



**Dorset  
Clinical Commissioning Group**

# Governance Handbook



| <b>Version</b> | <b>Effective Date</b>                           | <b>Changes</b>   |
|----------------|---|--|
| V1             | 1 April 2019<br>(GB approval<br>16/01/19)       | New Governance Handbook following adoption of the New Constitution incorporating the new model published by NHS England in September 2018. |
| V2             | 29 November<br>219 (GB<br>approval<br>13/11/19) | SFIs and Member Engagement/Governing Body GP member appointment process  |

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# Introduction

Dorset CCG's Governance Handbook brings together a range of documents which support the Constitution and good governance.

# Standards of Business Conduct

Incorporating Conflicts of interest Policy

## DOCUMENT TRAIL AND VERSION CONTROL SHEET

|                         |  |
|-------------------------|--|
| <b>Name of document</b> | Standards of Business Conduct  |
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| Version 5<br>20/09/2017               | C G Lakeman,<br>Secretary and<br>General Counsel                      | Governing Body - 20<br>September 2017             | Predominantly Sections 9,<br>12 Gifts and Hospitality,<br>Commercial<br>Sponsorship/Sponsored<br>Events  |
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| Version 2<br>Jan 2015                 | C G Lakeman,<br>Secretary and<br>General Counsel                      |   | Declarations of Interest   |
| Original<br>12 April<br>2013          | C G Lakeman,<br>Secretary and<br>General Counsel                      |   |  |

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## **1. Introduction**

- 1.1 This policy describes the public service values, which underpin the work of the NHS and to reflect current guidance and best practice to which all individuals within NHS Dorset Clinical Commissioning Group (CCG) must have regard in their work for the CCG.
- 1.2 The CCG aspires to the highest standards of corporate behaviour and responsibility. All CCG staff are required to comply with this policy.
- 1.3 The Code of Conduct and Code of Accountability in the NHS (second revision July 2004) sets out the following three public service values which are central to the work of the CCG:
  - Accountability - everything done by those who work in the NHS must be able to stand the test of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.
  - Probity - there should be an absolute standard of honesty in dealing with the assets of the NHS: integrity should be the hallmark of all personal conduct in decisions affecting patients, officers and members and suppliers, and in the use of information acquired in the course of NHS duties.
  - Openness - there should be sufficient transparency about NHS activities to promote confidence between the CCG and its staff, patients and the public.
- 1.4 In addition, all individuals within the CCG must abide by the Seven Principles of Public Life as set out by the Committee on Standards in Public Life and set out at Appendix A of this Policy, and the NHS Clinical Commissioners, Royal College of General Practitioners and British Medical Association – Shared Principles on Conflicts of Interest when CCGs are commissioning from member practices:
  - The Good Governance Standards of Public Services.
  - The Seven Key Principles of the NHS Constitution, and
  - The Equality Act 2010.

## **2. Scope of policy**

- 2.1 This policy applies to:
  - CCG Governing Body Members;
  - CCG non-Governing Body Lay Members;
  - CCG GPs;
  - CCG employees (whether their remit is clinical or corporate);
  - Committee Members;
  - Third parties acting on behalf of the CCG under a contract;
  - Agency staff engaged by the CCG; and secondees;
  - CCG Member Practices

All referred to collectively in this policy as Regulated Persons

### **3. Prevention of corruption**

3.1 The CCG has a responsibility to ensure that all CCG Regulated Persons are made aware of their duties and responsibilities arising from the Bribery Act 2010. Under this Act there are four offences:

- Offering, promising or giving a bribe to another person (section 1);
- Requesting, agreeing to receive, or accepting a bribe (section 2);
- Bribing, or offering to bribe, a foreign public official (section 6);
- Failing to prevent bribery (section 7).

3.2 All Regulated Persons must be aware of the Bribery Act 2010 and should also refer below for further guidance in relation to this.

### **4. Raising concerns**

4.1. It is the duty of every Regulated Person to speak up about genuine concerns in relation to criminal activity, breach of a legal obligation (including negligence, breach of contract or breach of administrative law), failure to declare conflicts of interest, miscarriage of justice, danger to health and safety or the environment, and the cover up of any of these in the workplace. The CCG has developed a [Freedom to Speak Up: Raising Concerns \(Whistleblowing\) Policy for the NHS](#) ~~whistle-blowing policy~~ setting out the arrangements for raising and handling staff concerns. The procedure for reporting specific concerns relating to fraud bribery or corruption are described in paragraph five.

### **5. Counter fraud measures**

5.1 All Regulated Persons must not to use their position to gain financial advantage.

5.2 The CCG encourages Regulated Persons with concerns or reasonably held suspicions about potentially fraudulent activity or practice (including conflicts of interest), bribery and corruption to report these. Regulated Persons should immediately inform the Local Counter Fraud Specialist who will inform the Chief Financial Officer, unless the Chief Finance Officer is implicated. If that is the case, he will report it to the Chair or Accountable Officer, who will decide on the action to be taken.

5.3 Regulated Persons can also call the NHS Fraud and Corruption Reporting Line on free phone 0800 028 40 60. This provides an easily accessible and confidential route for the reporting of genuine suspicions of fraud within or affecting the NHS. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so.

5.4 Anonymous letters, telephone calls, etc. are occasionally received from individuals who wish to raise matters of concern, but not through official channels. While the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern and should always be taken seriously. The Local Counter Fraud

Specialist or Chief Financial Officer will make appropriate enquiries to establish any foundation to the suspicion that has been raised.

