

Standards of Business Conduct Policy

January 2024-January 2027

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Purpose	The primary purpose of this policy is to support a culture of openness and transparency in business transactions and ensure that the organisation is operating in accordance with national guidance and best practice with regard to standards of business conduct	
Superseded Documents	Standards of Business Conduct Policy v2.0	
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1. Introduction

- 1.1. This policy applies to NHS Nottingham and Nottinghamshire Integrated Care Board, hereafter referred to as 'the ICB'.
- 1.2. As a publicly funded organisation, the Integrated Care Board (ICB) has a duty to set and maintain the highest standards of conduct and integrity. We expect the highest standards of corporate behaviour and responsibility from the members of our Board and its committees and sub-committees and all others working for, with, or on behalf of the ICB (referred to as 'individuals' throughout this policy).
- 1.3. Ensuring that decisions are taken transparently and clearly is a key principle in the NHS Constitution. All individuals, regardless of their role, are expected to act in the spirit set out in the seven principles of public life; the 'Nolan Principles' (Appendix A).
- 1.4. In how it conducts its business, the ICB is required to adhere to the <u>National</u> <u>guidance on managing conflicts of interest in the NHS</u>. The ICB also observes the principles of good governance described in:
 - a) The Good Governance Standards for Public Services (2004), Office for Public Management and the Chartered Institute of Public Finance and Accountancy.
 - b) The seven key principles of the NHS Constitution.
 - c) The Equality Act 2010.
 - d) The UK Corporate Governance Code.

2. Purpose

- 2.1 The purpose of this policy is to:
 - a) Safeguard the ICB's decision-making arrangements and protect the integrity of its workforce by ensuring that robust arrangements are in place for declaring and managing conflicts of interest.
 - b) Ensure that all individuals are aware of their own responsibilities with regard to standards of business conduct.
 - c) Support the ability of individuals to apply good judgement across the topics included in this policy; understanding when further guidance and support in meeting the requirements of this policy may be needed and where to obtain it.
- 2.2 This policy supports the ICB's Constitution, Standing Orders, Standing Financial Instructions and Scheme of Reservation and Delegation, which set out the statutory and governance framework in which the ICB operates. All individuals are required to comply with the requirements of the ICB's

- Constitution, Standing Orders, Standing Financial Instructions and Scheme of Reservation and Delegation when carrying out their duties and these shall prevail over the requirements of this policy where conflicting advice is given.
- 2.3 All clinically qualified individuals employed by or working with or on behalf of the ICB must also refer to their respective codes of conduct relating to the areas included in this policy.

3. Scope

- 3.1 The ICB requires this policy to be followed by:
 - a) All employees this includes all individuals working for the ICB in a temporary capacity, including agency staff, seconded staff, students and trainees, and any self-employed consultants or other individuals working for the ICB under contract for services. Where relevant, it also includes prospective employees who have commenced the recruitment process.
 - b) Members of the ICB Board and members of the Board's committees and sub-committees that are not members of the ICB Board or ICB employees.
 - c) Any other individual directly involved with the business or decisionmaking of the ICB.
- 3.2 Hereafter, the above are referred to throughout this policy as 'individuals'.

4. Decision-Making Officers

4.1 Some individuals are more likely than others to have a decision-making role or influence on the use of public money because of the requirements of their role. In the context of this policy 'decision-making officers' are defined as members of the ICB Board and its committees, members of formal decision-making groups and ICB Officers with individual decision-making authority. Delegated decision-making arrangements are set out specifically in the ICB's Scheme of Reservation and Delegation (SoRD).

5. Definitions

5.1 The following definitions apply in the context of this policy:

Term	Definition
Conflict of interest	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,

Term	Definition
	commissioning, or assuring taxpayer funded health and care services is, or could be, impaired or influenced by another interest they hold.
Actual conflict of interest	There is a material conflict between one or more interests.
Potential conflict of interest	There is the possibility of a material conflict between one or more interests in the future.
Perceived conflict of interest	An individual could be incorrectly seen to have a conflict of interest, due to false perceptions about their responsibilities, their interests or their relationships.
Gifts	Any item of cash or goods, or any service, which is provided for personal benefit, free of charge or at less than its commercial value.
Hospitality	Offers of meals, refreshments, travel, accommodation and other expenses in relation to attendance at meetings, conferences, education and training events, etc.
Sponsorship	Support (financial or otherwise) of ICB activities by an external body.

6. Roles and Responsibilities

6.1 The following roles and responsibilities apply in the context of this policy:

Role	Responsibilities
ICB Board and its committees	The ICB Board and its committees and sub- committees are responsible for upholding the principles of good corporate governance and ensuring that ICB is acting in the best interests of stakeholders at all times. In particular, the Chairs of these fora are responsible for ensuring that any declared
	interests in relation to agenda items at meetings are managed in accordance with this policy.
Audit and Risk Committee	The Audit and Risk Committee is responsible for reviewing the establishment and maintenance of an effective system of integrated governance and

Role	Responsibilities	
	internal control. In particular, the Committee is responsible for monitoring compliance with this policy and the organisation's established probity arrangements.	
Chief Executive	The Chief Executive has overall accountability for the ICB's management of conflicts of interest, which includes the requirements for the management of gifts, hospitality and sponsorship.	
Director of Finance	The Director of Finance is responsible for ensuring the adequacy of the ICB's counter fraud arrangements.	
ICB Governance Lead (supported by the Governance Team as appropriate)	 The ICB's Governance Lead is responsible for: The day-to-day management of matters and queries relating to the application of this policy. Maintaining the ICB's Register of Declared Interests Providing advice, support, and guidance on how conflicts of interest should be managed Ensuring that appropriate administrative processes are put in place; Supporting the Conflicts of Interest Guardian and Freedom to Speak Up Guardian in carrying out their roles effectively. 	
Conflicts of Interest Guardian	 The Conflicts of Interest Guardian is in place to further strengthen the scrutiny and transparency of the ICB's decision-making processes. This role will also: Act as a conduit for anyone with concerns relating to conflicts of interest. Be a safe point of contact for employees or workers of the ICB to raise concerns in relation to conflicts of interest. Support the rigorous application of the principles and policies for managing conflicts of interest. Provide independent advice and judgment where there is any doubt about how to apply conflicts of interest policies and principles in individual situations. 	

