outside employment when it arises. Best practice would require that all staff should declare such outside employment prior to commencement of the employment. Usually, permission is sought from the primary employer to ensure there is no conflict with their role at the Trust.

Where a risk of conflict of interest arises, the general management actions outlined in this policy should be considered and applied to mitigate risks.

Where contracts of employment or terms and conditions of engagement permit, staff may be required to seek prior approval from the organisation to engage in outside employment.

The organisation may also have legitimate reasons within employment law for knowing about outside employment of staff, even when this does not give rise to risk of a conflict.

Whilst in the employment of the BSMHFT, staff should not engage in outside employment without the written permission of the Trust. Any outside employments need to be registered with the Human Resources department on appointment. Staff will also need to inform Human Resources Department immediately of any changes to the information provided to them regarding outside employment (for further details please refer to the BSMHFT Pay Policy).

What should be declared

- Staff name and their role with the organisation.
- The nature of the outside employment (e.g. who it is with, a description of duties, time commitment).
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Shareholdings and other ownership issue

Staff should declare, as a minimum, any shareholdings and other ownership interests in any publicly listed, private or not-for-profit company, business, partnership or consultancy which is doing, or might be reasonably expected to do, business with the organisation.

Where shareholdings or other ownership interests are declared and give rise to risk of conflicts of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.

What should be declared

- Staff name and their role with the organisation.
- Nature of the shareholdings/other ownership interest.
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Patents

Staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are on-going, which are, or might be reasonably expected to be, related to items to be procured or used by the organisation.

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

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

What should be declared

- Staff name and their role with the organisation.
- A description of the patent.
- Relevant dates.
- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Loyalty interests

Loyalty interests should be declared by staff involved in decision making or where applicable hold second employments whereby they:

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

What should be declared

- Staff name and their role with the organisation.
- Nature of the loyalty interest.
- Any second or outside employments.
- Relevant dates.

- Other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Donations

Donations made by suppliers or bodies seeking to do business with the organisation should be treated with caution and not routinely accepted. In exceptional circumstances they may be accepted but should always be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value.

Staff should not actively solicit charitable donations unless this is a prescribed or expected part of their duties for the organisation, or is being pursued on behalf of the organisation's own registered charity or other charitable body and is not for their own personal gain.

Staff must obtain permission from the organisation if in their professional role they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign for a charity other than the organisation's own.

Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued.

Staff wishing to make a donation to a charitable fund in lieu of receiving a professional fee may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

What should be declared

The organisation will maintain records in line with the above principles and rules and relevant obligations under charity law.

Sponsored events

Sponsorship of events by appropriate external bodies will only be approved if a reasonable person would conclude that the event will result in clear benefit the organisations and the NHS.

During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.

No information should be supplied to the sponsor from whom they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.

At the organisation's discretion, sponsors or their representatives may attend or take part in the event but they should not have a dominant influence over the content or the main purpose of the event.

The involvement of a sponsor in an event should always be clearly identified.

Staff within the organisation involved in securing sponsorship of events should make it clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event.

Staff arranging sponsored events must declare this to the organisation.

What should be declared

The organisation will maintain records regarding sponsored events in line with the above principles and rules.

Sponsored research

Funding sources for research purposes must be transparent.

Any proposed research must go through the relevant health research authority or other approvals process.

There must be a written protocol and written contract between staff, the organisation, and/or institutes at which the study will take place and the sponsoring organisation, which specifies the nature of the services to be provided and the payment for those services.

The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.

Staff should declare involvement with sponsored research to the organisation

What should be declared

The organisation will retain written records of sponsorship of research, in line with the above principles and rules.

Staff should declare:

- Their name and their role with the organisation.
- Nature of their involvement in the sponsored research.
- Relevant dates.
- Other relevant information (e.g. what, if any, benefit the sponsor derives from the sponsorship, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Sponsored posts

External sponsorship of a post requires prior approval from the organisation.

Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate.

Sponsorship of a post should only happen where there is written confirmation that the arrangements will have no effect on purchasing decisions or prescribing and dispensing habits. This should be audited for the duration of the sponsorship. Written agreements should detail the circumstances under which organisations have the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise.

Sponsored post holders must not promote or favour the sponsor's products, and information about alternative products and suppliers should be provided.