5.5 Regulated Persons should not ignore their suspicions, nor investigate themselves.

## **6. Standing orders (SOs), standing financial instructions (SFIs) and scheme of delegation (SD)**

6.1 All Regulated Persons must carry out their duties in accordance with the CCG's Constitution, SOs, SFIs and SD (collectively referred to as the Governance documents). The Governance documents set out the statutory and governance framework in which the CCG operates and there is considerable overlap between the contents of this policy and the provisions of the Governance documents. CCG staff must at all times refer to and act in accordance with the Governance documents to ensure current CCG process is followed. In the event of doubt, CCG staff should seek advice from their line manager. In the event of any conflict arising between the details of this policy and the Governance documents, the provisions of the Governance documents shall prevail.

## **7. Declaration of interests**

7.1 The CCG has in place principles and procedures for managing potential conflicts of interests which could be deemed or assumed to affect the decisions made by those involved in the CCG. These decisions could include awarding contracts, procurement, policy, employment and other decisions.

7.2 Regulated Persons should not allow their judgement or integrity to be compromised. They should be, and be seen to be, honest and objective in the exercise of their duties and should understand fully their terms of appointment or engagement, duties and responsibilities.

7.3 This section describes the CCG policy in relation to the identification and management of conflicts of interest for Regulated Persons. Adherence to these provisions is mandatory in order to identify and manage current, perceived or potential conflicts which may arise between the interests of the CCG and the personal interests, associations and relationships of its Regulated Persons or their family and associates.

7.4 Failure to adhere to these provisions relating to the declaration of interests may constitute ~~the a~~ criminal offence, as an individual could gain an unfair advantage or financial reward for themselves or a family member/friend or associate. Any suspicion or knowledge that a relevant personal interest may not have been declared should be reported to the ~~Corporate Office CCG Secretary and General Counsel~~, who may refer the matter to the Local Counter Fraud Office.

7.4.1 The Local Counter Fraud Officer shall report (through the Chief Finance Officer where the matter may constitute a criminal offence and through the Director of Engagement and Development where the matter relates to a disciplinary issue) to

the Audit Committee his findings together with a recommendation regarding any further action.

- 7.4.2 Without prejudging the issue, the Regulated ~~p~~Person concerned will not be able to participate in any decision-making meeting pending consideration of the Local Counter Fraud Officer's report and recommendation, by the Audit Committee.
- 7.4.3 Where a contract has been entered into following one or more episodes of non-compliance with policy and procedure relating to conflicts of interest, the CCG will, where appropriate, seek independent legal counsel upon the proper course to redress any unfairness that may have occurred.
- 7.4.4 For the avoidance of doubt, every instance relating to a breach of policy or procedure relating to conflicts of interest shall be considered by the Audit Committee who will make a determination regarding any action to address or redress the situation.
- 7.4.5 A breach of policy (including a failure to declare) by a Regulated Person will be subject to investigation and, if appropriate, disciplinary action. Any statutorily regulated individuals may also be subject to Fitness to Practice proceedings.
- 7.4.6 Anonymised details of any breach of policy including a failure to declare by a Regulated Person will be recorded in the CCG's register for breaches of the Standards of Business Conduct incorporating the Conflicts of Interest Policy.
- 7.4.7 A breach of policy (including a failure to declare) by a Regulated Person will be published by the CCG on its website for learning and development purposes by the ~~Corporate Office Secretary and General Counsel~~, who will brief the Communications Department regarding potential media interest.
- 7.4.8 Any breach of policy (including a failure to declare) by a Regulated Person will be reported to NHS England – South ~~West (Wessex)~~ (CCG Link Person).
- 7.5 Concerns can also be raised or reported under the ~~Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy for the NHS whistleblowing policy~~ or the anti-Fraud, Bribery and Corruption Policy, both available from the CCG website.
- 7.6 Concerns raised or reported under either of the policies referred to in 7.4.2 above, that amount to a breach of this policy will be dealt with as set out in paragraphs 7.4.1 - 7.4.8.
- 7.7 All Regulated Persons staff must declare any interest, on appointment, when the interest is acquired, or on a change of role or responsibility and at any meeting if that interest may directly or indirectly give rise to an actual or potential conflict of interest or duty. Examples of interests are given in Appendix B. Such interests, and potential conflicts of interest, include personal and indirect interests, and may arise through:
- financial interests (for example, where someone involved has significant

shareholdings or voting rights in a company or partnership);

- decisions affecting individuals who share the interests of organisation staff – for example, family members or members of societies, clubs or other organisations, and close friends;
- acceptance of hospitality from current or prospective business contacts; and acceptance of gifts.

7.8 A family member may include:

- a partner (someone who is married to, a civil partner or someone with whom the Regulated Person lives in a similar capacity);
- a parent or parent in law;
- a son or daughter or stepson or step daughter;
- the child of a partner;
- a brother or sister;
- a brother or sister of the staff member's partner;
- a grandparent and/ or a grandchild;
- an uncle or aunt;
- a nephew or niece;
- and the partners of the above.

7.9 A definition of an interest and further examples of relevant interests are set out in Appendix B. If in doubt Regulated Persons should take advice from the [Corporate Office Secretary and General Counsel/Secretariat](#).

7.10 The CCG is required to maintain registers of interests to formally record declarations of interest. The declaration form set out at Appendix C should be completed by all Regulated Persons and sent to the Corporate Office. Further guidance on the declaration of interests is set out in the Constitution available from the Corporate Office.

7.11 The CCG will record interests declared by all CCG Member Practices. CCG Member Practices should complete the form set out at Appendix C to declare any relevant interests and send it to the Corporate Office. Relevant interests will include those of all partners/principals and all individuals within the Member Practice who have a relationship with the CCG and who would potentially be in a position to benefit from the CCG's decisions.

7.12 The CCG will maintain a record of how conflicts, actual, perceived or potential have been managed, particularly in the context of specific procurement decisions.

7.13 In the event of any dispute relating to Conflicts of Interests and/or Declarations thereof, the matter may be referred by the CCG Chair to the Audit Committee. The Audit Committee shall hear representations from all concerned parties and make a determination which shall be binding upon all parties.