Role	Responsibilities
	Provide advice on minimising the risks of conflicts of interest.
Freedom to Speak Up Guardian	The Freedom to Speak Up Guardian is in place to provide an independent and impartial source of advice to staff at any stage of raising a concern.
Executive Management and Senior Leadership Team	Members of the Executive Management Team and Senior Leadership Team have an ongoing responsibility for ensuring the application of this policy.
All individuals (as defined in this policy)	All individuals are responsible for complying with this policy and for seeking advice if unsure how it applies to them.

6.2 Key contact details in the application of this policy can be found at Appendix B.

7. Conflicts of Interest

- 7.1 An individual does not need to exploit their position or obtain an actual benefit, financial or otherwise, for a conflict of interest to occur. In fact, a perception of wrongdoing, impaired judgement, or undue influence can be as detrimental as any of them actually occurring. It is important to manage these perceived conflicts in order to maintain public trust.
- 7.2 Interests fall into the following categories:

Term	Definition
Financial interests	Where an individual may get direct financial benefit ¹ from the consequences of a decision they are involved in making.
Non-financial professional interests	Where an individual may obtain a non-financial benefit from the consequences of a decision they are involved in making, such as increasing their professional reputation or promoting their professional career.

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¹ This may be a financial gain, or avoidance of a loss.

Term	Definition
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 ¹ with another individual who has a financial interest, a nonfinancial professional interest or a non-financial personal interest and could stand to benefit from a decision they are involved in making. Indirect interests can also arise through relationships with colleagues from other organisations – see 'loyalty interests' in section below.

Loyalty Interests

- 7.3 As part of their jobs staff need to build strong relationships with colleagues across the NHS and in other sectors. These relationships can be hard to define as they may often fall in the category of indirect interests. They are unlikely to be directed by any formal process or managed via any contractual means it can be as simple as having informal access to people in senior positions.
- 7.4 However, loyalty interests can influence (or be seen to influence) decision making. Conflicts of interest can arise when decision making is influenced subjectively through association with colleagues or organisations out of loyalty to the relationship they have, rather than through an objective process. The scope of loyalty interests is potentially huge, so judgement is required for making declarations.
- 7.5 The above categories are not exhaustive, and each situation must be considered on a case-by-case basis. Where individuals are unsure whether a situation falling outside of the above categories may give potential for a conflict of interest, they should seek advice from the ICB's Governance Lead or the ICB's Conflicts of Interest Guardian. If in doubt, the individual concerned should assume the existence of a conflict of interest and ensure that it is managed appropriately, rather than ignore it.
- 7.6 Examples of each of the above categories of interest are provided at Appendix C.

¹ A common-sense approach should be applied to the term 'close association'. Such an association might arise, depending on the circumstances, through relationships with close family members and relatives, close friends and associates, and business partners.

8. Principles

- 8.1 In discharging its functions, the ICB will abide by the following principles for managing conflicts of interest to ensure they are handled with integrity and probity, in an open and transparent way:
 - a) Conducting business appropriately: decision-making will be geared towards always meeting the statutory duties of the ICB; ensuring that needs assessments, engagement and consultation mechanisms, commissioning strategies and provider selection procedures are robust and based on expert professional advice. Any individual involved in decisions relating to ICB functions must be acting clearly in the interests of the ICB and of the public.
 - b) Being proactive, not reactive: seeking to identify and minimise the risk of conflicts of interest at the earliest possible opportunity, for instance by:
 - Considering potential conflicts of interest when appointing individuals to the Board or other decision-making committees; clearly distinguishing between those individuals who should be involved in formal decision taking, and those whose input informs decisions.
 - Ensuring individuals receive proper induction and training so that they understand their obligations to declare their interests.
 - Establishing and maintaining the register of interests and agreeing in advance how a range of possible situations and scenarios will be handled, rather than waiting until they arise.
 - c) Assuming that individuals will seek to act ethically and professionally: ensuring there are prompts and checks to identify when conflicts occur, supporting individuals to exclude themselves appropriately from decision-making.
 - d) Being balanced and proportionate: identifying and managing conflicts, preserving the spirit of collective decision-making wherever possible, and not expecting to eliminate conflicts completely.
 - e) Transparency and sound record keeping: clearly documenting the rationale for decision-making so that an audit trail of actions taken is evident and able to withstand scrutiny.
 - f) Creating an environment and culture where individuals feel supported and confident in declaring relevant information and raising concerns.

9. Partner Members

9.1 Individuals from partner organisations who have a role in the ICB's decision-making will be expected to act in accordance with principles set out in section 8. Whilst it will not be assumed that they are personally or professionally conflicted, the possibility of actual and perceived conflicts of interest will remain. For all decisions, the ICB will need to consider whether an individual's role in another organisation could result in actual or perceived conflicts of interest and whether or not these outweigh the value and knowledge they bring to the process.

10. Declaring and Registering Interests

- 10.1 All individuals must declare any interests as soon as reasonably practicable after the person becomes aware of the conflict or potential conflict and in any event within 28 days.
- 10.2 Processes are in place to support Individuals in the declaration of new interests or to amend any existing interests at the following points:
 - a) On appointment for new starters to the organisation, the completion of the 'Declarations of Interest Form' (provided at Appendix C) is required prior to commencing in post. Individuals will also be asked about any relevant interests as part of the mandatory questions asked during job interviews. In the event that there are no interests to declare, a 'nil declaration' must be submitted.
 - b) On significantly changing role and/or responsibilities within the organisation.
 - c) At each meeting of the ICB Board or its committees and subcommittees (as described in the section 'Managing Conflicts of Interest at Meetings' in this policy).
 - d) Through the annual assurance exercise detailed in section 10.8 of this policy.
- 10.3 If individuals are in any doubt as to whether they have an interest or whether it is declarable, they should consult their line manager and/or the ICB's Governance Lead.
- In order to promote confidence in the probity of commissioning decisions and the integrity of those involved, the ICB will maintain and make publicly available a register that details the interests of all individuals as defined in section 3.1.
- 10.5 The ICB's Governance Lead, supported by the Corporate Governance Team, will maintain the 'Register of Declared Interests' which will include the following information:

- a) Name of the person declaring the interest;
- b) Position within, or relationship with, the ICB;
- c) Type of interest;
- d) Nature of the interest;
- e) The dates to which the interest relates;
- f) The actions to be taken to mitigate risk.
- 10.6 The Register of Declared Interests will be published on the ICB's website at least annually. A copy can also be obtained directly from the ICB.
- 10.7 The Register of Declared Interests will be updated whenever a new or revised interest is declared. NB: This means that the version published on the ICB's website will not always be the most up-to date.
- 10.8 The ICB will assure itself on an annual basis that the Register of Declared Interests is accurate and up to date. A request will be sent to all individuals, on behalf of the ICB's Governance Lead, asking them to check their entry on the register. Where an individual has no interest to declare, or no interest in addition to those already declared, they must confirm this by way of 'nil return'. The request is designed to prompt individuals and does not negate the responsibility of individuals to proactively declare, as stipulated within this policy.
- 10.9 Interests (including offers/receipt of gifts and hospitality) of decision-making staff will remain on the published register for a minimum of six months. In addition, the ICB will retain a record of historic interests (including offers/receipt of gifts and hospitality) for a minimum of six years after the date on which it expired. The ICB's published register of interests states that historic interests are retained by the ICB for the specified timeframe and details of whom to contact to submit a request for this information.
- 10.10 Where an individual has substantial grounds for believing that publication of their interests should not occur, they may request in writing that the information is not published, explaining the reasons why. In exceptional circumstances, the information may be withheld on the public register. However, this would be the exception and information will not be withheld or redacted merely because of a personal preference.
- 10.11 The decision as to whether or not to publish information will be made by the Conflicts of Interest Guardian, in consultation with the ICB's Governance Lead.

11. Management of Declared Interests

- 11.1 The ICB's Governance Lead (supported by the Corporate Governance Team) is responsible for ensuring that for every interest declared, arrangements are in place to manage the conflict of interests or potential conflict of interests following an assessment of the:
 - a) Materiality of the interest: in particular whether the individual (or family member, close friend or business associate) could be advantaged or disadvantaged from the individual's involvement in a decision.
 - b) **Extent of the interest**: in particular, whether it is related to a business area significant enough that would impact on the individual's ability to make a full and proper contribution to relevant commissioning activities.
- 11.2 These arrangements will confirm the following:
 - a) When an individual should withdraw from a specified activity, on a temporary or permanent basis.
 - b) Monitoring of the specified activity undertaken by the individual, either by a line manager, colleague or other designated individual.
- 11.3 All individuals that have declared interests are responsible for ensuring that they understand any requirements for managing their declared interests before participating in any decision-making activities.
- 11.4 There will be occasions where an individual declares an interest in good faith but upon closer consideration, it is clear that this does not constitute a genuine conflict of interest. The ICB's Governance Lead will provide advice on this and decide whether it is necessary for the interest to be added to the Register of Declared Interests.

12. Managing Conflicts of Interest at Meetings

- All formal meetings, including the ICB Board and its committees and subcommittees, must have a standing agenda item at the beginning of each
 meeting to determine whether anyone has any conflict of interest to declare
 in relation to the business to be transacted at the meeting. The ICB's
 Standing Orders and all Committee terms of reference will incorporate this
 requirement. Any new interests declared at the meeting should be included
 in the ICB's Register of Declared Interests as soon as practicable after the
 meeting.
- 12.2 Actions to mitigate conflicts of interest should be proportionate and should seek to preserve the spirit of collective decision-making wherever possible.

 Mitigation should take account of a range of factors including the perception of any conflicts and how a decision may be received if an individual with a

- perceived conflict is involved in that decision, and the risks and benefits of having a particular individual involved in making the decision.
- 12.3 If an interest is declared but there is no risk of a conflict arising, then no further action need be taken (although the interest will still need to be recorded). However, if a material interest is declared, then it should be considered to what extent it affects the balance of the discussion and decision-making process. In doing so the ICB should ensure conflicts of interest (and potential conflicts of interest) do not, and do not appear to, affect the integrity of the ICB's decision-making processes
- 12.4 In the event that the chair of the meeting has a conflict of interest, the deputy chair is responsible for deciding the appropriate course of action to manage conflicts of interests. If the deputy chair is also conflicted, then the remaining non-conflicted voting members of the meeting should unanimously agree how to manage the conflict(s).
- 12.5 When a member of the meeting (including the chair or deputy chair) has a conflict of interest in relation to one or more items of business to be transacted at the meeting, the chair (or deputy chair or remaining non-conflicted members where relevant as described above) must decide how to manage the conflict. The appropriate course of action will depend on the particular circumstances, but could include one or more of the following:
 - Including a conflicted person in the discussion but not in decisionmaking.
 - b) Excluding a conflicted person from both the discussion and the decision-making.
 - c) Including a conflicted person in the discussion and decision where there is a clear benefit to them being included in both however, including the conflicted person in the actual decision should be done after careful consideration of the risk and with proper mitigation in place.
 - d) Excluding the conflicted individual and securing technical or local expertise from an alternative, unconflicted source.
 - 12.6 The rationale for the agreed course of action should be properly documented and included in the minutes of the meeting. This should include:
 - a) Who has the interest;
 - b) The nature and extent of the conflict;
 - c) An outline of the discussion;
 - d) The actions taken to manage the conflict; and
 - e) Evidence that the conflict was managed as intended.

