



*Nottingham North and East
Clinical Commissioning Group*

Standards of Business Conduct Manual

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1 Introduction to Business Conduct Manual

This manual sets out clear and robust procedures for Nottingham North and East Clinical Commissioning Group to ensure that exemplary standards of business conduct are adhered to. By reading and understanding the manual, individuals will be aware of their own responsibilities as part of a corporate body.

It is intended to

- Make staff aware of the CCG's expectations of their conduct and behaviour
- Give staff the knowledge that they need to protect themselves from situations that may draw criticism or disciplinary action
- Enable members of staff to express their concerns in an open and unthreatening way

The Code of Conduct and the Code of Accountability in the NHS sets out the following three public service values which are central to the work of the CCG:

Accountability: Everything done by those who work in the organisation must be able to withstand public and parliamentary scrutiny.

Probity: Absolute honesty and integrity should be exercised in dealing with NHS patients, assets, staff, supplies and customers.

Openness: The organisation's activities should be sufficiently public and transparent to promote confidence between the organisation and its patients, staff and the public.

Along with the values set out above it is expected that staff and members of the CCG will follow the Nolan Principles of Public Life

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

This policy is applicable to:

- Employees of the CCG
- Individuals on the CCG governing body and committees and sub committees
- GP members who are directly involved in CCG business and decision making
- Third parties acting on behalf of the CCG (including commissioning support and shared services)

The failure to comply/adhere to this policy may be investigated in line with the 'Investigating complaints and allegations against employees' policy and procedure' and may result in disciplinary action, up to and including dismissal.

2 Conflicts of Interest

2.1 Introduction

For detailed guidance on the management of conflicts of interest, please see the CCG Conflicts of Interest Policy.

Clinical commissioning groups (CCGs) manage conflicts of interest as part of their day-to-day activities. Effective handling of conflicts of interest is crucial to give confidence to patients, tax payers, and healthcare providers that CCG commissioning decisions are robust, fair and transparent and offer value for money.

Although conflicts of interest are inevitable, having processes to appropriately identify and manage them is essential to maintain the integrity of the NHS commissioning system and to protect the CCG, its Governing Body, its employees and member GP practices from allegations and perceptions of wrong-doing. Failure to manage conflicts of interest could lead to legal challenge and even criminal action in the event of fraud,

2.2 Conflict of Interest Definition

A conflict of interest is defined as:

“A set of circumstances by which a reasonable person would consider that an individual’s ability to apply judgement or act, in the context of delivering, commissioning, or assuring taxpayer funded health and care services is, or could be, impaired or influenced by another interest they hold.”

A conflict may be **actual** which means that there is a material conflict between one or more interests or **potential** which means that there is the possibility of a material conflict between one or more interests in the future.

Staff may hold interests for which they cannot see potential conflict. However, caution is always advisable because others may see it differently. It will be important to exercise judgement and to declare such interests where there is otherwise a risk of imputation of improper conduct.

Interests can arise in a number of different contexts. A material interest is one which a reasonable person would take into account when making a decision regarding the use of taxpayer’s money because the interest has relevance to that decision

Interests fall into the following categories:

Financial interests

This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:

- A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations.

- A shareholder (or similar ownership interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations.
- A management consultant for a provider. This could also include an individual being
 - in secondary employment
 - In receipt of secondary income from a provider;
 - In receipt of a grant from a provider;
 - receipt of any payments (for example honoraria, one-off payments, day allowances or travel or subsistence) from a provider;
 - In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and
 - Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider).

Non-financial professional interests

This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:

- An advocate for a particular group of patients;
- A GP with special interests e.g., in dermatology, acupuncture etc.
- A member of a particular specialist professional body (although routine GP membership of the RCGP, British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared);
- An advisor for the Care Quality Commission (CQC) or the
- National Institute for Health and Care Excellence (NICE);
- A medical researcher.

GPs and practice managers, who are members of the governing body or committees of the CCG, should declare details of their roles and responsibilities held within their GP practices

Non-financial personal interests

This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit. This could include, for example, where the individual is:

- A voluntary sector champion for a provider;
- A volunteer for a provider;
- A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation;
- Suffering from a particular condition requiring individually funded treatment;
- A member of a lobby or pressure group with an interest in health.