- 7.14 All Declarations of Interest made by Regulated Persons will be reviewed by the Corporate Office every year and reported to the Audit Committee quarterly and annually to the Governing Body.
- 7.15 ~~As required by this Policy, p~~Prior to any final offer of employment or engagement being made by the CCG, the CCG will assess the materiality of any interests declared as part of the appointment process for prospective Governing Body, Committee members and members of staff ~~and required by this policy~~ where the individual (or a family member, business partner or close friend) could benefit from any decision of the Governing Body.
- The CCG shall determine the extent of any declared interest and determine whether it is significant enough that the individual concerned would not be able to make a full and proper contribution to the Governing Body, Committee or other role and whether that individual should therefore not become a member of the Governing Body, Committee or should not take up the position being considered.
  - Any individual who has a material interest in an organisation that provides or is likely to provide substantial services to the CCG (either as a provider of healthcare or commissioning support services) should not be a member of the Governing Body, Committee or other position if the nature of their interest is such that they are likely to need to exclude themselves from decision making on so regular a basis that it significantly limits their ability to effectively operate as a Governing Body or Committee member, or otherwise limits their ability to operate effectively.
- 7.16 Where all of the GPs or other Member Practice Representatives on a decision-making body could have a material interest in a decision relating to primary medical services (or any other matter where GP Members are conflicted) the matter in question shall be referred to the Governing Body but excluding all GPs or other Member Practice Representatives with an interest, from the decision-making process.
- where a matter has been referred to the Governing Body as in 7.15 above, or where the decision has through other governance means been sent to the Governing Body for determination, the Governing Body shall follow the requirements of paragraph 8.4.8 to 8.4.12 of the CCG's Constitution to ensure that a valid decision can be made.
- 7.17 Further guidance on the management of conflicts of interest is provided in the Constitution and the NHS statutory guidance on Managing Conflicts of Interest - <https://www.england.nhs.uk/wp-content/uploads/2017/06/revised-ccg-conflict-of-interest-guidance-v7.pdf>
- 7.18 A copy of all registers of Interests declared by Regulated Persons together with a register of Procurement Decisions will be publicly available in a prominent place on the CCG's website and may be inspected upon request at the CCG's Headquarters.

## **8. Personal conduct**

### **8.1 Lending or borrowing**

The lending or borrowing of money between staff should be avoided, whether informally or as a business, particularly where the amounts are significant.

It is a serious breach of discipline for any member of staff to use their position to place pressure on someone in a lower pay band, a business contact, or a member of the public to loan them money.

## 8.2 **Gambling**

No member of staff may bet or gamble when on duty or on CCG premises, with the exception of small lottery syndicates or sweepstakes related to national events such as the World Cup or Grand National among immediate colleagues.

## 8.3 **Trading on official premises**

Trading on official premises is prohibited, whether for personal gain or on behalf of others. Canvassing within the office by, or on behalf of, outside bodies or firms (including non-CCG interests of staff or their relatives) is also prohibited. Trading does not include small tea or refreshment arrangements solely for staff.

## 8.4 **Collection of money**

Charitable collections must be authorised by Corporate Services. Other flag day appeals are not permitted, and collection tins or boxes must not be placed in offices. With line management agreement, collections may be made among immediate colleagues and friends to support small fundraising initiatives, such as raffle tickets and sponsored events. Permission is not required for informal collections amongst immediate colleagues on an occasion like retirement, marriage or a new job.

## 8.5 **Bankrupt or insolvent staff**

Any member of staff who becomes bankrupt or insolvent must inform their line management and ~~Human Resources Workforce~~ as soon as possible. Staff who are bankrupt or insolvent cannot be employed in posts that involve duties which might permit the misappropriation of public funds or involve the handling of money.

## 8.6 **Arrest or conviction**

A member of staff who is arrested and refused bail or convicted of any criminal offence must inform their line management and ~~Human Resources Workforce~~.

## 9. **Gifts and hospitality**

The over-arching principle that CCG staff should not accept gifts that may affect, or be seen to affect, their professional judgement should apply in all circumstances.

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#### 9.1 Gifts from Suppliers or Contractors:

Gifts of low value (up to £6), such as promotional items, can be accepted and do not need to be declared, but all other gifts from suppliers or contractors must be declined and declared.

#### 9.2 Gifts from Other Sources:

Modest gifts under £50 can be accepted from non-suppliers and non-contractors and do not need to be declared. Gifts with a value over £50 should be treated with caution but can be accepted on behalf of the CCG but not in a personal capacity and must be declared to the Corporate Office. Multiple gifts from the same source over a 12-month period with a cumulative value exceeding £50 should be treated in the same way as single gifts over £50 value.

9.3 Any personal gift of cash or cash equivalents (e.g. tokens) must be declined whatever its value and the offer declined must be declared to the Corporate Office.

#### 9.4 Regulated Persons should:

- report all declarable gifts to the Corporate Office; and
- promptly return any gifts which need to be declined, with a letter politely explaining the terms of this policy and stating that you are not allowed to accept them.

#### 9.5 Hospitality

The over-arching principles which should apply in all circumstances are that CCG staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement.

9.5.1 Regulated Persons should exercise discretion in accepting offers of hospitality from actual or potential suppliers/contractors, other organisations or individuals concerned with the supply of goods or services. It can be accepted if modest and reasonable, but senior approval should be obtained, and such hospitality declared to the Corporate Office.

- Modest hospitality (meals/refreshments) (under £25) provided in normal and reasonable circumstances during the course of working visits may be accepted and need not be declared, although it should be on a similar scale to that which the CCG might offer in similar circumstances, e.g. hospitality provided at meetings, events, seminars. In cases of doubt, advice should be sought from your line manager.
- Hospitality (meals/refreshments) between £25 and £75 can be accepted but must be declared to the Corporate Office.
- Hospitality (meals/refreshments) of a value in excess of £75 must be declared and should be refused unless (in exceptional circumstances) senior approval is given.
- Modest offers to pay some or all travel and accommodation costs related to attendance at events may be accepted and must be declared to the Corporate

Office.