Sponsors should not have any undue influence over the duties of the post or have any preferential access to services, materials or intellectual property relating to or developed in connection with the sponsored posts.

What should be declared

The organisation will retain written records of sponsorship of posts, in line with the above principles and rules.

Staff should declare any other interests arising as a result of their association with the sponsor, in line with the content in the rest of this policy.

Clinical private practice

All clinical staff should declare all private practice on appointment, including those with job plans, should ensure their private practice is declared as part of their job plans and/or any new private practice when it arises including:

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

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

- Seek prior approval of their organisation before taking up private practice.
- Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work
- Not accept direct or indirect financial incentives from private providers other than those allowed by Competition and Markets Authority guidelines:
<https://www.gov.uk/government/organisations/competition-and-markets-authority>

Consultants and all staff who provide private clinical practice should not initiate discussions about providing their Private Professional Services for NHS patients, nor should they ask other staff to initiate such discussions on their behalf.

What should be declared

- Staff name and their role with the organisation.
- A description of the nature of the private practice (e.g. what, where and when staff practise, sessional activity, etc).
- Relevant dates.
- Any other relevant information (e.g. action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this Policy).

CATEGORY 2 (and other fee paying work).

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

- MHA undertaken during rota time – no fee payable even if Trust resource used;
- MHA / OFP work undertaken in own time (evenings, annual leave) – no Trust resource used (other than accessing notes as required) – no fee payable
- MHA / OFP work undertaken in own time but Trust resource used – Fee payable therefore include on the form

- MHA /OFP work undertaken in Trust time (time-shifting) – no Trust resource used – no fee payable – we do however need this to be recorded on the form so we have a central record of how much time shifting is taking place.
- MHA /OFP undertaken in Trust time (time-shifting) – Trust resource used – fee payable and declared on form.

Trust Resource', for the purposes of declarations regarding Cat 2 and fee paying work, includes use of Trust buildings, office use, printing, stationary, secretarial support (phone calls, report writing etc – note any secretarial support for typing up reports must be done outside of Trust time), equipment or postage and accessing notes. For the avoidance of doubt the time shifting process allows for up to 4 hours per week to be time shifted for category 2 fee paying work. Ideally the work should be done in your own time or time shifted within the levels allowed, if you are intending to undertake the work during normal working hours. Otherwise the contribution fee will be payable (see appendix 4). A link to this form is available at <https://bsmhft.mydeclarations.co.uk/login>

3.7 Management of Interests – advice in specific contexts

In common with other NHS bodies, BSMHFT uses a variety of different groups to make key strategic decisions about things such as:

- Entering into (or renewing) large scale contracts.
- Awarding grants.
- Making procurement decisions.
- Selection of medicines, equipment, and devices

The interest of those who are involved in these groups should be well known so that they can be managed effectively. For this organisation these groups are:

- The Board of Directors.
- The Board sub-committees.
- Procurement and Contract Groups.

For These groups should adopt the following principles:

- Chairs should consider any known interests of members in advance, and begin each meeting by asking for declaration of relevant material interests.
- Members should take personal responsibility for declaring material interests at the beginning of each meeting and as they arise.
- Any new interests identified should be added to the organisation's register(s).
- The vice chair (or other non-conflicted member) should chair all or part of the meeting if the chair has an interest that may prejudice their judgement.

If a member has an actual or potential interest the chair should consider the following approaches and ensure that the reason for the chosen action is documented in minutes or records:

- Requiring the member to not attend the meeting.
- Excluding the member from receiving meeting papers relating to their interest.
- Excluding the member from all or part of the relevant discussion and decision.
- Noting the nature and extent of the interest, but judging it appropriate to allow the member to remain and participate.

- Removing the member from the group or process altogether.

The default response should not always be to exclude members with interests, as this may have a detrimental effect on the quality of the decision being made. Good judgement is required to ensure proportionate management of risk.

3.8 Procurement

Procurement should be managed in an open and transparent manner, compliant with procurement and other relevant law, to ensure there is no discrimination against or in favour of any provider. Procurement processes should be conducted in a manner that does not constitute anti-competitive behaviour - which is against the interest of patients and the public.

Those involved in procurement exercises for and on behalf of the organisation should keep records that show a clear audit trail of how conflicts of interest have been identified and managed as part of procurement processes. At every stage of procurement steps should be taken to identify and manage conflicts of interest to ensure and to protect the integrity of the process.

