



Code of Conduct & Accountability Policy

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Approving Committee	CCG Executive
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The CCG is committed to an environment that promotes equality, embraces diversity and respects human rights both within our workforce and in service delivery. This document should be implemented with due regard to this commitment.

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

Version Control Sheet

Version	Date	Reviewed By	Comment
Draft v0.1	8/11/13	CCG Executive	Approved.
Draft v0.1	13/11/13	CCG Board	Reviewed at Board Development session.
Final v1.0	14/11/13		On web
Final v1.1	Dec 16	CCG AFS	Minor changes proposed. Signed off by CCG Chief Officer.

Analysis of Effect completed:	By:	Date:
<p>The intention is to have an equitably applied Code of Conduct which is transparent and is not influenced by the protected characteristics of the employee or CCG member. The Code of Conduct positively promotes standards of behaviour by stating that 'individuals must not do anything, in carrying out their CCG activities, to breach their equality duties' and that CCG members behaviours should evidence 'promoting equality and diversity in the treatment of staff, patients, their families and carers, and the community, and in the design and delivery of services for which they are responsible'.</p>		

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1. Introduction

This Code of Conduct applies to all members and individuals (temporary and permanent, full and part time and volunteers regardless of role or position and forms part of the organisation's governance arrangements) employed or engaged within activities for the NHS Bolton Clinical Commissioning Group (CCG). This excludes any external stakeholders who are engaged with the CCG as part of our patient and public engagement activities. The Code is based upon the general principles of public life and it is the responsibility of each individual to comply with the provisions of the Code.

This Code of Conduct should also be read in conjunction with the following CCG policies and national guidance:-

- Fraud, Bribery and Corruption Policy.
- Conflicts of Interest Policy (including the Gifts and Hospitality process).
- Standards of Business Conduct and Managing Conflicts of Interest in Section 8 of the CCG's Constitution.
- Code of Conduct for NHS Managers 2002
http://www.nhsemployers.org/sitecollectiondocuments/code_of_conduct_for_NHS_managers_2002.pdf
- Standards for Members of NHS Boards and CCG Governing Bodies in England 2012
<http://www.professionalstandards.org.uk/docs/psa-library/november-2012---standards-for-board-members.pdf?sfvrsn+0>
- Whistleblowing Policy.

1.1 Scope

Each individual must comply with this Code of Conduct whenever or wherever they act in an official capacity on behalf of or for the CCG. Whilst this Code does not have effect in relation to the individuals conduct other than when it is in official capacity, it is anticipated that a person's conduct will be in a manner consistent with their professional status and one which will not bring their association with the CCG or its activities into disrepute.

This Code of Conduct is designed to build on the good practice that exists within the CCG and to clarify expectations and standards to ensure a consistently high standard of practice is achieved. It also complements organisational policies and procedures within the organisation.

This policy also clarifies the expectations that staff should have a supportive and learning environment and of the CCG which will respond to issues fairly and consistently and supplements the NHS Code of Conduct for Managers (2002).

1.2 General Obligations

- Individuals must treat others with respect including patients, staff and external stakeholders.
- Individuals must make the care and safety of patients their first concern and act to protect them from risk at all times.
- Individuals must not do anything, in carrying out their CCG activities, to breach their equality duties.
- Individuals must ensure they take responsibility for their own work and show commitment as a team member.
- Individuals must not bully or harass any person as this will be subject to disciplinary action.

- Individuals must act with honesty and integrity.
- Individuals must not intimidate or attempt to intimidate any person.
- Individuals must not do anything which compromises or is likely to compromise the impartiality of those who work for, or on behalf of, their CCG.
- Individuals must not use or attempt to use their position as a member improperly to confer on or secure for themselves or any other person, an advantage or disadvantage.
- Individuals must, when using or authorising the use by others of the resources within the CCG:
 - Act in accordance with their CCG's reasonable requirements.
 - Ensure that such resources are not used improperly for political purposes (including party political purposes).
- Individuals must have regard to any applicable Government policies such as data protection, freedom of information act, making a disclosure in the public interests.
- When reaching decisions on any matter, individuals must have regard to any relevant advice provided to them by the CCG's Chief Officer or Chief Finance Officer where that officer is acting pursuant to his or her statutory duties.
- The individual must give reasons for all decisions in accordance with any statutory requirements and any reasonable additional requirements imposed by their CCG.

1.3 Making a disclosure in the public interest

The disclosure may concern:

- Relevant offences in line with the Rehabilitation of Offenders Act.
- Failure to comply with a legal obligation.
- Miscarriage of justice.
- Threats to an individual's health and safety.
- Damage to the environment.
- A deliberate attempt to cover up any of the above.