- Offers which go beyond modest or are of a type that the CCG itself might not usually offer, should be declined unless (in exceptional circumstances) senior approval is given. A non-exhaustive list of examples includes business class/first class travel and accommodation and foreign travel. These should be declared to the Corporate Office with a clear reason for acceptance and a copy of any senior approval.

- 9.6 All declarable hospitality or gifts must be reported to the Corporate Office and recorded in the Gifts, Hospitality and Sponsorship Register held by the Corporate Office (example attached at Appendix D) as soon as is reasonably practicable. It is not necessary to report refreshments such as tea, coffee etc., or for course participants to record meals provided during a training event or seminar. The Gifts, Hospitality and Sponsorship register will be published on the CCG website.
- 9.7 Regulated Persons should be cautious of accepting small items of value, or hospitality over that afforded in a normal meeting environment (i.e. beverages) during a procurement process or from bidders/potential bidders. This avoids any potential claim of unfair influence, collusion or canvassing.
- 9.8 Care should be taken when providing hospitality. Avoid providing hospitality at non-business locations unless there is a clear need to do so – this should be agreed in advance by a Director. Any hospitality provided should be modest.
- 9.9 GPs and other staff within Member practices are not required to declare offers/receipt of gifts and hospitality to the CCG which are unconnected with their role or involvement with the CCG. This policy does not apply to such situations, although Member Practices should follow any requirements of their PMS/GMS/APMS contracts.

**10. Outside employment and private practice**

- 10.1 Employees of the CCG (depending on the details of their contract as regards outside employment and private practice) are required to inform the CCG if they are engaged in or wish to engage in outside employment in addition to their work with the CCG (using the form at Appendix E). The purpose of this is to ensure that the CCG is aware of any potential conflict of interest with their CCG employment. Examples of work which might conflict with the business of the CCG include:
- employment with another NHS body;
  - employment with another organisation which might be in a position to supply goods/services to the CCG; and
  - self-employment, including private practice, in a capacity which might conflict with the work of the CCG or which might be in a position to supply goods/services to the CCG.
- 10.2 The WorkforceHR team of the CCG will send an annual reminder to all CCG staff about this requirement.

10.3 Permission to engage in outside employment/private practice will be required and the CCG reserves the right to refuse permission where it believes a conflict will arise.

## **11. Political activities**

11.1 Any political activity should not identify an individual as an employee of CCG. Conferences or functions run by a party-political organisation should not be attended in an official capacity, except with prior written permission from a National director.

## **12. Commercial sponsorship/Sponsored events**

12.1 Sponsorship of NHS events by external parties is valued. Offers to meet part of the cost of running an event secures their ability to take place, benefitting NHS staff and patients. 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.

12.2 When sponsorships are offered the following principles must be adhered to:

- Sponsorship of CCG events by appropriate external bodies should only be approved if a reasonable person would conclude that the event will result in a clear benefit for the CCG or 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 CCG'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 interests of transparency.
- The CCG will make it clear that sponsorship does not equate to endorsement of a sponsor or its products and this needs to be made visibly clear on any promotional or other materials relating to the event.

12.3 Regulated persons may accept commercial sponsorship for courses, conferences, post/project funding, meetings and publications if they are reasonably justifiable and in accordance with the principles set out in this policy. In cases of doubt, regulated persons should declare their involvement with arranging sponsored events to their line manager (with details of the proposed sponsorship) and permission must be obtained from the relevant director in writing in advance and a copy of this permission must be sent to the Corporate Office. (See Appendix F "Application to seek permission to accept commercial sponsorship").

- 12.4 Acceptance of commercial sponsorship should not in any way compromise commissioning decisions of the CCG or be dependent on the purchase or supply of goods or services.
- 12.5 Sponsors should not have any influence over the content of an event, meeting, seminar, publication or training event.
- 12.6 The CCG should not endorse individual companies or their products. It should be made clear that the fact of sponsorship does not mean that the CCG endorses a company's products or services.
- 12.7 During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection legislation.
- 12.8 No information should be supplied to a company for their commercial gain unless there is a clear benefit to the NHS. As a general rule, information which is not in the public domain should not normally be supplied.

### **13. Suppliers and contractors**

- 13.1 All CCG staff who are in contact with suppliers and contractors (including external consultants), and in particular those who are authorised to sign purchase orders or enter into contracts for goods and services are expected to adhere to professional standards in line with those set out in the Code of Ethics of the Chartered Institute of Purchasing and Supply (Appendix G).
- 13.2 All CCG staff must treat prospective contractors or suppliers of services to the CCG equally and in a non-discriminatory way and act in a transparent manner.
- 13.3 Regulated Persons involved in the awarding of contracts and tender processes must take no part in a selection process if a personal interest or conflict of interest is known. Such an interest must be declared to the Corporate Office using the form at Appendix C as soon as it becomes apparent. Regulated Persons should not at any time seek to give unfair advantage to any private business or other interests in the course of their duties.
- 13.4 The CCG has duties under European and UK procurement law and CCG staff must comply with Standing Financial Instructions (SFIs) in relation to all contract opportunities with the CCG.
- 13.5 Regulated Persons must not seek, or accept, preferential rates or benefits in kind for private transactions carried out with companies with which they have had, or may have, official dealings on behalf of the CCG. This does not apply to officers' and members' benefit schemes offered by the NHS or trade unions.
- 13.6 CCG staff invited to visit organisations to inspect equipment (e.g. software or training aids) for the purpose of advising on its purchase will be reimbursed for their travelling expenses in accordance with the travel expenses policy laid down

by the CCG. Such expenses should not be claimed from other organisations to avoid compromising the purchasing decisions of the CCG.