12.7 In all cases, a quorum must be present for the discussion and decision.

13. Conflicts of Interest in Procurement Activities and the Provider Selection Regime (PSR)

- 13.1 The appropriate management of conflicts of interest extends to any situation where an individual has, directly or indirectly, an interest which might be perceived to compromise their impartiality and independence in the context of a procurement process.
- 13.2 At the outset of any process, the relevant interests of individuals involved should be identified and clear arrangements put in place to manage any conflicts. This includes consideration as to which stages of the process a conflicted individual should not participate in, and in some circumstances, whether the individual should be involved in the process at all.
- 13.3 Decision-making processes with regard to procurement and the PSR are subject to the principles described in section 8 and the arrangements detailed in sections 11 'Management of Declared Interests' and 12 'Managing Conflicts of Interest at Meetings'.
- 13.4 The ICB's Procurement Policy describes the ICB's arrangements for procurement and applying the PSR. This includes where there is a requirement to publish any declared or potential conflicts of interest of individuals, groups or committees making the decision and how these were managed.

14. Outside Employment

- 14.1 All employees are required to seek approval from their line manager if they are engaged in or wish to engage in outside employment in addition to their work with the ICB.
- 14.2 Outside employment or private practice must neither conflict with nor be detrimental to the NHS work of the officer in question. Examples of outside employment or private practice which may give rise to a conflict of interest includes, but is not limited to:
 - Employment with another NHS body or any organisation which might be in a position to supply goods/services to the ICB; or
 - b) Self-employment, including private practice, in a capacity which might conflict with the work of the ICB, or which might be in a position to supply goods/services to the ICB.
- 14.3 Where a risk of conflict of interest is identified, these should be managed in accordance with the guidance provided in this policy. The ICB reserves the

- right to refuse permission where we reasonably believe a conflict will arise or that approval would be detrimental to the work of the officer in question.
- 14.4 In undertaking any outside employment, employees should have regard to the section 'Trading on NHS premises' in this policy.
- 14.5 The ICB may have legitimate reasons within employment law for knowing about outside employment of employees, even where this does not give rise to the risk of a conflict of interest. Nothing in this policy prevents such enquiries being made.
- 14.6 Where an individual is approached to speak at an externally sponsored event, the individual should ensure that the provisions in the sponsorship section of this policy are observed.
- 14.7 All employees must declare any relevant outside employment or private practice on appointment, and when any new employment arises, in accordance with the guidance above.
- 14.8 Declarations will be documented on the ICB's Register of Declared Interests.

15. Patents and Intellectual Property

- 15.1 Individuals 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 ongoing, which are, or might be reasonably expected to be, related to items to be procured or used by the organisation.
- 15.2 Individuals 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.
- 15.3 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.

16. Gifts, Hospitality and Sponsorship Gifts

16.1 Individuals should not accept gifts that may affect, or be seen to affect, their professional judgement. This overarching principle should apply in all circumstances.

- 16.2 Gifts from suppliers or contractors:
 - a) Gifts from suppliers or contractors doing business (or likely to do business) with the ICB should be politely declined. Low cost promotional aids (under the value of £6¹ in total) can be accepted and do not need to be declared.
 - b) If a gift from a supplier or contractor (with an estimated value in excess of the £6 limit) arrives without warning, it must be handed over to the ICB's Governance Lead who will decide whether the gift should be returned (or passed on to a charity or good cause). In such circumstances, action will be taken to ensure that the donor is informed of what has happened.
- 16.3 Gifts from other sources (e.g. patients, families, service users):
 - a) Individuals should not ask for gifts.
 - b) Gifts of cash and vouchers should always be politely declined.
 - c) Modest gifts under a value of £50 may be accepted and do not need to be declared.
 - d) Gifts at a value of £50 or over should be treated with caution and only be accepted on behalf of the ICB and not in a personal capacity. Such gifts should be declared.
 - e) A common-sense approach should be applied to the valuing of gifts if the actual value is unknown, this should be based on 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.

Hospitality

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- 16.5 Individuals 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.
- 16.7 Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors. These offers can be accepted if modest

¹ The £6 value has been selected with reference to existing industry guidance issued by the Association of the British Pharmaceutical Industry.

- and reasonable, but individuals should always obtain approval from a member of the Executive Management and Senior Leadership Team.
- 16.8 Individuals should never put themselves in a position where there could be any suspicion that their business decisions could have been influenced by accepting hospitality from others. With this in mind, individuals should ask themselves what a member of the public, who may be critical or suspicious, might think.
- 16.9 Individuals are advised to consult with the ICB's Governance Lead if they are unsure as to whether to accept any offers of hospitality.

Meals and refreshments:

- a) Under a value of £25 may be accepted and need not be declared.
- b) Of a value between £25 and £75 may be accepted and must be declared.
- c) Over a value of £75¹ should be refused unless (in exceptional circumstances) approval from a member of the Executive Management and Senior Leadership Team is given. A clear reason for the approval should be recorded on the Register of Interests.
- 16.10 Individuals should take a common-sense approach to the valuing of meals and refreshments (if actual value is not known) and always adhere to the principles set out in this policy.

Travel and Accommodation

- 16.11 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.
- 16.12 Offers which go beyond modest or are of a type that the ICB itself would not usually offer (eg. business class or first class travel, offers of foreign travel, etc) need approval from a member of the Executive Management Team and should only be accepted in exceptional circumstances. A clear reason for the approval should be recorded on the Register.
- 16.13 Where a declaration is required, the following information should be provided:
 - a) The staff member/individual's name and their role within the ICB.
 - b) A description of the nature and value of the gift/hospitality, including its source.

¹ The £75 value has been selected with reference to existing industry guidance issued by the Association of the British Pharmaceutical Industry.

- c) Date of offer and receipt of the gift or hospitality.
- d) Any other relevant information (eg. circumstances surrounding the offer, action taken to mitigate any conflict of interest, details of any approvals given that may conflict with this policy).

Sponsored Events

- 16.14 Sponsorship of NHS events by external parties is valued, as such offers can secure their ability to take place and ultimately benefit patients, as well as NHS staff. Without this funding, there may be fewer opportunities for learning, development and partnership working.
- 16.15 Sponsorship of the ICB's events by appropriate external bodies should only be approved if a reasonable person would conclude that the event will result in clear benefits for the ICB.
- 16.16 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.
- 16.17 During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.
- 16.18 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.
- 16.19 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.
- 16.20 The involvement of a sponsor in an event should always be clearly identified.
- 16.21 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.
- 16.22 Staff arranging sponsored events must declare this to the organisation. The organisation will maintain records regarding sponsored events in line with the above principles and rules.

