



LOCAL ARRANGEMENTS FOR THE UTILISATION OF THE POLICY FOR THE STANDARDS OF BUSINESS CONDUCT, NHS COMMISSIONING BOARD

STANDARD OPERATING PROCEDURE

Approval Date: 8 July 2013
Review Date: July 2014
Responsible Person: Chief Operating Officer (South)

Procedure Name: Standards of Business Conduct Local Guidance
Team: CSU Governance & Risk Team
Version: 1.0
Date: 8 July 2013

NOTE: All Standing Operating Procedures remain extant until notification of an amended procedure is placed on the Intranet.

LOCAL GUIDANCE FOR THE IMPLEMENTATION OF THE NHS COMMISSIONING BOARD STANDARDS OF BUSINESS CONDUCT POLICY

This policy is applicable to:

- WSYBCSU directors/non executive directors;
- all employees staff of the WSYBCSU (clinical or corporate);
- third parties acting on behalf of the WSYBCSU under a contract;
- students and trainees (including apprentices);
- agency staff engaged by the WSYBCSU; and
- secondees.

This policy provides information on key corporate areas of governance of the organisation and should be read in conjunction with the NHS Commissioning Board Standards of Business Conduct. WSYBCSU staff need to be aware of and act upon these areas which include;

- the seven Nolan principles which set out the standards and values for public service employees;
- the prevention of corruption in line with the Bribery Act 2010;
- standing orders, standing financial instructions and scheme of delegation;
- personal conduct;
- outside employment and private practice;
- commercial sponsorship;
- suppliers and contractors;
- initiatives;
- confidentiality; and
- management arrangements

WSYBCSU staff also need to be aware of and act upon the following the criteria relating to:-

- the declaration of conflicts of interests – Appendix A (attached);
- the declaration of sponsorships – Appendix B (attached)
- the declaration of hospitality and gifts – Appendix C (attached)
- non disclosure agreement – Appendix D (attached)

All declarations need to be verified and endorsed by Line Managers/Heads of Service and submitted to the Senior Associate Governance and Risk, Governance and Risk department, Finance Directorate, WSYBCSU HQ, Douglas Mill, Bowling Old Lane, Bradford, BD5 7JR

**Process for WSYBCSU Advisory Board
Members/Directors/Senior/Managers/WSYBCSU employees**

Declarations/Conflict of Interest Declaration (Appendix A)	Commercial Sponsorship Declaration (Appendix B)	Hospitality/Gift Declaration (Appendix C)
1. If you need to make a declaration/ conflict of interest or declare secondary employment based on the criteria laid out in the NHSCB Standards of Business Conduct you need to complete the attached declaration form.	1. If you are offered commercial sponsorship you need to complete the attached form and in the first instance discuss with your line manager.	1. If you are offered a gift or hospitality you must check whether you can accept/reject this based on the criteria laid out in the NHSCB Standards of Business Conduct.
2. On appointment all WSYBCSU Advisory Board members, senior managers, staff should complete a declaration/conflict of interest form even if there is nothing to declare.	2. Your line manager should then discuss the offer with the Head of Service and a decision can be made to accept or reject the offer.	2. Whether you accept/reject the gift/ hospitality you need to complete the attached declaration form and clearly state whether this has been accepted/ rejected. The form then needs to be endorsed by your line manager.
3. Employee forms should be discussed with Line Managers and kept on HR files. If there is any concern on the declaration/conflict this should be raised with HR and/or Senior Governance and Risk Officer.	3. The completed form should then be forwarded to the Senior Associate Governance and Risk.	3. All forms need to be forwarded to the Senior Associate Governance and Risk.
4. WSYBCSU Advisory Board members, senior directors declarations/conflict should be submitted to the Senior Governance and Risk Associate to be kept on the WSYBCSU Register and submitted to audit and available to the public at the discretion of the Senior Governance and Risk Associate.	4. The forms will be kept on the WSYBCSU Register and submitted to the audit and counter fraud office as and when requested and also made available for the public at the discretion of the Senior Governance and Risk Associate	4. The forms will be kept on the WSYBCSU Register and submitted to the audit and counter fraud office as and when requested and also made available for the public at the discretion of the Senior Governance and Risk Associate.
5. In the event of any changes to the circumstances of the original declaration/conflict submission a new form should be completed.	5. If there is any clarification required or queries on hospitality and gifts you should contact the Senior Associate Governance and Risk.	5. If there is any clarification required or queries on hospitality and gifts you should contact the Senior Associate Governance and Risk.
6. All declarations/conflicts may be subject to scrutiny of the audit and counter-fraud department.		