Procurement advice can be sought from the Procurement Team.

3.9 Dealing with Breaches

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

Staff who are aware about actual breaches of this Policy, or who are concerned that there has been, or may be, a breach, should report these concerns to the Company Secretary.

Adherence to BSMHFT Policy is mandatory in order to identify and manage current or potential conflicts which may arise between the interests of BSMHFT and the personal interests, associations and relationships of individuals carrying out work for BSMHFT. Any breach of this Policy may be treated as a disciplinary offence and a potential outcome of which could result in dismissal.

Failure to adhere to the Declaration of Interests Policy may constitute potential criminal offences of fraud or bribery, as an individual could be gaining unfair advantage or financial rewards for himself or a family member, friend or associate.

Anyone who suspects that a relevant interest may not have been declared should report it to the Local Counter Fraud Specialist and/or the Executive Director of Finance.

To ensure that interests are effectively managed staff are encouraged to speak up about actual or suspected breaches. Every individual has a responsibility to do this. For further information about how concerns should be raised refer to the Freedom To Speak Up Raising Concerns Policy.

The organisation will investigate each reported breach according to its own specific facts and merits and give relevant parties the opportunity to explain and clarify any relevant circumstances.

Following investigation, the organisation will:

- Decide if there has been or is potential for a breach and if so then, what severity of the breach is.
- Assess whether further action is required in response – this is likely to involve any staff member involved and their line manager, as a minimum.
- Consider who else inside and outside the organisation should be made aware
- Take appropriate action as set out in the next section.

3.10 Taking action in response to breaches

Action taken in response to breaches of this Policy will be in accordance with the disciplinary procedures of the organisation and could involve organisational leads for staff support (e.g. Human Resources), counter fraud (e.g. Local Counter Fraud Specialists; i.e. Emily Wood, LCFS, emily.wood10@nhs.net, +44 113 285 5026), members of the management or executive teams and organisational auditors.

Breaches could require action in one or more of the following ways:

Clarification or strengthening of existing Policy, process and procedures.

- Consideration as to whether HR/employment law/contractual action should be taken against staff or others.
- Consideration being given to escalation to external parties. This might include referral of matters to external auditors, NHS Protect, the Police, statutory health bodies (such as NHS England, NHS Improvement or the CQC), and/or health professional regulatory bodies.

Inappropriate or ineffective management of interests can have serious implications for the organisation and staff. There will be occasions where it is necessary to consider the imposition of sanctions for breaches.

Sanctions should not be considered until the circumstances surrounding breaches have been properly investigated. However, if such investigations establish wrong-doing or fault then the organisation can and will consider the range of possible sanctions that are available, in a manner which is proportionate to the breach. This includes:

- Employment law action against staff, which might include.
 - Informal action (such as reprimand or signposting to training and/or guidance).
 - Formal disciplinary action (such as formal warning, the requirement for additional training, re-arrangement of duties, re-deployment, demotion, or dismissal as per the Trust's Disciplinary Policy).
- Reporting incidents to the external parties described above for them to consider what further investigations or sanctions might be.
- Contractual action, such as exercise of remedies or sanctions against the body or staff which caused the breach.
- Legal action, such as investigation and prosecution under fraud, bribery and corruption legislation

3.11 Learning and transparency concerning breaches.

Reports on breaches, the impact of these, and action taken will be considered by the Audit Committee.

To ensure that lessons are learnt and management of interests can continually improve, anonymised information on breaches, the impact of these, and action taken will be prepared and made available for inspection by the public upon request.

3.12. Managing conflict of interests during meetings

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

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

Each case will be different and context-specific, and BSMHFT will always clarify the circumstances and issues with the individuals involved. Staff should maintain a written audit trail of information considered and actions taken.

Staff who declare material interests should make their line manager or the person(s) they are working to aware of their existence.

4: Responsibilities

This should summarise defined responsibilities relevant to the policy.