Sponsored Research

16.23 Funding sources for research purposes must be transparent and any proposed research must go through the relevant health research authority or other approvals process.

- 16.24 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.
- 16.25 The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.
- 16.26 Staff should declare involvement with sponsored research to the organisation. The Corporate Governance Team will maintain records of:
 - a) Their name and their role with the organisation.
 - b) Nature of their involvement in the sponsored research.
 - c) Relevant dates.
 - d) 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

- 16.27 External sponsorship of a post requires prior approval from the organisation.
- 16.28 Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and withdraw if appropriate.
- 16.29 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.
- 16.30 Sponsored post holders must not promote or favour the sponsor's products, and information about alternative products and suppliers should be provided.
- 16.31 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.
- 16.32 The organisation will retain written records of sponsorship of posts, in line with the above principles and rules.
- 16.33 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.

17. Hospitality provided by the ICB

17.1 Care should also be taken when providing hospitality from ICB funds.

Individuals must be able to demonstrate that the hospitality is being provided for a legitimate business reason and is subject to senior manager approval.

18. Working with the Pharmaceutical Industry

- 18.1 It is recognised that cross-sector working can accelerate improvements in patient care, with pharmaceutical companies able to bring expertise, skills and resources to complement the expertise of healthcare organisations.
- 18.2 Types of cross-sector working that might be taken up by the ICB include:
 - Joint working this is defined by the Department of Health and Social
 Care as situations where, for the benefit of patients, one or more
 pharmaceutical company and the NHS pool skills, experience and/or
 resources for the joint development and implementation of patient-centred
 projects and share a commitment to successful delivery.
 - Collaborative working this is a newer and broader category of crosssector working and is wider than joint working, in that project outcomes can be for patient and/or healthcare centred projects.
- 18.3 Whilst the ICB is generally supportive of working with the pharmaceutical industry, it has a duty to ensure that any involvement is transparent, ethical and is agreed within a clear and logical framework. All staff are responsible for ensuring that:
 - a) The interests and integrity of the ICB are safeguarded at all times. pharmaceutical companies should not use any aspect of the ICB to infer its endorsement of products and explicit agreement from the ICB's Executive Management Team should be sought if use of the ICB's name and/or branding is deemed necessary.
 - b) Where individuals are approached by pharmaceutical industry representatives with requests for meetings to promote products or services, the decision to meet with a representative is in line with the ICB's priorities.
 - c) Engagement with any pharmaceutical company (or its representatives) does not occur without approval from their line manager.
 - d) Any conflicts of interest are identified at the project outset, and management actions agreed in line with the requirements of this policy.
 - e) Engagement with the ICB's Medicines Management Team takes place at the earliest stage of any discussions with pharmaceutical companies. The team will be able to provide the correct guidance and advice, and

- ensure the ICB is working in line with the <u>APBI guidance on cross-sector</u> working.
- 18.4 Agreement to proceed with cross-sector working must be authorised by the relevant ICB Executive Director, following consultation with the ICB's Medicines Management Team.
- 18.5 The ICB's Confidentiality and Data Protection Policy must be followed at all times during any joint working or collaborative working projects.

19. Corporate Responsibilities

Charitable Collections

- 19.1 Whilst the ICB wishes to support individuals who want to undertake charitable collections amongst immediate colleagues, no reference or implication should be drawn to suggest that the ICB is supporting the charity. Permission is not required for informal collections amongst immediate colleagues on an occasion like retirement, marriage, birthday or a new job.
- 19.2 Charitable collections which reference the ICB must be authorised by a member of the Executive Management Team and reported to the Corporate Governance team.

Political Activities

19.3 Any political activity should not identify an individual as an officer of the ICB. Conferences or functions run by a party-political organisation should not be attended in an official capacity, except with prior written permission from a member of the ICB's Executive Management Team.

Personal Conduct

- 19.4 All individuals have a responsibility to respect and promote the corporate or collective decision of the ICB, even though this may conflict with their personal views. This applies particularly if we are yet to decide on an issue or has decided in a way with which they personally disagree. Individuals may comment as they wish; however, if they decide to do so, they should make it clear that they are expressing their personal view and not the view of the ICB.
- 19.5 When speaking as a member of the ICB, whether to the media, in a public forum or in a private or informal discussion, individuals should ensure that they reflect the current policies or view of the organisation. For any public forum or media interview, approval should be sought in advance:

- a) In the case of the Board, from the Chair and/or Chief Executive or their nominated deputies. Advice should also be sought from the ICB's Communications Team.
- b) In the case of all other individuals, advice should be sought from the ICB's Communications Team.
- 19.6 When this is not practicable, they should report their action to the Chair or Chief Executive Designate, or their nominated deputies, as soon as possible.
- 19.7 Individuals must ensure their comments are well considered, sensible, well informed, made in good faith, in the public interest and without malice and that they enhance the reputation and status of the ICB.
- 19.8 Individuals must follow the guidance for communication with the media; disciplinary action may be taken if this is not followed.

Use of Social Media

- 19.9 Individuals should be aware that social networking websites are public forums and should not assume that their entries will remain private. Individuals communicating via social media must comply with the ICB's Internet and Email Policy.
- 19.10 Individuals must not:
 - a) Conduct themselves in a way that brings the ICB into disrepute;
 - Disclose any ICB information that is or may be sensitive, confidential and person-identifiable, or subject to a non-disclosure contract or agreement;
 - c) Divulge details of their NHS employer on their personal profile pages. If this information is divulged staff must state that they are communication in a personal capacity.