Individuals must not disclose information given to them in confidence by anyone, or information acquired by them which they believe, or ought reasonably to be aware, is of a confidential nature, except where:

- They have the consent of a person authorised to give it, or
- they are required by law to do so, or
- the disclosure is made to a third party for the purpose of obtaining professional advice provided that the third party agrees not to disclose the information to any other person and the disclosure is:
 - (a) Reasonable and in the public interest, and
 - (b) Made in good faith (which means with honest intent and without malice) and in compliance with the reasonable requirements of the CCG or
 - (c) Individuals must not prevent another person from gaining access to information to which that person is entitled by law.

2. Duties

2.1 Directors/Senior Managers

The Chief Officer will have overall responsibility for ensuring that the Staff Code of Conduct has been developed in accordance with the requirements of the Policy for the development and management of procedural documents.

All managers have a responsibility to ensure that the Code of Conduct is applied fairly and consistently and that staff are monitored in relation to factors within it.

2.2 Authors/Originator

The Board Secretary will have responsibility to ensure that the requirements of this policy are met and that the document achieves required standards for format, content, consultation and approval. The Board Secretary will answer queries in relation to the Code of Conduct and ensure that it is applied fairly and consistently. The Board Secretary will also take responsibility for reviewing this document.

2.3 Staff

All staff have a duty to read and work within the policy and to ensure that they keep themselves up to date with all procedural documentation issued by the CCG. Staff must ensure that they are aware of the location of procedural documents and how to access them.

Staff have a responsibility to bring to the attention of the document author/lead director, any part of a document that is identified to be no longer relevant or requires revision, staff should not wait until the identified review date of the document to notify of any suggested amendment.

All employees have a responsibility to ensure that they comply with the Code of Conduct as outlined in this document.

2.4 Committees/Groups

The Executive, Staff Forum and Board Secretary are responsible for the scrutiny and review of the policy to recommend that the policy is put forward for approval or to ratify the policy for use, where this is within the delegated power of the Chief Officer.

The Chief Officer must be assured that the document meets the standards outlined in this policy before they can approve it.

3. Standards

All members of NHS Clinical Commissioning Groups, Boards and Governing Bodies should understand and be committed to the practice of good governance and to the legal and regulatory frameworks in which they operate. As individuals they must understand both the extent and limitations of their personal responsibilities, such as the differences in role of executive and non-executive board members. To justify the trust that has been placed in them by patients and the public they must adhere to these standards of personal behaviour, technical competence and business practice.

3.1 Personal Behaviours

Individuals within the organisation will commit to:

- The values of the NHS Constitution in the treatment of staff, patients, their families and carers, and the community, and in the design and delivery of services for which they are responsible.
- Promoting equality and diversity in the treatment of staff, patients, their families and carers, and the community, and in the design and delivery of services for which they are responsible.

- Promoting human rights in the treatment of staff, patients, their families and carers, and the community, and in the design and delivery of services for which they are responsible.

The individual will apply the following values in their work and relationships with others:

- **Accountability:** They will take full responsibility for their work and for the work that they delegate, and for the performance of the staff and services for which they are responsible.
- **Honesty:** They will act with honesty and probity in all their actions, transactions, communications, behaviours and decision-making, including with respect to any personal, professional or financial interests that could influence their decisions as a CCG member or member of staff.
- **Openness:** They will be as open as possible about the reasoning, reasons and processes underpinning their actions, transactions, communications, behaviours and decision-making and about any conflicts of interest.
- **Respect:** They will show respect to all patients, their families and carers, and to the wider community, staff and colleagues, in their actions, transactions, communications, behaviours and decision-making.
- **Professionalism:** They will take responsibility for ensuring that they have the relevant knowledge and skills to perform as a CCG member, and that they are in a position to identify and fill any gaps in their knowledge and skills and will participate constructively in appraisal of themselves and others.
- **Integrity:** They will apply these values consistently in all their actions, transactions, communications, behaviours and decision-making, and will always raise concerns if they see harmful behaviour or misconduct by others.

3.2 Workplace Behaviour

Staff are expected to adhere to the principles enshrined in this code of conduct and to always behave in a manner which does not bring the organisation into disrepute.

Workplace behaviour that is considered to bring the organisation into disrepute includes:

- Theft.
- Fraud, bribery and/or corruption.
- Assault or violence.
- Harassment or bullying of others.
- Negligence.
- Malicious damage.
- Discriminatory acts.
- Professional misconduct.
- Gross insubordination.
- Breaches of confidentiality.
- Inappropriate behaviour as a result of drugs and/or alcohol.
- Misuse of computerised equipment including misuse of e-mail or the viewing, downloading or sending of inappropriate or offensive material from the internet.
- Causing risk of or harm to others through breaches of health and safety regulations and policies.
- Failure to disclose relevant information to the organisation regarding fitness to practice including:
 - Criminal offences outside of employment, receiving police cautions, final warnings or reprimands.

