



Lincolnshire Partnership
NHS Foundation Trust

LINCOLNSHIRE PARTNERSHIP NHS FOUNDATION TRUST

Counter Fraud and Anti-Bribery Policy

DOCUMENT VERSION CONTROL	
Document Type and Title:	Counter Fraud and Anti-Bribery Policy
Authorised Document Folder:	Policies (wef 2 November 2015)
New or Replacing:	Replacing former policies on counter fraud, sponsorship, gifts and hospitality
Document Reference:	5e
Version No:	10.2
Date Policy First Written:	September 2006
Date Policy First Implemented:	September 2006
Date Policy Last Reviewed and Updated:	October 2016
Implementation Date:	12 January 2018
Author:	Counter Fraud Specialist / Trust Secretary
Approving Body:	Audit Committee
Approval Date:	6 July 2017
Ratifying Body:	Board of Directors
Ratified Date:	27 July 2017
Committee, Group or Individual Monitoring the Document	Audit Committee
Review Date:	July 2018

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1. Counter Fraud

- 1.1 Lincolnshire Partnership NHS Foundation Trust has a zero tolerance attitude to fraud, bribery and corruption within the organisation. It is committed to eliminating any such offences within the Trust to free up public resources for better patient care. This policy has been produced by the Counter Fraud Specialist (CFS) and is intended as a guide for all staff on Counter Fraud, bribery and corruption work within the Trust.
- 1.2 One of the basic principles of public sector organisations is the proper use of public funds. The majority of people who work in the NHS are honest and professional and they find that fraud, bribery and corruption committed by a minority is wholly unacceptable as it ultimately leads to a reduction in the resources available for patient care.
- 1.3 The Trust is committed to the elimination of fraud, bribery and corruption and will rigorously investigate any such cases and, where proven, ensure wrong doers are appropriately dealt with, which includes taking steps to recover assets lost as a result of fraud. Any apparent fraud, bribery or corruption will be investigated and disciplinary action, including reference to any relevant professional organisation, will be taken. Cases will be referred for formal investigation by the CFS wherever there is prima facie evidence of a criminal offence. Criminal and civil prosecutions and recovery of money from individuals convicted of fraud, bribery or corruption offences will be pursued. The Trust has agreed Sanction and Redress Protocols with the CFS.

2. Definitions

To assist a better understanding, definitions of 'fraud', 'bribery and corruption' are detailed below.

2.1 Fraud

The Fraud Act 2006 came into force on the 15 January 2007 and introduced the general offence of fraud. Fraud involves dishonestly:

- making a false representation
- failing to disclose information
- abusing a position held

The Fraud Act 2006 also created new offences of:

- Possession and making or supplying articles for use in fraud
- Fraudulent trading (sole traders)
- Obtaining services dishonestly

2.2 Other fraud-related offences

The following offences are not contained within the Fraud Act 2006 but may nevertheless be used to prosecute in cases of fraud against the Trust:

- Conspiracy to defraud
- Forgery & Counterfeiting
- Dishonestly retaining a wrongful credit
- Computer misuse

2.3 Bribery and Corruption

Bribery and corruption involves offering, promising or giving a payment or benefit in-kind in order to influence others to use their position in an improper way to gain an advantage.

The Bribery Act 2010 replaced the fragmented and complex offences at common law and in the Prevention of Corruption Acts 1889-1916. There are two general offences of bribery within the Act:

- Offering or giving a bribe to induce someone to behave, or to reward someone for behaving, improperly; and
- Requesting or accepting a bribe, either in exchange for acting improperly, or where the request or acceptance is itself improper.

The Act also introduced a new corporate offence of negligently failing by a company or limited liability partnership to prevent bribery being given, or offered by an employee or agent on behalf of that organisation. Lincolnshire Partnership NHS Foundation Trust (in common with other NHS Provider bodies) falls under the definition of a 'company' for the purposes of the Act.

3. Purpose

3.1 This document states the Trust policy in relation to fraud, bribery and corruption and provides guidance and information applicable to all staff (includes those permanently employed, Non-Executive Directors, Governors, consultants, temporary agency staff, contractors, volunteers, or others performing any role on behalf of the Trust, whether for payment or otherwise).

In compliance with NHS Counter Fraud Authority (formerly NHS Protect) 'Standards for Providers: Fraud, Bribery and Corruption', the Trust will minimise losses to financial crime through:

3.1.1 Creating a strong counter fraud, bribery and corruption culture

All staff have a responsibility to protect our organisation and its resources. Trust staff, professionals, managers and policy makers, must work together to raise awareness of the Trust zero tolerance approach to fraud, bribery and corruption, to report concerns and enforce the message to any dishonest minority that such matters are not acceptable within the NHS and will be dealt with accordingly.

The most effective deterrent will come from those of us within the NHS who value the service provided and disapprove of those who abuse the system through fraud, bribery, corruption and other dishonest acts. In addition, publicity surrounding counter fraud, bribery and corruption work will deter some who perpetrate or consider

perpetrating related offences. Lincolnshire Partnership NHS Foundation Trust will publicise successful investigation outcomes both internally and externally as appropriate in order to aid the deterrent effect.

3.1.2 Proactively preventing and detecting fraud, bribery and corruption

The Director of Finance & Information will ensure (through 'fraud-proofing') that the Trust's systems, policies and processes are sufficiently robust so that the risk of fraud, bribery and corruption is reduced to a minimum. Checks will be conducted in areas identified to be most at risk to fraud, bribery or corruption in order to proactively detect instances that might otherwise be unreported.

