



Norfolk and Waveney
Integrated Care Board

NHS Norfolk and Waveney ICB

Conflicts of Interest Policy

Document Control Sheet

This document can only be considered valid when viewed via the ICB's intranet. If this document is printed into hard copy or saved to another location, you must check that the version number on your copy matches that of the one online.

Approved documents are valid for use after their approval date and remain in force beyond any expiry of their review date until a new version is available.

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Version	3
Date of this version	October 2025
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Who is it aimed at and which settings?	Integrated Care Board, system partners, the public and patients
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Version control

Revision Date	Summary of changes	Author(s)	Version Number
Jan 25	<p>Annual policy review. The following changes have been made:</p> <ul style="list-style-type: none"> • Section 11: Management in common situations • updated in relation to competition prizes and the new NHS England guidance on Clinical private practice. • Section 14 – Management of COIs through the commissioning cycle – updated to reflect new guidance in relation to the Provider Selection Regime. • Section 15: Joint working - Narrative added to confirm that Joint Committees need to clearly document governance arrangements to ensure conflicts of interest are identified. • Appendix A – DOI Template updated. 	Corporate Governance	2
Oct 25	<p>Policy updated to reflect implementation of the electronic declaration forms for COI and gifts and hospitality.</p> <p>Sections updated:</p> <ul style="list-style-type: none"> • Appendix A: Conflicts of Interest Declaration Form • Appendix D: Gifts and Hospitality Declaration Form 	Corporate Governance	3

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1. INTRODUCTION

This policy describes the arrangements that NHS Norfolk and Waveney Integrated Care Board (hereafter referred to as the ICB) has in place to manage conflicts of interest. This policy reflects and supports the ICB's Constitution and the Statutory Guidance on Managing Conflicts of Interest in the NHS issued by NHS England.

The ICB can be described both as a statutory body, as established in legislation to replace Clinical Commissioning Groups from 1 July 2022, and separately as a unitary board.

ICBs manage conflicts of interest as part of their day-to-day activities. Effective handling of conflicts of interest is crucial to give confidence to patients, taxpayers, stakeholders/partners and Parliament that ICB commissioning decisions are robust, fair and transparent and offer value for money. It is essential to manage conflicts of interest to protect and maintain public trust in the NHS. Failure to manage conflicts of interest could lead to legal challenge and even criminal action in the event of fraud, bribery and corruption.

Conflicts of interest are common and sometimes an unavoidable part of the delivery of healthcare and as such it may not be possible or desirable to completely eliminate them; rather, it is how they are managed that matters. Section 14O of the National Health Service Act 2006 (as amended by the [Health and Social Care Act 2012](#)) ("the Act") sets out the minimum requirements of what both NHS England and ICBs must do in terms of managing conflicts of interest.

This policy reflects the legal requirements and the statutory guidance issued by NHS England under sections 14O and 14Z8 of the Act. This policy also describes the systems the ICB has in place to identify and manage conflicts of interest, and to create an environment in which staff, ICB Board and committee members, feel able, encouraged and obliged to be open, honest and upfront about actual or potential conflicts.

The principles of collaboration, transparency and subsidiarity should be at the centre of any decision making. It is expected that all those who serve as members of the ICB Board, its committees or those who take decisions where they are acting on behalf of the public or spending public money will observe the principles of good governance in the way they do business.

2. PURPOSE

The aim of this policy is to protect both the ICB and individuals involved, from impropriety or any appearance of impropriety by setting out how the organisation will manage conflicts of interest to ensure there is confidence in the commissioning decisions made and to ensure the integrity of all members, officers, office holders, staff, stakeholders and suppliers involved with the work of the ICB.

Conflicts of interest may arise where an individual's personal interests, loyalties or those of a connected person (for example a relative or close friend) conflict with those of the ICB or might be perceived to conflict with those of the ICB.

Such conflicts may create problems such as inhibiting free discussion which could result in decisions or actions being made that are not in the interests of the ICB, and risk giving the impression that the ICB has acted improperly.

The ICB's responsibility includes the stewardship of significant public resources and the commissioning of health and social care services to the population of Norfolk and Waveney.

This policy aims to:

- Enable the ICB partner organisations, clinicians and others who are involved in the work of the ICB, to demonstrate fairness and transparency, and that actions are in the best interest of patients and the ICB's local population.
- Ensure that the ICB operates within the relevant legal framework and in accordance with good practice, but without being bound by over-prescriptive rules that stifle efficiency or innovation.
- Safeguard clinically led commissioning, whilst ensuring objective investment decisions.
- Provide the public, providers, parliament, and regulators with confidence in the probity, integrity and fairness of our decisions.
- Uphold the confidence and trust between patients, the public and the NHS, in their recognition that parties want to behave ethically but may need support and training to understand when conflicts (actual or potential) may arise and how to manage them if they do.

3. LEGAL CONTEXT

Section 14O of the [National Health Service Act 2006](#) (as amended by the Health and Social Care Act 2012) ("the Act") sets out the minimum requirements of what both NHS England and ICBs must do in terms of managing conflicts of interest.

This policy reflects the legal requirements and the statutory guidance issued by NHS England under sections 14O and 14Z8 of the Act.

In addition to complying with the guidance issued by NHS England, ICBs are also required to adhere to relevant guidance issued by professional bodies on conflicts of interest, including the British Medical Association (BMA), the Royal College of General Practitioners, and the General Medical Council (GMC), and to procurement rules including [The Public Contract Regulations 2015](#) and [The National Health Service \(procurement, patient choice and competition\) \(no.2\) regulations 2013](#), as well as the [Bribery Act 2010](#).

4. GOVERNANCE FRAMEWORK – STANDING ORDERS, SCHEME OF RESERVATION AND DELEGATION AND STANDARD FINANCIAL INSTRUCTIONS

All individuals must carry out their duties in accordance with the ICB's Constitution, Standing Orders, Scheme of Reservation and Delegation and Standing Financial Instructions (SFIs). These set out the statutory governance framework in which the ICB operates and there is considerable overlap between the contents of this policy and provision made within these. Individuals must always refer to, and act in accordance with them at all times to ensure processes are followed.

In the event of doubt, individuals should seek advice from their line manager or the Corporate Governance team. Should a conflict arise between the details of this policy and the Constitution, Standing Orders, Scheme of Reservation and Delegation and SFIs then the provision of the Constitution, Standing Orders, Scheme of Reservation and Delegation and SFIs shall prevail.

5. WHAT ARE CONFLICTS OF INTEREST

For the purposes of this policy a conflict of interest is defined 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'.

With this in mind, and in accordance with the national guidance, a conflict of interest may be either:

Actual
There is a material conflict between one or more interests.

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

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

A conflict of interest can fall into the following categories:

Financial Interests	Indirect Interests
An individual may get direct financial benefits from the consequences of a commissioning decision.	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. These associations may arise through relationships with close family members and relatives, close friends and associates, and business partners.
<p>Examples include:</p> <ul style="list-style-type: none"> • Directorship or employment in a private or public company or other organisation which is doing, or may do, business with health or social care organisations • A shareholder (more than 5% of the issued shares), partner or owner of a private or not for profit company, business or consultancy which is doing, or may do, business with health or social care organisations • A management consultant for a provider • Secondary employment • Receipt of secondary income from a provider • Receipt of a grant from a provider • Receipt of any payments (e.g. honoraria, one off payments, day allowances, travel or subsistence) from a provider • Receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role • Having a pension that is funded by a provider (where the value of this might be affected by their success or failure). 	<p>Examples include:</p> <ul style="list-style-type: none"> • Spouse / Partner • Close relative e.g., parent, grandparent, child, grandchild or sibling • Close friend - any confusion relating to the declaration of friendship should be discussed with Corporate Governance to ensure that all declarations are appropriate (e.g. a friend who works as a checkout operator in a shop that supplies the NHS need not be declared but a contracts manager with an NHS supplier should be) • Business partner • Any other relationship which may influence or may be perceived to influence the judgement of the individual (e.g. a reconfiguration of hospital services which might result in the closure of a busy clinic next door to an individual's house) • Where the individual is closely related to, or in a relationship, including friendship, with an individual in the above categories.

