

# The Fit and Proper Persons Regulations Standard Operating Procedure

This procedure outlines the requirements and responsibilities for ensuring that all Executive Director and Non-Executive Director appointments are compliant with The Fit and Proper Persons Regulations both on appointment and during ongoing employment.

If you require further help in the interpretation of this document please contact the Director of Corporate Governance and Trust Secretary

If this document has been printed please note that it may not be the most up-to-date version. For current guidance please refer to the Trust Website.

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#### 1. Introduction

- 1.1. The Fit and Proper Persons Regulations (FPPR) were introduced in response to concerns raised following investigations into Mid Staffordshire NHS Foundation Trust and Winterbourne View Hospital.
- 1.2. The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 require all Trusts to ensure that "Directors of the service provider" (or anyone performing similar or equivalent functions) are individuals who meet the requirements of FPPR. These regulations were introduced in November 2014 and the fundamental standards came into force in April 2015. Further details can be found on the Care Quality Commission's (CQC) website: <a href="http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-5-fit-proper-persons-directors">http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-5-fit-proper-persons-directors</a>
- 1.3. The regulations stipulate that Trusts must not appoint or have in place Directors unless they meet the FPPR standards. While it is the Trust's duty to ensure that they have fit and proper Directors in post, the CQC has the power to take enforcement action against the Trust if it considers that the Trust has not complied with the requirements of the FPPR. This may come about if concerns are raised to the CQC about an individual or during the annual well-led review of the appropriate procedures.
- 1.4. For Torbay and South Devon NHS Foundation Trust ('the Trust'), "Directors of the Service Provider" is defined as all members of the Trust Board, that being all voting Executive Directors and Non-Executive Directors, and includes non-voting members of the Board i.e. Associate Directors and Associate Non-Executive Directors, if and when appointed.
- 1.5. This procedure outlines the application of FPPR for all Directors of the Service Provider as outlined in section 1.4, including interim appointments.

#### 2. Purpose

- 2.1. The purpose of this procedure is to ensure the Trust complies with 'The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Regulation 5: Fit and Proper Persons: Directors'. As noted above, further details are provided in the CQC Guidance for NHS Bodies: Fit and Proper Persons: Directors, November 2014 and can be found on their website: <a href="http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-5-fit-proper-persons-directors">http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-5-fit-proper-persons-directors</a>
- 2.2. Practical suggestions for how Trusts can ensure their policies and procedures comply with FPPR, as well as meet the expectations of the CQC's regulatory approach, are provided by NHS Providers in the document 'Fit and Proper Persons Regulations in the NHS: What do providers need to know?', February 2018. This document also highlights what Trusts should take into account when considering whether to undertake an investigation into FPPR concerns raised about a Director, and what they should be mindful of at each stage of the process. Further details can be found on the NHS Providers website.
- 2.3. The purpose of this procedure is to enable the Trust to operate in line with the prevailing guidance set out above.

#### 3. Definitions

- 3.1. **CQC** -Care Quality Commission
- 3.2. **FPPR** The Fit and Proper Persons Regulations
- 3.3. **NEDs** Non-Executive Directors

#### 4. Duties within the Organisation

- 4.1. **Chair –** The Chair is the Responsible Officer for discharging the FPPR requirement placed on the Trust, to ensure that all relevant post holders meet the fitness test and that they do not meet any of the 'unfit' criteria set out in the FPPR. For new appointees, the Chair will be presented with information setting out the individual's compliance with the FPPR requirements.
  - 4.1.1. Should the Trust wish to proceed with the recruitment of a Director to the Board before all of the FPPR checks have been completed, or in circumstances where an individual does not meet the FPPR, the Chair must take responsibility for this decision which must be documented in writing and the reasons reported to the Board.
- 4.2. Voting Board Directors and regular Board attendees who are direct reports to the Chief Executive To comply with the Trust's FPPR procedure in order to ensure that the annual requirement for each individual's FPPR assurance is delivered.
- 4.3. **Director of Corporate Governance** To act as the main point of contact in relation to the FPPR process and to provide regular FPPR documentation updates, for administering by the Corporate Governance Manager , and to oversee the administration of the FPPR process from start to finish for those to whom the FPPR applies.
- 4.4. **Associate Director of People (Resourcing Hub) –** To support the Trust Director of Corporate Governance with the compliance checks for FPPR, including a check of the FPPR paper and electronic files at least annually, and whenever a new appointment is made.
- 4.5. **Corporate Governance Manager** To coordinate the annual FPPR declaration process and ensure that all documentation is received and recorded (See Appendix 2). To receive updated FPPR documentation for Directors of the Board and to oversee the administration of their Fit and Proper Person files, ensuring that files are in good working order.
- 4.6. The Trust will take steps to ensure the continued compliance with FPPR of the Chair and NEDs by undertaking annual checks.

#### 5. Meeting the FPPR Requirements

- 5.1. The Trust will make every reasonable effort to assure itself about existing post holders, including interim appointments and new applicants and to make information about the compliance of Directors of the Board available to the CQC on request. The following is a summary of the FPPR requirements:
  - Are of good character
  - Hold the required qualifications and have the competence, skills and experience required for the relevant office for which they're employed
  - Are able, by reason of their physical and mental health, after any required reasonable adjustments if required, of properly performing their work.
  - Can supply relevant information as required by Schedule 3 of the Act, i.e. documentation to support the FPPR.
  - Have not been responsible for or privy to, contributed to, or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying on regulated activity (or providing a service elsewhere which if provided in England would be a regulated activity).
  - Are prohibited from holding the office in question under other laws such as the Companies Act or Charities Act.
  - As the Trust is an apolitical organisation, to meet the FPPR requirements an individual cannot be a serving Member of Parliament (MP) or Member of the European Parliament (MEP) or a candidate for election as MP or MEP.
  - In addition, individuals cannot be a Chair or Member of the Governing Body of a Clinical Commissioning Group (CCG) or employee of such a group.
  - In the case of Non-Executive Directors only, NEDs cannot be an employee of the Trust.

#### 5.2. In accordance with Schedule 4, Part 1, of the Act a person is deemed 'unfit' if:

- The person is an undischarged bankrupt or whose estate has had sequestration awarded in respect of it and who has not been discharged.
- The person is the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland.
- The person is a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986.
- The person has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it.

- The person is included in the barred list for children and/or adults, maintained under Section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland (an enhanced Disclosure and Barring Service test will be undertaken).
- The person is prohibited from holding the relevant office or position, or in the case of an individual from carrying on the regulated activity, by or under any enactment.

## 5.3. In accordance with Schedule 4, Part 2, of the Act a person will fail the 'good character' test if they have been:

- Convicted in the United Kingdom of any offence or been convicted elsewhere of any offence which, if committed in any part of the United Kingdom would constitute an offence.
- Erased, removed or struck off a register of professionals maintained by a regulator of health care or social work professionals.

#### 5.4. The table below sets out how the Trust makes these compliance checks:

FPPR Requirement	Check	Regularity
	References	On appointment
The individual is of good character.	Social media check	On appointment, annually and with ongoing internet alerts
The individual is of good character.	Interview	At recruitment stage
	DBS if applicable and in line with the DBS guide lines Professional Standards	On appointment and annually thereafter
The individual has the	Authority Form – Appendix 4	At regruitment stage
The individual has the	Application	At recruitment stage
qualifications, competence, skills	Interview	At recruitment stage
and experience which are	References	On appointment
necessary for the relevant office or	Qualifications	On appointment
position or the work for which they are employed.	Professional registration	On appointment and annually thereafter
The individual is able by reason of their health, after reasonable adjustments are made, of properly performing tasks which are intrinsic to the office or position for which they are appointed or to the work for which they are employed.	Occupational Health Assessment	On appointment
The individual has not been	Verifile check	On appointment and annually thereafter
responsible for, been privy to, contributed to or facilitated any	References	On appointment
serious misconduct or	DBS	
mismanagement (whether unlawful or not) in the course of carrying on a regulated activity or providing a service elsewhere which, if provided	Search of registers: Companies House Disqualified Directors Insolvency Registers	On appointment and annually thereafter

in England, would be a regulated	Removed Trustees	
activity.	Director Code of Conduct	
	Self Declaration – Appendix	
	5	
	FPPR Self-Declaration Form	
	– Appendix 6	
	Professional Standards	
None of the grounds of unfitness	Authority Form – Appendix 4	
specified in Part 1 of Schedule 4	Director Code of Conduct	On appointment and
apply to the individual.	Self Declaration – Appendix	annually thereafter
	5	annually increated
	FPPR Self-Declaration Form	
	<ul><li>Appendix 6</li></ul>	

- 5.5. Directors of the Board will not be able to commence in post unless the FPPR requirements have been met. However, there may be exceptional circumstances where, in the interests of the efficient running of the organisation and/or to ensure that the requirements of our licence are fulfilled, an Executive Director or NED may start work before all components of the FPPR have been met. The Chair is the Responsible Officer for making an informed decision regarding the course of action to be followed and will confirm their authorisation for the Executive Director or NED to start prior to the FPPR being met. This has to be documented in writing and the reasons reported to the Board.
- 5.6. Please note that commencement of an appointment is subject to the expectation of the appointee successfully meeting the FPPR requirements. If they do not meet the requirements then their appointment may be terminated with immediate effect.

#### 6. FPPR at the Recruitment Stage and Ongoing Basis

- 6.1. Appendix 1 sets out the Trust's requirements for 'Complying with FPPR at the recruitment stage'. Human Resources (HR) is the lead department for conducting and completing the FPPR checks as part of the recruitment process. Once completed, the information should be sent to the Office of the CEO and Chair for storage and ongoing FPPR checks
- 6.2. Appendix 2 sets out the Trust's requirements for 'Complying with FPPR on an ongoing basis'. The Trust Director of Corporate Governance, with the support of the Associate Director of People and the Corporate Governance Manager, is the lead for conducting and completing the FPPR checks on an ongoing basis.
- 6.3. The NHS Employment Check standards apply to applications for NHS positions, including permanent staff, staff on fixed-term contracts, volunteers, students, trainees, contractors, highly mobile staff, temporary workers (including locum doctors), those working on a Trust bank, and other workers supplied by an agency. The checks are intended to provide assurances that staff working in the NHS are appropriately registered, qualified, experienced and do not pose a risk to patients. NHS organisations are required to show evidence of their compliance with these standards as part of the CQC's regulatory framework. These checks will be conducted for all new Directors of the Board, including interim positions.
- 6.4. The NHS Employment Check standards are on the NHS Employers website and checks will be taken out in line with these. Currently the NHS Employment checks are as set out below though they change from time to time:

- Identity Checks reducing the risk of employing illegal workers and impersonators
- Right to Work in the UK Check
- Professional Registration (where appropriate) and Qualification Checks
- Criminal Record and Barring Checks reducing the risk of employing criminals
- Employment History and Reference Checks reducing the risk of employing staff with unsuitable or unsatisfactory employment records
- Work Health Assessments reducing the risk of employing staff that are not correctly immunised or not fit for work (pending reasonable adjustments).
- 6.5. In addition to the NHS and NHSI pre-employment checks, the following checks will be conducted for all new Directors of the Board, including interim positions:
  - Search of insolvency and bankruptcy register
  - Search of disqualified directors register
  - The Director completes a self-declaration of interests form and a FPPR self-declaration form
  - An appropriate media, social media and news search is conducted.
- 6.6. The process for assurance includes a check of personal files to ensure there is a complete employment history and, where there are any gaps or omissions, the post holder will be asked to provide a written explanation for this. Where the Trust has no record of mandatory qualifications or mandatory professional registration, the individual will be asked to produce the original for inspection and verification. Where documentation against FPPR checks is not available due to historical timescales, the Trust will make every effort to obtain relevant, alternative records where appropriate. "Historical" is defined as instances where documentation is not available, whether due to having been mislaid or not having been requested at the appropriate time; instances, for example, where interview panel paperwork has been mislaid or where reference checks were stored electronically and subsequently mislaid due to staff changes. Alternative documentation may include. for example, requesting a letter of endorsement where a reference check has been mislaid and contacting the awarding institution for proof of qualification where original certificates of qualification have been mislaid.
- 6.7. If any issues arise as a result of the FPPR process, an interview may be conducted by the Chair or their nominated Deputy. Further documentary evidence may be required to support this process and should be provided on request.
- 6.8. An FPPR self-declaration form and all associated documentation regarding FPPR will be retained on the individual's personal file.
- 6.9. The Chair will be notified of specific issues of non–compliance with the FPPR and is the Responsible Officer for making an informed decision regarding the course of action to be followed.

#### 7. FPPR Monitoring and Review

- 7.1. The Board of Directors is required to review, check and agree the outcome of the annual FPPR assessment of continued fitness and to record in the minutes of the meeting that due process has been followed. FPPR annual assurance will be formally addressed by the Board of Directors in the Quarter 4 meeting.
- 7.2. Assessment of all Directors' continued fitness is to be undertaken each year as part of their appraisal process and overseen by the Trust Director of Corporate Governance.
- 7.3. Appendix 9 and Appendix 10 set out the FPPR Assurance Trackers which will be used to provide assurance to the Board that the "Directors of the Service Provider" remain Fit and Proper people. This will be done at least annually, and whenever there is a change to the Board of Directors.
- 7.4. A FPPR process and review of all Director FPPR files will be undertaken at Quarter 4 each year.

#### 8. References

Care Quality Commission, (January 2018). Regulation 5: Fit and proper persons: directors, Guidance for providers and CQC inspectors.

Care Quality Commission, Regulation 5: Fit and proper persons: directors.

NHS Employment Standards.

NHS Providers, (February 2018). Fit and proper persons regulations in the NHS: what do providers need to know?



## **Complying with FPPR at the Recruitment Stage**

Assurance process	Evidence	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Recruitment check	<ul> <li>Process</li> <li>Job description</li> <li>Person specification</li> <li>Application and/or CV and covering letter</li> <li>Qualitative assessment and values-based questions, including copy of interview panel's questions and answers</li> <li>Contract of Employment</li> </ul>	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))  Information is formally held on the individual's 'Fit and Proper Persons' file and should be sent to the Office of the CEO and Chair.	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>
Pre-employment check	References  - Post November 2014: 3 references required, one of which must be the most recent employer	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>

## **Appendix 1 Complying with FPPR at the Recruitment Stage** (page 2 of 6)

Assurance process	Evidence	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Pre-employment check	Proof of identity and right to work in UK  - Proof of identity: - certified copy of photo ID and proof of address in accordance with NHS Employment Check Standards issued by NHS Employers  - Right to work in UK: passport and/or birth certificate	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>
Pre-employment check	Proof of qualifications  - Certified copy of certificates related to requirements included within the job description and qualifications verified	HR Team (Recruitment Manager with supervision from Associate Director of People(Resourcing Hub))	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>
Pre-employment check	Professional registration and qualification check  - Certified copy of original registration and check of relevant professional regulator's register	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>

## **Appendix 1 Complying with FPPR at the Recruitment Stage** (page 3 of 6)

Assurance process	Evidence	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Pre-employment check	Occupational Health Assessment  - Occupational health clearance and fit letter	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>
Pre-employment check	Disclosure and Barring Scheme (DBS) check (where appropriate to the role)   - DBS issue number recorded on file and check certificate where appropriate	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>
Pre-employment check	Search of registers e.g. disqualified Directors, bankruptcy and insolvency	Director of Corporate Governance	As above	Paper copy held on individual's 'Fit and Proper Persons' file
Pre-employment check	Google and news searches  - Internet search results	Director of Corporate Governance in liaison with Recruitment Agency (if used)	As above	Paper copy held on individual's 'Fit and Proper Persons' file

## **Appendix 1 Complying with FPPR at the recruitment stage** (page 4 of 6)

Assurance process	Evidence	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
On appointment check	Completed Declaration Forms  - Declaration of Interests Form  - Professional Standards Authority Form  - x2 Director Code of Conduct Forms (one for file and one to be retained by the individual)  - Fit and Proper Person Self-Declaration	HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	Held electronically by HR Team     Paper copy held on individual's     'Fit and Proper Persons' file     Paper copy held on individual's     'Fit and Proper Persons' file
On Appointment Check	Other  - Equalities Monitoring Form  - Secondary Employment Form (Executive Directors Only)	Trust Director of Corporate Governance	As above	<ul> <li>Held electronically by HR Team</li> <li>Paper copy held on individual's 'Fit and Proper Persons' file Paper copy held on individual's 'Fit and Proper Persons' file</li> </ul>

#### **Appendix 1 Complying with FPPR at the Recruitment Stage** (page 5 of 6)

#### Other considerations

- Where the Trust engages an interim appointment at a level equivalent to Director level posts, the same process will apply whether they are employed or registered as an external worker. Where an interim is sourced by an agency, the recruitment agency will be made aware of the FPPR process and must confirm that they have undertaken the employment history and reference checks. External search companies will provide relevant evidence to the Trust to be retained on file. This information should be collected by Human Resources and the complete records forwarded to the Director of Corporate Governance c/o Office of the CEO and Chair.
- Where a Trust deems the individual suitable despite not meeting the characteristics outlined in Schedule 4, Part 2 of the regulations, the reasons should be recorded and information about the decision should be made available to those who need to be aware, compliance check as follows:

Assurance process	Evidence	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Recruitment Check	Record that due process was followed for Freedom of Information Act purposes  - Report and debate at the nomination committee(s)  - Report to the Board  - Decisions and reasons for decisions recorded in minutes  - External advice sought as necessary	Trust Director of Corporate Governance	Information is formally held on the individual's 'Fit and Proper Persons' file and should be sent to the Office of the CEO and Chair.	Paper copy held on individual's 'Fit and Proper Persons' file

#### **Appendix 1 Complying with FPPR at the Recruitment Stage** (page 6 of 6)

• Where a Trust deems an individual can be appointed to a role based on their qualifications, skills and experience with the expectation that they will develop specific competence to undertake the role within a specified timeframe, the Chair must provide formal approval and written documentation in advance of the appointment. Compliance check as follows:

Assurance process	Evidence	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Recruitment Check	Appropriate records held detailing the decision and outcome  Discussions and records by the nominations committee(s)  Discussion and decision at Board  Minutes of Board  Notes of appraisal and follow-up as part of continuing review	Trust Director of Corporate Governance in liaison with the Chair.	Information is formally held on the individual's 'Fit and Proper Persons' file and should be sent to the Office of the CEO and Chair.	Paper copy held on individual's 'Fit and Proper Persons' file



## **Complying with FPPR on an Ongoing Basis**

Assurance process	Evidence and frequency of check*	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Assessment of continued fitness	Proof of identity  - Certified copy of photo ID and proof of address, in accordance with NHS Employment Check Standards issued by NHS Employers  *Annual requirement as part of the appraisal process	Trust Director of Corporate Governance	Information is formally held on the individual's 'Fit and Proper Persons' file and should be sent to the Office of the CEO and Chair.	Paper copy held on individual's 'Fit and Proper Persons' file
Assessment of continued fitness	Professional registration and qualification check  - Check of relevant professional regulator's register  *Annual requirement as part of the appraisal process	Trust Director of Corporate Governance	As above	Paper copy held on individual's 'Fit and Proper Persons' file

## Appendix 2 Complying with FPPR on an Ongoing Basis (page 2 of 4)

Assurance process	Evidence and frequency of check*	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Assessment of continued fitness	Search of registers e.g. disqualified Directors, bankruptcy and insolvency  *Annual requirement as part of the appraisal process	Trust Director of Corporate Governance	As above	Paper copy held on individual's 'Fit and Proper Persons' file
Assessment of continued fitness	Disclosure and Barring Scheme (DBS) check (where appropriate to the role)  - DBS issue number recorded on file and check certificate where appropriate  *Annual requirement as part of the appraisal process	Trust Director of Corporate Governance in liaison with HR Team (Recruitment Manager with supervision from Associate Director of People (Resourcing Hub))	As above	Paper copy held on individual's 'Fit and Proper Persons' file

## Appendix 2 Complying with FPPR on an Ongoing Basis (page 3 of 4)

Assurance process	Evidence and frequency of check*	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Assessment of continued fitness	Google and news searches  - Internet search results  *Annual requirement as part of the appraisal process	Trust Director of Corporate Governance in liaison with the Communications Department (Communications Lead)	As above	Paper copy held on individual's 'Fit and Proper Persons' file
Assessment of continued fitness	Completed Declaration Forms  - Declaration of Interests Form  - Professional Standards Authority Form  - x2 Director Code of Conduct Forms (one for file and one to be retained by the individual)  - Fit and Proper Persons Self-Declaration  *Annual requirement completed in Quarter 4	Trust Director of Corporate Governance	As above	Paper copy held on individual's 'Fit and Proper Persons' file

## **Appendix 2 Complying with FPPR on an Ongoing Basis** (page 4 of 4)

Assurance process	Evidence and frequency of check*	Responsibility for obtaining information	Responsibility for storing information	Where will information be stored
Assessment of continued fitness	Other  - Record of Appraisal  - Record of Supervisions  *Annual requirement for appraisal  - Secondary Employment Form (Executive Directors Only)  * annual requirement completed in Quarter 4	Trust Director of Corporate Governance	As above	Paper copy held on individual's 'Fit and Proper Persons' file



Declaration of Interests Form – Board Directors					
Full name:					
Position within Torbay and South Devon NHS Foundation Trust					
Detail of inte	Detail of interests held (complete all that are applicable):				
Type of interest* see reverse of form	Description of Interest (including for indirect interest details of the relationship with person who has the interest; include company details, regis office address, company num etc.) and position held	the stered	from a	est relates and to im-yy	Actions to be taken to mitigate risk
Alternatively if you have no interests to declare, please state this below:  ☐ I do not have any interests to declare					

The information submitted will be held by the Trust for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998 (General Data Protection Regulations). Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and, in the case of 'decision making staff' (as defined in the statutory guidance on managing conflicts of interest for Trust) may be published in registers that the Trust holds.

Decision making staff should be aware that the information provided in this form will be added to the Trust's registers which are held in hardcopy for inspection by the public and published on the Trust's website. Decision making staff must make any third party whose personal data they are providing in this form aware that the personal data will held in hardcopy for inspection by the public and published on the Trust's website and must inform the third party that this information is held in line with the Trust's privacy policy.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to the Trust in writing as soon as practicable and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, or internal disciplinary action may result.