- Being subject of a fitness to practice investigation or proceedings by a licensing or regulatory body in the UK or abroad.
- Having been removed from the professional register or conditions made on registration by the fitness to practice committee or licensing or regulatory body in the UK or abroad.

The above list is not exhaustive. Whilst the list above refers to incidents within work, similar behaviour that takes place external to the workplace will be investigated if it is deemed relevant to the staff member's role within the CCG.

Staff are expected to notify their employer immediately if they are charged with a criminal offence by the police. Staff should provide details of the nature of the offence and the action taken. The CCG will make a decision on the appropriate action to be taken.

3.3 Technical Competence

For themselves and their organisation, they will seek:

- To make sound decisions individually and corporately.
- Excellence in the safety and quality of care.
- Long term financial sustainability and value for money.

The individual will do this through:

- Demonstrating the skills and competencies necessary to fulfil their role and by engaging in training and continuing professional development.
- Working collaboratively and constructively with others.
- Ensuring performance is measured and risk is evaluated and managed.
- Making effective use of evidence.
- Maintaining their focus on the safety of patients, the quality of care and patient experience.
- Understanding the health needs of the population they serve.
- Looking for the impact of decisions on services they collectively provide and those provided by others and on the people who use them.
- Seeking the expertise and views of service users, their families, carers, the community and staff.
- Communicating clearly, consistently and honestly with colleagues, staff, patients and the public.

3.4 Business practices

For themselves and their organisation, they will seek:

- To demonstrate honesty, probity and integrity in their conduct, decisions and financial and commercial relationships.
- To manage public money wisely and to seek best value in the interests of the people and community they serve.
- To be transparent in decision-making and be ready to be held publicly to account.

The individual will do this through:

- Having a clear understanding of the business and financial aspects of their organisation's work and of the business, financial and legal contexts in which it operates.

- Declaring any personal, professional or financial interests and ensuring that they do not interfere with their actions, transactions, communications, behaviours or decision-making, removing themselves from decision-making when they might be perceived to do so.
- Being open about the evidence, reasoning and reasons behind decisions about budget and resource allocation, and contract allocation in particular.
- Careful stewardship of public money, always acting with probity, honesty and restraint.
- Ensuring that the contracts and commercial relationships their organisation enters into are legal and well-founded, that they are properly monitored, that the terms of the contract are adhered to and that they fulfil their responsibilities within it.
- Building and maintaining effective partnerships with relevant stakeholders, including healthcare partners, the independent sector and patient and public representative groups.
- Ensuring that patients and their families have clear information about the choices available to them so that they can make decisions on their own behalf.
- Taking appropriate action to raise concerns if they perceive that their organisation or colleagues are engaging in any harmful behaviour or misconduct.

3.5 Acting with Integrity

All staff must act in a manner that is honest and open and ensure that they:

- Are at all times objective, impartial and act without favour.
- Use NHS resources in an appropriate and effective way, ensuring “Best Value” principles are applied.
- Understand and comply with all relevant Standing Financial Instructions (please see the CCG Constitution on the website for further information).
- Promote public and patients’ interests.
- Do not accept any gifts or consideration as an inducement or reward, in accordance with the CCG’s Gifts and Hospitality Policy, which can be found on the website for further guidance.
- Present and use information honestly, even where this reflects on personal or organisational performance.
- Bring to the attention of the CCG any act they witness, or anything they are made aware of, which is detrimental to the wellbeing of another employee or patient or to the organisation itself.
- Bring to the attention of the CCG if they have a registerable interest in accordance with the CCG’s Anti-Fraud, Bribery and Corruption and Conflicts of Interest Policies, which can be found on the website for further guidance. This includes interests wherein they receive remuneration by virtue of being employed, self-employed, the holder of an office, a director of an undertaking, a partner in a firm or undertaking a trade, profession or vocation or any other work. No employee shall knowingly directly or indirectly do business within the CCG with a relative or family member except if the facts are fully disclosed in advance and the appropriate approval given.
- Ensure that they are aware and familiar with the CCG’s Conflicts of Interest Policy found on the website. This describes staff responsibilities when they identify an actual or perceived conflict of interest between activities they are involved in outside of the CCG and the work they do as employees of the CCG.

4. Conflicts of Interest

The CCG members have ultimate responsibility for all activities undertaken by professionals on their behalf. This includes stewardship of significant public resources and the

commissioning and provision of healthcare to the community. The CCG must protect the organisation and individuals involved from any impropriety and demonstrate transparency to the public and other interested parties. The CCG has a legal obligation to act in the best interest of patients and to avoid situations where there may be a conflict of interest. Such situations may arise when an individual's personal or connected person's interests and/or loyalties conflict with those of the CCG.

A conflict of interest includes those aspects mentioned in section 8.2 of the NHS Bolton CCG's Constitution. See also guidance issued by the NHS Commissioning Board: Code of Conduct: Managing conflicts of interest where GP practices are potential providers of CCG-commissioned services which can be found at:

<http://www.england.nhs.uk/wp-content/uploads/2012/09/c-of-c-conflicts-of-interest.pdf>

which includes a template to be used when commissioning services from GP practices, including provider consortia, or organisations in which GPs have a financial interest.

Because this is such an important area, it is also covered by a separate Conflicts of Interest Policy.

5. Freedom of Information

The Freedom of Information Act 2000 gives the right to every individual to ask any public body for all the information they have on any subject they choose. Everyone can make such a request irrespective of age, nationality, or where they live.

Some information may be protected and therefore withheld, which is allowed for within the Act and the public sector organisation must inform the individual why the information is withheld.

Employees and members should ensure they know the CCG's policy for dealing with such requests and direct them in a timely manner to the appropriate manager to ensure that the CCG can meet its obligations.

6. Data Protection

The Data Protection Act 1998 controls how personal information is used by corporations, organisations and Government bodies and requires everyone who collects data to follow strict rules and to keep the information safe.

Anyone collecting personal information must:-

- Fairly and lawfully process it.
- Process it only for limited specifically stated purposes.
- Use the information in a way that is adequate, relevant and not excessive.
- Use the information accurately.
- Keep the information on file no longer than absolutely necessary.
- Process the information in accordance with your legal rights.
- Keep the information secure.
- Never transfer the information outside the UK without adequate protection.

CCG staff should ensure they know the CCG's Information Governance policies and adhere to these.

7. Gifts and Hospitality, Sponsorship and Joint Working

All members and employees should ensure that they are aware of the CCG's policies and procedures on gifts and hospitality, sponsorship and joint working arrangements and should make such declarations as are relevant in those policies and procedures. In case of doubt, the employee or member should always seek advice from the Chief Officer or the Board Secretary.

8. Duty of Candour

The CCG is committed to transparency and openness in all its dealings and all members and employees will be supported in this aim. All members and members of staff should make any disclosures they deem relevant, using the Whistleblowing Policy, if appropriate. In case of doubt, the member or employee should always seek advice from the Chief Officer or Board Secretary, or if that is not considered possible, to the Chair of the Audit Committee.

9. Breaches of the Code

Breaches of this code will be investigated fairly and consistently. When things go wrong it is right that individuals should be held to account for their actions – in particular if there is evidence of gross negligence, recklessness or criminal behaviour.

Where the failure is symptomatic of wider issues, particularly where they demonstrate institutional failures, the CCG will ensure that it takes action to learn from these and actively put into place appropriate mechanisms to address these.

10. Summary

We are confident that all staff want the CCG to be a successful organisation. This code of conduct is designed to build on the good practice that already exists, and to clarify expectations and standards to ensure we all provide the very best service at all times.

The implementation and dissemination of this policy will be through a variety of communication methods including staff briefings/newsletters/Board development sessions etc., to ensure the Board and all staff are fully aware of the Code.

11. Equality Statement

In applying this code of practice, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and promote good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation, in addition to offending background, trade union membership or any other personal characteristics.

The CCG aims to create an environment in which all staff feel equally welcome, valued and respected.

Harassment on the grounds of any of the protected characteristics contravenes the CCG Dignity at Work (Bullying and Harassment Policy). Abuse or bullying (for example, but not limited to, name calling, inappropriate use of language, derogatory jokes, unacceptable or unwanted behaviour, intrusive questions) is a serious disciplinary offence and will be dealt with under the CCG's disciplinary procedure.

Everyone needs to contribute to compliance with these requirements, for example by treating each other fairly and with respect, by embedding such values in the workplace and by challenging inappropriate behaviour and processes.

12. Monitoring and Compliance

The policy and procedure will be reviewed every 2 years by the Audit Committee in conjunction with operational managers and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

The Conflicts of Interest Committee will oversee the system on an annual basis.

13. Associated Documentation

This policy should be read in conjunction with other relevant CCG policies including:

- Anti-Fraud, Bribery and Corruption Policy.
- Conflicts of Interest Policy.
- Incident reporting processes.
- Gifts and Hospitality Policy.
- Travel and Subsistence Policy.
- Complaints Policy and Procedures.
- Dignity at Work Policy.
- Confidentiality and Data Protection Policy.
- CCG Constitution.