Non-financial Professional Interests	Non-financial Personal Interests
Individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career.	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.
<p>Examples include:</p> <ul style="list-style-type: none"> • An advocate for a particular group of patients • A GP with special interest e.g. in dermatology, acupuncture etc. • A member of a particular specialist professional body (routine GP membership of the RCGP, BMA or a medical defence organisation would not usually in itself amount to an interest which needs to be declared) • An advisor to for the CQC or NICE • A medical researcher 	<p>Examples include:</p> <ul style="list-style-type: none"> • A voluntary sector champion for a provider • A volunteer for a provider • A member of a voluntary sector board or any position of authority in or connection with a voluntary organisation • Suffering from a particular condition requiring individually funded treatment • A member of a lobby or pressure groups with an interest in health • A financial advisor.
<p>General Interest</p> <p>This could be any position held in another public body organisation, NHS, Local Authority or a community group which may have potential to give rise to influence decisions made by the ICB. Similarly, if you have made a declaration that you are a member of the ICB or attend any of its committees/working groups to another organisation, this information MUST be reciprocated back to the ICB to ensure consistency across organisations and vice versa</p>	

Whether an interest held by another person gives rise to a conflict of interest will depend upon the nature of the relationship between that person and the individual, and the role of the individual within the ICB. It should be noted that:

- The above categories and examples are not exhaustive and the ICB will exercise discretion on a case-by-case basis.
- The possibility of the perception of wrongdoing, impaired judgement or undue influence shall also be considered a conflict of interest for the purposes of this Policy and should be declared and managed accordingly; and
- Where there is doubt as to whether a conflict of interest exists, it should be assumed that there is a conflict of interest and declared and managed accordingly.

Where an individual has any queries with respect to conflicts of interest they should seek advice from the ICB Corporate Governance team.

6. ROLES AND RESPONSIBILITIES

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

ICB Board and Committees	The ICB Board and its committees are responsible for upholding the principles of good governance and ensuring that ICB is always acting in the best interests the NHS and its communities. In particular, the chairs of these 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 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.
Executive Director of Finance	The Executive Director of Finance is responsible for ensuring the adequacy of the ICB's counter fraud arrangements.
Governance Lead	<ul style="list-style-type: none"> • 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	<p>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:</p> <ul style="list-style-type: none"> • 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. • 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 Team	Members of the Executive Management Team and Senior Leadership Team have an ongoing responsibility for ensuring the application of this policy.
All individuals	All individuals are responsible for complying with this policy and for seeking advice if unsure how it applies to them.

7. DECISION MAKING STAFF

Some staff are more likely than others to have a decision-making role or influence on the use of public money. This is because of the requirements of their role. This policy refers to these people as decision making colleagues.

Decision making colleagues in the ICB are:

- executive, non-executive and partner members of the board
- members of ICB committees, and delivery groups which contribute to decision making on the commissioning or provision of services
- those at Agenda for Change band 8d and above, or operating at that level on an interim basis
- administrative and clinical colleagues who:
 - have the power to enter into contracts on behalf of the ICB
 - are involved in decision making concerning the commissioning of services, purchasing of goods, medicines, medical devices or equipment and formulary decisions

8. DECLARING INTERESTS

It is a statutory requirement that individuals must declare any interest that they have (see [Appendix A](#)) in relation to ICB business or a decision to be made, this must first be discussed with their line manager and submitted in writing, to be reviewed by their line manager and which is received by the ICB's Corporate Governance team. as soon as they are aware of it and in any event no later than 28 days after becoming aware.

Where an individual is unable to provide a declaration in writing, for example, if a conflict becomes apparent during a meeting, they will make an oral declaration before witnesses which will be formally written in the meeting record. A written declaration will need to be submitted following the meeting to ensure inclusion on the register.

Individuals contracted to work on behalf of the group, or otherwise providing services or facilities to the group, will be made aware of their obligations under this policy to declare conflicts or potential conflicts of interests. This requirement will be written into their contracts for services.

The ICB will ensure as a matter of course that declarations of interest are made and regularly confirmed or updated. This includes the following circumstances:

- **On appointment** – all appointments will be asked to make a formal declaration of interest and in the case of Board members, prior to appointment. The ICB will need to assess the materiality of the interest, in particular whether the individual (or family member/business partner) could benefit from any decision the Board might make). If the interest is significant to the extent that the individual would be unable to make a full and proper contribution to the Board because they are required to exclude themselves from decision-making on so regular a basis, then that individual should not become a member of the Board.
- **Annually** - to ensure the register of interest is accurate and up to date. If there are no interests or changes to declare a 'nil return' should be submitted.
- **At meetings** – a standing agenda item will be on the ICB Board, sub-committee and any working group agendas. Even if an interest has been recorded in the register of interests, it should still be declared in meetings before matters relating to that interest are discussed and any declarations will be recorded in the minutes of the meeting.
- **When prompted by the ICB** – because of the ICB's role in spending taxpayers' money, on at least an annual basis the ICB will ensure that individuals are prompted to update their declarations of interest or make a nil return where there are no interests or changes to declare.
- **On changing role or responsibility** – a further declaration should be made to reflect the change in circumstances; this could involve a conflict of interest ceasing to exist or a new

one materialising (for example, where an individual takes on a new role outside the ICB, sets up a new business or relationship, starts a new project / piece of work or may be affected by a procurement decision e.g. if their role may transfer to a proposed new provider). A further declaration should be made to reflect the change in circumstances as soon as possible, and in any event within 28 days of the change.

- **During the procurement process** - anyone participating in the procurement, or otherwise engaging with the ICB, in relation to the provision of services or facilities, will be required to make a declaration of interest which will include nil returns. This includes those who will take part in any tender evaluation or decision making with regards to the award of a contract.

Registers of Interest are maintained by the Corporate Governance team and these registers are available on the ICB website.

All interests declared will be promptly transferred to the relevant registers by Corporate Governance. Where interests have expired, these will remain on the relevant register for a minimum of 6 months although a private record of the historic interests will be retained by the ICB for a minimum of 6 years after the date on which it expired

9. REGISTERS OF INTEREST

The ICB maintains a Register of Interests ([Appendix B](#)) of all interests declared. The ICB Corporate Governance team ensures that the Register includes sufficient information about the nature of the interest and the details of those holding the interest.

The ICB maintain a Register of Interests for the following:

- All ICB employees – including:
 - All full and part time staff
 - Any staff on sessional or short-term contracts
 - Any students and trainees (including apprentices)
 - Agency staff
 - Seconded staff
- Members of the ICB Board and its committees – Including (but not limited to)
 - Executive Directors
 - Non-Executive Members
 - Partner Members
- Any third parties contracted to provide services, any person involved in procurement or commissioning decisions and any individual directly involved with business or decision making.

The register(s) will be publicly available and will be refreshed on an annual basis. Individuals should identify changes to their record on their register as soon as they are aware of it and in any event no later than 28 days of the change. The register will be published on the ICB's website.

In exceptional circumstances, where the public disclosure of information could give rise to a real risk of harm or is prohibited by law, an individual's name and/or other information may be redacted from the publicly available register(s). If an individual believes that substantial damage or distress may be caused to themselves or somebody else by the publication of information about them, they are entitled to request that the information is not published. Such requests must be made in writing. Decisions not to publish information must be made by the Conflicts of Interest Guardian for the ICB, who will seek legal advice where required, and the ICB will retain a confidential un-redacted version of the register(s).