Signed:	Dated:

**Appendix 3 Declaration of Interests Form** (page 2 of 2)

Type of	Description
Interest Financial Interests	<ul> <li>This is where an individual may get direct financial benefits from the consequences of a Trust decision. This could, for example, include being:</li> <li>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. This includes involvement with a potential provider of a new care model;</li> <li>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;</li> <li>A management consultant for a provider; or</li> <li>A provider of clinical private practice.</li> <li>This could also include an individual being:</li> <li>In employment outside the Trust;</li> <li>In receipt of secondary income;</li> <li>In receipt of any payments (for example honoraria, one-off payments, day allowances or travel or subsistence) from a provider;</li> <li>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</li> <li>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).</li> </ul>
Non-Financial Professional Interests	<ul> <li>This is where an individual may obtain a non-financial professional benefit from the consequences of a decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:</li> <li>An advocate for a particular group of patients;</li> <li>Someone with special interests e.g., in a particular clinical field;</li> <li>An active member of a particular specialist professional body (although routine of a Royal College, British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared);</li> <li>An adviser for the Care Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE);</li> <li>Engaged in a research role;</li> <li>The development and holding of patents and other intellectual property rights which allow staff to protect something that they create, preventing unauthorised use of products or the copying of protected ideas.</li> </ul>
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;  • 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, treatment for which it is provided by or commissioned through the Trust;  • A member of a lobby or pressure group with an interest in health and care.
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 Trust decision (as those categories are described above) for example, a:  Spouse / partner;  Close family member or relative e.g., parent, grandparent, child, grandchild or sibling;  Close friend or associate; or  Business partner.

 $Please\ return\ this\ form\ to\ The\ Director\ of\ Corporate\ Governance\ c/o\ Office\ of\ the\ CEO\ and\ Chair.$ 



## Professional Standards Authority - Standards for Members of NHS Boards and Clinical Commissioning Group Governing Bodies in England – and Nolan Principles

Name:	
Position within Torbay and South Devon NHS Foundation Trust:	

#### Personal behaviour

1. As a director of the Board, I commit to:

The values of the NHS Constitution Promoting equality
Promoting human rights

In the treatment of patients and service users, their families and carers, the community, colleagues and staff, and in the design and delivery of services for which I am responsible.

#### 2. I will apply the following values in my work and relationships with others:

- a. **Responsibility**: I will be fully accountable for my work and the decisions that I make, for the work and decisions of the Board, including delegated responsibilities, and for the staff and services for which I am responsible
- b. **Honesty**: I will act with honesty in all my actions, transactions, communications, behaviours and decision-making, and will resolve any conflicts arising from personal, professional or financial interests that could influence or be thought to influence my decisions as a Board member
- c. **Openness**: I will be open about the reasoning, reasons, and processes underpinning my actions, transactions, communications, behaviours, and decision-making and about any conflicts of interest
- d. **Respect**: I will treat patients and service users, their families and carers, the community, colleagues and staff with dignity and respect at all times
- e. **Professionalism**: I will take responsibility for ensuring that I have the relevant knowledge and skills to perform as a Board member and that I reflect on and identify any gaps in my knowledge and skills, and will participate constructively in appraisal of myself and others. I will adhere to any professional or other codes by which I am bound
- f. **Leadership**: I will lead by example in upholding and promoting these Standards, and use them to create a culture in which their values can be adopted by all
- g. **Integrity**: I will act consistently and fairly by applying these values in all my actions, transactions, communications, behaviours, and decision-making, and always raise concerns if I see harmful behaviour or misconduct by others.

#### **Appendix 4 Professional Standards Authority Form** (page 2 of 4)

I will also uphold the Seven Principles of Public Life (the Nolan Principles), which are:

- 1. **Selflessness:** Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.
- 2. **Integrity:** Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.
- 3. **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.
- 4. **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.
- 5. **Openness:** Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.
- 6. **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.
- 7. **Leadership:** Holders of public office should promote and support these principles by leadership and example.

#### **Technical Competence**

3. As a director of the Board, for myself, my organisation, and the NHS, I will seek:

Excellence in clinical care, patient safety, patient experience, and the accessibility of services

To make sound decisions individually and collectively Long term financial stability and the best value for the benefit of patients, service users, and the community.