Indirect interests

This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above) for example:

- Spouse / partner
- Close relative e.g., parent, grandparent, child, grandchild or sibling;
- Close friend
- Business partner.

A declaration of interest for a “business partner” in a GP partnership should include all relevant collective interests of the partnership, and all interests of their fellow GP partners (which could be done by cross referring to the separate declarations made by those GP partners, rather than by repeating the same information verbatim).

Whether an interest held by another person gives rise to a conflict of interests will depend upon the nature of the relationship between that person and the individual, and the role of the individual within the CCG.

2.3 Declaring conflicts of interests

The National Health Service Act 2006 as amended by the Health and Social Care Act 2012 states that CCGs must make arrangements to ensure individuals declare any conflict or potential conflict in relation to a decision to be made by the Group as soon as they become aware of it and in any event **within 28 days**. CCGs must record the interest in the registers as soon as they become aware of it.

The Chief Officer has overall accountability for the CCG’s management of conflicts of interest.

The Director of Operations is responsible for the day to day management of conflicts of interest matters and queries including:

- Maintaining the CCG’s register(s) of interest and any other register required by statutory guidance
- Supporting the Conflicts of Interest Guardian to enable them to carry out the role effectively
- Providing advice, support and guidance on how conflicts of interest should be managed
- Ensuring that the appropriate administrative processes are put in place
- Ensuring that training is provided including examples of conflicts and situations in which a conflict might arise.

All persons referred to in section 1 must declare any interests as outlined in the definition of an interest section as soon as is reasonably practicable and by law within 28 days after the interest arises.

3 Gifts and Hospitality

For detailed guidance and templates on the management of Gifts and Hospitality, please see the CCG Gifts and Hospitality Policy.

3.1 Receipt of Gifts and Hospitality

A gift is defined as any item of cash or goods, or any service, which is provided for personal benefit, free of charge or at less than its commercial value.

3.2 Gifts from Suppliers, Contractors or other sources

Gifts from suppliers or contractors doing business (or likely to do business) with the CCG should be declined, whatever their value (subject to this, items of low intrinsic value such as low cost branded promotional aids may be accepted and not declared where they are under the value of £6).

Gifts from other sources (e.g. patients, families, service users)

- CCG staff should not ask for any gifts
- Modest gifts under a value of £50 may be accepted and do not need to be declared
- Gifts valued at over £50 should be treated with caution and only accepted on behalf of the organisation
- A common sense approach should be applied to the value of gifts
- Multiple gifts from the same source over a 12 month period should be treated in the same way as single gifts over £50 where the cumulative value exceeds £50

In cases of doubt advice must be sought from your line manager and, in no case must a gift be accepted without prior written approval of the relevant manager if the estimated value of the gift exceeds £50. If a gift which is not a 'small value item' arrives without warning, it must be handed over to the appropriate director who will decide whether the gift should be returned (or passed on to a charity or good cause) and will ensure that the donor is informed of what has happened

3.3 Cash

Under no circumstances must personal gifts of cash, even below the £25 limit be accepted.

CCG Staff, Governing Body and Committee members and GP members working on behalf of the CCG must not, under any circumstances, accept personal gifts with a significant financial value, or any benefits in kind, such as offers of holiday accommodation.

3.4 Hospitality

A blanket ban on accepting or providing hospitality is neither practical nor desirable from a business point of view. However, individuals should be able to demonstrate that the acceptance or provision of hospitality would benefit the CCG

Hospitality is the offer of meals, refreshments, travel, accommodation, and other expenses in relation to attendance at meetings, conferences, education and training events etc.

CCG staff, Governing Body and Committee members and GP members working on behalf of the CCG should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement

Caution should be exercised when hospitality is offered by actual or potential suppliers or contractors, these can be accepted if modest and reasonable, senior approval must be sought and the offer must be declared within 28 days.

Modest hospitality under the value of £25, for example, a drink and sandwich during a visit or a working lunch is reasonable and does not require recording or approval of a manager.

Where the hospitality is of a value between £25 and £75 maybe accepted and must be declared.

Where hospitality is not modest or of a value over £75, it should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on the Gifts and Hospitality Register. Where it is difficult to avoid meetings involving hospitality, for example meals taken in a restaurant, individuals might wish to consider paying for your own meal to demonstrate that no benefit was obtained from a third party.