The Register of Interest will include:

- Name of the person declaring the interest
- Position within or relationship with the ICB
- Type of interest, including for indirect interest details of the relationship with the person who has an interest
- The dates from which the interest relates
- The actions taken to mitigate the risk – these should be agreed with the individual's line manager or a senior manager within the ICB.

10. MANAGEMENT OF INTERESTS IN GENERAL

In a situation where a person declares an interest but there is no risk of a conflict arising, it required no action. However, should they declare a material interest the following general management action(s) which could be applied by the ICB include:

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

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

Colleagues who declare material interests should tell their manager or the people they are working about those interests.

The Corporate Governance team can advise on appropriate management action if this cannot be agreed locally.

11. MANAGEMENT IN COMMON SITUATIONS

This section sets out the principles and rules to be adopted by staff in common situations, and what information should be declared. A condensed 'at a glance' version is available at [Appendix C](#).

The ICB should not accept gifts that may affect, or be seen to affect, their professional judgement.

Any personal gift of cash or cash equivalents (for example: vouchers, tokens, offers of remuneration to attend meetings whilst in a capacity working for or representing the ICB) must always be declared, whatever their value and whatever their source, and the offer which has been declined must be declared to the Corporate Governance team who has designated responsibility for maintaining the register of gifts and hospitality.

All staff need to consider the risks associated with accepting offers of gifts, hospitality and entertainment when undertaking activities for or on behalf of the ICB or their GP practice.

This is especially important during procurement exercises, as the acceptance of gifts could give rise to real or perceived conflicts of interests, or accusations of unfair influence, collusion, or canvassing.

The information captured below provides a description of what the issues, principles and rules are in respect of the main themes listed above.

Prizes (including cash, cash equivalents or gifts) must not be accepted by ICB staff or anyone working for or representing them or the ICB. A trophy or accolade may be accepted.

Gifts

What are the issues?	<p>Staff in the NHS offer support during significant events in people's lives. For this work they may sometimes receive gifts as a legitimate expression of gratitude. We should be proud that our services are so valued. But situations where the acceptance of gifts could give rise to conflicts of interest should be avoided. Staff and organisations should be mindful that even gifts of a small value may give rise to perceptions of impropriety and might influence behaviours if not handled in an appropriate way. A gift means 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</p>
Principles and rules	<p>Overarching principle applying in all circumstances:</p> <ul style="list-style-type: none">• Staff should not accept gifts that may affect, or be seen to affect, their professional judgement. <p>Gifts from suppliers or contractors:</p> <ul style="list-style-type: none">• Gifts from suppliers or contractors doing business (or likely to do business) with an organisation should be declined, whatever their value.• Subject to this, low cost branded promotional aids may be accepted where they are under the value of a common industry standard of £6* in total and need not be declared. *the £6 value has been selected with reference to existing industry guidance issues by the ABPI. <p>Gifts from other sources (e.g., patients, families, service users):</p> <ul style="list-style-type: none">• Gifts of cash and vouchers to individuals should always be declined.• Staff should not ask for any gifts.• Gifts valued at over £50 should be treated with caution and only be accepted on behalf of an organisation (i.e., to an organisation's charitable funds), not in a personal capacity. These should be declared by staff.• Modest gifts accepted under a value of £50 do not need to be declared.• A common sense approach should be applied to the valuing of gifts (using an actual amount, if known, or an estimate that a reasonable person would make as to its value).• Multiple gifts from the same source over a 12-month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50.
What should be declared	<ul style="list-style-type: none">• Staff name and their role with the ICB Board• A description of the nature and value of the gift, including its source.• Date of receipt.• Any other relevant information (for example, circumstances surrounding the gift, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Hospitality

What are the issues?

Delivery of services across the NHS relies on working with a wide range of partners (including industry and academia) in different places and, sometimes, outside of “traditional” working hours. As a result, staff will sometimes appropriately receive hospitality. Staff receiving hospitality should always be prepared to justify why it has been accepted and be mindful that even hospitality of a small value may give rise to perceptions of impropriety and might influence behaviours.

Hospitality means offers of meals, refreshments, travel, accommodation, and other expenses in relation to attendance at meetings, conferences, education and training events, etc.

Principles and rules

Overarching principles applying in all circumstances:

- Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.
- Hospitality must only be accepted when there is a legitimate business reason and it is proportionate to the nature and purpose of the event.
- Particular caution should be exercised when hospitality is offered by actual or potential suppliers or contractors, these can be accepted if modest and reasonable, but individuals should always obtain senior approval and declare these.

Meals and Refreshments

- Under a value of £25 may be accepted and need not be declared.
- Of a value between £25 and £75* may be accepted and must be declared.
- Over a value of £75* should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on an organisation’s register(s) of interest as to why it was permissible to accept.
- A common-sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or an estimate that a reasonable person would make as to its value).

Travel and accommodation

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

What should be declared

- Staff name and their role with the ICB Board
- A description of the nature and value of the gift, including its source.
- Date of receipt.
- Any other relevant information (for example, circumstances surrounding the gift, action taken to mitigate against a conflict, details of any approvals given to depart from the terms of this policy).

Sponsored Events

What are the issues

Sponsorship of NHS events by external parties is valued. Offers to meet some or part of the costs of running an event secures their ability to take place, benefiting NHS staff and patients. Without this funding there may be fewer opportunities 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 or services. As a result, there should be proper safeguards in place to prevent conflicts occurring.

Principles and rules

- 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 ICB and the NHS.
- During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection rules and legislation.
- No information should be supplied to the sponsor from which they could gain a commercial advantage, and information which is not in the public domain should not normally be supplied.
- At the ICB's discretion, sponsors or their representatives may attend or take part in the event but they should not have a dominant influence over the content or the main purpose of the event.
- The involvement of a sponsor in an event should always be clearly identified in the interest of transparency.
- ICBs should make it clear that sponsorship does not equate to endorsement of a company or its products and this should be made visibly clear on any promotional or other materials relating to the event.
- Staff should declare involvement with arranging sponsored events to the organisation.
- All declarations made under this section must be made promptly - A declaration form is at [Appendix E](#).

What should be declared

Organisations should maintain records regarding sponsored events in line with the above principles and rules.

Other forms of sponsorship

What are the issues?

Research is vital in helping the NHS to transform services and improve outcomes. Without sponsorship of research some beneficial projects might not happen. More broadly, partnerships between the NHS and external bodies on research are important for driving innovation and sharing best practice. However, there is potential for conflicts of interest to occur, particularly when research funding by external bodies does or could lead to a real or perceived commercial



advantage. There needs to be transparency and any conflicts of interest should be well managed.

Principles and rules

- Funding sources for research purposes must be transparent.
- Any proposed research must go through the relevant health research authority or other approvals process.
- There must be a written protocol and written contract between staff, the organisation, and/or institutes at which the study will take place and the sponsoring organisation, which specifies the nature of the services to be provided and the payment for those services.
- The study must not constitute an inducement to prescribe, supply, administer, recommend, buy or sell any medicine, medical device, equipment or service.
- Staff should declare involvement with sponsored research to their organisation.
- The organisation will retain written records of sponsorship of research, in line with the above principles and rules.

What should be declared

- Staff should declare:
- Their name and their role with the ICB Board.
 - A description of the nature of the nature of their involvement in the sponsored research.
 - Relevant dates.
 - Any 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

What are the issues

Sponsored posts are positions with an organisation that are funded, in whole or in part, by organisations external to the NHS. Sponsored posts can offer benefits to the delivery of care, providing expertise, extra capacity and capability that might not otherwise exist if funding was required to be used from the NHS budget. However, safeguards are required to ensure that the deployment of sponsored posts does not cause a conflict of interest between the aims of the sponsor and the aims of the organisation, particularly in relation to procurement and competition.

