

Gifts and Hospitality Policy

March 2017 NOTE: This policy will be subject to review in 2017/18 as part of the partnership work between North East Hampshire and Farnham CCG, South East Hampshire CCG, Fareham and Gosport CCG, and North Hampshire CCG.

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Head of Governance

Subject and version number of document:	Gifts and Hospitality Policy Policy Version 3.0
Serial Number:	
Operative date:	April 2017
Author:	Governance Team
Review date:	April 2018
For action by:	All NHS North East Hampshire and Farnham Clinical Commissioning Group staff and those individuals working alongside NHS North East Hampshire and Farnham Clinical Commissioning Group without a formal contract of employment; for example – contractor or temporary members of staff.
Policy statement:	This policy provides the NHS North East Hampshire and Farnham Clinical Commissioning Group clear instructions on how staff they manage Gifts and Hospitality from other organisations.
Responsibility for dissemination to new staff:	The policy will be disseminated via the approved Policy implementation process for NHS North East Hampshire and Farnham Clinical Commissioning Group.
Training Implications:	All staff should be aware of the content of this policy.
Further details and additional copies available from:	Business Services Team
Equality Impact Assessment Completed	Attached at appendix 1
Consultation Process	North East Hampshire and Farnham Audit and Risk Committee
Approved by:	Remuneration and Nominations Committee
Date approved:	Governing Body 12 April 2017

Intranet and Website Upload:

Intranet	Electronic Document Library Location:	<i>Insert the location of the document on the intranet</i>
Website	Location in Publication Scheme	Our Policies and Procedures
Keywords:	Gift, Hospitality	

Amendments Summary:

Amend No	Issued	Page(s)	Subject	Action Date
2				
3				
4				
5				

Review Log:

Include details of when the document was last reviewed:

Version Number	Review Date	Name of Reviewer	Ratification Process	Notes
V1	2014		Approved by GB	
V2	2015		Approved by GB	
V3	2017		Approved by GB	

Gifts and Hospitality Policy

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1. Introduction

- 1.1. Managing the question of gifts and hospitality appropriately is essential for protecting the CCG from perceptions of wrongdoing or impropriety. This policy sets out the approach to managing and recording any gifts and hospitality that may arise in connection with the CCG's work. It is closely related to two other policies on (1) Conflicts of Interest and (2) Sponsorship and Joint Working with the Pharmaceutical Industry and staff are asked to familiarise themselves with those policies.
- 1.2. This policy is issued to comply with statutory guidance under Sections 14O and 14Z8 of the National Health Service Act 2006 (as amended by the Health and Social care Act 2012). The 2006 Act sets out clear requirements for CCGs to make arrangements for managing actual and potential conflicts of interests, to ensure they do not affect, or appear to affect, the integrity of the CCGs decision making processes.
- 1.3. This Policy draws on a range of guidance relating to Conflicts of Interests and the receipt of Gifts and Hospitality which includes:
 - Managing Conflicts of Interest: Revised Statutory Guidance for CCGs (NHS England, 2016)
 - GMC Guidelines: Financial and Commercial Arrangements and Conflicts of Interests (General Medical Council, 2013)
 - Managing Conflicts of Interests: A guide for NHS Commissioning Groups (NHS England, 2013)
 - Substantive guidance on the Procurement, Patient Choice and Competition Regulations (Monitor, 2013)
 - Standards for members of NHS Boards and CCG Governing Bodies in England (Professional Standards Authority, 2012)
 - Code of Conduct for NHS Managers (Department of Health, 2002)
 - The Nolan Principles (Committee on Standards in Public Life, 1995)
- 1.4. An audit of the area of Conflicts of Interest (including gifts and hospitality) will be carried out each year. The Governing Body produces an Annual Governance Statement to demonstrate that the CCG carries out its functions effectively and in a controlled manner and that Statement will include the findings of the audit.
- 1.5. This Policy will be reviewed on an annual basis.

2. Scope of Policy

- 2.1. This policy applies to all CCG members, staff (including temporary, agency and interim staff), Governing Body members and members of its committees. It also includes General Practitioners and practice staff involved in our commissioning, contracting and procurement decision-making processes.
- 2.2 The CCG will ensure that all staff and other affected individuals are aware of the contents of this policy. It will be available to staff on the CCG's intranet and to the public via our website.
- 2.3 Failure to comply with this policy is regarded as a serious matter and disciplinary action may be taken in accordance with the CCG's Disciplinary Policy.

3. Aims and Objectives

- 3.1 The aim of this policy is to protect both the organisation and individuals involved from impropriety or any appearance of impropriety by setting out how the CCG will manage any offers or receipt of gifts and hospitality.
- 3.2 All members need all affected individuals to consider the risks associated with accepting offers of gifts and hospitality when undertaking activities on behalf of the CCG or our member practices. This is especially important during procurements, as the acceptance of gifts in these circumstances would almost certainly give rise to the appearance of conflicts of interests, or unfair influence.
- 3.3 A blanket ban on accepting or providing hospital is neither practical nor desirable from a business point of view. However, in any given situation, individuals should be able to demonstrate their compliance with this policy and confirm that sensible judgement has been applied.

