

## BUSINESS CONDUCT POLICY

### Summary

It is a long established principle that public sector bodies, including the NHS, must be impartial and honest in the conduct of their business. It is also an offence under the Bribery Act 2010 for an employee to corruptly accept any inducement or reward for doing, or refraining from doing, anything in his/her official capacity or corruptly showing favour or disfavour in the handling of contracts. This policy sets out the principles and governance requirements for all staff working for, or on behalf of, the Trust regarding business conduct. This includes action to be taken with regard to conflicts of interest, casual gifts, hospitality, sponsorship, shareholdings and other ownership issues, patents, loyalty interests and donations. The policy is in line with guidance on *Managing Conflicts of Interest in the NHS* issued by NHS England in February 2017.

### CONTENTS

Section		Page
1	Definition of Interests	1
2	Declaration of Interests and Fit and Proper Person	2
3	General Principles for all Trust Staff	4
4	Common situations which give rise to risk of Conflict of Interests	5
5	Dealing with breaches	11
6	General Business Conduct Rules	12
7	Review and Publication of Policy and Register & Wider Transparency initiatives	14

#### 1. Definition of Interest

- 1.1 A conflict of interest includes any situation in which an individual or corporation is in a position to exploit a professional or official capacity in some way for their personal or corporate benefit, or where an individual's ability to exercise judgment or act in one role is or could be impaired or otherwise influenced by his or her personal or professional involvement in another role or relationship. The conflict exists even if the individual does not actually exploit his or her position or obtain an actual benefit, financial or otherwise.
- 1.2 Pursuant to Section 20 of the Schedule 7 of the National Health Service Act 2006, a Register of Director's interests must be kept by each NHS Foundation Trust.
- 1.3 A conflict of interest may be:
- Actual – there is a material conflict between one or more interests; or
  - Potential – there is the possibility of a material conflict between one more interests in the future.
- 1.4 The perception of a conflict of interest can be damaging even if none exists, so it is important always to err on the side of caution and to declare any interest or role where there might be perceived to be the potential for conflict.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

## 1.5 Interests fall into the following categories:

1. <b>Financial interests:</b> where an individual may get direct financial benefit from the consequences of a decision the individual are involved in making;
2. <b>Non-financial professional interests:</b> 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;
3. <b>Non-financial personal interests:</b> 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;
4. <b>Indirect interests:</b> where an individual has a close association with another individual or entity who or which 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.

## 2. Declaration of Interests and Fit and Proper Person

### *For Trust Board Members, Governors and Leadership Team*

- 2.1 All relevant interests must be declared by Board of Directors, Council of Governors and the Leadership Team at their earliest opportunity (no later than 28 days of the interest arising), on joining the Trust and on an annual basis to the Trust Secretary. This includes, but is not limited to, any Directorship of a company, any interest in an organisation providing health and social care services to the NHS, a position of authority in a charity or voluntary organisation in the field of health and social care, any affiliation to a special interest group campaigning on health and social care issues, and any connection with an organisation or entity entering into or having entered into financial arrangement with the Trust, including but not limited to, banks or lenders.
- 2.2 Every such declaration shall be formally recorded on the register and, where relevant, the minutes.
- 2.3 Directors must also declare details of any significant transactions which they, their close families or entities controlled by any of these, have undertaken with the Trust or anyone associated with the Trust, such as management contracting, NHS mergers or acquisitions, and operating in competition with the Trust. The Trust is required to disclose in its annual report details of such transactions. Board members, Governors and the Leadership Team should notify the Trust Secretary within 28 days of any changes to the declarations of interest.
- 2.4 The Board and Council of Governors should refer to its Standing Orders for guidance on managing conflicts of interest in Board meetings.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

***Fit and Proper Person Test***

- 2.5 Board Members, Governors and the Leadership Team will also be asked to confirm annually that they remain a Fit and Proper Person in accordance with Regulation 5 of the new Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- 2.6 Unfit persons are defined as a person who:
- (a) has an undischarged bankrupt or a person whose estate has had sequestration awarded in respect of it and who has not been discharged.
  - (b) is the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland.
  - (c) is a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986(a).
  - (d) has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it.
  - (e) is included in the children's barred list or the adults' barred list maintained under section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland.
  - (f) is prohibited from holding the relevant office or position, or in the case of an individual from carrying on the regulated activity, by or under any enactment.
  - (g) has been convicted in the United Kingdom of any offence or been convicted elsewhere of any offence which, if committed in any part of the United Kingdom, would constitute an offence.
  - (h) has been erased, removed or struck-off a register of professionals maintained by a regulator of health care or social work professionals.