All staff must be aware of and comply with Lincolnshire Partnership NHS Foundation Trust Standing Financial Instructions (SFIs), codes of conduct and declare relevant information.

3.1.3 Conducting professional investigations of all instances of suspected fraud, bribery and corruption

Criminal offences of fraud, bribery or corruption will be investigated in a professional, objective and timely manner by an accredited NHS CFS. Parallel internal investigations may also be carried out by Lincolnshire Partnership NHS Foundation Trust managers (supported by the Human Resources Team) as part of disciplinary procedures. Such parallel investigations will be conducted in accordance with the agreed HR/CFS working together protocol.

3.1.4 Applying effective sanctions

Where fraud, bribery or corruption offences are committed criminal sanctions (including prosecution) will be pursued by the CFS. In addition Trust employees found to have committed such offences will also be dealt with in accordance with internal disciplinary procedures and referral to professional bodies where appropriate.

3.1.5 Seeking effective redress

Redress allows resources that are lost to fraud, bribery and corruption to be returned to the NHS for use as intended for the provision of high quality patient care and services. The Trust will consider initiating civil recovery action if this is cost-effective and desirable for deterrence purposes. This could involve a number of options such as applying through the Small Claims Court and/or recovery through debt collection agencies. Each case will be discussed by CFS with the Director of Finance & Information to determine the most appropriate action.

4. Anti-Bribery guidance

4.1 The Bribery Act 2010 came into force on 1st July 2011. As detailed in section 2.3, the new Act makes it a criminal offence, not just for individuals to engage in acts of bribery but for commercial organisations (which includes NHS bodies) for failing to have adequate preventative measures in place.

4.2 Bribery does not have to involve cash or an actual payment exchanging hands and can take many forms such as a gift, lavish treatment during a business trip

or tickets to an event. Annex 2 of this policy deals with the processes to be adopted in relation to commercial sponsorship, gifts and hospitality. Internal investigatory and disciplinary processes, as well as potential criminal investigation, will apply to those failing to comply with this policy.

- 4.3 The Bribery Act brings into law a new corporate crime of failing to prevent bribery, with unlimited fines. In addition to corporate liability there is potential personal liability for both directors and officers, with unlimited fines and/or imprisonment for up to 10 years.
- 4.4 The Trust is committed to the prevention, deterrence and detection of bribery and has a zero-tolerance towards those responsible for bribery and corruption. The Trust aims to maintain full anti-bribery compliance with the Bribery Act 2010 and will ensure that the prescribed preventative measures are embedded in its daily activities.
- 4.5 This policy is also intended to contribute to maintaining the highest standards of business conduct and ensure compliance with the 7 principles of public life drawn up by the Nolan Committee (**see Annex 1**).

4.6 Bribery Act 2010 offence and penalties

4.6.1 The Bribery Act makes it a criminal offence to:

- offer, promise or give a bribe to another person (Section 1)
- request, agree to receive, or accept a bribe (Section 2)
(A simple example would include a candidate for a job offering the interviewer tickets to an event in order to secure the position. Under the Bribery Act 2010, two offences would be committed; one by the person offering the bribe, and one by the person receiving the bribe.)
- failure to prevent bribery by persons working on behalf of a commercial organisation (a corporate offence) - (Section 7)

(Two simple examples would be:

- a) Where an act of bribery has occurred, for a director, manager or officer of an organisation ignoring an act or acts of bribery within the organisation. Under the Bribery Act 2010, the corporate offence would have been committed.*
- b) Where an act of bribery has occurred, it was subsequently established that the organisation employing the individual failed to have adequate procedures in place to identify and prevent the act of bribery by its employee. Again, under the Bribery Act 2010, the corporate offence would have been committed.)*

4.6.2 The penalties for breaches of the Bribery Act 2010 are potentially severe. There is no upper limit on the level of fines that can be imposed. An individual convicted of an offence will face a prison sentence of up to 10 years. If a bribery offence by a staff member is proved to have been committed with the consent or connivance of a director, manager or other similar person, that person (as well as the commercial organisation) is also guilty of the offence and liable to be prosecuted and fined or imprisoned accordingly.

The penalties if found guilty of an offence under sections 1, 2 or 7 are as follows:

- Upon conviction in a magistrates court, to imprisonment for a maximum term of 12 months (six months in Northern Ireland), or to a fine not exceeding £5,000, or to both.
- Upon conviction in a crown court, to imprisonment for a maximum term of ten years, or to an unlimited fine, or both.
- The Trust, if convicted under sections 1 or 2 will also face the same level of fines and, if guilty of an offence under section 7, is liable to an unlimited fine.

4.7 Anti-Bribery Procedures

The Secretary of State has outlined six principles that are expected from “commercial organisations” to address the risk of bribery occurring within its business activities. These six principles if adopted amount to a defence from prosecution.

The six principles are:

4.7.1 Proportionality

Lincolnshire Partnership NHS Foundation Trust (the Trust) must and does have procedures in place to prevent bribery by persons associated with it. These are proportionate to the bribery risks faced by the Trust and to the nature, scale and complexity of the organisation’s activities. They are also clear, practical, accessible, effectively implemented and enforced.

4.7.2 Top Level Commitment

The Chief Executive, Accountable Officers, Directors, Governors and Senior Managers are committed to preventing bribery by persons associated with the Trust. They foster a culture within the organisation in which bribery is never acceptable.

4.7.3 Risk Assessment

There are periodic and documented assessments undertaken of the nature and extent of the Trust’s exposure to potential external and internal risk of bribery on the organisations behalf by persons associated with the activities is periodically assessed. This includes financial risks but also other risks such as reputational damage.