Post(s)	Responsibilities	Ref
All Staff	<ul style="list-style-type: none">• Familiarise yourself with this policy and follow it. Refer to the guidance for the rationale behind this policy https://www.england.nhs.uk/wpcontent/uploads/2017/02/guidancemanaging-conflicts-of-interest-nhs.pdf• Use your common sense and judgement to consider whether the interests you have could affect the way taxpayers' money is spent.• Regularly consider what interests you have and declare these as they arise. If in doubt, declare.• Should not misuse your position to further your own interests or those close to you.• Staff should not be influenced, or give the impression that you have been influenced by outside interests.	

	<ul style="list-style-type: none"> • Should not allow outside interests you have to inappropriately affect the decisions you make when using taxpayers' money. • To declare any outside or second employments, gifts, benefits, interests and sponsorship of any kind. 	
Service, Clinical and Corporate Directors	<ul style="list-style-type: none"> • To ensure declarations are made in accordance with the policy by themselves to the Company Secretary and to them by their staff for holding in a local register. 	
Policy Lead	<ul style="list-style-type: none"> • Company Secretary to maintain the database, be the lead the review and implementation of the NHS Providers Guidance. 	
Executive Director	<ul style="list-style-type: none"> • To ensure relevant staff within their portfolio are compliant with the Trust's Declarations of Interest Policy. 	
Others...	<ul style="list-style-type: none"> • To ensure they are fully compliant with the Trust's Declarations of Interest Policy. 	

5: Development and Consultation process:

Consultation summary		
Date policy issued for consultation	November 2023	
Number of versions produced for consultation	1	
Committees / meetings where policy formally discussed	Date(s)	
PDMG		
FPP		
Audit Committee		
Where received	Summary of feedback	Actions / Response

6: Reference documents

<http://connect/corporate/governance/Policies/Pay%20Policy.pdf> .

<http://connect/corporate/governance/Policies/Job%20planning%20policy.pdf>

7: Bibliography:

- Freedom of Information Act
- 2000 ABPI: The Code of Practice for the Pharmaceutical Industry (2014)

- ABHI Code of Business Practice NHS Code of Conduct & Accountability (July 20040)
- Freedom To Speak Up Raising Concerns Policy
- Counter Fraud and Anti-Bribery Policy
- Pay Policy
- Relationship between BSMHFT and Pharmaceutical Industry Policy
- BSMHFT Constitution
- Grievance and Disputes Policy
- Relationships at Work Policy

8: Glossary consisting of:

In A 'conflict of interest' is:

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

A conflict of interest may be:

Actual - there is a material conflict between one or more interests.

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

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

9: Audit and assurance:

Element to be monitored	Lead	Tool	Frequency	Oversight Committee
Compliance (for staff groups as per this Policy)	Company Secretary and/or ADCG	Review of the Declaration of Interest Electronic database.	Annually	Annual report to Audit Committee
Monitoring compliance with declaration of interests for Board Members.	Company Secretary and/or ADCG	Review of Board members Public facing Declaration of Interest Register on the intranet.	Annually	Annual compliance Report to the Audit Committee.

10. Appendices:

- Appendix 1 – Equality Impact Assessment
- Appendix 2 – Examples of possible conflicts of interest
- Appendix 3 – Governors
- Appendix 4 – Board of Directors

Appendix 1

Equality Analysis Screening Form

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

Title of Policy	Declarations Policy		
Person Completing this policy	David Tita	Role or title	AD Corporate Governance
Division	Corporate Governance	Service Area	Corporate Governance
Date Started	December 2023	Date completed	December 2023
Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.			
This policy was already in place. It has been updated to reflected national requirements which came into force in June 2017 and the introduction of the online declarations website.			
Who will benefit from the policy?			
The organisation and staff.			
Does the policy affect service users, employees or the wider community? <i>Add any data you have on the groups affected split by Protected characteristic in the boxes below. Highlight how you have used the data to reduce any noted inequalities going forward</i>			
The Policy may indirectly affect service users, however, it will directly affect staff who hold interests, outside or second employments as they will be expected to declare these.			
Does the policy significantly affect service delivery, business processes or policy? <i>How will these reduce inequality?</i>			
N/A			
Does it involve a significant commitment of resources? <i>How will these reduce inequality?</i>			
N/A			