***Key Decision-Making staff***

- 2.7 The following members of staff are identified by NHS England as key decision - making staff for the purposes of reporting compliance with this policy:
- Members of advisory groups which contribute to director-delegated decision making on the commissioning or provision of taxpayer funded services;
  - Senior Managers at Agenda for Change band 8d and above;
  - Procurement staff and staff involved in decision making concerning the commissioning of services, purchasing of goods, medicines, medical devices or equipment, and formulary decisions.
- 2.8 Key Decision-Making Staff with any interest, direct or indirect, in contracts or other matters shall be subject to the provisions of Statutory Instrument 2024 [the National Health Service Trusts (Membership and Procedure Regulations) 1990]. Key Decision Making Staff who participate in tender exercises must make a written

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

declaration of their potentially conflicting interests before they are able to participate in a tender process. If a conflict of interest occurs staff will be excluded from the tender process.

- 2.9 Key Decision-Making Staff must promptly inform their line manager as soon as a potentially conflicting interest arises, and ensure that within 28 days they complete the Trust Register of Interests to be accessed in the folder entitled '*Declaration of Interests*' on the T Drive of the Trust's network.
- 2.10 The Corporate Governance Department will request declarations of potentially conflicting interest from Agenda for Change band 8d and above staff on an annual basis. Those staff shall also update the register as soon as a potentially conflicting interest arises and notify the Trust Secretary of any such changes no later than 28 days of the event.
- 2.11 Key Decision-Making Staff of the Trust's Procurement Department should ensure that their Department keeps records that show a clear audit trail of how conflicts of interest have been identified and managed as part of procurement processes.

### 3. General Principles for all Trust Staff

- 3.1 All staff working for or on behalf of the Trust (including temporary, fixed term, honorary contract staff, prospective employees who are part-way through recruitment, contractors or sub-contractors, agency staff and Trust Committee, sub-Committee and advisory group members) have a responsibility to ensure compliance with this policy and be aware of the potential for a conflict of interest while maintaining high ethical professional standards at all times. Such situations must be carefully managed to ensure that the overall conduct of staff and any conflict of interest do not detrimentally impact on the NHS standards of, or public confidence in, The Royal Marsden NHS Foundation Trust. Employees should be aware that failure to comply with this policy may lead to disciplinary measures and may render them liable to prosecution.
- 3.2 An employee must declare to their line manager and note in the '*Declaration of Interests*' folder within the T Drive all interests which may affect the proper discharge of his/her duties or which could potentially result in personal gain as a consequence of the employee's position in the NHS for themselves or any close family member, or any other entity which is associated with any of them. A declaration must also be made:
- when staff move into a new role and their responsibilities change significantly;
  - at the beginning of a new project/piece of work; and
  - as soon as circumstances change and new interests arise.
- 3.3 This includes cases where any person with whom the employee has a business or personal relationship has an interest which may reasonably be perceived to influence the employee in the discharge of his/her duties.
- 3.4 Staff are asked to note the aforementioned examples in section 4 which illustrate situations where a conflict of interest may occur. These examples are not

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

exhaustive and should not detract from the principles of the policy which are concerned with personal conduct and staff providing a public service.

- 3.5 Employees should ensure they do not abuse their official position for personal gain or benefit to their family or friends. An employee should not misuse any financial procedures of the Trust for personal gain, remove items of Trust property without authorisation, or seek to gain advantage of further private or business interests in the course of their financial duties.
- 3.6 If it comes to the knowledge of an employee of the Trust that a contract in which he/she, or any person related to him/her, has a direct or indirect interest is proposed to be or has been entered into by the Trust, he/she shall at once give notice of the fact in writing to his/her senior manager and update the '*Declarations of Interest*' register on the T Drive of the Trust's network.
- 3.7 At every step of the procurement process steps should be taken to identify and manage conflicts of interest to ensure and protect the integrity of the process.
- 3.8 Advice should be sought from the Trust Secretary if there are any enquiries concerning situations or posts where potential for conflict of interest may arise, particularly in the event of an actual conflict of interest to ensure this is managed appropriately and in line with regulatory and statutory standards.