4.7.4 Due Diligence

The Trust takes a proportionate and risk based approach, in respect of persons who perform or will perform services for or on their behalf, in order to mitigate identified bribery risks.

4.7.5 Communication (including training)

The Trust seeks to ensure that its bribery prevention policies and procedures, including Standing Orders, Standing Financial Instructions, Codes of Conduct for Directors and Governors, Counter Fraud Policy, Freedom to Speak Up Policy, Standards of Business Conduct for Staff, Commercial Sponsorship and Hospitality are embedded and understood throughout the organisation through internal and external communication, including training that is proportionate to the risks it faces.

4.7.6 Monitoring and Review

The Trust will monitor and review their procedures designed to prevent bribery by persons associated with the organisation and make improvements to minimise the risk where necessary.

4.8 Staff Responsibilities

Trust employees and others acting on behalf of the organisations, must apply the following principles:

- Not accepting gifts, hospitality or benefits of any kind from a third party which might be perceived as compromising their personal judgement or integrity, Annex 1 of this policy sets out the procedures in place to guide and protect employees and the organisation;
- Not using their official position to further their private interests or those of others;
- Declare any private interests as required by Policies;
- Base all procurement decisions and negotiations of contracts solely on achieving best value for money for the tax payer;
- Refer to their line manager when faced with a situation for which there is no adequate guidance;
- If in any doubt, seek advice from the appropriate assistant director or director.

An essential component of the Trust's anti-bribery approach is to ensure that all staff comply with the governance requirements of the Trust's policies and procedures in place to ensure full compliance with the Bribery Act 2010. The policies and procedures, that all staff must make themselves aware of, and comply with are:

Standing Orders for the Council of Governors – (embodied within the Constitution)

Section 7 ~ Declaration of Interests and Register of Interests

Section 8 ~ Standards of Business Conduct

Standing Orders for the Board of Directors – (embodied within the Constitution)

Section 8 ~ Declaration of Interests and Register of Interests

Section 9 ~ Standards of Business Conduct

Standing Financial Instructions

Section 19 ~ Acceptance of Gifts by Officers and Link to Standards of Business Conduct

Governors' Responsibilities and Code of Conduct;

Directors' Responsibilities and Code of Conduct;

Commercial Sponsorship and Hospitality practices as set out in this Policy;

Freedom to Speak Up Procedure;

Counter Fraud, Bribery and Corruption procedures and practices (as set out in this Policy).

The above list is not exhaustive and may be varied, by the Trust, as required, to

ensure full compliance with Trust's governance and the Bribery Act 2010.

5. Duties

Countering fraud, bribery and corruption is the responsibility of all Trust staff. We must all work together to be effective in reducing fraud to an absolute minimum. The Director of Finance & Information has overall responsibility for the Trust's counter fraud, bribery and corruption arrangements.

5.1 Chief Executive

The Chief Executive has overall responsibility for funds entrusted to the Trust. The Chief Executive must ensure that adequate policies and procedures are in place to protect the Trust and the funds it receives from fraud, bribery and corruption.

5.2 Director of Finance & Information

The Director of Finance & Information has overall responsibility for ensuring that counter fraud, bribery and corruption arrangements are in place. A key element of these responsibilities is to ensure that there is counter fraud, bribery and corruption awareness across the organisation and that all suspected instances of financial crime are appropriately investigated.

5.3 Internal and External Audit

The Trust internal and external auditors review and report on the adequacy of Trust controls and systems and ensure compliance with financial instructions. They have a duty to report any suspicions of fraud, bribery or corruption identified during the course of their work to the CFS.

5.4 Associate Director of Human Resources

The Associate Director of Human Resources has responsibility for the provision of advice, guidance and support to Lincolnshire Partnership NHS Foundation Trust managers and officers investigating disciplinary matters. All disciplinary matters which involve suspected fraud, bribery or corruption offences will also be subject to parallel criminal investigation by the Trust CFS. The Associate Director of Human Resources shall ensure that a liaison protocol is in place which details arrangements for the conduct of parallel disciplinary and criminal investigations.

5.5 Counter Fraud Specialist

The CFS is responsible for taking forward all counter fraud, bribery and corruption work within the Trust in accordance with NHS Counter Fraud Authority 'Standards for Providers: Fraud, Bribery and Corruption' and this policy. The CFS reports to the Director of Finance & Information and the Trust's Audit Committee.

The CFS must be professionally trained and accredited to conduct counter fraud, bribery and corruption work. All criminal investigations undertaken by the CFS are conducted in accordance with relevant legislation.

5.6 Managers

All Lincolnshire Partnership NHS Foundation Trust managers are responsible for ensuring compliance with Trust policies, procedures and processes applicable to their area of work, for applying controls to prevent financial crime and for identifying and reporting to the CFS any identified weaknesses which might allow fraud, bribery or corruption to occur. Managers are also responsible for ensuring that staff are aware

of what constitutes fraud, bribery and corruption within the NHS and that they understand the importance of protecting the Trust from it.

Managers must report any instances of actual or suspected fraud, bribery and corruption immediately when concerns are identified or brought to their attention and refrain from undertaking any investigations of financial crimes themselves.

5.7 Employees

It is the responsibility of all staff to ensure that they comply with this, and all other Trust policies and procedures relevant to their area of work and to ensure that they recognise fraud, bribery and corruption, which might occur within the organisation.