Attendance at working lunches or workshop events where food is provided, without a charge to NNE CCG, is acceptable only where the main focus of the event is work-related and providing attendees can demonstrate that NNE CCG will obtain some value from attendance.

Offers of hospitality such as theatre tickets, sporting events, holiday accommodation or similar offers of hospitality must be politely declined; advice should be sought from the line manager or the Director of Operations.

There is an important difference between attendance at events in an official capacity and accepting hospitality at events where representation by NNE CCG is not required. Where you are invited to an event as a representative of NNE CCG and consider that NNE CCG should be represented in an official capacity, attendance is acceptable and will be agreed prior to attending with your line manager. It is very unlikely that hospitality such as sporting events, holidays or theatre shows would ever fall into this category.

3.5 Travel and Accommodation

Modest offers to pay for some or all of the travel and accommodation costs related to attendance at events may be accepted but must be declared.

Offers which go beyond modest, or are a type that the CCG do not usually offer will need approval by a senior member of staff. They should only be accepted in exceptional circumstances, and must be declared. An example would be an offer of business or first class travel or offers of foreign travel and accommodation.

3.6 Commercial Sponsorship

CCG staff, Governing Body and Committee members, and GP members working on behalf of the CCG may be offered commercial sponsorship courses, conferences, post/ project funding, meetings and publications in connection with the activities which they carry out for or on behalf of the CCG or their GP practices. All such offers (whether accepted or declined) must be declared so that they can be included on the CCG's register of interests. In cases of doubt, individuals should seek advice from their line manager where relevant and/or the Director of Operations.

Acceptance of commercial sponsorship should not in any way compromise the CCG's commissioning decisions or be dependent on the purchase or supply of goods or services.

Sponsors should not have any influence over the content of an event, meeting, seminar, publication, or training event.

The CCG should not endorse individual companies or their products. Therefore, it should be made clear that the fact of sponsorship does not constitute an endorsement by the CCG of a company's products or services. This is required to be made clear to the public and those attending the event. Where meetings are sponsored by external sources, that fact must be disclosed in the papers relating to the meeting and related publications.

No information should be supplied to a company for their commercial gain unless there is a clear benefit to the NHS. As a general rule, information which is not in the public domain should not normally be supplied. During dealings with sponsors it is important to ensure that confidentiality requirements and data protection legislation are not breached.

3.7 Payment for Speaking at Meetings/ Conferences

Should a member of staff, Governing Body and/or Committee member and GPs and individuals acting on behalf of the CCG be asked to speak at an event relating to CCG business for which payment is offered the payment should be declined or credited to the CCG.

A member of staff, Governing Body and/or Committee member and GP working on behalf of the CCG should not personally accept payment.

3.8 Declaring Gifts and Hospitality

Declarations of receipt of gifts and hospitality should be made as soon as they become aware of it, and in any event within 28 days. A draft template for declaring gifts and hospitality is included in Appendix A. The declaration form must be returned to the Director of Operations either by email from the individual making the declaration or as a signed hard copy. This will be then added to the Gifts and Hospitality Register which can be found in Appendix B.

3.9 Register of Gifts and Hospitality

NNE CCG has established a Register of Gifts and Hospitality, which is held by the Director of Operations.

This information will be recorded in the register. The following information will be included in the register:

- Recipient's name
- Current position(s) held by the individual (within the CCG)
- Date of offer and/or receipt
- Details of the gift or hospitality
- The estimated value of the gift or hospitality
- Details of the supplier/offeror (e.g. their name and the nature of their business)
- Details of previous gifts and hospitality offered or accepted by this offeror/supplier
- Action taken to mitigate against a conflict, details of any approvals given and details of the officer reviewing/approving the declaration made and date
- Whether the offer was accepted or not
- Reasons for accepting or declining the offer

If after referring to the above guidance, it is necessary for a member of staff to declare an acceptance or refusal of gifts or hospitality, a declaration form must be completed promptly. The declaration form is attached at Appendix A of this policy.

The Gifts and Hospitality Register is published in the CCGs website and as part of the CCGs Annual Report and Annual Governance Statement

The Gifts and Hospitality Register is available on the CCG Website and, upon request at the CCG headquarters.