#### 4. Common situations which give rise to risk of Conflict of Interests

- 4.1 Areas where conflicts or potential conflicts of interest may arise include, but are not limited to, gifts, hospitality, sponsorship, loans and financial inducements, business interests, share dealing and outside consultancy arrangements and employment.

##### **Casual Gifts**

- 4.2 Only low cost branded promotional aids worth less than £6 may be accepted from contractors/suppliers. All other gifts from contractors or suppliers must be politely but firmly declined.
- 4.3 The following principles and practices will apply to the acceptance of casual gifts:
- Gifts worth between £10 and £50 should be declared by staff by completing the relevant register to be accessed in the folder entitled '*Declaration of Interests*' on the T Drive of the Trust's network;
  - Gifts worth between £10 and £50 should be treated with caution and only accepted on behalf of RM, not in a personal capacity;
  - 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.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

## **Hospitality**

- 4.4 Similarly, modest hospitality, such as lunches in the course of working visits, may be accepted and offered if it is normal and reasonable in the circumstances although it should be similar to the scale of hospitality which the NHS would be likely to offer and receive. Staff must be able to demonstrate that the appropriateness and frequency of hospitality can be justified.
- 4.5 All staff must comply with the following principles regarding meals and refreshments as part of accepting hospitality:
- Worth less than £25: may be accepted and need not be declared;
  - Worth between £25 and £75: may be accepted and must be declared by completing the relevant register to be accessed in the folder entitled '*Declaration of Interests*' on the T Drive of the Trust's network;
  - Worth more than £75: should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on the Trust's register of interests as to why it was permissible to accept;
  - A common sense approach should be applied to the valuing of meals and refreshments using actual amount, if known, or an estimate that a reasonable person would make as to its value.
- 4.6 Health Professionals must also ensure they are aware of, and comply with the hospitality, gift and/or remuneration policies of their relevant health professional regulated body such as ABPI, GMC, NMC and Colleges.
- 4.7 The Statutory Regulators of Health and Care professionals have issued a joint statement on the management of conflicts of interests. This sets out their expectations of health and care professionals in relation to avoiding, declaring and managing conflicts of interest across all healthcare settings. Trust staff are expected to:
- Put the interests of people in their care before their own interests, or those of any colleague, business, organisation, close family member or friend;
  - Maintain appropriate personal and professional boundaries with the people they provide care to and with others;
  - Consider carefully where conflicts of interest may arise – or be perceived to arise – and seek advice if they are unsure how to handle this;
  - Be open about any conflict of interest they face, declaring it formally when appropriate and as early as possible, in line with the policies of their employer or the organisation contracting their services;
  - Ensure their professional judgement is not compromised by personal, financial or commercial interests, incentives, targets or similar measures;
  - Refuse all but the most trivial gifts, favours or hospitality if accepting them could be interpreted as an attempt to gain preferential treatment or would contravene your professional code of practice; and
  - Where appropriate, ensure that patients have access to visible and easy-to-understand information on any fees and charging policies for which you are responsible.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

- 4.8 In all cases, offers of hospitality to third parties must be incidental to bona fide meetings or seminars and must be capable of justification from critical review. The level of hospitality should not give rise to inference of impropriety. It must be reasonable and appropriate to both the occasion and to the business conducted by the Trust; and the costs involved must not exceed that level which the recipients would normally adopt when paying for themselves or that which could not be reciprocated by the Trust.
- 4.9 In cases where the employee is unsure whether it would be appropriate to accept a gift or hospitality or to take any other course of action which may give rise to a conflict of interest he/she should seek advice from his/her manager in the first instance or politely decline acceptance.
- 4.10 On occasions when the Trust considers it necessary for staff advising on the purchase of equipment to inspect such equipment in operation in other parts of the country (or exceptionally, overseas), the Trust will meet the related cost, so as to avoid putting in jeopardy the integrity of subsequent purchasing decisions.
- 4.11 All staff must be aware of the potential risks in accepting hospitality, even where they have acted in good faith.