Does the policy relate to an area where there are known inequalities? (e.g. seclusion, accessibility, recruitment & progression)				
N/A				
Impacts on different Personal Protected Characteristics – Helpful Questions:				
<i>Does this policy promote equality of opportunity? Eliminate discrimination? Eliminate harassment? Eliminate victimisation?</i>			<i>Promote good community relations? Promote positive attitudes towards disabled people? Consider more favourable treatment of disabled people? Promote involvement and consultation? Protect and promote human rights?</i>	
Please click in the relevant impact box and include relevant data				
Personal Protected Characteristic	No/Minimum Impact	Negative Impact	Positive Impact	Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.
Age	X			It is anticipated that age will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair, reasonable and consistent manner irrespective of their age.
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your policy? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
Disability	X			It is anticipated that disability will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair, reasonable and consistent manner irrespective of any disclosed disability. The Trust have the Disability and Neuro Diversity Staff Network Group who currently support staff with disability. We also support staff with Reasonable adjustment with the Government 'Access to Work' Grant. This is dependent if the individual feel comfortable about being open about their disability especially where this may be a

				hidden disability or mental health issues. The current WDES is showing the Trust is ranked in the top 10% nationally in Recruitment and Reporting of harassment, bullying and abuse.
Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability? Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families?				
Gender	X			It is anticipated that gender will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair, reasonable and consistent manner irrespective of their gender identity. Currently gender is collated and there is a disparity around gender pay gap overall with an increase from 6.99% to 11.17%. The Trust has now set up a Women's Network and Men's Network who meet on a monthly basis.
This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your policy?				
Marriage or Civil Partnerships	X			It is anticipated that marriage or civil partnership will not have an impact in terms of discrimination as this policy ensures that the staff group who affected by this policy should be treated in a fair, reasonable and consistent manner irrespective of their marriage or civil partnership. This is dependent on staff feeling comfortable about being open about their Marriage or Civil Partnership.
People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?				
Pregnancy or Maternity	X			It is anticipated that pregnancy and maternity will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair,

				reasonable and consistent manner irrespective of this. However, the Trust will provide necessary support and reasonable adjustment for an employee who is pregnant or on maternity, paternity or adoption leave and this may be pausing the procedure for a temporary time. This is dependent on staff feeling comfortable about being open about their or their partners pregnancy, including miscarriage. We also have started the Women's Network where these matters can be discussed and shared there.
<p>This includes women having a baby and women just after they have had a baby</p> <p>Does your service accommodate the needs of expectant and post natal mothers both as staff and service users?</p> <p>Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?</p>				
Race or Ethnicity	X			The Trust is working towards a Anti Racist organisation and will be launching the Anti Racist Framework. It is anticipated that Race or Ethnicity will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair, reasonable and consistent manner irrespective of this. We also have the Race Equity Network and Anti Racist Campaign to support those who are facing racial discrimination.
<p>Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees</p> <p>What training does staff have to respond to the cultural needs of different ethnic groups?</p> <p>What arrangements are in place to communicate with people who do not have English as a first language?</p>				
Religion or Belief	X			Although this is a protected characteristic, we have some recorded data and this is subject to staff completing this. The Trust will provide necessary support and reasonable adjustment for employees and we also have the Spiritual Care Team. It is anticipated that religion or belief will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair, reasonable and

				consistent manner irrespective of this. This is also dependent on staff feeling comfortable about being open about their religion or belief.
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				
Sexual Orientation	X			Although this is a protected characteristic we have some recorded data and this is subject to staff completing this. We currently have LGBTQ Staff Network who meet regularly where information is shared. It is anticipated that sexual orientation will not have a negative impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair discrimination, reasonable and consistent manner irrespective of this. The Trust has also launched the LGBTQ+ campaign to support staff and training.
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				
Transgender or Gender Reassignment	X			Although this is a protected characteristic, this is not recorded. It is anticipated that Transgender or Gender Reassignment will not have an impact in terms of discrimination as this policy ensures that the staff group who are affected by this policy should be treated in a fair discrimination, reasonable and consistent manner irrespective of this. This is also dependent on staff feeling comfortable about being open about their being Transgender or undergoing Gender Reassignment. The Trust is currently offering Trans Awareness training to support staff.
This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your policy or service?				