Appendix A NHS CB declaration of interests by WSYBCSU – Advisory Board Member

Note: A Declaration of Interest must be submitted by a WSYBCSU Board Member to the Senior Associate Governance and Risk on appointment as a WSYBCSU Advisory Board Member, reviewed annually and also in the event that any Personal Interest or potential Personal Interest arises during the course of their involvement with the WSYBCSU.

NAME:

.....

DESIGNATION:

.....

NATURE OF INTEREST:
(Please write none if applicable)

.....

I confirm that the information provided is a full, accurate and complete list of all my interests that require declaration to the WSYBCSU. I acknowledge that any changes in these declarations must be notified to the Senior Associate Governance and Risk as soon as they occur. I will provide the WSYBCSU with further details of any interest declared if required.

I am also aware that any hospitality received or offered must be notified to the Senior Associate Governance and Risk on the appropriate declaration form as soon as possible.

Signed & Dated:

Appendix A NHS CB declaration of interests by WSYBCSU – Employee

Note: A Declaration of Interest must be submitted by a WSYBCSU employee to the Senior Associate Governance and Risk on appointment as a WSYBCSU Board Member, reviewed annually and also in the event that any Personal Interest or potential Personal Interest arises during the course of their involvement with the WSYBCSU.

NAME:

.....

DESIGNATION:

.....

NATURE OF INTEREST and include:

- Fee paid work
- Shareholdings
- Fellowships / trusteeships & membership of voluntary bodies:
- Any other personal interests not covered above
- Non-personal interests:

(Please write none if applicable)

.....

I confirm that the information provided is a full, accurate and complete list of all my interests that require declaration to the WSYBCSU. I acknowledge that any changes in these declarations must be notified to the Senior Associate Governance and Risk as soon as they occur. I will provide the WSYBCSU with further details of any interest declared if required.

I am also aware that any hospitality received or offered must be notified to the Senior Associate Governance and Risk on the appropriate declaration form as soon as possible.

Signed & Dated:

Appendix B Application to seek permission to accept commercial sponsorship

Please complete the form below and then pass to the relevant Director for approval. If approval is given, send a copy of the form, once signed by the Director, to the Senior Associate Governance and Risk.

<p>1 Detail of staff :</p> <p>Name</p> <p>Title</p> <p>E-mail</p> <p>Tel-No</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>2 Details of proposed sponsorship, including details of proposed sponsor :</p> <p>Approval by relevant Director</p> <p>Name</p> <p>Title</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>Signature</p> <p>Date</p> <p>Any comments</p>	<p>.....</p> <p>.....</p> <p>.....</p>

Please return this form to: Senior Associate Governance and Risk

Appendix C Application to seek permission to accept hospitality or a gift

Please complete the form below and then pass to the relevant Director for approval. If approval is given, send a copy of the form, once signed by the Director, to the Senior Associate Governance and Risk.

<p>1 Detail of staff:</p> <p>Name</p> <p>Title</p> <p>E-mail</p> <p>Tel-No</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>2 Details of proposed sponsorship, including details of proposed sponsor</p> <p>Approval by relevant Director</p> <p>Name</p> <p>Title</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>Signature</p> <p>Date</p> <p>Any comments</p>	<p>.....</p> <p>.....</p> <p>.....</p>

Please return this form to: Senior Associate Governance and Risk

Appendix D Non-disclosure agreement

WSYBCSU - express requirement for confidentiality

You have been requested to be involved in [INSERT DETAILS] (the "Project").

WSYBCSU or other parties participating in the Project may provide you with, as part of your role in respect of the Project, access to certain confidential information relating the Project (whether before or after the date of this letter), in writing, by email, orally or by other means (including from or pursuant to discussions with any other party or which is obtained through attendance at meetings related to the Project) and trade secrets including, without limitation, technical data and know-how relating to the Project, including in particular (by way of illustration only and without limitation) [EXAMPLES] and including (but not limited to) information that you may create, develop, receive or obtain in connection with your engagement on the Project, whether or not such information (if in anything other than oral form) is marked confidential (the "Confidential Information").

Accordingly we draw to your attention that as part of your role for the WSYBCSU you are required to:

1.1. Maintain the Confidential Information in the strictest confidence and not divulge any of the Confidential Information to any third party without the prior written permission of WSYBCSU; and

1.2. Not make use of, reproduce, copy, discuss, disclose or distribute the Confidential Information other than for use as part of your role in the Project.

The above obligations in respect of this Confidential Information are supplemental to any prior representation, understanding and commitment (whether oral or written) between us. The terms of this Letter can only be changed by a written document, agreed upon by both of us and signed by duly authorised persons. These provisions shall be governed and construed by English law.

Yours faithfully

For and on behalf of the WSYBCSU

By signing this letter you agree to comply with these terms.

Signed:

Date:

Print Name: