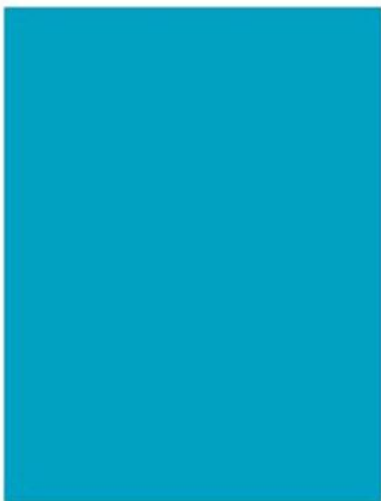


**East of England  
Clinical Senate**

**Conflicts of interest policy:  
Declaring and managing  
conflicts of interest**



**East of England Clinical Senate.**

**Conflicts of interest policy: Declaring and managing conflicts of interest**

**Purpose of document:** This document sets out the arrangements clinical senates will have in place for declaring and managing conflicts of interest of its members.

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<b>Contents</b>	<b>Page</b>
1. Introduction	4
2. Background: Nolan principles of public life	5
3. Conflict of Interest	6
4. Register of Interests: Senate council	6
5. Managing conflicts of interest: general	7
6. Declaring and managing conflicts of interest: topic groups and clinical review teams	9
7. Glossary	10
8. Managing Conflicts of interest – general	7
9. Appendix 1 – Template form for Senate council members: Council member declaration of interests	11
10. Appendix 2 – conflict of interest form	13

# DECLARING AND MANAGING CONFLICTS OF INTEREST

## 1. Introduction

*“Standards of behaviour matter. They are particularly important where public money is being spent on public services or public functions. Citizens have a right to expect that holders of public office who take decisions which affect their lives should do so with impartiality, should be truthful about what they are doing and should use public money wisely. Society can expect better outcomes when decisions are made fairly and on merit and not influenced by personal or private interests”<sup>1</sup>*

Actual or potential conflicts of interest need to be managed appropriately to protect the integrity of NHS England and the members of the Clinical senate council and assembly from any perceptions of wrong-doing.

Clinical senate must be open and transparent about the advice it provides and must demonstrate that the advice

- is in the public and patient interest;
- clearly meets the local health needs and has been considered appropriate; and
- goes beyond the scope of a single provider or organisation.

Clinical senate council members will include, among others, primary care commissioners and individuals from tertiary, secondary, community and mental health providers. Members of the clinical senate will already be subject to other codes of conduct which will include managing conflicts of interest and this policy is intended to supplement, not over-ride, any policy or code of conduct of the individual's employing organisation.

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<sup>1</sup> Standards matter: A review of best practice in promoting good behaviour in public life': *Committee on Standards in Public Life January 2013*

## 2. Background: Nolan principles of public life

Members of the East of England clinical senate should act in good faith and in the interests of clinical senate. In conducting business, members should follow the seven principles of public life (Nolan Principles)<sup>2</sup>, namely:

**Selflessness:** Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other 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 seek to 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 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

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<sup>2</sup> First Report of the Committee on Standards in Public 1995)

### 3. Conflict of interest

A conflict of interest can be defined as any situation in which a member's interests or responsibilities, professional or personal, may, or may appear, to affect the impartiality of clinical senate's advice. That conflict could be direct i.e. applies to themselves or indirect, applies to someone or something (body, organisation) known to them or with who they have a relationship.

Members of the clinical senate are intended to act independently, that is they do not represent their employing organisation or professional body, however members of the senate council and assembly may at some point find they have a conflict of interest of some description (as detailed in Appendix 2) . Where there is an actual or potential conflict of interest, senate members must comply with the arrangements in place to manage conflicts and potential conflicts of interest to ensure that decisions made by senate council and its topic groups will be taken and seen to be taken without any possibility of the influence of external or private interest.

If in doubt, the individual concerned should assume that a potential conflict of interest exists.

### 4. Register of interests: Senate council

Upon appointment all senate council members are required to make a written declaration of any personal or business interest(s) which may influence, or may be perceived to influence, their judgement. This should include, as a minimum, personal direct and indirect financial interests (including regular employment), and should normally also include such interests of close family members. Indirect financial interests arise from connections with bodies which have a direct financial interest, or from being a business partner of, or being employed by, a person with such an interest. This declaration will be on a standard template – Appendix I of this document and will be reviewed on an annual basis.