Fraud, bribery and corruption training is available to all staff through eLearning, completion of workbooks and face to face presentations. Further details can be obtained by contacting the CFS.

6. Reporting Fraud, Bribery and Corruption

If fraud, bribery or corruption is discovered or suspected it must immediately be reported directly to the CFS, the Trust Director of Finance & Information or NHS Counter Fraud Authority. Contact details are as follows:

CFS

Ian Morris

Tel: 0116 225 6120

Email: ian.morris7@nhs.net

Director of Finance & Information

Sarah Connery

Tel: 01529 222 236

Email: sarah.connery@lpft.nhs.uk

Concerns may also be reported directly to NHS Counter Fraud Authority:

NHS Counter Fraud Authority

Fraud and Corruption Reporting Line

Secure Website

Tel: 0800 028 40 60

www.reportnhsfraud.nhs.uk

You do not have to advise who you are when raising concerns under this policy, however, this may make it more difficult for your concerns to be investigated.

7. Acting on your suspicions – the dos and don'ts.

If you suspect fraud, bribery or corruption within the workplace, there are a few simple guidelines that should be followed:

DO

- Make an immediate note of your concerns – note all relevant details, such as what was said in telephone or other conversations, the date, time and the names of any parties involved.
- Deal with the matter promptly, if you feel your concerns are warranted – any delay may cause the Trust to suffer further financial loss.

DON'T

- Do nothing.
- Be afraid of raising your concerns – you will not suffer any recrimination from the Trust as a result of voicing a reasonably held suspicion. The Trust will treat any matter you raise sensitively and confidentially.
- Approach or accuse any individuals directly.
- Try to investigate the matter yourself – there are special rules surrounding the gathering of evidence for use in criminal cases. Any attempt to gather evidence by people who are unfamiliar with these rules may destroy the case. The CFS is trained in handling investigations in accordance with the NHS Counter Fraud Authority Anti- Fraud Manual.
- Convey your suspicions to anyone other than the CFS, Director of Finance & Information, or NHS Counter Fraud Authority.

8. Approval and Ratification Process

8.1 The policy will be approved by the Audit Committee and ratified by the Board of Directors.

9. Review and Revision Arrangements including Version Control

9.1 The Trust Secretary will maintain a version control.

10. Dissemination and Implementation of a Policy

10.1 Dissemination

The policy will be included on the Trust website with other corporate governance documents.

10.2 Implementation

Presentations are delivered to employees at the commencement of their employment with the Trust, and as required thereafter, to promote counter fraud awareness. In addition, other publicity initiatives such as a counter fraud intranet page, posters, leaflets and quarterly counter fraud newsletters will be made available giving general information on counter fraud and examples of real cases to help deter fraud.

11. Policy Control including Archiving Arrangements

11.1 The Trust Secretary will archive a copy of the policy with the Board of Directors papers.

12. Monitoring Compliance with and Effectiveness of Policies and Procedures

Monitoring and/or Audit				
Measurables	Lead Officer	Frequency	Reporting to	Action Plan/Monitoring
Delivery of Counter Fraud Plan	CFS	Quarterly	Audit Committee	Audit Committee
Staff questionnaire on fraud awareness	CFS	Annual	Audit Committee	Audit Committee

This policy will be reviewed annually and updated as necessary.

12.1 The Trust will periodically review compliance with the Standards for Providers: Fraud, bribery and corruption.

12.1 Standards/Key Performance Indicators

TARGET/STANDARDS	KEY PERFORMANCE INDICATOR
Counter Fraud, Bribery and Corruption Arrangements	NHS Counter Fraud Authority Self-Assessment Review Toolkit
Fraud Awareness	Results from survey and year on year improvements
Counter Fraud, Bribery and Corruption Operational Plan	Delivery of plan

13. References

NHS Litigation Authority (2008). NHSLA Risk Management Standards for MH and LD Trusts www.nhsla.com

The Fraud Act 2006

The Bribery Act 2010

Countering Fraud in the NHS:
<https://cfa.nhs.uk/>

Standards for Providers: Fraud, bribery and corruption

Human Medicines Regulations 2012 (S.I. 2012 No. 1916)
http://www.legislation.gov.uk/uksi/2012/1916/pdfs/uksi_20121916_en.pdf

Review of Operational Productivity in NHS providers
(Interim report June 2015: Lord Carter of Coles Report)

The following Trust documents:

- Standing Orders for the Council of Governors – (embodied within the Constitution)
 - Section 7 ~ Declaration of Interests and Register of Interests
 - Section 8 ~ Standards of Business Conduct

- Standing Orders for the Board of Directors – (embodied within the Constitution)
 - Section 8 ~ Declaration of Interests and Register of Interests
 - Section 9 ~ Standards of Business Conduct

- Standing Financial Instructions
 - Section 19 ~ Acceptance of Gifts by Officers and Link to Standards of Business Conduct

- Governors' Responsibilities and Code of Conduct;
- Directors' Responsibilities and Code of Conduct;
- Freedom to Speak Up Procedure;

Annex 1

The Seven Nolan Principles of Public Life *(taken from First Report of the Committee on Standards in Public Life (1995))*

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 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 rewards and 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 that 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 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.



Lincolnshire Partnership
NHS Foundation Trust

Commercial Sponsorship, Gifts and Hospitality

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1. Introduction

Health Professionals, have an obligation to work together and in collaboration with other agencies outside the NHS, with the aim of improving the health of service users being treated and the services provided by them. As a result, the Trust recognises that collaborative partnerships with industry may have a number of benefits, which may include sponsorship and hospitality. This policy provides guidance upon the process to be followed should sponsorship and or hospitality be offered to any member of staff employed by the Trust.