### ***Sponsored Events***

- 4.12 Sponsorship of NHS events by external parties is valued and important for learning, development and partnership working. However there is potential for conflicts of interest between the organiser and the sponsor, particularly regarding the ability to market commercial products and services.
- 4.13 Sponsorship of events by appropriate external bodies should only be approved if a reasonable person would conclude that the event will result in clear benefit for the organisation and NHS. No information should be supplied to the sponsor from which they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.
- 4.14 At RM'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; their involvement should be clearly identified.
- 4.15 Staff may accept sponsorship for attendance at a relevant conference and course provided permission is granted in advance at Divisional Director level or above and purchasing decisions and/or patient care is not compromised. Where the party is inviting the individual to attend an overseas event this must always be approved in advance. Retrospective approval will not be given for overseas events.
- 4.16 Staff who benefit from sponsorship must inform the company concerned that sponsorship will not provide them with an advantage in relation to Trust business including purchasing decisions and sponsorship of a meeting should be disclosed in papers relating to the meeting.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

- 4.17 Staff who work with pharmaceutical companies must ensure they do not breach the Association of the British Pharmaceutical Industry's (ABPI) Code of Practice 2011. When a member of staff arranges a meeting sponsored by a pharmaceutical company they must:
- Ensure the meeting has a clear educational content including an agenda;
  - The venue must be appropriate to the purpose of the meeting;
  - If the pharmaceutical company is paying for the venue and hospitality it must be acceptable and open to public scrutiny; and
  - The name of the sponsoring organisation must be declared to all attendees.
- 4.18 Staff should declare their involvement in arranging sponsored events for RM via the '*Declaration of Interests*' folder on the T Drive of the Trust's network. The Royal Marsden School will support this principle by recording names of staff involved in the organising of externally sponsored events / meetings at RM.

### ***Shareholdings and other ownership issues***

- 4.19 Holding shares or other ownership interests can be a common way for staff to invest. However, conflicts of interest can arise when staff personally benefit from this investment because of their role in the organisation.
- 4.20 Staff should declare in the '*Declarations of Interest*' folder on the T drive, 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 Trust*. There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.
- 4.21 Where shareholdings or other ownerships interests are declared and give rise to risk of conflicts of interests then the actions for dealing with such situations outlined in this policy should be considered and applied to mitigate risks.

### ***Patents***

- 4.22 The development and holding of patents and other intellectual property rights (IPR) allows staff to protect something they create. Staff are encouraged to be innovative in their practice and therefore this activity is welcomed. However conflicts of interest can arise when staff who hold patents and other IPR are involved in decision making and procurement. In addition, where product development involves use of time, equipment or resources from RM, then this too could create risks of conflicts of interest, and it is important that RM is aware of this and it can be managed appropriately.
- 4.23 Staff should declare in the '*Declarations of Interest*' folder on the T drive, 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 Trust*.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

### ***Sponsored Research***

- 4.24 National guidance notes that there is a potential for conflicts of interest to occur when research funding by external bodies does or could lead to a real or perceived commercial advantage.
- 4.25 Key principles to manage this appropriately include ensuring funding sources for research purposes are transparent and any proposed research must go through the relevant health research authority or other approvals process including RM internal governance processes (please refer to relevant Trust research policies for further guidance).
- 4.26 Staff should declare their involvement with sponsored research to the Clinical R&D Office which will retain written records of sponsorship.
- 4.27 Management of funds received by senior members of staff: Any honorarium payments, donations, income from source including but not limited to consultancy, lecture fees, medical expertise, and other ad-hoc income received should be managed in accordance with the provisions of the Specific Fund Guidelines of the Trust (available on the intranet). Furthermore, donations made to senior members of staff which are transferred into research funds should be used appropriately and adequately for that purpose only.
- 4.28 Where holding of patents and other intellectual property rights give rise to a conflict of interest then the actions for dealing with such situations outlined in this policy should be considered and applied to mitigate risks.

### ***Sponsored Posts***

- 4.29 Sponsored posts are positions that are funded, in whole or part, by organisations external to the NHS. These posts can offer benefits to the delivery of care, providing expertise, extra capacity and capability however national guidance notes that safeguards are required to avoid a conflict between the aims of the sponsor and RM, particularly in relation to procurement and competition.
- 4.30 Staff who are establishing external sponsorship of a post should seek formal prior approval from Divisional Director level or above. Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and confirm arrangements continuing.
- 4.31 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. It is advised that auditing arrangements are put in place and the ability to exit the sponsorship agreement if conflicts of interests arise which cannot otherwise be managed.
- 4.32 Sponsored post holders must not promote or favour the sponsor's specific 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

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

developed in connection with the sponsored posts.