Confidentiality

- 19.11 Individuals must, at all times, operate in accordance with the UK General Data Protection Regulation and Data Protection Act 2018, and maintain the confidentiality of information of any type, including but not restricted to patient information; personal information relating to individuals; commercial information.
- 19.12 This duty of confidence remains after individuals (however employed) leave the ICB.
- 19.13 For the avoidance of doubt, this does not prevent the disclosure or information where there is a lawful basis for doing so (e.g. consent). Staff

should refer to the ICB's Confidentiality and Data Protection Policy for more detailed information.

Gambling

19.14 No officer may bet or gamble when on duty or on ICB premises. The exception is small lottery syndicates or sweepstakes related to national events such as the World Cup or Grand National, where no profits are made, or the lottery is wholly for purposes that are not for private or commercial gain (e.g. to raise funds to support a charity)

Lending and Borrowing

- 19.15 The lending or borrowing of money between individuals should be avoided, whether informally or as a business, particularly where the amounts are significant.
- 19.16 It is a particularly serious breach of discipline for any officer to use their position to place pressure on someone in a lower payband, a business contact, or a member of the public to loan them money.

Trading on Official NHS Premises

- 19.17 Trading on official premises is prohibited, whether for personal gain or on behalf of others. This includes, but is not limited to:
 - a) Flyers advertising services/products in common areas; and
 - b) Catalogues in common areas.
- 19.18 Canvassing within the office by, or on behalf of, outside bodies or firms (including non-ICB interests of individuals or their relatives) is also prohibited.

Individual Voluntary Arrangements, County Court Judgment (CCJ), Bankruptcy or Insolvency

19.19 Any individual who becomes bankrupt, insolvent, has active CCJs, or made individual voluntary arrangements with organisations must inform their line manager and the HR Team as soon as possible. Officers who are bankrupt or insolvent cannot be employed, or otherwise engaged, in posts that involve duties which might permit the misappropriation of public funds or involve the approval of orders or handling of money.

Arrest or Conviction

19.20 An individual who is arrested, subject to continuing criminal proceedings, or convicted of any criminal offence must inform their line manager and the HR Team as soon as is practicably possible. Further information can be found within the ICB's Disciplinary Policy.

20. Breaches of this Policy

- 20.1 Failure by an individual to comply with the requirements set out in this policy may result in action being taken in accordance with the relevant organisational disciplinary procedure. Such disciplinary action may include termination of employment (where applicable).
- Where the failure to comply relates to an individual that is not a direct employee of the ICB, this may result in action being taken in accordance with the relevant engagement procedures (e.g. termination of a secondment agreement).
- 20.3 Any financial or other irregularities or impropriety which involve evidence or suspicion of fraud, bribery or corruption by any officer, will be reported to the ICB's Counter Fraud Specialist, with a view to an appropriate investigation being conducted and potential prosecution being sought.
- 20.4 Individuals 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 relevant person detailed at Appendix B.
- 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.
- 20.6 Following investigation the organisation will:
 - a) Decide if there has been or is potential for a breach and if so, what the severity of the breach is.
 - b) Assess whether further action is required in response this is likely to involve any individual involved and their line manager, as a minimum.
 - c) Consider who else inside and outside the organisation should be made aware.
 - d) Take appropriate action (as set out in the next section).
- 20.7 Breaches could require action in one or more of the following ways:
 - a) Clarification or strengthening of existing policy, process and procedures.

- b) Consideration as to whether HR/employment law/contractual action should be taken against staff or others.
- c) 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.
- d) Contractual action, such as exercise of remedies or sanctions against the body or staff which caused the breach.
- e) Legal action, such as investigation and prosecution under fraud, bribery and corruption legislation.
- 20.8 These actions will 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.
- 20.9 Inappropriate or ineffective management of interests can have serious implications for the organisation and staff. In extreme cases, individuals could face personal civil liability.
- 20.10 To aid transparency, the ICB will consider whether anonymised information on the breach and the actions taken should be published on the ICB's website.

21. Equality and Diversity Statement

- 21.1 The Nottingham and Nottinghamshire ICB pays due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation as a commissioner and provider of services, as well as an employer.
- The ICB is committed to ensuring that the way we provide services to the public and the experiences of our staff does not discriminate against any individuals or groups on the basis of their age, disability, gender identity (trans, non-binary), marriage or civil partnership status, pregnancy or maternity, race, religion or belief, gender or sexual orientation.
- 21.3 The ICB is committed to ensuring that its activities also consider the disadvantages that some people in our diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, gypsies, Roma and travellers.

- As an employer, the ICB is committed to promoting equality of opportunity in recruitment, training and career progression and to valuing and increasing diversity within our workforce.
- 21.5 To help ensure that these commitments are embedded in the ICB's day-to-day working practices, an Equality Impact Assessment has been completed for, and is attached to, this policy.

22. Communication, Monitoring and Review

- The ICB will establish effective arrangements for communicating the requirements of this policy, to include:
 - a) Communicating the publication of this policy at the time of issue;
 - b) Ensuring that the existence of this policy, and the requirements, are highlighted to new starters as part of the local induction process;
 - As a minimum, bi-annual reminders of the existence and importance of this policy will be sent out via established staff communication methods.
- The implementation of this policy, and the effectiveness of the arrangements detailed within it, will be monitored by the ICB's Audit and Risk Committee on a bi-annual basis.
- This policy will be reviewed by the Board every three years or in light of any legislative changes or best practice guidance.
- 22.4 Any individual who has queries regarding the content of this policy, or has difficulty understanding how this policy relates to their role, should contact the ICB's Governance Lead.

23. Staff Training

- 23.1 Individuals will be made aware of this policy at induction and through regular reminders via the ICB's staff communication channels (as per section 24).
- 23.2 Advice, training and support for staff on how interests should be managed will be available to individuals via the ICB's Governance Lead, supported by the Corporate Governance Team.

24. Interaction with other policies

- 24.1 This policy should be read in conjunction with the following ICB policies:
 - a) Freedom to Speak Up Policy;
 - b) Confidentiality and Data Protection Policy;

- c) Internet and Email Policy;
- d) Acceptable use of the Network Policy;
- e) Procurement and Provider Selection Policy;
- f) Disciplinary Policy;
- g) Acceptable Behaviours Policy.