- 13.7 Every invitation to tender to a prospective bidder for CCG business must require each bidder to give a written undertaking, not to engage in collusive tendering or other restrictive practice and not to engage in canvassing the CCG, its employees or officers concerning the contract opportunity tendered.
- 13.8 Offers of pro bono work from prospective bidders for CCG business should be politely refused.

#### **14. Initiatives**

- 14.1 As a general principle any financial gain resulting from external work where use of CCG time or title is involved (e.g., speaking at training events/conferences, writing articles etc) and/or which is connected with CCG business must be forwarded to the Corporate Office.
- 14.2 Any patents, designs, trademarks or copyright resulting from the work (e.g., research) of an employee of the CCG carried out as part of their employment by the CCG shall be the Intellectual Property of the CCG.
- 14.3 Approval from the appropriate line manager should be sought prior to entering into an obligation to undertake external work connected with the business of the CCG, e.g. writing articles for publication, speaking at conferences.
- 14.4 Where the undertaking of external work, gaining patent or copyright or the involvement in innovative work, benefits or enhances the CCG's reputation or results in financial gain for the CCG, consideration will be given to rewarding employees subject to any relevant guidance for the management of Intellectual Property in the NHS issued by the Department of Health.

#### **15. Confidentiality**

- 15.1 Information concerning the CCG that is not in the public domain must not at any time be divulged to any unauthorised person. Similarly, patient data or personal data concerning staff must not be divulged. This duty of confidence remains after termination of employment and applies to all individuals working within CCG.
- 15.2 Care should be taken that neither the duty of confidentiality nor the [EU General Data Protection Regulation 2016 \(GDPR\)](#) or the [Data Protection Act 2018](#) is breached inadvertently by, for instance discussing confidential matters in public places, e.g. whilst travelling by train, or by leaving portable IT equipment containing confidential information where it might easily be stolen, e.g. on full view in a parked car. Data should only be distributed using mechanisms with an appropriate level of security.

15.3 CCG staff must maintain confidentiality of information at all times, both commercial data and personal data, as defined by the [EU General Data Protection Regulation 2016 \(GDPR\) or the Data Protection Act 2018](#).

15.4 Regulated Persons should guard against providing information on the operations of the CCG which might provide a commercial advantage to any organisation (private or NHS) in a position to supply goods or services to the CCG. For particularly sensitive procurements/contracts CCG staff may be asked to sign a non-disclosure agreement.

## 16. Management arrangements

16.1 Regulated Persons should be aware that a breach of this Policy could render them liable to prosecution as well as leading to the termination of their employment or position with the CCG.

16.2 Regulated Persons who fail to disclose any relevant interests, outside employment or receipt of gifts or hospitality as required by this policy or the CCG's Governance documents may be subject to disciplinary action which could, ultimately, result in the termination of their employment or position with the CCG.

16.3 The Corporate Office will be responsible for maintaining the register of interests, holding the Gifts and Hospitality Register and reviewing the implementation of this policy.

16.4 All Regulated Persons will be required to undergo annual mandatory training in Conflicts of Interest.

## 17. Complaints

17.1 Regulated Persons who wish to report suspected or known breaches of this policy should inform the [Corporate Office Secretary and General Counsel](#). All such notifications will be held in the strictest confidence and the person notifying the [Corporate Office Secretary and General Counsel](#) can expect a full explanation of any decisions taken as a result of any investigation.

## 18. Further information

This policy is an interpretation of guidance and is based on examples of good practice. In addition to referring to the CCG's Governance Documents standing orders, matters reserved to the Governing Body, standing financial instructions and financial scheme of delegation. Regulated Persons should refer to:

- the National Health Service Act 2006 & the Health and Social Care Act 2008;
- the Code of Conduct for NHS Managers;
- the Nolan Principles on Conduct in Public Life;
- the NHS Codes of Conduct and Accountability; (NHS Appointments Commission & Department of Health – amended July 2004)
- The NHS Clinical Commissioners, Royal College of General Practitioners and

British Medical Association – shared Principles on Conflicts of Interest when CCGs are commissioning from member practices.

- the Code of Practice on Openness in the NHS; and
- for more detailed guidance on Conflicts of Interest please see the [NHS statutory guidance on Managing Conflicts of Interest](#).
- any additional or successor guidance published by the Department of Health.

Copies of these documents will be available from the Corporate Office.

This policy will be reviewed regularly, and in accordance with the following on an as and when required basis:

- legislative changes; good practice guidance; case law;
- significant incidents reported; new vulnerabilities; and
- changes to organisational infrastructure.

## Appendix A

### **The seven principles of public life set out by the Committee on Standards in Public Life (the Nolan Principles)**

#### **Selflessness**

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

#### **Integrity**

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

#### **Objectivity**

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for awards or benefits, holders of public office should make choices on merit.

#### **Accountability**

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

#### **Openness**

Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

#### **Honesty**

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

#### **Leadership**

Holders of public office should promote and support these principles by leadership and example.

## Appendix B

### Examples of conflicts of interest for CCG staff (excluding Governing Body members)<sup>1</sup>

| Scenario   | Declaration of Interest Required (Y/N) | Disqualification from involvement in matter of interest appropriate? |
|--|--|--|
| CCG staff member (or a family member) is a director, shareholder, employee or partner of an entity which has an interest in bidding for a contract for services which is being put out to tender by the CCG. | Yes.                                   | Yes, depending on circumstances this should be considered.           |
| CCG staff member (or a family member) is an existing director or partner in one or more potential providers of services to the CCG   | Yes - on appointment.                  | Yes  |
| CCG staff member (or a family member) holds a contract with or is a director/ shareholder/ employee of a company or party to a partnership which holds a contract with the CCG.                              | Yes – on appointment.                  | Yes  |

A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role is, could be, or is seen to be impaired or otherwise influenced by his or her involvement in another role or relationship. In some circumstances, it could be reasonably considered that a conflict exists even when there is no actual conflict. In these cases it is important to still manage these perceived conflicts in order to maintain public trust.