- 4.33 These provisions should be read in conjunction with other related Trust policies and procedures regarding sponsored posts. Departments should keep a written record of sponsorship of posts and staff are advised to declare in the 'Declarations of Interest' folder in the T drive any other interests arising as a result of their association with the sponsor.

### ***Loyalty Interests***

- 4.34 As part of their jobs staff need to build strong relationships with colleagues across the NHS and in other sectors. These interests can be hard to define as they may often fall in the category of indirect interests and can influence decision making.
- 4.35 Conflicts of interests can arise when decision making is influenced subjectively out of loyalty to colleagues and organisations with which a member of staff has a relationship. The scope of loyalty interests is potentially huge so judgment is required for making declarations.
- 4.36 Loyalty interests should be declared in the '*Declarations of Interest*' folder on the T drive by staff involved in decision making where the [or a close family member?]:
- Hold a position of authority in another NHS organisation or commercial, charity, voluntary, professional, statutory, or other body which could be seen to influence decisions they take in their NHS role;
  - Sit on advisory groups or other paid or unpaid decision making forums that can influence how an organisation spends taxpayers' money;
  - Are, or could be, involved in the recruitment or management of close family members and relatives, close friends and associates, and business partners;
  - Are aware that their organisation does business with an organisation in which close family members and relatives, close friends and associates, and business partners have decision making responsibilities.

### ***Donations***

- 4.37 Donations made by suppliers or bodies seeking to do business with the Trust 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 with the actual or estimated value.
- 4.38 Staff should not actively solicit charitable donations unless it is being pursued on behalf of The Royal Marsden Cancer Charity and is not for their own personal gain.
- 4.39 Staff must obtain permission from an Executive Director if in their professional role they intend to undertake fundraising activities on behalf of a charitable campaign for a charity other than the Trust's own.
- 4.40 Donations, when received, should be recorded including the name of the donor and payment should be made to The Royal Marsden Cancer Charity (never to an

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

individual). All donor details and the payment must be transferred to the Charity so that they can issue a receipt.

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

### ***Clinical Private Practice***

- 4.42 Trust staff who take up private practice must seek prior approval and ensure that NHS commitments take precedence over private work and that they do not accept direct or indirect financial incentives from private providers other than those allowed by the Competition and Markets Authority.
- 4.43 Trust consultants should ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.
- 4.44 Trust consultants should not initiate discussions about providing their private professional services for NHS patients, nor should they ask other staff to initiate such discussions on his or her behalf.
- 4.45 Clinical staff should declare all private practice on appointment, and / or any new private practice when it arises including where they practice, what they practice, and when they practice. National guidance notes that Hospital Consultants are already required to provide their employer with this information by virtue of paragraph 3. Sch. 9 of the Terms and Conditions – Consultants (England) 2003.

## **5. Dealing with breaches**

- 5.1 There may 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 all these situations are referred to as breaches.
- 5.2 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 Trust Secretary. To ensure that interests are effectively managed staff are encouraged to speak up about actual or suspected breaches and all Trust staff have a responsibility to do this<sup>1</sup>.
- 5.3 The Trust Secretary 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.
- 5.4 Following investigation the Trust will:
- Decide if there has been or is potential for a breach and if so the what severity of

<sup>1</sup> Should it be made clear that voluntary disclosure of an inadvertent breach of one's own is to be encouraged and is unlikely to result in disciplinary action?

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

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 Trust should be made aware; and
- Take appropriate action as set out below.

5.5 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), fraud (e.g. Local Counter Fraud Specialists), members of the management or executive teams and organisational auditors.

5.6 Sanctions should not be considered until the circumstances surrounding breaches have been properly investigated. However, if such investigations establish wrongdoing or fault then the Trust 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).
- Reporting incidents to external auditors, NHS Protect, the Police, statutory health bodies (such as NHS England, NHS Improvement and the CQC), and/or health professional regulatory bodies 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.

5.7 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 published on the Trust website as appropriate, or made available for inspection by the public upon request.

## 6. General Business Conduct Rules

6.1 The following rules apply to all staff including permanent, temporary, contracted staff and volunteers. The Business Conduct Rules reinforce principles of probity and honesty and ensure that the Trust's formal policies reflect these principles.