2. Organisational Responsibilities

This policy applies to all workers in Lincolnshire Partnership NHS Foundation Trust, under NHS terms and conditions and extends to others who legitimately represent the Trust (e.g. governors and volunteers). For the purposes of this policy the word “staff” shall apply to all such parties.

This policy should be read in conjunction with related guidance and professional codes of conduct, including

- “HSG (93) Standards of Business Conduct for NHS Staff National Health Service”
- EL (94) Commercial approaches to the NHS regarding Disease Management Packages
- The Association of the British Pharmaceutical Industry (ABPI) Code of Practice
- “Good Medical Practice “General Medical Council
- Guidance produced by the College of Nursing and Midwifery
- Commercial sponsorship – Ethical Standards for the NHS

3. Gifts and hospitality

- 3.1 With the exception of items of little value (less than £25) such as diaries, calendars, flowers and small tokens of appreciation (including seasonal gifts), which may be accepted, all offers of gifts should be declined. Repeated offers of small gifts amounting to a value in excess of £100 in any one year should also be declined. In cases of doubt, advice should be sought from your line manager. A 'gift' is defined as any item of cash or goods, or any service (including training), which is provided for personal benefit at less than its commercial value.
- 3.2 Any personal gift of cash or cash equivalents (e.g. tokens) must be declined whatever its value.
- 3.3 Staff should: report immediately all offers of unreasonably generous or otherwise inappropriate gifts to the Trust Secretary; and return promptly any unacceptable gifts, with a letter politely explaining the terms of this policy and stating that you are not allowed to accept them.

- 3.4 Staff should exercise discretion in accepting offers of hospitality from contractors, other organisations or individuals concerned with the supply of goods or services. Modest hospitality provided in normal and reasonable circumstances during the course of working visits may be acceptable, although it should be on a similar scale to that which the Trust 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.
- 3.5 All hospitality or gifts accepted, or rejected, regardless of value, should be reported to the Trust Secretary using the “Hospitality form” (see below) as soon as is reasonably practicable. It is not necessary to record refreshments such as tea, coffee etc, or for course participants to record meals provided during a training event or seminar.
- 3.6 Staff should be especially 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.
- 3.7 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 the responsible director. Any hospitality provided should be modest.

4. Definition of Commercial Sponsorship

For the purpose of this policy, commercial sponsorship is defined as including:-

NHS funding from an external source, including funding of all or part of the costs of a member of staff, NHS research, staff training, pharmaceuticals, equipment, meeting rooms, costs associated with meetings, meals, gifts, hospitality, hotel and transport costs (including trips abroad), provision of free services (speakers), buildings or premises.

In all of the instances contained within the definition above, all staff should declare sponsorship or any commercial relationship linked to the supply of goods or services.

A central register of all sponsorship, commercial relationships and hospitality, linked to the supply of goods or services, is held by the Trust Secretary. A sponsorship agreement (Appendix A) form and / or Hospitality registration form (Appendix B) must be completed and e-mailed to the Trust Secretary at least 2 weeks prior to the event/sponsorship taking place.

Neither a sponsorship nor hospitality application form will be required in the following circumstances:

- Any income generation schemes which will be logged separately
- Discounts on particular pharmaceuticals

5. Code of Conduct

- All staff working in the Lincolnshire Partnership NHS Foundation Trust are expected (in addition to any professional codes of conduct) to:
- Act impartially in all their work;
- Refuse all gifts, benefits, hospitality or sponsorship of any kind, which might reasonable be seen to compromise their personal professional judgment or integrity, and to avoid seeking to exert influence to obtain preferential consideration. All such gifts should be returned and hospitality refused;
- Declare and record financial or personal interest (e.g. company shares, research grant) in any organisation with which they have to deal, and be prepared to withdraw from those dealings if required, thereby ensuring that their professional judgment is not influenced by such considerations;
- Ensure offers of sponsorship that could possibly breach the Code are reported to the Trust Board via the Trust Secretary;
- Not misuse their official position or information acquired in the course of their official duties, to further their private interests or those of others;
- Ensure professional registration (if applicable) and/or status are not used in the promotion of commercial products or services;
- Beware of bias generated through sponsorship, where this might impinge on professional judgment and impartiality;
- Neither agree to practice under any conditions, which compromise professional independence or judgment, nor impose such conditions on other professionals.

6. Pharmaceutical Company Collaboration

Any pharmaceutical sponsorship for joint working on e.g. a project or research proposal must be agreed by the Chief Pharmacist before commencement. In these circumstances the signature of the Chief Pharmacist will be required on the sponsorship registration form (see Appendix A) before submission to the Trust Secretary.

Any clinical aspects of the sponsored projects must always be under local control, and the development of clinical guidance or drug guidelines and protocols by the Trust should not include a representative of the sponsor at the local groups or committees.

Projects which involve the use of clinical guidelines and protocols prepared by the sponsors should only be agreed following advice of Trust professional advisers.

All staff and Board members involved with a sponsored project must declare any prior interests to the Trust in accordance with the code of conduct.

The sponsor cannot advertise Lincolnshire Partnership NHS Foundation Trust in their project as an endorsement to their product, packages or company without permission

of the Trust.

Sponsorship agreements, which involve more than one sponsor, are to be preferred to those involving a single sponsor.

Collaborative Partnerships which involve a pharmaceutical company must comply with the Medicines (Advertising) Regulations 1994, in particular regulation 21, which covers inducements and hospitality (attached at Appendix C).