Principles and rules

- Staff who are establishing the external sponsorship of a post should seek formal prior approval from their organisation.
- Rolling sponsorship of posts should be avoided unless appropriate checkpoints are put in place to review and confirm the appropriateness of arrangements continuing.
- 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. For the duration of the sponsorship, auditing arrangements should be established to ensure this is the case. Written agreements should detail the circumstances under which organisations have the ability to exit sponsorship arrangements if conflicts of interest which cannot be managed arise.



- Sponsored post holders must not promote or favour the sponsor’s 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 developed in connection with the sponsored posts.

What should be declared

- The organisation will retain written records of sponsorship of posts, in line with the above principles and rules.
- Staff should declare any other interests arising as a result of their association with the sponsor, in line with the content in the rest of this policy.

Shareholdings and other Ownership Issues

What are the issues

Holding shares or other ownership interests can be a common way for staff to invest their personal time money to seek a return on investment. However, conflicts of interest can arise when staff personally benefit from this investment because of their role within an organisation. For instance, if they are involved in their organisation’s procurement of products or services which are offered by a company they have shares in then this could give risk to a conflict of interest. In these cases, the existence of such interest should be well known so that they can be effectively managed.

Principles and rules

- Staff should declare, as a minimum, any shareholdings and other ownership interests in a publicly listed, private or not-for-profit company, business, partnership or consultancy which is doing, or might be reasonably expected to do, business with the organisation.
- There is no need to declare shares or securities held in collective investment or pension funds or units of authorised unit trusts.
- Where shareholdings or other ownership interests are declared and give rise to the risk of conflicts of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

What should be declared

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

Patents/intellectual property

What are the issues?

The development and holding of patents and other intellectual property rights allows staff to protect something that they create, preventing unauthorised use of products or the copying of protected ideas.

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 intellectual property rights are involved in decision making and procurement. In addition, where produce development involves



use of time, equipment or resources from their organisation, then this too could create risks of conflicts of interest, and it is important that the organisation is aware of this and it can be managed appropriately.

Principles and rules

- Staff should declare patents and other intellectual property rights they hold (either individually, or by virtue of their association with a commercial or other organisation), including where applications to protect have started or are on-going, which are, or might be reasonably expected to be, related to items to be procured or used by their organisation.
- Staff should seek prior permission from their 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 of intellectual property.
- Where holding of patents and other intellectual property rights give rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

What should be declared

- Staff name and their role within the ICB Board.
- A description of the patent or other intellectual property right and its ownership.
- Relevant dates.
- Other relevant information (e.g., action taken to mitigate against a conflict, detail of any approvals given to depart from the terms of this policy).

Loyalty Interests

What are the issues?

As part of their jobs staff members 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 a formal process or managed via any contractual means – it can be as simple as having informal access to people in senior positions. However, loyalty interest can 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.

Principles and rules

- Loyalty interests should be declared by staff involved in decision making where they:
- Hold a position of authority in another NHS organisation, or commercial, charity, voluntary, professional, statutory or other body which could be seen to influence decisions they take in their NHS role.
 - Sit on advisory groups or other paid or unpaid decision making forums that can influence how 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.

Where holding loyalty interest gives rise to a conflict of interest then the general management actions outlined in this policy should be considered and applied to mitigate risks.

What should be declared

- Staff name and their role within the ICB Board.
- Nature of the loyalty interest
- Relevant dates.
- Other relevant information (e.g., action taken to mitigate against a conflict, detail of any approvals given to depart from the terms of this policy).

Donations

What are the issues?

A donation is a charitable financial payment, which can be in the form of direct cash payment or through the application of a will or similar directive. Charitable giving and other donations are often used to support the provision of health and care services. As a major public sector employer, the NHS holds formal and informal partnerships with national and local charities. A supportive environment across the NHS and charitable sector should be promoted. However. Conflicts of interest can arise.

Principles and rules

- Acceptance of donations made by suppliers or bodies seeking to do business with an organisation should be treated with caution and not routinely accepted. In exceptional circumstances a donation from a supplier may be accepted but should always be declared. A clear reason should be recorded as to why it was deemed acceptable, alongside the actual or estimated value.
- Staff should not actively solicit charitable donations unless this is a prescribed or expected part of their duties for an organisation or is being pursued on behalf of that organisation’s registered charity (if it has one) or other charitable body and is not for their own personal gain.
- Staff must obtain permission from their organisation if in their professional role they intend to undertake fundraising activities on behalf of a pre-approved charitable campaign.
- Donations, when received, should be made to a specific charitable fund (never to an individual) and a receipt should be issued.
- Staff wishing to make a donation to a charitable fund in lieu of a professional fee they receive may do so, subject to ensuring that they take personal responsibility for ensuring that any tax liabilities related to such donations are properly discharged and accounted for.

What should be declared

- Organisations should maintain records in line with their wider obligations under charity law, in line with the above principles and rules.

Secondary employment

What are the issues?

The NHS relies on staff with good skills, broad knowledge and diverse experience. Many staff bring expertise from sectors outside the NHS, such as industry, business, education, government and beyond. The involvement of staff in these outside roles alongside their NHS role can

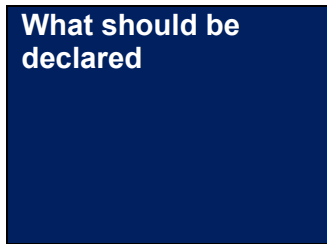


therefore be of benefit, but the existence of these should be well known so that conflicts can be either managed or avoided.
 Outside employment means employment and other engagements, outside of formal employment arrangements. This can include directorships, non-executive roles, self-employment, consultancy work, charitable trustee roles, political roles and roles within not-for-profit organisations, paid advisory positions and paid honorariums which relate to bodies likely to do business with an organisation.



Principles and rules

- Staff should declare any existing outside employment on appointment, and any new outside employment when it arises to their Line Manager. Please read the Secondary Employment Policy for further detail.
- Where a risk of conflict of interest is identified, the general management actions outlined in this policy should be considered and applied to mitigate risks.
- Where contracts of employment or terms and conditions of engagement permit, staff may be required to seek prior approval from an organisation to engage in outside employment.
- Organisations may also have legitimate reasons within employment law for knowing about outside employment of staff, even if this does not give rise to risk of a conflict. Nothing in this policy prevents such enquiries being made.



What should be declared

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

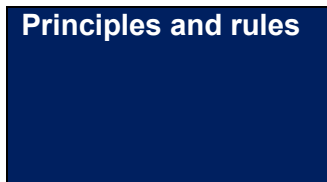
Clinical Private Practice



What are the issues

Service delivery in the NHS is done by a mix of public, private and not-for-profit organisations. The expertise of clinicians in the NHS is in high demand across all sectors and the NHS relies on the flexibility that the public, private and not-for-profit sectors can provide. It is therefore not uncommon for clinical staff to provide NHS funded care and undertake private practice work either for an external provider, or through a corporate vehicle established by themselves.

Existing provisions in contractual arrangements make allowances for this to happen and professional conduct rules apply. However, these arrangements do create the possibility for conflicts of interest arising. Therefore, these provisions are designed to ensure the existence of private practice is known so that potential conflicts of interest can be managed.