6.2 Expense claims:

The Trust's *Business Travel, Subsistence and other Expenses Policy* should be read in conjunction with this policy. Employees must accept and declare modest offers to pay some or all of the travel and accommodation costs related to attendance at events, but only accept offers which go beyond modest only in exceptional circumstances. Employees must also make sure that all expense claims

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

must be supported by receipts as these may be requested by HMRC upon inspection. You are also reminded of the following requirements which are complimentary to the aforementioned policy:

- You are required to minimise costs to the public purse and claim honestly for expenses incurred legitimately whilst on business.
- The use of taxis should be kept to a minimum and taxis should only be used in exceptional circumstances.
- In cases where senior members of staff are attending external meetings, for time constraint reasons and under exceptional circumstances, a taxi may be booked.
- Other expenses such as national and international travel and accommodation must be ordered by the Trust appointed Travel Management Company and the expenses process cannot be used to circumvent this process.
- No personal calls can be made on Trust mobile phones.

### 6.3 Providing evidence/expert opinion in legal cases not relating to patient care:

- The Trust recognises that employees may, due to the nature of their work, be requested from time to time to assist a Court with matters not relating to patient care but within their professional expertise.
- When providing oral or written evidence which does not relate to the care provided by the Trust to an individual patient, staff should note that it is custom and practice to do so in a personal capacity and be clear at all times that this is the case.
- The Trust advises staff to avoid giving opinions or forming judgments that may appear to have been issued by the Trust and cannot be supported by reference to objective or empirical evidence.
- In undertaking work as an expert or professional witness in cases not relating to patient care, Trust medical staff must conduct themselves in a manner that does not bring the Trust into disrepute by association.
- Trust resources and letterheads must not be used to provide expert opinion orally or in writing in legal cases not relating to patient care.

### 6.4 Secondary/Outside Employment: Trust staff must not engage in outside employment, directorships, Non-Executive roles, self-employment, consultancy work, charitable Trustee roles, political roles, and roles with not-for profit organisations, paid advisory positions and paid honorariums *which relate to bodies likely to do business with the Trust and may conflict with, or be detrimental to their Trust work.*

### 6.5 Staff should advise their manager about any secondary employment in which they are engaged and inform them if they take additional paid employment outside the Trust. The line manager shall discuss this with the relevant HR lead to assess the potential for a conflict and ensure there are no implications for the Trust, its patients and reputation. Where it is considered that there is a potential for conflict, a declaration must be made by the staff member to their line manager and add this to the Trust Register of Interests on the T drive > Declarations of Interest.

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			

- 6.6 Preferential Treatment in Private Transactions: Trust staff must not seek or accept preferential rates or benefits in kind for any private transaction carried out with companies with which they have had, or may have, official dealings on behalf of the Trust.
- 6.7 Canvassing in Relation to Appointments:
- Canvassing of Directors of the Trust, members of any committee of the Trust, or member of any interviewing panel, either directly or indirectly, for any appointment within the Trust, shall disqualify the candidate from such an appointment.
  - Candidates for any appointment shall when making application, disclose in writing whether they are related to any Director or holder of any office in the Trust. Failure to disclose such a relationship may disqualify a candidate and if appointed may render them liable to summary dismissal.
- 7. Review and Publication of Policy and Register & Wider transparency initiatives**
- 7.1 This policy will be reviewed annually by the Trust Secretary and approved by the Executive Board and the Audit and Finance Committee when key policy changes are proposed.
- 7.2 The Trust Secretary will ensure that Conflict of Interest declarations are kept on file for the last six years and that individual interests remain on the register for six months after they have expired.
- 7.3 The Trust Secretary will liaise with the Marketing and Communications department to ensure that Board, Governors', and Leadership Team interests are published annually in a prominent place on the Trust website.
- 7.4 If Directors and Governors staff have substantial grounds for believing that publication of their interests should not take place then they should contact the Trust 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.
- 7.5 The Royal Marsden NHS Foundation Trust actively supports wider transparency initiatives in healthcare, and we encourage staff to engage actively with these. Relevant staff are 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, also known as the 'Sunshine Rule'.

[End of Document - Do Not Delete]

Authoring Department:	Corporate Governance	Version Number:	10
Author Title:	Trust Secretary	Published Date:	09/10/2017 10:41:47
Ratified By:	Executive Board; Audit and Finance Committee	Review Date:	09/10/2018 10:41:47
Uncontrolled if printed			