---

<sup>1</sup> Governing Body members should refer to the Constitution for further guidance.

**DECLARATIONS OF INTEREST FORM FOR CCG MEMBERS, EMPLOYEES AND ASSOCIATES**

Name:  
Position within, or relationship with, the CCG:

Details of interests held (complete all that are applicable):

| Type of Interest*<br>(*See reverse of form for details) | Description of Interest (including for indirect interests, details of the relationship with the person who has the interest) | Date interest relates: |    | Actions to be taken to mitigate risk (this column will be completed by the Corporate Office Secretary and General Counsel) |
|---|--|------------------------|----|--|
|   |  | From                   | To |  |
|   |  |                        |    |  |

*NHS Dorset Clinical Commissioning Group (CCG) must demonstrate that conflicts of interest are managed in a way that does not undermine the probity and accountability of the CCG. It is crucial to provide confidence that decisions taken by NHS Dorset CCG are robust, fair, transparent and offer value for money.*

*Section 140 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 CCGs must do in terms of managing conflicts of interest. All staff, CCG remunerated GPs and Member Practices are required to complete a Declaration of Interests. All conflicts, or perceived conflicts of interest, will be recorded on a Register that will be available on the CCG website.*

*Anyone who is included in the declaration of interest regime can contact the Corporate Office [corporate.office@dorsetccg.nhs.uk](mailto:corporate.office@dorsetccg.nhs.uk) for further information.*

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to the CCG 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:**

On receipt, reviewed by the Corporate Office

**Signed :**

**Date :**

Please return your completed form to Steph Lower, Executive Assistant, Corporate Office, telephone (01305) 368017 or e-mail

[stephanie.lower@dorsetccg.nhs.uk](mailto:stephanie.lower@dorsetccg.nhs.uk)

## TYPES OF INTEREST

| Type of Interest                            | Description   |
|---|---|
| <b>Financial Interests</b>                  | <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"> <li>• 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;</li> <li>• 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;</li> <li>• A management consultant for a provider;</li> <li>• In secondary employment (see paragraph 56 to 57);</li> <li>• In receipt of secondary income from a provider;</li> <li>• In receipt of a grant from a provider;</li> <li>• In receipt of any payments (for example honoraria, one off payments, day allowances or travel or subsistence) from a provider;</li> <li>• 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</li> <li>• 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).</li> </ul> |
| <b>Non-Financial Professional Interests</b> | <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"> <li>• An advocate for a particular group of patients;</li> <li>• A GP with special interests e.g., in dermatology, acupuncture etc.;</li> <li>• 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);</li> <li>• An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE);</li> <li>• A medical researcher.</li> </ul>   |

|   |  |
|---|--|
| <b>Non-Financial Personal Interests</b> | <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"> <li>• A voluntary sector champion for a provider;</li> <li>• A volunteer for a provider;</li> <li>• A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation;</li> <li>• Suffering from a particular condition requiring individually funded treatment;</li> <li>• A member of a lobby or pressure groups with an interest in health.</li> </ul> |
| <b>Indirect Interests</b>               | <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"> <li>• Spouse / partner;</li> <li>• Close relative e.g., parent, grandparent, child, grandchild or sibling;</li> <li>• Close friend;</li> <li>• Business partner.</li> </ul>  |



### Appendix D

## Dorset Clinical Commissioning Group Declaration of Gifts, Hospitality and Sponsorship Form

| Recipient Name | Position | Date of Offer | Date of Receipt (if applicable) | Details of Gift/Hospitality/ Sponsorship | Estimated Value | Supplier/ Offeror name and nature of business | Details of previous offers or acceptance by this Offeror/ Supplier | Details of the officer reviewing and approving the declaration made and date | Declined or Accepted | Reason for Accepting or Declining | Other Comments |
|----------------|----------|---------------|---------------------------------|--|-----------------|---|--|--|----------------------|-----------------------------------|----------------|
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |
|                |          |               |                                 |  |                 |   |  |  |                      |                                   |                |

NHS Dorset Clinical Commissioning Group (CCG) must demonstrate that conflicts of interest are managed in a way that does not undermine the probity and accountability of the CCG. It is crucial to provide confidence that decisions taken by NHS Dorset CCG are robust, fair, transparent and offer value for money.

Section 140 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 CCGs must do in terms of managing conflicts of interest. All staff, CCG remunerated GPs and Member Practices are required to complete a Declaration of Interests. All conflicts, or perceived conflicts of interest, will be recorded on a Register that will be available on the CCG website.

Anyone who is included in the declaration of interest regime can contact the Corporate Office [corporate.office@dorsetccg.nhs.uk](mailto:corporate.office@dorsetccg.nhs.uk) for further information.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to the CCG 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.

Signed : \_\_\_\_\_ Date : \_\_\_\_\_

On receipt, reviewed by the Corporate Office

Signed : \_\_\_\_\_ Date : \_\_\_\_\_

Please return to Stephanie Lower, Executive Assistant, Corporate Office, telephone (01305) 368017 or e-mail [stephanie.lower@dorsetccg.nhs.uk](mailto:stephanie.lower@dorsetccg.nhs.uk)



### Appendix E

#### Declaration of Secondary Employment Form

##### Personal Details and Position

Full Name: .....

Job Title: .....

Department: .....

Directorate: .....

Hours of work per week: .....

Pattern of hours (e.g. 24/7 shifts, 8.30am – 5.00pm): .....

Days worked: .....

##### Other Employment/Work Details

I have other employment/work or I am considering other employment/work including Bank/ Locum Agency, the details of which are below:

Organisation/ Company/ Agency: .....

Job Title: .....

