

Board Meeting in Public

Tuesday, 22 July 2025

Title of Paper	Conflicts of Interest Policy		Agenda No.	4.1
Nature of Paper	<input checked="" type="checkbox"/> Official		<input type="checkbox"/> Official Sensitive	
Author(s)	Louise Espley, Corporate Governance Manager			
Lead Executive	Helen Gillan, Director of Quality and Governance			
Non-Executive Director Sponsor	Ian Murphy, ARGC Committee Chair			
Presenter at meeting	Silena Dominy, Company Secretary			
Presented for	<input checked="" type="checkbox"/> Approval		<input type="checkbox"/> Information*	
	<input checked="" type="checkbox"/> Assurance		<input type="checkbox"/> Update	

Executive Summary

The Conflicts of Interest Policy was approved as a Board-Level Policy in June 2024. In May 2025, a progress and assurance report was presented to the Audit, Risk and Governance Committee (ARGC) outlining the actions taken to improve compliance with the policy. At that time, the ARGC agreed that several sections of the policy would be reviewed ahead of the July ARGC. The policy has since undergone a comprehensive review, incorporating the revisions approved by ARGC in May 2025, along with additional updates informed by discussions with the Executive Team, Head of Charity and Assistant Director, Partnerships and Community Engagement. This paper presents the updated policy for Board approval, with a track-changed version provided at Appendix 1.

The policy changes were endorsed by ARGC on 4 July 2025. Additionally, an action plan is included in the report, which sets out the next phase of work to continue strengthening compliance with this policy.

The key areas of policy revision are summarised below:

- a) The Scope of the policy is confirmed as mandatory for Executive and Non-Executive Directors and staff in roles Band 8A and above, and equivalent medical staff.
- b) Confirmation that compliance reviews will be undertaken annually.
- c) Definitions of family members for which indirect interests should be declared amended to be consistent with definitions in the Companies Act 2006.
- d) General principles related to the acceptance of gifts and hospitality have been expanded to provide clarity. The role of the NHSBT Charity in relation to gifts has been defined.
- e) Values related to gifts, hospitality and event attendance have been standardised to a lower limit of £25 and the requirement for Executive Director sign off for hospitality over a value of £75 has been added.
- f) Gifts over £25 may not be accepted in a personal capacity but may be accepted by NHSBT's Charity.
- g) Paragraph 3.6 in respect of donations has been reviewed to require Chief Financial Officer or Accounting Officer approval.
- h) Paragraph 3.7 has expanded to encompass all sponsored activity.
- i) The roles and responsibilities of the Chief Executive/Accounting Officer and Executive Directors (paragraph 4.1 and 4.3) have been strengthened.

Previously Considered by	
Initial policy changes were agreed by ARGC in May 2025. This was followed by engagement with the Executive Team, Head of Charity and Assistant Director, Partnerships and Community Engagement who suggested additional policy updates. ARGC endorsed the policy amendments and action plan on 4 July 2025.	
Recommendation	The Board is asked to approve the proposed revisions to the policy. Additionally, the Board is invited to review the accompanying action plan and confirm it provides assurance.
Risk(s) identified (Link to Board Assurance Framework Risks)	
BAF P11 Corporate Governance	
Strategic Objective(s) this paper relates to: [Click on all that apply]	
<input type="checkbox"/> Collaborate with partners <input type="checkbox"/> Invest in people and culture <input type="checkbox"/> Drive innovation <input checked="" type="checkbox"/> Modernise our operations <input type="checkbox"/> Grow and diversify our donor base	
Appendices:	Appendix 1 – COI Policy (with track changes)

Conflicts of Interest Policy (Annual Policy Review and Action Plan)

Introduction:

1. The Conflicts of Interest (COI) Policy was approved as a Board-Level Policy in June 2024. This report presents the annual review of the COI Policy and includes an action plan setting out the next phase of work to continue strengthening compliance with this policy.

Background:

2. In May 2025, a progress and assurance report was presented to the Audit, Risk and Governance Committee (ARGC) outlining the actions taken to improve compliance with the policy. At that time, the ARGC agreed that several sections of the policy would be reviewed ahead of its submission to the ARGC in July 2025.
3. The comprehensive review of the policy, incorporating the revisions approved by ARGC in May 2025, along with additional updates informed by discussions with the Executive Team, Head of Charity and Assistant Director, Partnerships and Community Engagement was endorsed by the ARGC on 4 July 2025.