4. Handling Gifts and Hospitality

- 4.1 A gift is defined as any item of cash, goods or service, which is provided for personal benefit, either free of charge or at less than its commercial value.
- 4.2 Our general rule is that any offer of a gift should be courteously declined. The only exceptions to this are where the value of the item is regarded as insignificant. Our policy guideline on this is £10 and would cover items such as diaries, calendars, stationary and other incidental gifts acquired from meetings or events. Gifts of less than this value do not need to be recorded on the Gifts and Hospitality Register.
- 4.3 Hospitality may be defined as the offer or provision of food, drink, accommodation or entertainment. Modest hospitality may be acceptable, although it should be on a similar scale to that which the CCG might offer in similar circumstances (such as tea, coffee or light refreshments at meetings). As with gifts, a common-sense approach should be adopted as to whether hospitality offered is modest or not, but the value should not exceed £25. Below this level, it does not need to be recorded on the Register. However, offers of any value by suppliers or contractors linked to our business (whether or not accepted) should be recorded.

Permitted	Not permitted *
Gifts of limited financial value (below £10) e.g., flowers, chocolates, stationary Modest hospitality, similar to that which we would provide	Cash or cash equivalents (including payments to attend meetings when working for the CCG) Any gifts or hospitality offered by existing or potential suppliers/providers Hospitality above £25 Offers of foreign travel and accommodation

4.4 Improper Gifts and Hospitality: Under no circumstances should an individual ask for or agree to receive from any third party any form of gift, hospitality (including sporting or other social events) or other benefit in return for doing or not doing anything in relation to the discharge of their duties and responsibilities on our behalf or for showing or not showing any favour in relation to such duties and responsibilities. The test that needs to be applied is whether a fair-minded member of the public, knowing the facts of the matter, would see anything improper or suspicious in the receipt of the offer and/or hospitality, and whether the person would consider the hospitality to be reasonable in the context of our position as an organisation using public funds.

4.5 Recurrent Gifts and Hospitality - several small gifts or hospitality individually worth less than the guidelines from a similar source in a 12-month period must be recorded in the Register.

4.6 Cash or Donations - under no circumstances may staff accept personal gifts of cash, even below the guideline level. Should a donation be offered by a present or potential supplier or contractor, it should be politely declined, or the matter referred to the Chief Officer for approval.

4.7 Advice and Approvals: If you are in any doubt about accepting a gift or hospitality, you should either politely decline or consult your line manager in the first instance. You may also seek guidance from the Head of Governance or the Lay Member who has been appointed as the Conflicts of Interest Guardian. Please note that approval from the Chief Officer or Chief Finance Officer is required in advance of accepting offers in excess of the guideline values.

5. Working with the Pharmaceutical Industry

5.1 Recognising the special nature of our relationship with the pharmaceutical companies, we have adopted a separate policy on Sponsorship of Activities and Joint Working with the Pharmaceutical Industry. Staff are asked to refer to that for substantive guidance. The Head of Medicines Management should be contacted for detailed advice.

6. Registering a gift or hospitality

6.1 The Governance Team holds and maintains our Register of Gifts and Hospitality. Any offers of gifts or hospitality (even if they have been declined) should be declared as soon as is practicable and certainly within 28 days of the date on which the gift and hospitality was either accepted or declined.

6.2 The Register includes information on (1) recipients name (2) position held within the CCG (3) date of offer or receipt (4) details of the gift or hospitality (5) estimated value of the gift or hospitality (6) details of the supplier (7) details of any previous gifts offered or accepted by the same supplier (8) details of the officer reviewing or approving the declaration made and date (9) whether the offer was accepted or not (10) reasons for accepting or declining the offer.

6.3 All individuals covered by this policy will be required to complete a Gifts and Hospitality Declaration twice a year. All “nil returns” will also be collated as part of due diligence.

6.4 The Audit and Risk Committee will review the Register at least twice per year.

6.5 Managers are required to remind staff that they are obliged to complete and return the Declaration Form attached as Appendix A to this policy should they accept or decline any kind of gift or hospitality.

7. Publication of Registers

7.1 The CCG publishes the Register of Gifts and Hospitality on its website. Only in exceptional circumstances, where the public disclosure of information could give rise to a real risk of harm or is prohibited by law, may an individual’s name and/or related information be removed from the publicly available register.

7.2 Decisions not to publish information are made of the Conflicts of Interest Guardian, who will seek appropriate legal advice and retain a confidential un-redacted version of the register.

7.3 Staff should note that, following implementation of the Freedom of Information Act 2000, the information contained with the CCG Register of Gifts and Hospitality will also be subject to disclosure to any member of the public on request.