Description of work undertaken: .....  
.....  
.....

Type of work: (Circle as appropriate):    Paid    Unpaid    Voluntary    Casual

Hours per week: .....Pattern of hours: .....  
(e.g. 24/7 shifts, 8.30am – 5.00pm)

Annual Leave Entitlement: ..... days/ hours    Date commenced: .....  
(if already in secondary employment)

##### Declaration

'I declare that the above information is correct and that Secondary Employment in this instance will not have a detrimental effect on my work with the CCG. I will inform my Line Manager if there are any changes to the above. I understand that false information given with regard to this form could be treated as Gross Misconduct or fraudulent and dealt with accordingly under the Conduct and Capability Policy. To prevent and detect fraud I consent to the disclosure of relevant information from this form to and by the NHS Counter Fraud Service'.

(Employee) Signed: ..... Date: .....

(Manager) Approved by: ..... Date: .....

Print Name: .....

## Appendix F

### 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 [Corporate Office Secretary and General Counsel](#).

1. Detail of staff  
Name  
Title E-mail  
Tel-No
2. Details of proposed sponsorship, including details of proposed sponsor

Approval by relevant Director

Name Title

Signature

Date

Any comments

Please return this form to the [Corporate Office Secretary and General Counsel](#), Dorset

CCG

**The Chartered Institute of Purchasing and Supply (CIPS) Code of Ethics****Use of the code**

Members of CIPS are required to uphold this code and to seek commitment to it by all those with whom they engage in their professional practice. Members are expected to encourage their organisation to adopt an ethical purchasing policy based on the principles of this code and to raise any matter of concern relating to business ethics at an appropriate level. The Institute's Royal Charter sets out a disciplinary procedure which enables the CIPS Council to investigate complaints against any of our members and, if it is found that they have breached the code, to take appropriate action. Advice on any aspect of the code is available from the CIPS.

This code was approved by the CIPS Council on 11 March 2009.

**As a member of The Chartered Institute of Purchasing & Supply, I will:**

- maintain the highest standard of integrity in all my business relationships;
- reject any business practice which might reasonably be deemed improper; never use my authority or position for my own personal gain;
- enhance the proficiency and stature of the profession by acquiring and applying knowledge in the most appropriate way;
- foster the highest standards of professional competence amongst those for whom I am responsible;
- optimise the use of resources which I have influence over for the benefit of my organisation; and
- comply with both the letter and the intent of:
  - the law of countries in which I practice;
  - agreed contractual obligations; and
  - CIPS guidance on professional practice.

**Non-disclosure agreement**

*NHS Dorset Clinical Commissioning Group(CCG) - express requirement for confidentiality*

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

The CCG 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 CCG you are required to:

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 the CCG; and

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  
**NHS Dorset Clinical  
Commissioning Group**

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

|                    |  |
|--------------------|--|
| <b>Signed:</b>     |  |
| <b>Date:</b>       |  |
| <b>Print Name:</b> |  |

## Appendix I

### Annex E: Template declarations of interest checklist

Under the Health and Social Care Act 2012, there is a legal obligation to manage conflicts of interest appropriately. It is essential that declarations of interest and actions arising from the declarations are recorded formally and consistently across all CCG governing body, committee and sub-committee meetings. This checklist has been developed with the intention of providing support in conflicts of interest management to the Chair of the meeting- prior to, during and following the meeting. It does not cover the requirements for declaring interests outside of the committee process.

| Timing                    | Checklist for Chairs   | Responsibility                |
|---------------------------|--|-------------------------------|
| In advance of the meeting | 1. <b>The agenda</b> to include a standing item on declaration of interests to enable individuals to raise any issues and/or make a declaration at the meeting.                    | Meeting Chair and secretariat |
|                           | 2. A <b>definition of conflicts of interest</b> should also be accompanied with each agenda to provide clarity for all recipients.   | Meeting Chair and secretariat |
|                           | 3. <b>Agenda</b> to be circulated to enable attendees (including visitors) to identify any interests relating specifically to the agenda items being considered.                   | Meeting Chair and secretariat |
|                           | 4. <b>Members should contact the Chair</b> as soon as an actual or potential conflict is identified.   | Meeting members               |
|                           | 5. Chair to review a <b>summary report from preceding meetings</b> i.e., subcommittee, working group, etc., detailing any conflicts of interest declared and how this was managed. | Meeting Chair                 |
|                           | <b>A template for a summary report</b> to present discussions at preceding meetings is detailed below.   |                               |
|                           | 6. A <b>copy of the members' declared interests</b> is checked to establish any actual or potential conflicts of interest that may occur during the meeting.                       | Meeting Chair                 |

|                                     |   |   |
|-------------------------------------|---|---|
| <p><b>During the meeting</b></p>    | <p><b>7. Check and declare the meeting is quorate</b> and ensure that this is noted in the minutes of the meeting.</p> <p>8. Chair requests <b>members to declare any interests in agenda items</b>- which have not already been declared, including the nature of the conflict.</p> <p>9. <b>Chair makes a decision</b> as to how to manage each interest which has been declared, including whether / to what extent the individual member should continue to participate in the meeting, on a case-by-case basis, and this decision is recorded.</p> <p>10. <b>As minimum requirement</b>, the following should be <b>recorded in the minutes of the meeting</b>:</p> <ul style="list-style-type: none"> <li>• Individual declaring the interest;</li> <li>• At what point the interest was declared;</li> <li>• The nature of the interest;</li> <li>• The Chair's decision and resulting action taken;</li> <li>• The point during the meeting at which any individuals retired from and returned to the meeting - even if an interest has not been declared.</li> </ul> <p><b>Visitors in attendance</b> who participate in the meeting must also follow the meeting protocol and declare any interests in a timely manner.</p> <p><b>A template for recording any interests during meetings</b> is detailed below.</p> | <p>Meeting Chair</p> <p>Meeting Chair</p> <p>Meeting Chair and secretariat</p> <p>Secretariat</p>         |
| <p><b>Following the meeting</b></p> | <p>11. <b>All new interests declared</b> at the meeting should be promptly updated onto the declaration of interest form;</p> <p>12. All new completed declarations of interest should be <b>transferred onto the register of interests</b>.</p>  | <p>Individual(s) declaring interest(s)</p> <p>Designated person responsible for registers of interest</p> |