Appendix A: The Seven Principles of Public Life set out by the Committee on Standards in Public Life (The Nolan Principles)

Selflessness	Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.
Integrity	Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.
Objectivity	In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
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.
Openness	Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.
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.
Leadership	Holders of public office should promote and support these principles by leadership and example.

Appendix B: Key Contact Details

Name	Role	Contact details
Lucy Branson	Director of Corporate Affairs	lucy.branson@nhs.net
Gary Brown	Conflicts of Interest Guardian	gary.brown23@nhs.net
Craig Bevan-Davies	Local Counter Fraud Specialist	craig.bevan-davies@nhs.net

Support and guidance on managing conflicts of interest can also be sought from the ICB's Corporate Governance Team at nn.interests@nhs.net.

Appendix C: Declaration of Interest Form

All individuals within the ICB (including employees, appointees and temporary staff) must declare any conflict of interest or potential conflict of interest in the capacity of their role with the ICB. A conflict of interest can be described as:

"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."

Interests fall into one of five categories, as shown at **section D** of this form and a benefit may arise from the making of a gain or the avoidance of a loss.

Declarations of interest should be made as soon as reasonably practicable and by law; within 28 days after the interest arises (this could include an interest an individual is pursuing).

Further details on conflicts of interest management can be found in the ICB's Standards of Business Conduct Policy or NHS England's Managing Conflicts of Interest in the NHS: Guidance for Staff and Organisations.

Please complete the following:

Full Name:	Role:	
Line Manager:	Directorate	
Start Date:		

Please complete:

Section A and Section C if you have interests to declare.

Section B and Section C if you have no interests to declare.

Section A

Description of Interest - please include all relevant details, e.g.:	Type of Interest (See section D)			Date of Interest		How is the interest		
 Nature of interest Name of the organisation and the nature of business Details of relationship for indirect interests 	Financial Interests	Non-Financial Professional Interests	Non-Financial Personal Interests	Indirect Interest	Loyalty Interest	Date From	Date To (leave blank if end date is unknown)	relevant to your ICB role? (if you see no relevance or are unsure, please state this in the box).
						Click or tap to enter a date.	Click or tap to enter a date.	
						Click or tap to enter a date.	Click or tap to enter a date.	
						Click or tap to enter a date.	Click or tap to enter a date.	
						Click or tap to enter a date.	Click or tap to enter a date.	

Section B

Please tick the box $\ \square$ to confirm that you have **no relevant interests** to declare.

Section C

Please tick the box \(\) to confirm the following statement: The information I have provided above is complete and correct. I acknowledge that any changes to my declaration must be notified to the ICB as soon as practicable, and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, professional regulatory or internal disciplinary action may result.

The information submitted will be held by the ICB for personnel or other reasons specified in this email and to comply with the ICB's policies. This information will be held in electronic form in accordance with the Data Protection Act 2018 and may be disclosed to third parties in accordance with the Freedom of Information Act 2000.

The ICB is obliged to publish the interests of decision making staff on its website. If you have any concerns about this, please raise these in your response and explain why you consider that the information you supply should not be made publicly available.

Signed:

Date: Click or tap to enter a date.

Please return a signed copy to the Corporate Governance Team via nn.interests@nhs.net (copying in your line manager)

Section D - Type of Interest and Description

Type of Interest	Description
Financial	Where an individual may get direct financial benefits* from the consequences of a decision their organisation makes. This could include:
	• A director (including a non-executive director) or senior employee in another organisation which is doing, or is likely to do business with an organisation in receipt of NHS funding;
	 A shareholder, partner or owner of an organisation which is doing, or is likely to do business with an organisation in receipt of NHS funding;
	Someone in outside employment;
	Someone in receipt of secondary income;
	Someone in receipt of a grant;
	Someone in receipt of other payments (e.g. honoraria, day allowances, travel or subsistence);
	Someone in receipt of sponsored research.
Non-financial professional interests	Where an individual may obtain a non-financial professional benefit* from the consequences of a decision their organisation makes, such as increasing their professional reputation or status or promoting their professional career. This could include situations where the individual is: • An advocate for a particular group of patients; • A clinician with a special interest; • An active member of a particular specialist body;
	 An advisor for the Care Quality Commission or National Institute of Health and Care Excellence; A research role.
Non-financial	This is where an individual may benefit* personally from a decision their organisation makes in ways which
personal	are not directly linked to their professional career and do not give rise to a direct financial benefit. This could
interests	include, for example, where the individual is:
	A member of a voluntary sector board or has a position of authority within a voluntary sector organisation;
	A member of a lobbying or pressure group with an interest in health and care.

Type of Interest	Description
Indirect interests	This is where an individual has a close association with another individual who has a financial interest, a non-financial professional interest or a non-financial personal interest who would stand to benefit* from a decision they are involved in making. This would include**: • Close family members and relatives; • Close friends and associates; • Business partners.
Loyalty interests	 This is where decision making is influenced subjectively through association with colleagues or organisations out of loyalty to the relationship they have, rather than through an objective process. This would include: 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 their organisation spends taxpayers' money; Are, or could be, involved in the recruitment or management of close family members and relatives, close friends and associates, and business partners; Are aware that their organisation does business with an organisation with whom close family members and relatives, close friends and associates, and business partners have decision making responsibilities.

^{*} A benefit may arise from the making of gain or avoiding a loss

^{**} A common sense approach should be applied to these terms. It would be unrealistic to expect staff to know of all the interests that people in these classes might hold. However, if staff do know of material interests (or could be reasonably expected to know about these) then these should be declared.