The declarations of all council members will form the **register of interests** and will be reviewed annually. The register will be a public document available for view.

Where an individual is unable to provide a declaration in writing, for example if an actual or potential conflict becomes apparent in the course of a meeting, they will make an oral declaration that will be dealt with immediately and provide a written declaration as soon as possible thereafter.

The attached template at Appendix 1 is for completion of declaration of interest and sets out the various types of interest to be considered.

## **5. Managing conflicts of interest: general**

The clinical senate manager will ensure that for every interest declared, either in writing or by oral declaration, arrangements are in place to manage the actual or potential conflict of interests to ensure the integrity of the group's decision making/ recommendation processes. The NHS England area team Medical Director and Senate Chair are responsible for overseeing management of conflicts of interest on behalf of the clinical senate.

Arrangements for the management of conflicts of interest will include the requirement to put in writing to the relevant individual arrangements for managing the conflict of interest or potential conflicts of interest, within a week of declaration. The arrangements will confirm the following:

- when an individual should withdraw from a specified activity, on a temporary or permanent basis;
- where an interest has been declared, either in writing or by oral declaration, the declarer will ensure that before participating in any activity connected with the Senate's functions, they have received confirmation of the arrangements to manage the conflict of interest or potential conflict of interest from the Senate Chair.

Where an individual member of the senate council or a topic group is aware of an interest which has not been declared, either in the register or orally, they will declare this at the start of the meeting, or has previously been declared, in relation to the scheduled or likely business of the meeting, they will bring this to the attention of the chair of the meeting, together with details of arrangements which have been confirmed for the management of the conflict of interests or potential conflict of interests.

The senate chair will then determine how this should be managed and inform the member of their decision. Where no arrangements have been confirmed, the Senate Chair may require the individual to withdraw from the meeting or part of it. The individual will then comply with these arrangements, which must be recorded in the minutes of the meeting.

Where the chair of the clinical senate council has a personal interest, previously declared or otherwise, in relation to the scheduled or likely business of the meeting, they must make a declaration and a vice chair will act as chair for the relevant part of the meeting. Where arrangements have been confirmed for the management of the conflict of interests or potential conflicts of interests in relation to the chair, the meeting must ensure these are followed. Where no arrangements have been confirmed, the vice chair may require the chair to withdraw from the meeting or part of it. Where there is no deputy chair, the members of the meeting will select one.

Any declarations of interests, and arrangements agreed in any meeting of the clinical senate council or its topic groups, will be recorded in the minutes.

Where more than 50% of the members of a meeting are required to withdraw from a meeting or part of it, owing to the arrangements agreed for the management of conflicts of interests or potential conflicts of interests, the chair (or vice chair) will determine whether or not the discussion can proceed.

In making this decision the chair will consider whether the meeting is quorate. Where the meeting is not quorate, owing to the absence of certain members, the discussion will be deferred until such time as a quorum can be convened. Where a



quorum cannot be convened from the membership of the meeting, owing to the arrangements for managing conflicts of interest or potential conflicts of interests, the chair of the meeting shall consult with the area team Medical Director on the action to be taken.

These arrangements must be recorded in the minutes of the Council and the Assembly.

Where the Chair or a majority of the senate council members are concerned that there is a persistent or serious breach of the governance or standards by a member or members, the Chair or a majority of the membership may apply to the Area Director, NHS England to have that member or members removed from the senate council and replaced by the normal means of nomination or appointment.

## **6. Declaring and managing conflicts of interest: topic groups and clinical review teams**

The above principles of declaring, registering and managing conflicts of interest will apply to topic group and clinical review team members. Individuals invited to be a member of a topic group or clinical review team will be requested to declare any interests before their appointment to the team is confirmed. It would be best practice for council senate members of the topic groups to make a separate declaration of interest so that a complete record can be held.

Where an individual declares an indirect interest this may not automatically exclude them from the team. It is recommended that in such cases, the clinical senate council chair, the chair / lead member of the topic group or review team consider the degree of interest and discuss, on a case by case basis, whether it is appropriate for the individual to be a member of the team or not . It may be beneficial to include the individual in the discussion; the senate manager is also able to offer advice.