Principles and rules

- Clinical staff should declare all private practice on appointment, and/or any new private practice when it arises including:
- where they practise (name of private facility)
 - what they practise (specialty, major procedures)
 - when they practise (identified sessions/time commitment)



- hospital consultants are already required to provide their employer with this information by virtue of paragraph 3, schedule. 9 of Terms and conditions – consultants (England)
- Clinical staff should:
- Seek prior approval from their line manager before taking up private practice and follow the ICB’s secondary employment policy.
 - Ensure that, where there would otherwise be a conflict or potential conflict of interest, NHS commitments take precedence over private work.
 - Not accept direct or indirect financial incentives from private providers.

What should be declared

- Staff name and their role within the ICB Board.
- The nature of the outside employment including:
 - where they practise (name of private facility)
 - what they practise (specialty, major procedures)
 - when they practise (time commitment)
- Relevant dates.
- Other relevant information (e.g., action taken to mitigate against a conflict, details of an approvals given to depart from the terms of this policy).

12. MANAGING CONFLICTS OF INTEREST AT MEETINGS

It is important that the interests of those who are involved in decision-making groups are documented and understood and that the following principles are adopted:

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

To support Chairs in their role, the meeting Secretariat will regularly provide the Chair with access to a copy of the Register of Interests prior to meetings. This should include details of any declarations of conflicts, which have already been made by the members.

The Meeting Secretariat should invite members and those in attendance, to declare any interests in relation to agenda items to the Chair in advance of the meeting.

Meeting Secretariats are required to use the following templates to administer the meetings. Use of these will help to ensure conflicts of interest are discussed and recorded in line with statutory guidelines.

- Meeting Agenda
- Template for recording minutes

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) 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:

- Request that the individual does not receive the papers which are relevant or minutes of the meeting which relate to the matter(s) which give rise to the conflict or receive redacted versions.
- Request that the individual leaves the meeting when the relevant matter(s) are about to be discussed or does not attend the meeting.
- Allow the individual to participate in some or all of the discussion when the relevant matter(s) are being discussed but request them to leave the meeting when any decisions are being taken in relation to those matter(s). This may be appropriate where the conflicted individual has important relevant knowledge and experience of the matter(s) which would benefit other members to hear, but this will depend on the nature and extent of the interest which has been declared.
- Noting the interest and ensuring that all in attendance are aware of the nature and extent of the interest but allowing the individual to remain and participate in both the discussion and in any decisions. This is only likely to be the appropriate course of action where it is decided that the interest which has been declared is either immaterial or not relevant to the matter(s) under discussion.

In the event that the Chair of a meeting has a conflict of interest, the Deputy Chair is responsible for deciding the appropriate course of action to manage the conflict of interest. If the Deputy Chair is also conflicted or not in attendance, then the remaining non-conflicted voting members of the meeting should agree between themselves how to manage the conflict(s).

As a minimum requirement, the following should be recorded in the minutes of all meetings where a conflict of interest has been declared:

- Individual declaring the interest.
- At what point the interest was declared.
- The nature of the interest.
- The Chair's decision and resulting action taken.
- The point during the meeting at which the individual left and returned to the meeting.

[Appendix F](#) can be used by meeting Secretariats to record information in these circumstances. Completed forms should be sent to nwicb.corporateaffairs@nhs.net

In addition, the ICB encourages meeting Secretariats and chairs to use the Conflicts Management Plan ([Appendix G](#)) to assist with planning appropriate steps which can be taken in certain situations.

13. **MANAGING CONFLICTS OF INTEREST DURING THE RECRUITMENT PROCESS**

Everyone in the ICB has responsibility to appropriately manage conflicts of interest during the recruitment process because these roles will be involved (in some form) in the decision-making processes of the ICB.

Appointing ICB Board Members, Committee Members, and any member of staff

When advertising for a ICB Board Member, Committee member or a member of staff, a request will be made via the recruitment team by the recruiting manager for a Conflict of Interest declaration to be completed by the successfully shortlisted candidates, and this will need to be brought with them to their interview.

On appointing to any of these roles the ICB will need to consider whether conflicts of interest should exclude individuals from being appointed to the role. This will need to be considered on a case-by-case basis and in conjunction with the principles within the ICB's Constitution. In such cases the Corporate Governance team must always be consulted for advice prior to any decision being made.

The materiality of the interest will need to be considered, and in particular, whether the individual (or any person with whom they have a close association as listed in the scope of this policy) could benefit (whether financially or otherwise) from any decision the ICB might make. The ICB will also determine the extent of the interest and the nature of the appointee's proposed role within the ICB. If the interest is related to an area of business significant enough that the individual would be unable to operate effectively and make a full and proper contribution in the proposed role, then that individual should not be appointed to the role.

All recruiting managers will need to ensure that they support obtaining the declaration of interest forms for new staff and make the necessary arrangements to manage any declared conflicts of interest.

ICB Board and Committee members from other Organisations

ICBs have been created to give statutory NHS providers, local authorities and primary medical services (general practice) nominees a role in decision-making. It should not be assumed that the ICB Board will always be conflicted because at least three members of the ICB Board must be jointly nominated (the "partner members") It is crucial that the ICB ensures that the Boards and Committees are appropriately composed and take into account different perspectives individuals will bring from their respective sectors to help inform decision-making.

14. MANAGING CONFLICTS OF INTEREST THROUGH THE COMMISSIONING CYCLE

The NHS England guidance for Managing Conflicts of Interest in the NHS is clear that conflicts of interest need to be managed appropriately throughout the whole commissioning cycle including within the ongoing management of existing contracts and ICBs must have in place processes to ensure this happens.

At the outset of a commissioning process, all individuals involved, including those from external bodies, must complete a Conflict of Interest declaration, even if there is nothing to declare (see [Appendix A](#)). Completed forms must be held by the lead Procurement Manager and either the forms or a collated register must be available at every meeting.

Where Conflicts of Interest are declared, the chair of the meeting, in conjunction with the Corporate Governance team, must put in place clear arrangements to robustly manage these. This includes consideration as to which stages of the process a conflicted individual should not participate in, and, in some circumstances, whether that individual should be involved in the process at all. The steps taken must be clearly documented in the minutes.

Where a conflict is identified which may impact on the management of an existing contract, a discussion must take place with the Corporate Governance team, and if necessary the Conflicts of Interest Guardian, so that steps can be put in place to manage this. Any mitigation must also be recorded in minutes that are taken.

ICBs will also need to identify as soon as possible where staff might transfer to a provider (or their role may materially change) following the award of a contract. This should be treated as a relevant interest which will be managed in line with this policy and following advice from the Corporate Governance team and if necessary the ICB Conflicts of Interest Guardian.

Designing service requirements

The NHS England guidance upon which this policy is based states that ICBs have legal duties under the Act to properly involve patients and the public in their respective commissioning processes and decisions. Public involvement supports transparent and credible commissioning decisions and should happen at every stage of the commissioning cycle from needs assessment, planning and prioritisation to service design, procurement and monitoring.

Conflicts of Interest can arise from the inclusion of members of the public or particular groups who are involved in the decision-making process of the ICB. As such, any member of the public

or representative of a particular group involved in the influencing or decision-making of the ICB will be required to complete a Declaration of Interest regardless of a conflict being identified. This will be held by the Procurement Manager alongside any other conflict of interest forms completed as part of the procurement process.

Provider engagement

It is good practice to engage relevant providers, especially clinicians, in confirming that the design of service specifications will meet patient needs. Such engagement, done transparently and fairly, is entirely legal but it is important not to gear the requirement in favour of any particular provider(s). If appropriate, the advice of an independent clinical adviser on the design of the service should be secured.

Conflicts of interest, as well as challenges to the fairness of the procurement process, can arise if a commissioner engages selectively with only certain providers (existing or potential) in developing a service specification for a contract for which they may later bid. The ICB is particularly mindful of these issues when engaging with existing / potential providers in relation to the development of new care models.