Address:

Nottingham North and East Clinical Commissioning Group
Civic Centre
Arnot Hill Park, Arnold
Nottingham
NG5 6LU

Telephone: 0115 883 1743

www.nottinghamnortheastccg.nhs.uk

4 Confidentiality

All staff, Member Practices, Governing Body and Committee members and individuals acting on behalf of the CCG has a duty to maintain confidentiality of information at all times, and only share information with those authorised to receive it. As a public body, the CCG recognises the need for openness. However, this should not be confused with a breach of confidentiality. All employees of the CCG must be aware that a breach of confidentiality is potentially a serious disciplinary offence that could result in dismissal.

It is important that the information about staff should also be regarded as confidential and not disclosed to anyone who is not authorised to receive it, without the prior consent of the employee.

CCG employees may frequently find that, as part of their work, they have access to confidential reports and information concerning the business of the CCG and other organisations. The fact that they do have access to this information places a responsibility on them to honour the trust placed on them by the nature of their employment. In addition, 'commercial in confidence' information must not be disclosed to any unauthorised person or organisation, since its disclosure would prejudice the principle of a purchasing system based on competition.

5 Fraud, Corruption & Bribery

5.1 Introduction

For detailed information on fraud, corruption and bribery please see the CCG policy.

One of the basic principles of public sector organisations is the proper use of public funds. It is, therefore, important that all those who work in the public sector are aware of the risk of, and means of enforcing the arrangements against, fraud, corruption, bribery and other illegal acts involving dishonesty or damage to property.

The CCG requires all staff, Governing Body members and GP members to always act honestly and with integrity to safeguard the public resources they are responsible for. The CCG will not tolerate any acts of fraud, corruption or bribery perpetrated against it or involving its employees and will actively pursue all available criminal and civil actions including the recovery of any loss suffered as a result.

5.2 Statement of the Governing Body

The Governing Body is committed to the elimination of fraud, corruption and bribery by ensuring there is a strong anti-fraud, corruption and bribery culture, proactive prevention through widespread awareness and rigorously investigating any such cases, and where proven, to ensure wrong doers are appropriately dealt with, which includes taking steps to recover assets lost as a result of fraud, corruption or bribery.

Any apparent fraud, corruption, bribery or financial irregularity will be rigorously investigated and all available sanctions (including criminal prosecution, disciplinary action and reference to any relevant professional organisation) will be pursued. Cases will be referred to an accredited NHS Counter Fraud Specialist appointed by the CCG, for formal investigation wherever there is prima facie evidence of a criminal offence.

The seeking of financial redress and recovery of losses will always be considered in cases of fraud, corruption or bribery and recovery of the loss caused by the perpetrator will always be sought.

Redress allows resources that are lost to dishonest acts to be returned to the NHS for use as intended for the provision of high quality patient care and services.

All staff have a duty to protect the assets of the CCG, to comply with its policies and also to co-operate with any investigation and the Governing Body wishes to encourage anyone having suspicions of fraud, corruption or bribery to report them. All members of staff can, therefore, be confident that their reasonably held suspicions will be taken seriously.

5.3 Statutory Requirements

In accordance with its constitutional framework, the CCG is required to have adequate arrangements in place for countering fraud, corruption and bribery.

5.4 Definitions

Fraud

The Fraud Act 2006 came into force on the 15 January 2007 and introduced the general offence of fraud. This is broken into three key sections;

- Fraud by false representation
- Fraud by failing to disclose information
- Fraud by abuse of position

The Fraud Act also created new offences of;

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

Corruption/Bribery

The Bribery Act 2010 replaced the Prevention of Corruption Acts 1889-1916 and created two general offences of bribery:

- 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.

A new corporate offence was also introduced;

- 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.

5.5 Creating a strong counter fraud, corruption and bribery culture

We all have a responsibility to protect our organisation and its resources. Everyone, including the public, the CCG's staff, professionals, managers and policy makers (the honest majority), must work together to raise awareness of the CCG's zero tolerance approach to fraud, corruption and bribery, to report concerns and enforce the message to the 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, corruption, bribery and other dishonest acts. In addition, publicity surrounding counter fraud, corruption and bribery work will deter some who perpetrate or consider perpetrating related offences. The CCG will publicise successful investigation

outcomes both internally and externally as appropriate in order to aid the deterrent effect.