## 8. Glossary

Declaration of interest (form)	The annual statement made by each individual senate council member of their personal and professional current situation with regard to potential conflicts of interest of the senate.
Conflict of interest form	The document that records the type of interest an individual has declared on an item of business or topic group. The form will record the action taken once the interest has been declared.
Register of interests	The single document that contains all the (annual) declarations of interest of senate council members. OR  The single document that contains all the declarations of interest made by topic group or clinical review team members relating to that single piece of work.

## APPENDIX I

### TEMPLATE FORM FOR COMPLETION BY SENATE COUNCIL MEMBERS.

#### East of England Clinical Senate: Council member declaration of interests

Senate Council members should include below full details of the interest as specified. All sections should be completed, stating “none” where appropriate – do not leave any section blank.

<b>A</b>	<b>Employment, office, trade, profession or vocation</b>	
<b>1.</b>	I am employed as <i>{the amount of income need not be disclosed}</i>  I carry on a business (i.e. am self-employed) as	
<b>2.</b>	My employer is  I am a partner in  I am a paid director of	

<b>B</b>	<b>Contracts</b>	
<b>1.</b>	I, or a company of which I am a director or partner, or in which I hold shares, have a current contract with the NHS England <i>(If yes, state the company)</i>	
<b>2.</b>	Briefly state the nature of the contract <i>{the value or detail does not need to be stated}</i>	

<b>A</b>	<b>Membership of other bodies</b>	
	<b>I am a member or trustee or hold a position of general control or management in the following bodies:</b>	
<b>1.</b>	bodies to which I have been appointed or nominated by NHS England or my Clinical Commissioning Group or my (NHS) employer as its representative	

2.	public authorities or bodies exercising functions of a public nature	
3.	companies, industrial and provident societies, charities, or bodies which have charitable purposes	
4.	bodies whose principal purposes include the influence of public opinion or policy <i>{This includes political parties}</i>	
5.	trades union or professional associations	

**This declaration of interests will be included in the Senate Register of Interests that will be publically available.**

In order to increase transparency, the information submitted on this register of interests forms will be published on the internet.

I agree that my completed declaration form can be published on the internet (*NB should I not agree to publication of this information on the internet, I understand that it is still available for viewing under a Freedom of Information (Act) request.*)

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

Print name: \_\_\_\_\_

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

This declaration will be reviewed on an annual basis.

**APPENDIX 2: Conflict of interest. This form should be completed by**

- i) a senate member when (or before) a conflict of interest on a matter of senate business arises**
- ii) topic group or clinical review team members before confirmation of their appointment to the team**

**1. Please consider the type of interest from the list below and supply details of where there is conflict in accordance with the following list**

- a) A direct pecuniary interest: where an individual may financially benefit from the consequences of a commissioning decision (for example, as a provider of services);
- b) An indirect pecuniary interest: for example, where an individual is a partner, member or shareholder in an organisation that will benefit financially from the consequences of a commissioning decision;
- c) A direct non-pecuniary interest: where an individual holds a non-remunerative or not-for profit interest in an organisation, that will benefit from the consequences of a commissioning decision (for example, where an individual is a trustee of a voluntary provider that is bidding for a contract);
- d) An indirect non-pecuniary interest: where an individual is closely related to, or in a relationship, including friendship, with an individual in categories a-f.
- e) A direct non-pecuniary benefit: where an individual may enjoy a qualitative benefit from the consequence of a commissioning decision which cannot be given a monetary value (for example, a reconfiguration of hospital services which might result in the closure of a busy clinic next door to an individual's house);
- f) An indirect non-pecuniary benefit: where an individual may enjoy a qualitative benefit from the consequence of a commissioning decision which cannot be given a monetary value but is a benefit to peers or colleagues (for example, a

recommendation which results in an increase in revenue or status to their employing organisation or results in their organisation becoming the preferred provider).

g) An indirect non-pecuniary conflict: where the evidence of the Senate may bring a member into direct or indirect conflict with their contracting or employing organisation, to the extent that it may impair the member's ability to contribute in a free, fair and impartial manner to the deliberations of the Senate Council, in accordance with the needs of patients and populations.

h) Other – please specify

Name	
Type of interest declared (if none state NONE here)	
Details of interest	
Detail of how interest considered (e.g. discussion, email, meeting)	
Action taken (e.g. remain or withdraw)	
Action taken by & date	
Date of declaration	