

Improvement and Assessment Framework

Conflict of interest indicator: submission process for CCGs



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Publications Gateway Re	ference: 05787
Document Purpose	Guidance
Document Name	Improvement and assessment framework: Conflict of interest indicator: Submission process for CCGs
Author	Commissioning Policy Unit, NHS England
Publication Date	September 2016
Target Audience	CCG Accountable Officers, NHS England Directors of Commissioning Operations
Additional Circulation List	
Description	This document sets out the conflict of interest indicator and the process for completing and returning the self-certification submissions. It includes the self certification templates.
Cross Reference	Improvement and Assessment Framework and Technical Annex. The revised guidance on the management of conflicts of interest June 2016.
Superseded Docs (if applicable)	N/A
Action Required	For use by CCGs
Timing / Deadlines (if applicable)	Quarterly and annually.
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Document Status

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Improvement and Assessment Framework Conflict of interest indicator: submission process for CCGs

Version number: 1

First published: September 2016

Prepared by: Commissioning Policy Unit

Classification: OFFICIAL

The proposed collection is currently being assessed by the Burden Advice and Assessment Service (BAAS) team, as a part of the approval process.

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Introduction

- The <u>Improvement and Assessment Framework (IAF)</u> includes a conflicts of interest indicator to assess CCGs' compliance with the requirements of the revised <u>statutory guidance on managing conflicts of interest for CCGs</u>. The indicator can be found in the <u>technical annex of the IAF</u> under section 162a Probity and Governance. CCGs are required to demonstrate compliance with the conflicts of interest indicator through an annual and quarterly self-certification submission.
- 2. NHS England expects all CCGs to fully implement the revised statutory guidance on managing conflicts of interest, which was published in June 2016. Where a CCG has decided not to comply with one or more of the requirements of the guidance, they should discuss and agree this in advance with their local NHS England team. They should also include the reasons for deciding not to fully implement the guidance on a 'comply or explain' basis within the annual and quarterly self-certification statements. In such circumstances and depending upon the alternative arrangements put in place and the level of assurance this gives that conflicts of interest are being managed appropriately by the CCG, the NHS England local team will allocate a rating of compliance.

3. This document includes:

- The quarterly and annual self-certification proformas (Annex 1 and 2);
- The timescales and process for submitting the proformas;
- The process for individual CCG conflicts of interest ratings to be published on myNHS.

Part one (Annex 1)

- 4. The annual self-certification seeks confirmation that:
 - The CCG has a clear policy for the management of conflicts of interest (in line with <u>Managing conflicts of interest: revised guidance for CCGs</u>) and that the policy includes a robust process for the management of breaches.
 - The CCG has a minimum of three lay members, including the number of days per month their lay members are employed. *
 - The CCG's audit chair has taken on the role of the conflicts of interest guardian, supported by a senior CCG manager(s).
 - From April 2017/18, 100% of staff have been offered the mandatory training on conflicts of interest and a minimum of 90% of CCG staff have completed the training by 31 January each year. **

* Lay members play an important role in the management of conflicts of interest, not least as the CCG's Conflicts of Interest Guardian and Chair of the Primary Care Commissioning Committee. We know the number of lay members and the number of days they work per month varies across CCGs. We have requested confirmation of the number of days lay members work through the self-certification process to gather national intelligence on lay members' capacity.

** It is expected that all CCG employees and practice staff with involvement in CCG business complete and pass the mandatory online conflicts of interest training at the level most appropriate to their role (i.e. all CCG staff are required to complete level 1 of the online training. Those individuals with a greater likelihood of exposure to conflicts of interest will be required to complete either levels 2 and 3 depending upon the nature of their role). Guidance will be issued alongside the online training to advise which CCG roles should complete each level of training. We recognise that due to possible changes in staffing levels (as a result of staff sickness or recruitment issues for instance), it may not be possible for 100% of CCG staff to complete the training by the 31 January each year. That is why we have set the compliance rating at 90%. However our expectation is that all CCG employees should complete the training. For example, we would expect newly recruited staff to complete the training within two months of taking up their post. To ensure the training is in line with the changes to the statutory guidance on the management of conflicts of interests for CCGs, to take in to account new care models and the anticipated guidance for the wider NHS, the mandatory training will be launched in the spring of next year. The requirement for staff to complete the mandatory training will come in to effect in 2017/18.

Part two (Annex 2)

- 5. The quarterly self-certification process seeks confirmation that:
 - The CCG has processes in place to ensure individuals declare any conflict or potential conflict of interest as soon as they become aware of it, and within 28 days, ensuring accurate, up-to-date registers are complete for:
 - o conflicts of interest
 - o procurement decisions
 - o gifts and hospitality.

These registers must be made available on the CCG's website and upon request at the CCG's headquarters.

- If there have been any breaches of the CCG's policy on managing conflicts of interests, confirmation that the breaches have been:
 - o published on the CCG's website
 - o communicated to NHS England.