Appendix D: Equality Impact Assessment

Name of Policy	Standards of Business Conduct Policy
Date of Completion	January 2024
EIA Responsible Person	Jo Simmonds, Head of Corporate Governance
Include name, job role and contact details.	Email: joanne.simmonds1@nhs.net

For the policy, please answer the following questions against each of the protected characteristics, human rights and health groups:	What are the actual, expected or potential positive impacts of the policy, process, strategy or service change?	What are the actual, expected or potential negative impacts of the policy, process, strategy or service change?	What actions have been taken to address the actual or potential positive and negative impacts of the policy, process, strategy or service change?
Age	There are no actual or expected positive impacts on the characteristic of Age.	There are no actual or expected negative impacts on the characteristic of Age.	None.
Disability ¹ (Including: mental, physical, learning, intellectual and neurodivergent)	There are no actual or expected positive impacts on the characteristic of Disability.	There are no actual or expected negative impacts on the characteristic of Disability.	Mechanisms are in place via the Communications and Engagement Team to receive the policy in a range of languages, large print, Braille, audio, electronic and other accessible formats.

Gender ² (Including: trans, non-binary and gender reassignment)	There are no actual or expected positive impacts on the characteristic of Gender.	There are no actual or expected negative impacts on the characteristic of Gender.	None.
Marriage and Civil Partnership	There are no actual or expected positive impacts on the characteristic of Marriage and Civil Partnership.	There are no actual or expected negative impacts on the characteristic of Marriage and Civil Partnership.	None.
Pregnancy and Maternity	There are no actual or expected positive impacts on the characteristic of Pregnancy and Maternity Status.	There are no actual or expected negative impacts on the characteristic of Pregnancy and Maternity Status.	None.
Race ³	There are no actual or expected positive impacts on the characteristic of Race.	There are no actual or expected negative impacts on the characteristic of Race.	Mechanisms are in place via the Communications and Engagement Team to receive the policy in a range of languages.
Religion and Belief ⁴	There are no actual or expected positive impacts on the characteristic of Religion or Belief.	There are no actual or expected negative impacts on the characteristic of Religion or Belief.	None.
Sex ⁵	There are no actual or expected positive impacts on the characteristic of Sex.	There are no actual or expected negative impacts on the characteristic of Sex.	None.

Sexual Orientation ⁶	There are no actual or expected positive impacts on the characteristic of Sexual Orientation.	There are no actual or expected negative impacts on the characteristic of Sexual Orientation.	None.
Human Rights ⁷	There are no actual or expected positive impacts on the characteristic of Human Rights.	There are no actual or expected negative impacts on the characteristic of Human Rights.	None.
Community Cohesion and Social Inclusion ⁸	There are no actual or expected positive impacts on the characteristic of Community Cohesion and Social Inclusion.	There are no actual or expected negative impacts on the characteristic of Community Cohesion and Social Inclusion.	None.
Safeguarding ⁹	There are no actual or expected positive impacts on the characteristic of Safeguarding.	There are no actual or expected negative impacts on the characteristic of Safeguarding.	None.
Socioeconomic and other 'at risk' groups ¹⁰ (Including carers, homeless, Looked After Children, living in poverty, asylum seekers, rural communities, victims of abuse, ex-offenders)	There are no actual or expected positive impacts on the characteristic of Other Groups at Risk.	There are no actual or expected negative impacts on the characteristic of Other Groups at Risk.	None.

¹Disability refers to anyone who has: "...a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities..." (Equality Act 2010 definition). This includes, but is not limited to: mental health conditions, learning disabilities, intellectual disabilities, neurodivergent conditions (such as dyslexia, dyspraxia and dyscalculia), autism, many physical conditions (including HIV, AIDS and cancer), and communication difficulties (including d/Deaf and blind people).

2Gender, in terms of a Protected Characteristic within the Equality Act 2010, refers to: "A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex."

³Race, in terms of a Protected Characteristic within the Equality Act 2010, refers to: A person's colour, nationality, or ethnic or national origins. This also includes people whose first spoken language is not English, and/or those who have a limited understanding of written and spoken English due to English not being their first language.

⁴Religion and Belief, in terms of a Protected Characteristic within the Equality Act 2010, refers to: Religion means any religion and a reference to religion includes a reference to a lack of religion. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief.

⁵Sex, in terms of a Protected Characteristic within the Equality Act 2010, refers to: A reference to a person who has a particular protected characteristic and is a reference to a man or to a woman.

Sexual Orientation, in terms of a Protected Characteristic within the Equality Act 2010, refers to: Sexual orientation means a person's sexual orientation towards persons of the same sex, persons of the opposite sex or persons of either sex.

⁷The **Human Rights Act 1998** sets out the fundamental areas that everyone and every organisation must adhere to. In relation to health and care, the most commonly applicable of the Articles within the Human Rights Act 1998 include: Article 2 Right to Life, Article 5 Right to Liberty and Security, Article 8 Right to Respect of Private and Family Life, and Article 9 Freedom of Thought, Conscience and Religion.

⁸Community Cohesion is having a shared sense of belonging for all groups in society. It relies on criteria such as: the presence of a shared vision, inclusion of those with diverse backgrounds, equal opportunity, and supportive relationships between individuals. Social Inclusion is defined as the process of improving the terms of participation in society, particularly for people who are disadvantaged, through enhancing opportunities, access to resources, voice and respect for rights (United Nations definition). For the EQIA process, we should note any positive or negative impacts on certain groups being excluded or not included within a community or societal area. For example, people who are homeless, those from different socioeconomic groups, people of colour or those from certain age groups.

⁹Safeguarding means: "...protecting a citizen's health, wellbeing and human rights; enabling them to live free from harm, abuse and neglect. It is an integral part of providing high-quality health care. Safeguarding children, young people and adults is a collective responsibility" (NHS England definition). Those most in need of protection are children, looked after children, and adults at risk (such as those receiving care, those under a DoLS or LPS Order, and those with a mental, intellectual or physical disability). In addition to the ten types of abuse set out in the Health and Care Act 2022, this section of the EQIA should also consider PREVENT, radicalisation and counterterrorism.

¹⁰Other Groups refers to anyone else that could be positively or negatively impacted by the policy, process, strategy or service change. This could include, but is not limited to: carers, refugees and asylum seekers, people who are homeless, gypsy, Roma and traveller communities, people living with an addiction (e.g., alcohol, drugs or gambling), people experiencing social or economic deprivation, and people in stigmatised occupations (e.g., sex workers).