5.6 Proactive prevention and detection

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

All staff must be aware of and comply with the CCG Standing Financial Instructions (SFIs), the Standards of Business Conduct and the associated requirement to declare other interests.

5.7 Professional investigation of detection fraud, corruption and bribery

Criminal offences of fraud, corruption or bribery will be investigated in a professional, objective and timely manner by an accredited NHS Counter Fraud Specialist appointed by the CCG. Internal investigations may also be carried out by Human Resources (HR) staff and/or CCG managers as part of disciplinary procedures. Parallel criminal and disciplinary investigations may be undertaken in accordance with the agreed liaison protocol.

5.8 Effective sanctions

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

5.9 Seeking redress

The CCG 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 making an application to the Small Claims Court and/or recovery through debt collection agencies. Each case will be discussed with the Chief Finance Officer in order to determine the most appropriate action.

5.10 Reporting suspicions

Acting on your suspicions – Dos and Don'ts

If you suspect fraud, corruption or bribery 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. If appropriate these may be discussed or passed onto your line manager for further action or decisions.

- Report your suspicions immediately and **directly** to the CCG appointed Counter Fraud Specialist, Ian Morris, who can be contacted on 0116 2256120, or by email to ian.morris@360assurance.nhs.uk . Alternatively, concerns can be reported to the local (0116 225 6121) or national (0800 028 40 60) fraud, corruption and bribery reporting line.
- Deal with the matter promptly, if you feel your concerns are warranted – any delay may cause the CCG to suffer further financial loss.

DON'T

- Do nothing.
- Be afraid of raising your concerns – you will not suffer any recrimination from the CCG as a result of voicing a reasonably held suspicion. The CCG 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 CCG appointed NHS accredited CFS is trained in handling investigations in accordance with the NHS Protect Fraud and Corruption Manual.
- Convey your suspicions to anyone other than the CFS or Chief Finance Officer.

5.11 Training Requirements

The CFS will promote fraud, corruption and bribery awareness through the delivery of face to face presentations, the provision of eLearning modules and/or the distribution of newsletters and other materials. Should staff require any other assistance, or advice, they should contact the Counter Fraud Specialist (details above).

6 Personal conduct

6.1 Lending or borrowing

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

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

6.2 Gambling

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

6.3 Trading on official premises

Trading on official premises is prohibited, whether for personal gain or on behalf of others. Canvassing within the office by, or on behalf of, outside bodies or firms is also prohibited. Trading does not include small tea or refreshment arrangements solely for staff

6.4 Collection of money

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

6.5 Bankrupt or insolvent staff

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

6.6 Arrest or conviction

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

6.7 Outside employment and private practice

Employees of the CCG (depending on the details of their contract as regards outside employment and private practice) are required to inform the CCG if they are engaged in or wish to engage in outside employment in addition to their work with the CCG. The purpose of this is to ensure that the CCG is aware of any potential conflict of interest with their NHS employment. Examples of work which might conflict with the business of the CCG include:

- employment with another NHS body
- employment with another organisation which might be in a position to supply goods/services to the NHS
- self-employment, including private practice, in a capacity which might conflict with the work of the CCG or which might be in a position to supply goods/services to the CCG.

6.8 Political activities

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

7 References and links to other CCG documents

This manual is an overview of relevant CCG policies and an interpretation of guidance to provide an overall understanding of the standards of conduct. As such, the policies should be referred to for specific guidance. The manual should be considered in conjunction with:

CCG documents and policies	NNE CCG Constitution Raising Concerns at Work (Whistleblowing) Policy Fraud, Corruption and Bribery Policy Conflicts of Interest Policy Gifts and Hospitality Policy
National guidance	NHS England: Code of Conduct for Managing conflicts of interest NHS England: Creating responsive and accountable CCGs Department of Health: Code of conduct for NHS Managers Department of Health: Code of accountability in the NHS Department of Health: Code of practice for openness in the NHS Professional Standards Authority: Standards for members of NHS boards Business Services Authority: Standards of Business Conduct Procedure Gov.uk: Nolan Principles

8 Review

The Standards of Business Conduct Policy will be reviewed annually from the date of approval by the Governing Body.