Policy:

4. The policy covers requirements in respect of conflicts of interests and gifts, hospitality, sponsorship and donations.
5. Public sector bodies such as the NHS, which are accountable to the public must be impartial and honest in the conduct of their business. In turn, their members of staff and Board members should undertake their duties with the highest standards of probity and remain beyond suspicion. Providing best value for taxpayers and ensuring that decisions are taken transparently and clearly, are both key principles in the NHS Constitution. As an organisation and as individuals, there is a duty to ensure that all dealings are conducted to the highest standards of integrity and that NHS monies are used wisely to ensure that finite resources are used in the best interests of patients.
6. The aim of the policy is to ensure that NHSBT has robust procedures and processes in place for the effective management of conflicts of interest and this supports an organisational culture that proactively and positively manages any conflicts. The policy also aims to protect the organisation, its decision-making and stewardship of public funds from any impropriety.

Policy revisions, endorsed by the ARGC in July 2025:

7. A track changed version of the policy is attached at appendix one. Changes to the policy are summarised below:
 - a) The Scope of the policy is confirmed as mandatory for Executive and Non-Executive Directors and staff in roles Band 8A and above, and equivalent medical staff. On the basis that these staff supervise and sign off on decisions from administrative and clinical staff in relation to entering into contracts on behalf of the organisation or purchasing goods, medicines and medical devices or equipment declarations are no longer mandatory for staff outside of these roles.
 - b) Reviews of compliance will be undertaken annually.
 - c) Consistency between the Conflicts of Interest Policy, Standing Orders (SOs) and the Scheme of Delegations has been ensured.
 - d) More detailed, proportionate, user friendly, guidance to be provided regarding approval for, and declaration of gifts and hospitality (see below).

- e) The definition of family member for which indirect interests should be declared has been amended to be consistent with definitions in the Companies Act 2006.
- f) General principles related to the acceptance of gifts and hospitality have been expanded to provide clarity.
- g) Paragraph 3.5.1 addresses gifts in relation to the NHSBT Charity.
- h) Paragraph 3.5.2, gift values reduced to £25 (from £50) to ensure consistency with hospitality values. Additionally, gifts over £25 may not be accepted in a personal capacity but may be accepted by NHSBT's Charitable Trust Fund.
- i) Paragraphs 3.5.3, 3.5.4 and 3.5.5 now require Executive Director sign off for hospitality over the value of £75 or where they are greater than those permitted in NHSBT's travel and expenses policy. Paragraph 3.5.4 now covers event attendance in addition to meals and refreshments.
- j) Paragraph 3.6 in respect of donations now requires Chief Financial Officer or Accounting Officer approval.
- k) Paragraph 3.7 updated to encompass all sponsored activity.
- l) The roles and responsibilities of the Chief Executive/Accounting Officer and Executive Directors (paragraph 4.1 and 4.3) have been strengthened.

2025/26 Action plan, endorsed by the ARGC in July 2025:

8. The action plan below is presented for assurance and will promote greater compliance with this policy.

	Action	By whom	Timeline
1	Develop a further communications plan to raise awareness of the revised COI policy.	Company Secretary	September 2025
2	Update guidance on Service now to reflect 2025 policy changes.	Company Secretary	September 2025
3	Progress consideration of fee earning/private work outside of NHSBT to Conflicts of Interest policy or contracts of employment.	People Directorate and Company Secretary	December 2025
4	Implement a system to gain assurance that annual COI declarations are made by those required to by the COI policy.	People Directorate and Company Secretary	March 2026
5	Implement a digital solution for registering/approving interests, gifts/hospitality.	Company Secretary and Digital, Data and Technology Services.	March 2026
6	Consider drafting guidance to address overseas attendance at conferences in relation to hospitality.	Company Secretary	March 2026
7	Consider what information from the gifts and hospitality register should be available in the public domain.	Company Secretary	March 2026

Recommendation:

9. The Board is asked to approve the proposed revisions to the policy. Additionally, the Board is invited to review the accompanying action plan and confirm it provides assurance.