Any person who contravenes regulation 21(1) is guilty of an offence, and liable on summary conviction to a fine not exceeding £5000 and on conviction on indictment to a fine, or to imprisonment for a term not exceeding two years, or both. Anyone contravening regulation 21(5) is also guilty of an offence and liable, on summary conviction to a fine not exceeding £5000. The MCA Guidelines on Promotion and Advertising set out the standards to be followed.

Further guidance on working relationships with pharmaceutical industry is outlined in Appendix E

7. Hospitality and Meetings

Industry representatives organising meetings are permitted to provide appropriate hospitality and/or meet any reasonable actual costs, which may have been incurred. If none is required, there is no obligation or right, to provide any such hospitality, or indeed any benefit of equivalent value.

Hospitality must be secondary to the purpose of the meeting and the level of hospitality must be appropriate and in proportion to the event. The costs involved must not exceed the level, which the recipients would normally adopt when paying for themselves at such an event or that which could be reciprocated by the NHS. It should not extend beyond those whose role makes it appropriate for them to attend the meeting.

Meetings sponsored by external sources must be disclosed in the papers relating to the meeting and any published proceedings.

Applicants for the above are required to complete a Trust Application form 'Industry Support for Trust Functions and Initiatives' (see Appendix B). This must be forwarded to the Trust Secretary.

Formal meetings of the Trust should not be subject to sponsor hospitality.

Commercial Sponsorship for Attendance at courses & conferences

- Acceptance by staff of commercial sponsorship for attendance at relevant conferences and courses is acceptable if directly related to their work, but only where the employee seeks permission in advance and the employer is satisfied that acceptance will not compromise purchasing decisions in any way.

8. Research and Development

All clinical trials/research undertaken in the Trust require the prior approval of the Multi-centre-research Ethics Committee (MREC) or Local Research Ethics Committee (LREC). In addition evidence of Trust management approval (including indemnity forms, honorary contracts and clinical trial agreements as appropriate)

The Assistant Director of Research, Innovation and Effectiveness is responsible for ensuring that this policy is applied in all sponsorship involving research. Any sponsorship proposal must therefore be notified to the Trust Research and Effectiveness Manager who will check necessary documentation and ensure management approval is sought. A copy of any trial/research protocol and a copy of any ethics approval/application will be required.

In these circumstances the signatures of the Assistant Director of Research, Innovation and Effectiveness, The Senior Information Risk Owner (SIRO) and the Trust's Caldicott Guardian will be required on the sponsorship registration form (see Appendix A) before submission to the Trust Secretary. Where the research involves any relationship with the pharmaceutical industry the signature of the Trust's Chief Pharmacist will also be required.

Further guidance on research and development is contained in Appendix D

9. Charitable Funding

Trust charitable trust fund accounts cannot contain non-charitable monies. Trustees will ensure that items, which do not have charitable status, are removed from the charitable trust fund accounts. This includes drug trials undertaken directly by a consultant and supported by funding from non-official sources. However, not all consultant drug trials are non-charitable. Further guidance upon charitable funding can be obtained from "NHS Charitable Funds: A Guide" published by the Charity Commission and from the Trust's Financial Director.

10. Data Protection

Disclosure of confidential information must be legally and ethically appropriate. The Trust will ensure that any sponsorship agreement permitting access to patient information is legally and ethically sound (e.g. where the sponsor is to carry out or support NHS functions, where patients have explicitly consented) a contract will be drawn up which draws attention to obligations of confidentiality. This contract will specify the security standards that should be applied and the limits of use of the information to purposes specified in the contract.

Where there is disclosure of confidential information the signature of the Data Protection Officer will be required on the sponsorship/hospitality registration form before submission to the Trust Secretary.

If the use of confidential information is for research purposes, disclosure should not take place without approval of an ethics committee (LREC or informed consent of the patient) as well as Trust management approval. In these circumstances the Trust's Assistant Director of Research, Innovation and Effectiveness should be notified. (See section on Research and Development for further information).

11. Monitoring Arrangements

Commercial sponsorship and hospitality agreements must be recorded in the Trust Hospitality Register. This will be available on request to the public and any regulatory or legislative authority.

A quarterly report on the register will be provided to the Trust's Audit Committee. All joint projects with the Pharmaceutical Industry will be reported to the Trust's Medicines Management Committee on a regular basis for scrutiny.

Where there is evidence of unapproved sponsorship or receipt of gift or hospitality the Trust will act swiftly to deal with the situation and bring it within the arrangements detailed in this policy, this will be investigated and could include disciplinary and criminal sanctions against any staff involved.

Where appropriate arrangements must be in place to monitor clinical and financial outcomes. Break clauses, built into sponsorship agreements will permit the Trust to terminate the agreement if it becomes apparent that it is not providing expected value for money/clinical outcomes.

Throughout any agreement, contract negotiations must be conducted according to high ethical standards. It is the responsibility of the member of staff arranging any agreement to ensure the standards set out in this policy are maintained and to ensure that any agreement is regularly reviewed.



Lincolnshire Partnership

NHS Foundation Trust

REGISTRATION FORM – SPONSORSHIP PROPOSAL AGREEMENT

Nature of the proposed sponsorship - description including type i.e. goods or services including aims, objectives, duration, any educational material provided (please enclose). Attach sheet if required.

Estimated value of sponsorship

Name of Trust Contact

Name of Trust contact:

Designation:

Telephone Number/Email:

Details of Sponsor

Organisation:

Contact name:

Address:

Telephone number:

Details of the recipient (e.g. health professionals, patients and their location etc)

CONSIDERATIONS TO BE MADE PRIOR TO ENTERING A SPONSORSHIP AGREEMENT:

1 | **Does the sponsorship include pharmaceutical company collaboration?**

Yes/No? (Please delete as appropriate)

If yes, please describe briefly below. Signature is required by Chief Pharmacist

2 | **Does the sponsorship involve any clinical trials/research?**

Yes/No? (Please delete as appropriate)

If yes, please describe briefly below. Signatures required from the Assistant Director of Research, Innovation and Effectiveness, Caldicott Guardian and Data Protection Officer along with evidence of relevant ethics approval and Trust management approval.

3	Will there be any disclosure of confidential patient information, or data derived from such information?
----------	---

Yes/No? (Please delete as appropriate)

If yes, please describe briefly below. Signatures are required from Caldicott Guardian and Senior Responsible Officer. (Additionally, disclosure for research purposes should not take place without the approval of both the appropriate research ethics committee and Trust management approval – see Q. 2)

4	Are there any costs/benefits of the sponsorship to the Trust, patient or staff?
----------	--

Yes, No, N/A? Please give details:

5	Are there any costs/benefits in relation to alternative options where appropriate?
----------	---

Yes, No, N/A? Please give details:

6	Is the sponsorship related to a purchasing decision (including pharmaceuticals and appliances) and have you considered evidence of best clinical practice and value for money?
----------	---

Yes, No, N/A? Please give details:

7	Will there be any impact on other parts of the health care system, for example products dispensed to inpatients, which are likely to be required by patients regularly at home?
----------	--

Yes, No, N/A? Please give details:

8	Is there any clinical evidence that a product or service is best for a patient?
----------	--

Yes, No, N/A? Please give details:

9	Have you checked that there are no potential irregularities which may affect a company's ability to satisfy the conditions of the agreement or impact upon it in any way?
----------	--

Yes, No, N/A? Please give details:

10	Please state how clinical and financial outcomes will be monitored?
-----------	--

11	Has there been any agreement re termination of sponsorship arrangements with the sponsor?
-----------	--

12	Have you provided the sponsor with a copy of the Trust's policy guidance?
-----------	--

Yes, or No? (Please delete appropriately)

Signature of Trust contact:	
Signature of Sponsor:	

For Office use only: -

Authorisation	
Authorised by:	
Designation:	
Date:	
Entered on register: (date)	
Notes:	

Additional Signatures (if required)	
Chief Pharmacist:	
Caldicott Guardian:	
Senior Information Risk Owner (SIRO):	
Assistant Director of Research, Innovation and Effectiveness:	

Please return to the Trust Secretary



Lincolnshire Partnership

NHS Foundation Trust

APPLICATION FORM FOR PHARMACEUTICAL INDUSTRY SUPPORT FOR TRUST HOSPITALITY

Collaborative Partnerships which involve a pharmaceutical company must comply with:

- Medicines (Advertising) Regulations 1994, in particular regulation 21, which covers inducements and hospitality
- ABPI Code of Practice for the Pharmaceutical Industry July 2003 , and Controls on the Promotion of prescription medicines in the UK Code of Practice guidance notes

(Refer to attached Appendix C).

Date of Application:

Section 1	Pharmaceutical Company Information
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Company Name:

Representative Name:

Representative Telephone Number:

Section 2	Trust Information
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Name of Trust Contact:

Description of Trust Function/Initiative where support is being offered:
(Attach details where relevant)

.....
.....

Date of function:

Section 3	Description of Support Offered
------------------	---------------------------------------

Please tick the relevant boxes:

Financial support only. Please indicate amount: - £

Providing catering only. Please indicate approximate amount: - £.....

Presence of Representatives at Trust function: -

Please state how many: -

And for how long: -

Display stand at Trust function

Please state how many representatives will man the stand:

Please list which products will be displayed: -

.....
.....

Educational activities (please enclose material to be used, or outline of the content)

.....
.....

Other: -

Please describe.....

Section 4	Trust Commitment in Return for support
------------------	---

Please tick the relevant boxes: -

None

Display stand

Opportunity to meet health professionals at event/function

Any Other: -
Please describe.....
(Attach details where relevant)

If meeting is sponsored, this fact must be declared in all relevant documentation

Section 5	We Agree to Abide by the Above
------------------	---------------------------------------

Signature of Representative:

.....

Signature of Trust Contact (As delegated by the Medicines Management Committee):

.....

Please return this form to the Trust Secretary

Appendix C

EXTRACT FROM THE MEDICINES MANAGEMENT (ADVERTISING) REGULATIONS 1994

Inducements and Hospitality

21. (1)

Subject to paragraphs (2) and (4), where relevant medicinal products are being promoted to persons qualified to prescribe or supply relevant medicinal products, no person shall supply, offer or promise to such persons any gift, pecuniary advantage or benefit in kind, unless it is inexpensive and relevant to the practice of medicine or pharmacy.

(2)

The provisions of paragraph (1) shall not prevent any person offering hospitality (including the payment of traveling or accommodation expenses) at events for purely professional or scientific purposes to persons qualified to prescribe or supply relevant Medicinal products, provided that –

- (a) such hospitality is at a reasonable level
- (b) it is subordinate to the main scientific objective of the meeting, and
- (c) it is offered only to health professionals.

(3)

Subject to paragraph (4), no person shall offer hospitality (including the payment of traveling or accommodation expense) at a meeting or event held for the promotion of relevant medicinal products unless –

- (a) such hospitality is reasonable in level,
- (b) it is subordinate to the main purpose of the meeting or event, and
- (c) the person to whom it is offered is a health professional.