## Appendix J

### Template for recording minutes

#### XXXX Clinical Commissioning Group Primary Care Commissioning Committee Meeting

**Date:** 16 June 2017  
**Time:** 2pm to 4pm  
**Location:** Room B, XXXX CCG

#### Attendees:

| Name             | Initials | Role                                      |
|------------------|----------|---|
| Sarah Kent       | SK       | XXX CCG Governing Body Lay Member (Chair) |
| Andy Booth       | AB       | XXX CCG Audit Chair Lay Member            |
| Julie Hollings   | JH       | XXX CCG PPI Lay Member                    |
| Carl Hodd        | CH       | Assistant Head of Finance                 |
| Mina Patel       | MP       | Interim Head of Localities                |
| Dr Myra Nara     | MN       | Secondary Care Doctor                     |
| Dr Maria Stewart | MS       | Chief Clinical Officer                    |
| Jon Rhodes       | JR       | Chief Executive – Local Healthwatch       |

#### In attendance from 2.35pm

Neil Ford                      NF                      Primary Care Development Director

| Item No | Agenda Item  | Actions |
|---------|--|---------|
| 1       | <b>Chairs welcome</b>  |         |
| 2       | <b>Apologies for absence</b><br><br><apologies to be noted>  |         |
| 3       | <p><b>Declarations of interest</b></p> <p><i>SK reminded committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of XXX clinical commissioning group.</i></p> <p><i>Declarations made by members of the Primary Care Commissioning Committee are listed in the CCG's Register of Interests. The Register is available either via the secretary to the governing body or the CCG's website at the following link: <a href="http://xxxccg.nhs.uk/about-xxx-ccg/who-we-are/our-governing-body/">http://xxxccg.nhs.uk/about-xxx-ccg/who-we-are/our-governing-body/</a></i></p> <p><b>Declarations of interest from sub committees.</b><br/><i>None declared</i></p> <p><b>Declarations of interest from today's meeting</b></p> |         |

|          |   |  |
|----------|---|--|
|          | <p><i>The following update was received at the meeting:</i></p> <ul style="list-style-type: none"> <li>· <i>With reference to business to be discussed at this meeting, MS declared that he is a shareholder in XXX Care Ltd.</i></li> </ul> <p><i>SK declared that the meeting is quorate and that MS would not be included in any discussions on agenda item X due to a direct conflict of interest which could potentially lead to financial gain for MS.</i></p> <p><i>SK and MS discussed the conflict of interest, which is recorded on the register of interest, before the meeting and MS agreed to remove himself from the table and not be involved in the discussion around agenda item X.</i></p> |  |
| <b>4</b> | <b>Minutes of the last meeting &lt;date to be inserted&gt; and matters arising</b>  |  |
| <b>5</b> | <p><b>Agenda Item &lt;Note the agenda item&gt;</b></p> <p><i>MS left the meeting, excluding himself from the discussion regarding xx.</i></p> <p><b>&lt;conclude decision has been made&gt;</b></p> <p><b>&lt;Note the agenda item xx&gt;</b></p> <p><i>MS was brought back into the meeting.</i></p>   |  |
| <b>6</b> | <b>Any other business</b>   |  |
| <b>7</b> | <b>Date and time of the next meeting</b>  |  |

## Appendix K

### Template : Procurement decisions and contracts awarded

| Ref No | Contract/Service title | Procurement description | Existing contract or new procurement (if existing include details) | Procurement type – CCG procurement, collaborative procurement with partners | CCG clinical lead (name) | CCG contract manager (name) | Decision making process and name of decision making committee | Summary of conflicts of interest noted | Actions to mitigate conflicts of interest | Justification for actions to mitigate conflicts of interest | Contract awarded (supplier name & registered address) | Contract value (£) (total) and value to CCG | Comments to note |
|--------|------------------------|-------------------------|--|---|--------------------------|-----------------------------|---|--|---|---|---|---|------------------|
|        |                        |                         |  |   |                          |                             |   |  |   |   |   |   |                  |
|        |                        |                         |  |   |                          |                             |   |  |   |   |   |   |                  |
|        |                        |                         |  |   |                          |                             |   |  |   |   |   |   |                  |

To the best of my knowledge and belief, the above information is complete and correct. I undertake to update as necessary the information.

Signed:

On behalf of:

Date:

Please return to <insert name/contact details for team or individual in CCG nominated for procurement management and administrative processes>

## Appendix L

### Annex H : Template Register of procurement decisions and contracts awarded

| Ref No | Contract/Service title | Procurement description | Existing contract or new procurement (if existing include details) | Procurement type – CCG procurement, collaborative procurement with partners | CCG clinical lead | CCG contract manager | Decision making process and name of decision making committee | Summary of conflicts of interest declared and how these were managed | Contract awarded (supplier name & registered address) | Contract value (£) (total) | Contract value (£) to CCG |
|--------|------------------------|-------------------------|--|---|-------------------|----------------------|---|--|---|----------------------------|---------------------------|
|        |                        |                         |  |   |                   |                      |   |  |   |                            |                           |
|        |                        |                         |  |   |                   |                      |   |  |   |                            |                           |
|        |                        |                         |  |   |                   |                      |   |  |   |                            |                           |
|        |                        |                         |  |   |                   |                      |   |  |   |                            |                           |
|        |                        |                         |  |   |                   |                      |   |  |   |                            |                           |