Self-certification submission process

- 6. The **quarterly self-certification** (annex 2) should be completed and submitted to CCGs' relevant NHS England local team within the first two weeks following the end of each quarter. The first quarterly data collection will be in quarter two 2016. CCGs should submit their first quarterly self-certification by 21 October 2016 (allowing an extra week for the first collection).
- 7. The **annual self-certification** (annex 1) should be completed within the first two weeks of April each year and submitted to CCGs' relevant NHS England local team. The first annual self-certification return will cover 2016/17 and is due to be submitted by 14 April 2017. This deadline should allow CCG employees time to complete the mandatory online training on managing conflicts of interest, which will be made available in the autumn of 2016.
- 8. The self-certification must be signed by the CCG's Accountable Officer and Audit Chair to confirm the information given in the quarterly and the annual (when applicable) self-certification is accurate.
- 9. NHS England local teams will collate their CCGs' information onto a spreadsheet (provided by the national co-commissioning team) and send it to the primary care team at their NHS England regional office. NHS England regional teams will then collate the spreadsheets for their region and email them to the national co-commissioning team at england.co-commissioning@nhs.net.

10. The table below sets out the timescales for submissions:

Action	2016			2017			
CCG submission of	21	13	14	14	13	12	13
quarterly return	Oct	Jan	Apr	Jul	Oct	Jan	Apr
CCG submission of	N/A	N/A	14	N/A	N/A	N/A	13
annual return			Apr				Apr
Regional team to	4	31	28	31	31	31	30
forward completed	Nov	Jan	Apr	Jul	Oct	Jan	Apr
spreadsheet to							
national co-							
commissioning team							
Publication of rating	Dec	Mar	Jun	Sept	Dec	Mar	Jun
on MyNHS							

Indicator ratings

- 11. Each CCG will be rated as:
 - Compliant (if 100% of the conflicts of interest indicator criteria are met or suitable alternative arrangements are in place and agreed with NHS England);

- Partially compliant (if less than 100%, but more than 0%, of the indicator criteria are met or suitable alternative arrangements are in place agreed with NHS England);
- Not compliant (if 0% of the indicator criteria are met and no suitable alternative arrangements are in place).
- 12. The national co-commissioning team will publish each CCG's rating on the MyNHS website which is available to the public. Information will be uploaded to MyNHS at the end of each quarter. Therefore, information on the conflicts of interest indicator will be published one quarter in arrears.

Further information

13. If you have any queries regarding this process, please contact your local NHS England team in the first instance or england.co-commissioning@nhs.net.

Annex 1 Conflicts of Interest indicator: Part one (annual assessment)

Name of CCG:	Date:

Conflicts of Interest Annual Assessment				
Requirements	Please complete	Additional comments (If non-compliant in any areas, please outline the reasons why, the planned actions and any support needed from NHS England)		
The CCG has a clear policy for the management of conflicts of interest (in line with the statutory guidance on managing conflicts of interest for CCGs) and the policy includes a robust process for the management of breaches.	Y/N			
The CCG has a minimum of three lay members. Please confirm the:	Y/N			
 Number of CCG lay members: 	[insert number]			
 Number of days per month all CCG lay members are employed: 	[Insert number]			
The CCG Audit Chair has taken on the role of the Conflicts of Interest Guardian, supported by a senior CCG manager(s).	Y/N			
From April 2017/18, 100% of staff have been offered the mandatory training and a minimum of 90% of CCG staff have completed the mandatory online conflicts of interest training (at the relevant level) by 31 January each year.	Y/N			

Annex 2 Conflicts of Interest indicator: Part two (quarterly assessment)

Name of CCG:	Date:
	D ato.

Conflict of Interest Assessment Summary Report			
Requirements	Please complete	Additional comments (If non-compliant in any areas, please outline the reasons why, the planned actions and any support needed from NHS England)	
The CCG has processes in place to ensure individuals declare any conflict or potential conflict of interest in relation to a decision as soon as they become aware of it, and within 28 days, ensuring accurate, up-to-date registers are complete for:			
Conflicts of interest	Y/N		
Procurement decisionsGifts and hospitality	Y/N		
	Y / N		
Registers are published on the CCG website and are available upon request at the CCG HQ for:			
Conflicts of interest	Y / N		
Procurement decisions	Y / N		
Gifts and hospitality	Y / N	-	
Have there been any breaches of the CCG's policy on conflicts of interest management? If so:	Y/N		
How many breaches?	[Insert number]	-	
 Are the details of the breach(es) on the CCG's website? 	Y/N	-	

 Have the breach(es) been communicated to NHS England? 	Y/N	
The Accountable Officer confirms the information given above (including part 1 when applicable) is accurate and the CCG has effective processes in place to manage conflicts of interest in line with the statutory guidance on managing conflicts of interest for CCGs.	Y/N	
The CCG Audit Chair confirms the information above (including part 1 when applicable) is accurate and the CCG has effective processes in place to manage conflicts of interest in line with the statutory guidance on managing conflicts of interest for CCGs.	Y/N	

Name of Accountable Officer:	
Signature:	
Date:	
Name of CCG Audit Chair:	
Signature:	
Date:	

Signed by