Procuring new care models

Where new care models or other arrangements of a similar scale or scope, are being procured it is imperative that conflicts of interest are managed in line with this policy. Where further advice is needed, please seek advice from the Corporate Governance team.

Managing conflicts of interest relating to procurement

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

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

The Provider Selection Regime (PSR) came into force on 1 January 2024. The PSR is a set of rules for procuring health services which are designed to be a more flexible and proportionate decision-making process for selecting providers to deliver healthcare services.

The NHS England guidance states that ICBs need to comply with the PSR when arranging for the provision of “relevant health care services,” either on their own or as part of a “mixed procurement”. ICBs need to comply with the rules on public procurement set out in the [Public Contracts Regulations 2015](#) (‘PCR’) when arranging for the provision of goods and services that are not “relevant health care services”, unless they form part of a “mixed procurement,” which meets the test for the application of the PSR.

While the Regulations allow for the fact that an ICB member may also be an employee, director, partner or otherwise holding a position with another relevant organisation, the possibility of actual and perceived conflicts of interest arising will remain. For all PSR decisions, it must be carefully considered whether an individual’s role in another organisation may result in actual or perceived conflicts of interest and if so whether that outweighs the value of the knowledge they bring to the process.

In relation to the provider selection regime, where decisions are being taken as part of a formal competitive procurement of services, any individual who is associated with an organisation that has a vested interest in the procurement should recuse themselves from the process.

The procedure for managing conflicts of interest during procurements is set out in the ICB's Procurement and Contracting policies.

Register of procurement decisions

To promote transparency in decision-making, and in line with the NHS England Managing Conflicts of Interest guidance, the ICB maintains a register of procurement decisions taken, either for the procurement of a new service or any extension or material variation of a current contract. This will include:

- The details of the decision;
- Who was involved in making the decision (including the name of the ICB clinical lead, the ICB contract manager, the name of the decision making committee and the name of any other individuals with decision-making responsibility);
- Summary of any conflicts of interest in relation to the decision and how these were managed; and
- The award decision taken.

It is the responsibility of managers involved in procurements to ensure that details of any procurement decisions taken, including single tender actions are provided to the Corporate Governance team so that the register of procurement decisions can be maintained. Upon receipt of new information, the register of procurement decisions will be updated and published on the ICB website by the Corporate Governance team.

15. JOINT WORKING

Individuals must ensure that joint working arrangements are clear and transparent. Joint working is where, for the benefit of patients, organisations pool skills / resources and experience to enable successful delivery of a project or work area, this may also include joint committees.

Joint committees will need to adopt clear governance arrangements to ensure conflicts of interest are identified for making decisions, differentiating between those individuals who should be involved in the final, formal decision-making and those who contribute to committee discussions about, for example, service design that lead to that decision. These arrangements should be clearly documented. The ICB currently works in collaboration with Local Authorities and other system partners.

16. RAISING CONCERNS AND BREACHES

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

This policy has been prepared to help individuals approach their decision making properly where there is a conflict of interest. Individuals are expected to use this policy to fulfil their duty to act only in the best interests of the ICB and to be able to provide a convincing justification for their decisions in the event of challenge. The ICB takes seriously the failure to disclose such information as required by this policy.

It is the duty of every ICB employee, Board member, committee member and GP practice member to speak up about genuine concerns in relation to the administration of the ICB's policy on conflicts of interest management, and to report these concerns. Individuals should not ignore suspicions or investigate themselves, but rather speak to the designated ICB point of contact for these matters.

Concerns around suspected or known breaches of this policy should be raised in the first instance with either the Corporate Governance team or the Executive Director of Finance (unless implicated). If individuals prefer to speak to someone else in strict confidence, they can

also contact the Conflicts of Interest Guardian. All such notifications will be held in the strictest confidence and in accordance with the ICB's other policies (including the Freedom to Speak Up Policy).

The Counter Fraud, Bribery and Corruption Policy may be consulted and an appropriate referral made to the [Local Counter Fraud Specialist](#) where applicable. The Fraud and Security Management Service may also be consulted directly. The person notifying the Conflicts of Interest Guardian can expect a full explanation of any decisions taken as a result of any investigation.

Please see [Appendix H](#) for the procedure on reporting Conflicts of Interest Breaches.

If conflicts of interest are not effectively managed there is the potential for corporate offences to be applied contrary to the Bribery Act 2010 which could lead to unlimited fines and criminal prosecution against directors. The ICB could further face civil challenges to decisions they make. For instance, if breaches occur during a procurement exercise, the ICB risks a legal challenge from providers that could potentially overturn the award of a contract, lead to damages claims against the ICB, and necessitate a repeat of the procurement process. Breaches also damage public trust and confidence in the NHS generally.

In extreme cases, staff and other individuals could face personal civil liability, a claim for misfeasance in public office or fitness to practice proceedings by their professional regulator. Failure to manage conflicts of interest could also lead to criminal proceedings including for offences such as fraud, bribery and corruption.

It is an offence under the [Fraud Act 2006](#) for individuals to 1) abuse their position; and/or 2) fail to disclose information to the ICB and/or 3) make a false representation in order to make a gain for themselves or another, or to cause a loss or expose the organisation to a loss. Therefore, if an individual becomes aware that someone has failed to disclose relevant and material information, or made a false representation, they should raise the concern in the first instance with the Local Counter Fraud Service who will then liaise with the Corporate Governance team, Executive Director of Finance, and the Conflicts of Interest Guardian – all such notifications will be dealt with in the strictest confidence in accordance with the other ICB's policies (including the Freedom to Speak Up Policy).

Individuals who fail to disclose any relevant interests or who otherwise breach the ICB's rules and policies relating to the management of conflicts of interest will be subject to investigation and, where appropriate, to disciplinary action. ICB staff, Board and committee members in particular should be aware that the outcomes of such action may, if appropriate, result in the termination of their employment or position with the ICB.

All breaches will be anonymised, recorded and published on the ICBs website along with any outcomes/actions for the purpose of learning and development once investigations have been completed. NHS England will be notified of any breaches, as appropriate, as soon as possible, including as part of the quarterly returns for the Improvement and Assessment Framework.

Board Members, Members (voting and non-voting attendees) of the ICB's Primary Care Commissioning Committee and Joint Senior Leaders are all required to disclose their GP Practice. This enables the ICB to manage any potential conflicts in respect of primary care decisions. If you fall into one of the above categories, please complete the below:

GP Practice in N&W	Yes <input type="checkbox"/> (complete below)	No <input type="checkbox"/>
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GP Practice:	
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Please confirm below which Norfolk & Waveney ICB Committees you belong to or attend:

<input type="checkbox"/> ICB Board	<input type="checkbox"/> Integrated Care Partnership
<input type="checkbox"/> Conflicts of Interest Committee	<input type="checkbox"/> Audit and Risk Committee
<input type="checkbox"/> Patients and Communities Committee	<input type="checkbox"/> Quality and Safety Committee
<input type="checkbox"/> Remuneration, People and Culture Committee	<input type="checkbox"/> Primary Care Commissioning Committee
<input type="checkbox"/> Finance Committee	<input type="checkbox"/> Commissioning & Performance Committee
<input type="checkbox"/> Executive Management Team	<input type="checkbox"/> Other (please state below)

Other:

Data Protection and Freedom of Information

The information provided in this form will be held by the ICB in accordance with Data Protection Act 2018 and will be processed to enable compliance with the ICB's statutory duties and its Conflict of Interest Management & Standards of Business Conduct Policy.

Please be aware that the information provided in this form will be added to the ICB's register of interests, held for inspection by the public and published on the ICB's website. If you have provided information about third parties in this form, please make them aware of this. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000.

Statutory duties and publication

Consistent with Section 140 of the NHS Act 2006 and guidance produced by NHS England on the management of conflicts of interest, the ICB is required to hold and publish the interests of members and employees to comply with its statutory duties.

As a minimum, ICBs are expected to publish the interests of any person who fall into the following categories:

- Board, Committees, and management groups of the ICB
- Any person involved in procurement decisions and/or service re-design
- Any person at AfC 8d and above
- Any person with delegated functions or authority (as set out within the ICB Governance Handbook)

Staff who fall into the above categories should expect their interests to be published online unless in exceptional circumstances where the public disclosure of information could lead to a real risk of harm or is prohibited by law. Similarly, if a person believes that substantial damage or distress may be caused to them or somebody else by the public disclosure of information, they are entitled to request that the information is not published.

Requests should be set out in the free text box below.

[Reasons for non-disclosure of information here]

In this case, if the request to withhold the information is approved, the person's name will be removed from the record and the interest will be published anonymously.

Declaration

I confirm the information provided above is complete and correct. I acknowledge that any changes in this 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, or internal disciplinary action may result.

Signed:		Date:	
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'Nil' declarations do not need to be signed-off by the Head of Service/Line Manager. Where one or more interests have been declared, the individuals must discuss and agree how these interests will be managed with their Head of Service/Line Manager, who must sign this form before submission to the ICB Governance Lead.

If you are a candidate applying for a role within the ICB, the recruiting manager will review your declaration as part of the recruitment process.

Agreed action taken to mitigate the risk must be recorded in the last column of the table on the first page of this form. Declarations from non-ICB employees, will be signed-off by the ICB Governance Lead.

Signed:		Position:		Date:	
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Please return to the Governance team at nwicb.corporateaffairs@nhs.net

Type of Interest	Description
Financial Interests	<p>This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:</p> <ul style="list-style-type: none"> • A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations; • A shareholder (or similar owner interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations. • A management consultant for a provider; • In secondary employment (see paragraph 56 to 57); • In receipt of secondary income from a provider; • In receipt of a grant from a provider; • In receipt of any payments (for example honoraria, one off payments, day allowances or travel or subsistence) from a provider • In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and • Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider).
Non-Financial Professional Interests	<p>This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:</p> <ul style="list-style-type: none"> • An advocate for a particular group of patients; • A GP with special interests e.g., in dermatology, acupuncture etc. • A member of a particular specialist professional body (although routine GP membership of the RCGP, BMA or a medical defence organisation would not usually by itself amount to an interest which needed to be declared); • An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE); • A medical researcher.
Non-Financial Personal Interests	<p>This is 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. This could include, for example, where the individual is:</p> <ul style="list-style-type: none"> • A voluntary sector champion for a provider; • A volunteer for a provider; • A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation; • Suffering from a particular condition requiring individually funded treatment; • A member of a lobby or pressure groups with an interest in health.
Indirect Interests	<p>This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above). For example, this should include:</p> <ul style="list-style-type: none"> • Spouse / partner; • Close relative e.g., parent, grandparent, child, grandchild or sibling; • Close friend; • Business partner.

APPENDIX B: REGISTER OF INTERESTS TEMPLATE

NHS Norfolk and Waveney Integrated Care Board (ICB) Register of Interests										
Declared Interests of the <i>[insert Board/Committee name]</i>										
Name	Role	Declared Interest- (Name of the organisation and nature of business)	Type of Interest			Is the interest direct or indirect?	Nature of Interest	Date of Interest		Action taken to mitigate risk
			Financial Interests	Non-Financial Professional Interests	Non-Financial Personal Interests			From	To	

APPENDIX C: GIFTS AND HOSPITALITY GUIDE

What is a gift of hospitality?	
<p>Gift: 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.</p> <p>Hospitality: Meals/drinks/visits/entertainment/lecture courses organised by potential suppliers. It must only be accepted when there is legitimate reason, must be proportionate to the nature and purpose of the event and must be recorded.</p>	
What can I accept?	What can't I accept?
<p>Meals and refreshments:</p> <ul style="list-style-type: none"> • Under £25 may be accepted and need not be declared. • £25 - £75 may be accepted, but must be declared. <p>Travel and accommodation: Modest offers to pay for some travel and accommodation costs related to attendance may be accepted and must be declared.</p> <p>Low cost branded promotional aids e.g. pens and keyrings under £6.</p> <p>Modest gifts under £25 from non-suppliers, and non-contractors.</p>	<ul style="list-style-type: none"> • Gifts from suppliers or contractors doing business with the ICB (or likely to) whatever the value • Cash and vouchers <p>Meals and refreshments:</p> <ul style="list-style-type: none"> • Over £75 must be refused (unless exceptional and senior approval is given – reason for approval must be recorded on the register) <p>Travel and accommodation: If it's beyond modest and not normal for the ICB, it should only be accepted in exceptional circumstances and must be declared with a clear reason recorded on the register – for example business or first-class travel, foreign travel and accommodation.</p>
What to do if I accept a gift or hospitality	
<p>Within no later than 14 days you must complete the form (see appendix D) and return it to the Corporate Governance team for inclusion on the register.</p>	
How do I refuse a gift?	
<p>Politely refuse, explaining the policy and advise the donor that, if they wish, they are welcome to make a contribution to a charitable cause instead.</p>	
What happens to my form and the register?	
<ul style="list-style-type: none"> • The information from your form is included in the master register. • The master register has to be published on the ICB's website and in the Annual Report and Accounts. • You can ask that your information is not published. • The ICB has to report quarterly on its management of interests, gifts and hospitality and this information will be shared with regulators as part of this process. 	
What must you not do	
<ul style="list-style-type: none"> • You must not ask for any gifts or hospitality. • You should not accept gifts that may affect or be seen to affect your professional judgement. 	
When to be cautious	
<ul style="list-style-type: none"> • When hospitality is offered by actual or potential suppliers or contractors. If it's modest and reasonable it can be accepted (subject to senior approval). • Gifts over £25 can only be accepted on behalf of the ICB (i.e. to a charitable fund) but not in a personal capacity. They must be declared. • Multiple gifts from the same source, over a 12-month period, must be treated the same as single gifts over £25 where the cumulative value exceeds £75. 	

APPENDIX D: REGISTER OF GIFTS AND HOSPITALITY FORM

The paper declaration form has now been replaced with an electronic form. A link to the form can be found on the Corporate Affairs intranet page and should be used for all new declarations made from 1 April 2025.

A new form should be submitted for each declaration made.

The following information is required:

- **Recipient name**
- **Position**
- **Date of offer**
- **Date of receipt (if applicable)**
- **Declined or accepted?**
- **Supplier/offer or name and nature of business**
- **Details of gift/hospitality**
- **Estimated value**
- **Details of previous offers or Acceptance by the Offer or/Supplier**
- **Reason for Accepting or Declining**
- **Details of the officer reviewing and approving the declaration made and date**
- **Other comments**

Before submitting the form, individuals will be asked to confirm that the declaration has been discussed and agreed with their line manager

APPENDIX E: REGISTER OF SPONSORSHIP TEMPLATE

Recipient Name	Position	Date of Offer	Date of Receipt (if applicable)	Details of sponsorship	Estimated value	Supplier name and nature of business	Details of any previous offers	Details of Officer reviewing / approving	Declined / accepted	Reason of declining or accepting	Other Comments

The information submitted will be held by the ICB for personnel or other reasons specified on this form and to comply with the organisation’s policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 2018. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and in the case of ‘decision making staff’ (as defined in the statutory guidance on managing conflicts of interest for ICBs), may be published in registers that the ICB holds.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations 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. Decision making staff should be aware that the information provided in this form will be added to the ICB’s registers which are held in hardcopy for inspection by the public and published on the ICB’s website.

Decision making staff must make any third party whose personal data they are providing in this form aware that the personal data will held in hardcopy for inspection by the public and published on the ICB’s website and must inform the third party that the ICB’s privacy policy is available on the ICB’s website. If you are not sure whether you are a ‘decision making’ member of staff, please speak to your line manager before completing this form.

Signed:

Date:

Signed:

Position:

Date:

(Line Manager or a Senior ICB Manager)

APPENDIX F: TEMPLATE FOR RECORDING INTERESTS AT MEETINGS

Report from <insert details of committee/ work group>	
Title of paper	<insert full title of the paper>
Meeting details	<insert date, time and location of the meeting>
Report author and job title	<insert full name and job title/ position of the person who has written this report>
Executive summary	<include summary of discussions held, options developed, commissioning rationale, etc.>
Recommendations	<include details of any recommendations made including full rationale> <include details of finance and resource implications>
Outcome of Impact Assessments completed (e.g. Quality IA or Equality IA)	<Provide details of the QIA/EIA. If this section is not relevant to the paper state 'not applicable'>
Outline engagement – clinical, stakeholder and public/patient:	<Insert details of any patient, public or stakeholder engagement activity. If this section is not relevant to the paper state 'not applicable'>
Management of Conflicts of Interest	<Include details of any conflicts of interest declared> <Where declarations are made, include details of conflicted individual(s) name, position; the conflict(s) details, and how these have been managed in the meeting> <Confirm whether the interest is recorded on the register of interests- if not agreed course of action>
Assurance departments/ organisations who will be affected have been consulted:	<Insert details of the people you have worked with or consulted during the process : Finance (insert job title) Commissioning (insert job title) Contracting (insert job title) Medicines Optimisation (insert job title) Clinical leads (insert job title) Quality (insert job title) Safeguarding (insert job title) Other (insert job title)>
Report previously presented at:	<Insert details (including the date) of any other meeting where this paper has been presented; or state 'not applicable'>
Risk Assessments	<insert details of how this paper mitigates risks- including conflicts of interest>

APPENDIX G: COI MANAGEMENT PLAN

Conflicts of Interest – Management Plan Norfolk and Waveney Integrated Care Board

Definition

A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role, is or could be impaired or otherwise influenced by his or her involvement in another role or relationship. The individual does not need to exploit his or her position or obtain an actual benefit, financial or otherwise, for a conflict of interest to occur e.g.

- **Financial interest** – direct financial benefit e.g. shareholder of organisation in receipt of funding, in receipt of secondary income, sponsored research etc.
- **Non-financial professional interest** – e.g. increasing professional reputation or status or promoting career
- **Non-financial personal interest** – e.g. member of voluntary sector organisation or lobbying/pressure group
- **Indirect interest** – close association with another individual who has an interest e.g. close family, friends

A perception of wrong-doing, impaired judgement or undue influence can be as detrimental as any of them occurring. If in doubt, it is better to assume the existence of a conflict of interest and manage it appropriately rather than ignore it.

Some disclosed conflicts will require a Management Plan to be put in place. This should be developed between the Line Manager and the Discloser. Once it has been agreed, the Conflict Management Plan will need to be passed to the Corporate Governance Team.

Background

Use this space to tell us about the circumstances that have given risk to the conflict:

Who is potentially conflicted?

Please provide the details of potentially conflicted parties in this section:

Why?

Please use this space to explain why and how the conflict will, or may, occur:

What further mitigation could be taken?

Use this section to consider possible mitigations of the declared conflict, - remember, transparency of decision making is key. Possible mitigations include:

- add to publicly available Register of Interests
- exclude conflicted parties from a specific decision making situation
- ensure decisions are in line with operational/commissioning strategies
- decisions are based on local health needs
- be proactive – early engagement with patients, public, clinicians and other stakeholders, including local Healthwatch and Health and Wellbeing Boards
- early engagement with both incumbent and potential new providers over potential changes to the services commissioned for a local population
- seek advice e.g. clinical senates, networks, commissioning support
- invite Health and Wellbeing Board or another ICB to review the proposal The general safeguards will vary to some extent depending on at what stage in the commissioning cycle the decisions are being made.

Consider the ‘Six Rs’:

- **Register** – Where details of the existence of a possible or potential conflict of interest are formally registered.
- **Restrict** – Where restrictions are placed on the public official/Board member’s involvement in the matter.
- **Recruit** – Where a disinterested third party is used to oversee part or all of the process that deals with the matter.
- **Remove** – Where a public official/Board member chooses to be removed from the matter.
- **Relinquish** – Where the public official/Board member relinquishes the private interest that is creating the conflict.
- **Resign** – Where the public official/Board member resigns from their position with the organisation.

Steps taken to date:

Risk Score before and after mitigation

Further mitigation proposed:

Consequence (impact)	Likelihood				
	Rare 1	Unlikely 2	Possible 3	Likely 4	Almost certain 5
Negligible 1	1	2	3	4	5
Minor 2	2	4	6	8	10
Moderate 3	3	6	9	12	15
Major 4	4	8	12	16	20
Catastrophic 5	5	10	15	20	25

Low risk	Normal risks which can be managed by routine procedures	The ICB accepts low risks that are likely to result in identified impact
Moderate risk	Responsibility for assessment and action planning allocated to a named individual	The ICB is willing to accept moderate risks that may result in identified impact
Significant risk	Urgent senior management attention with action plan	The ICB is willing to accept some significant risks in certain circumstances
High risk	Immediate action required by a Director	The ICB is not willing to accept any high risk under any circumstances

Risk Score

	Likelihood	Consequence	Risk Rating
Risk before mitigation			
Risk after mitigation			

Conflict Management Plan Review date: _____
 (The review should take place no later than 12 months from the date of this plan, and sooner should circumstances change)

Agreement

	Signed	Print name	Date
Discloser			
Reviewer			
Corporate Governance			

Appropriate Actions

This section provides an indication of the actions that should be taken where a conflict is identified.

However, each situation is different, and where there is any uncertainty, guidance should be sought from the Corporate Governance team.

	Financial	Non-financial professional	Non-financial personal	Indirect
Needs Assessment	Fully participate	Fully participate	Fully participate	Fully participate
Review health outcomes	Fully participate	Fully participate	Fully participate	Fully participate
Design services	Discuss and vote	Discuss and vote	Discuss and vote	Discuss and vote
Decide priorities	Discuss but cannot vote	Discuss and vote	Discuss and vote	Discuss and vote
Review commissioning proposals	Remain but cannot speak or vote	Remain but cannot speak or vote	Remain but cannot speak or vote	Discuss and vote
Performance management	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Discuss and vote
Review prioritised business cases	Leave the room	Remain but cannot speak or vote	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Discuss and vote
Procurement/contracting	Leave the room	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Discuss and vote

PART 2 to be completed by Corporate Governance / COI Guardian

Outcome of Incident / Next steps	
Date of discussion:	
<i>Please detail the outcome of the discussion between the COI Guardian / Corporate Governance including next steps, actions and lessons learnt</i>	
Confidential spreadsheet updated and unique identifier been provided (if appropriate)	Yes / No
Does an appropriate person need to investigate?	Yes / No
Please provide details on reasons why Yes/No	
Does it need to be scored under the SIRI criteria?	Yes ((and if so the outcome) / No
Does it link to any Whistleblowing / HR Policies?	Yes / No
Please provide details on reasons why Yes/No	
Date that the breach report will be taken to Audit and Risk Committee	
Do Communications need to be notified?	Yes / No
Comments	
Please provide date that NHS England were / will be notified	
Please provide date the anonymised details have been / will be published on the ICBs website	
Please provide the date the original whistleblower has / will be informed of the outcome	