7.4 The CCG also maintains separate Registers for Conflicts of Interest and for Procurement Decisions. These Registers are also regularly updated and published on our website. Details on managing conflicts of interest during the procurement process are set out in section 13 of the Conflicts of Interest Policy.

8. Non-compliance and publication of breaches

- 8.1 The policy on the Receipt of Gifts and Hospitality forms an integral part of our Standing Financial Instructions and compliance is, therefore, mandatory.
- 8.2 If staff are aware of any non-compliance with this policy they should report it to their manager and to the Governance Team. Anonymised details of breaches may be published on the CCG's website for the purposes of learning and development and as a commitment to full transparency with the public.

9. Fraud and Corruption Guidance

- 9.1 Prevention of corruption - The CCG has a responsibility to ensure that all staff are made aware of their duties and responsibilities arising from the Bribery Act 2010. Under this Act there are four offences: (1) bribing, or offering to bribe another person (2) requesting, agreeing to receive, or accepting a bribe (3) bribing, or offering to bribe a foreign public official and (4) failing to prevent bribery.
- 9.2 All members of staff are required to be aware of the Bribery Act 2010 and should ensure their conduct is in line with the requirements of this policy to avoid allegations of corrupt behaviour.
- 9.3 Counter Fraud Measures – Staff should refer to the separate “Local Fraud and Corruption Policy”
- 9.4 The CCG encourages staff with concerns or reasonably held suspicions about potentially fraudulent or corrupt activity or practice, to report these. Staff can contact the (1) Conflicts of Interest Guardian (an independent Lay Member of the Governing Body) (2) the Local Counter Fraud Specialist or the Chief Finance Officer. The Local Counter Fraud Specialist can be contacted on mobile telephone number: 07733 226824
- 9.5 Staff can also call the NHS Fraud and Corruption Reporting Line on free phone 0800 0284060 or by visiting the fraud and corruption website at www.reportnhsfraud.nhs.uk This provides an easily accessible and confidential route for the reporting of genuine suspicions of fraud within or affecting the NHS. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so. Further information regarding the local counter fraud service can be viewed at www.nhsfraud.org
- 9.6 Anonymous letters, telephone calls are occasionally received from individuals who wish to raise matters of concern, but not through official channels. Whilst the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine concern and should be taken seriously. The Chief Financial Officer will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised.
- 9.7 Staff should not ignore their suspicions, investigate themselves or tell colleagues about their suspicions. Reference should be made to the “Concerns and Whistleblowing Policy” for further detailed guidance.

10. Analysing the Impact on Equality

Analysing the Impact on Equality

1.	Title of policy/ programme/ framework being analysed Gifts and Hospitality Policy
2.	Please state the aims and objectives of this work and the <i>intended equality outcomes</i>. How this proposal is linked to the organisation's business plan and strategic equality objectives? To provide a framework of guidance to NHS North East Hampshire and Farnham CCG staff regarding the security of Personal Identifiable Data in both paper and electronic form.
3.	Who is likely to be affected? e.g. staff, patients, service users, carers Staff
4.	What evidence do you have of the potential impact (positive and negative)? None expected.
5.	Disability (Consider attitudinal, physical and social barriers) No impact
6.	Sex (Impact on men and women, potential link to carers below) no impact
7.	Race (Consider different ethnic groups, nationalities, Roma Gypsies, Irish Travellers, language barriers, cultural differences). no impact
8.	Age (Consider across age ranges, on old and younger people. This can include safeguarding, consent and child welfare). no impact
9.	Gender reassignment (Consider impact on transgender and transsexual people. This can include issues such as privacy of data and harassment). no impact
10.	Sexual orientation (This will include lesbian, gay and bi-sexual people as well as heterosexual people). no impact

<p>11. Religion or belief (Consider impact on people with different religions, beliefs or no belief)</p> <p>no impact</p>
<p>12. Marriage and Civil Partnership</p> <p>no impact</p>
<p>13. Pregnancy and maternity (This can include impact on working arrangements, part-time working, infant caring responsibilities).</p> <p>no impact</p>
<p>14. Carers (This can include impact on part-time working, shift-patterns, general caring responsibilities, access to health services, 'by association' protection under equality legislation).</p> <p>no impact</p>
<p>15. Additional significant evidence (See Guidance Note) Give details of any evidence on other groups experiencing disadvantage and barriers to access due to:</p> <ul style="list-style-type: none"> • socio-economic status • location (e.g. living in areas of multiple deprivation) • resident status (migrants) • multiple discrimination • homelessness <p>no impact</p>
<p>16. Action planning for improvement (See Guidance Note) Please give an outline of the key action points based on any gaps, challenges and opportunities you have identified. An Action Plan template is appended for specific action planning.</p>

Sign off
Name and signature of person who carried out this analysis
Date analysis
Name and signature of responsible Director
Date analysis was approved by responsible Director