Human Rights	X			<p>This policy is written to promote equality and remove any discrimination to ensure that everyone can fulfil their full potential within a Trust that is inclusive, compassionate, and committed. This is keeping in line with our Trust values, the NHS People’s Plan commitment to equality, diversity and inclusion and reflects the provisions of the Equality Act 2010.</p> <p>This policy applies to all, including applicants applying for a job, staff including agency, bank and volunteers, services users and carers, visitors, stakeholders, an any other third-party organisations who work in partnership with the Trust.</p>
<p>Affecting someone’s right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position?</p>				
<p>If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)</p>				
	Yes	No		
What do you consider the level of negative impact to be?	High Impact	Medium Impact	Low Impact	No Impact
				X
<p>If the impact could be discriminatory in law, please contact the Equality and Diversity Lead immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.</p> <p>If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the Equality and Diversity Lead before proceeding.</p>				

If the policy does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the **Equality and Diversity Lead**.

Action Planning:

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

Discussions took place with colleagues in the development of this policy.
EDI Leads will work with the organisation to reduce impact of any detriment experienced by reports of concerns.

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

Via the Board and Board Committees.
Feedback from reporters of concerns, escalating concerns through governance routes.
Regular audits and policy updates.

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

This is not relevant. The policy is applicable to all members of the Board and afc band 9 (Directors) staff and above regardless of their personal protected characteristics.

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

Appendix 2

EXAMPLES OF POSSIBLE CONFLICTS OF INTEREST

- a) The following are examples of what conflicts of interest could include. This list provides guidance, but is not exhaustive:
- b) Owning shares, other securities or other financial or commercial interests in a company which has tendered for work at BSMHFT, or which is competing against BSMHFT for the provision of services to a third party. (BSMHFT clearly has no objection to individuals holding private investments. However, they must not, in their official capacity, deal with matters affecting any negotiation, contract, purchase or sale in which they have a private interest).
- c) Where an individual holds a second employment position with another organisation, whether NHS related or not.
- d) Using any information acquired in the course of BSMHFT work to advance your financial interests or those of another.
- e) Holding any office or membership of a committee or Council of a body other than BSMHFT, whether in the public, private or voluntary sector, which directly conflicts with the services provided by BSMHFT, or its corporate principles and objectives.
- f) Receiving gifts, hospitality or other benefits of a significant nature which in any way relate to an individual's position within BSMHFT.
- g) The employment or other financial interest of a spouse, partner or close relative or associate which could reasonably be regarded as relevant to an individual's position within BSMHFT, eg relating to a relevant company, organisation or public body. (It is accepted that it is not always reasonable for individuals to be aware of all relevant interests of a family member).
- h) A non-pecuniary interest where an individual has other interests that might be thought to influence them, either wittingly or unwittingly, in performing the professional duties on behalf of BSMHFT.
- i) Close links with, or interest in, a particular Institution from which a grant or other funding application is being considered (eg employment or academic collaborations).
- j) Expectation of future employment with a particular company or organisation. Individuals should not give, or appear to give, advice or take decisions that might be influenced by the hope or expectation of future employment. This is to ensure that the company or organisation involved does not gain an unfair advantage over its competitors.

APPENDIX 3

Governors

“Material” Interests include any of the following;

Any directorship of a company

- a) Any interest or position in any firm, company, business or organisation (including any charitable or voluntary organisation) which has or is likely to have a trading or commercial relationship with the Foundation Trust;
- b) Any interest in an organisation providing health and social care services to the National Health Service;
- c) A position of authority in a charity or voluntary organisation in the field of health and social care;
- d) Any connection with any organisation, entity or company considering entering into a financial arrangement with the Foundation Trust including but not limited to lenders or banks.

Further provisions as to conflicts of interest of Governors are contained at paragraph 17 of the Foundation Trust’s Constitution.

APPENDIX 4

Board of Directors

Interests regarded as “material” include any of the following, held by a Director, or the spouse or partner of a Director:

- a) Any interest (excluding a holding of shares in a company whose shares are listed on any public exchange where the holding is less than 2% of the total shares in issue) or position held by a Director in any firm, company or business which has or is likely to have a trading or commercial relationship with the Foundation Trust.
- b) Any interest in a voluntary or other organisation providing health and social care services to the National Health Service.
- c) A position of authority in a charity or voluntary organisation in the field of health and social care.
- d) Any connection with any organisation, entity or company considering entering into a financial arrangement with the Foundation Trust including but not limited to lenders or banks.

Further provisions as to conflicts of interest of Directors are contained at paragraph 29 of the Foundation Trust’s Constitution