(4)

Nothing in this regulation shall affect measures or trade practices relating to prices, margins or discounts, which were in existence on the 1st January 1993.

(5)

No person qualified to prescribe or supply relevant medicinal products shall solicit or accept any gift, pecuniary advantage, benefit in kind, hospitality or sponsorship prohibited by this regulation.

Extract from Controls on the Promotion of Prescription Medicines in the UK - Guidance Notes for health professionals ABPI on understanding the ABPI Code of Practice for the Pharmaceutical Industry

Controls on meetings and hospitality:

- Meetings must have a clear educational content
- Hospitality must be secondary to the purpose of the meeting and not out of proportion
- Sponsoring of social events are normally unacceptable

RESEARCH AND DEVELOPMENT

1. Exceptionally, in the case of non-commercial research and development (R&D) originated or hosted by NHS providers, commercial sponsorship may be linked to the purchase of particular products, or to supply from particular sources. This should be in accordance with the guidance at paragraph 28 of HSG(97)32. Responsibilities for meeting Patient Care Costs Associated with Research and Development in the NHS.¹ Where there is industry collaboration in such studies, companies may alternatively make a contribution towards the study's costs, rather than supply of product.
2. Any funding for research purposes should be transparent. There should be no incentive to prescribe more of any particular treatment or product other than in accordance with the peer reviewed and mutually agreed protocol for the specific research intended. When considering a research proposal, whether funded in whole or part by industry, NHS bodies will wish to consider how the continuing costs of any pharmaceutical or other treatment initiated during the research will be managed once the study has ended.
3. Separate Guidelines exist for pharmaceutical company Sponsored Safety Assessment of Market Medicines (SAMM) which remain in force.
4. Where R&D is primarily for commercial purposes, NHS providers are expected to recover the full cost from the commercial company on whose behalf it is carried out. (HSG(97) 32, paragraph 7). An industry-sponsored trial should not commence until an indemnity agreement is in place; see the guidelines in HSC(96)48 NHS Indemnity, Arrangements for Clinical Negligence Claims in the NHS . A standard form of indemnity agreement, agreed with ABPI, can be found at Annex B of that guidance.
5. The NHS should benefit from commercial exploitation of intellectual property derived from R&D that the NHS has funded, or for which it has been funded, even where the intellectual property itself is owned by people outside the NHS. NHS bodies should ensure that an agreement to this effect is included in any contracts concerning R&D. The guidelines in HSC 1998/106 Policy Framework for the Management of Intellectual Property within the NHS from R&D should be followed.

¹ Paragraph 28 of HSG(97)32 states: At present, industry frequently contributes to the costs of pharmaceuticals (and other products) which are the subject of non-commercial R&D in the NHS. Although, by definition, such items constitute Treatment Costs, the NHS will continue, under the Partnership Arrangements, to look to researchers and non-commercial research funders to secure such contributions before approaching the NHS for support.

Appendix E

ADDITIONAL GUIDANCE ON WORKING WITH PHARMACEUTICAL REPRESENTATIVES

General

1. It is recognised that in addition to providing information and assistance to health practitioners, the prime function of representatives is to encourage the use of their products.
2. Representatives who visit or engage with work for the Trust should comply with Association of the British Pharmaceutical Industry (ABPI) codes of practice and the Trust's Commercial and Hospitality Policy, code of conduct and guidance.
3. Pharmacy staff will extend cooperation to drug companies where this is in the direct interest of patient care and the strategic aims of the Trust.

Visits by representatives

4. Representatives of pharmaceutical companies should make contact through the Chief Pharmacist in the first instance.
5. Visits to medical and professional staff should only be made by appointment or after person invitation. When arranging an appointment the purpose of the visit should be explained and product information provided.
6. Individual junior doctors and nursing staff must not be contacted directly by representatives without the permission of the consultant or the unit / team manager.

Hospitality and meetings sponsored by representatives

7. Meetings must have a clear educational content.
8. Hospitality must be secondary to the purpose of the meeting and not out of proportion.
9. Material to be used should be vetted beforehand by the senior clinical staff.
10. Advise on the acceptability or hospitality or any aspect of a representative's operation may be sought from the Chief Pharmacist or Medical Director.
11. Where meetings are sponsored by external sources, that fact must be disclosed in the papers relating to the meeting and in any published proceedings.
12. Any personal gifts that are accepted in line with policy e.g. stationary, pens etc. Should not be visible in public and service user areas, but for personal use only.

New drugs and formulation of drug guidelines

13. The Medicines Management Committee require declarations of interest from clinicians submitting the request for new drugs, and the decision by the Committee is based on clinical and cost – effectiveness information.



Declaration of offers of hospitality and gifts form

Name of recipient		
Position of recipient		
Department		
Name and details of donor		
Details of item(s)		
Approximate value of item(s)		
Hospitality or gift	<input type="checkbox"/> <i>Accepted</i>	<input type="checkbox"/> <i>Declined</i>
Reason for declining (if applicable)		
Form completed by		
Date		
Line manager notified	<input type="checkbox"/> <i>Yes</i>	<input type="checkbox"/> <i>No</i>

Trust Secretary's office use only

Entered in Hospitality Register	<input type="checkbox"/> <i>Yes</i>	<input type="checkbox"/> <i>No</i>
Date		
Entered by		
Hospitality Reference Number		
Approved by Trust Secretary		
Presentation to Audit Committee		