#### 4. I will do this by:

- Always putting the safety of patients and service users, the quality of care, and patient experience first, and enabling colleagues to do the same
- Demonstrating the skills, competencies, and judgement necessary to fulfil my role, and engaging in training, learning, and continuing professional development
- Having a clear understanding of the business and financial aspects of my organisation's work and of the business, financial, and legal contexts in which it operates

#### **Appendix 4 Professional Standards Authority Form** (page 3 of 4)

- Making the best use of my expertise and that of my colleagues while working within the limits
  of my competence and knowledge
- Understanding my role and powers, the legal, regulatory, and accountability frameworks and guidance within which I operate, and the boundaries between the executive and the nonexecutive
- Working collaboratively and constructively with others, contributing to discussions, challenging decisions, and raising concerns effectively
- Publicly upholding all decisions taken by the Board under due process for as long as I am a member of the Board
- Thinking strategically and developmentally
- Confidently and competently using data and other forms of intelligence, including patient complaints and feedback, to improve the quality of care
- Understanding the health needs of the population I serve
- Reflecting on personal, Board, and organisational performance, and on how my behaviour affects those around me; and supporting colleagues to do the same
- Looking for the impact of decisions on the services we and others provide, on the people who use them, and on staff
- Listening to patients and service users, their families and carers, the community, colleagues, and staff, and making sure people are involved in decisions that affect them
- Communicating clearly, consistently and honestly with patients and service users, their families and carers, the community, colleagues, and staff, and ensuring that messages have been understood

#### **Business Practices**

5. As a director, for myself and my organisation, I will seek:

To ensure my organisation is fit to serve its patients and service users, and the community To be fair, transparent, measured, and thorough in decision-making and in the management of public money

To be ready to be held publicly to account for my organisation's decisions and for its use of public money.

#### 6. I will do this by:

- Declaring any personal, professional, or financial interests and ensuring that they do not
  interfere with my actions, transactions, communications, behaviours, or decision-making, and
  removing myself from decision-making when they might be perceived to do so
- Taking responsibility for ensuring that any harmful behaviour, misconduct, or systems
  weaknesses are addressed and learnt from, and taking action to raise any such concerns that
  I identify

#### **Appendix 4 Professional Standards Authority Form** (page 4 of 4)

- Ensuring that effective incident reporting, disclosure, complaints, and whistleblowing procedures are in place and in use
- Condemning any practices that could inhibit or prohibit the reporting of concerns by members of the public, staff, or Board members about standards of care or conduct
- Ensuring that staff provide high quality care in a listening, supportive, learning environment
- Ensuring that patients and service users and their families have clear and accessible information about the choices available to them so that they can make their own decisions
- Respecting patients' rights to consent, privacy and confidentiality, and access to information, while enabling the legitimate sharing of information between care teams and professionals for the purposes of a patient's direct care
- Being open about the evidence, reasoning, and reasons behind decisions about budget, resource, and contract allocation
- Seeking assurance that my organisation's financial, operational, and risk management frameworks are sound, effective, and properly used, and that the values in these Standards are put into action in the design and delivery of services
- Ensuring that my organisation's contractual and commercial relationships are honest, legal, regularly monitored, and compliant with best practice in the management of public money
- Working in partnership and co-operating with local and national bodies to support the delivery of safe, high quality care
- Ensuring that my organisation's dealings are made public, unless there is a justifiable and properly documented reason for not doing

To justify the trust placed in me by patients, service users, and the public, I will abide by these Standards at all times when at the service of the NHS.

I understand that care, compassion and respect for others are central to quality in healthcare; and that the purpose of the NHS is to improve the health and well-being of patients and service users, supporting them to keep mentally and physically well, to get better when they are ill and, when they cannot fully recover, to stay as well as they can to the end of their lives.

I understand and am committed to the practice of good governance and to the legal and regulatory frameworks in which they operate. I also understand the extent and limitations of my personal responsibilities.

Signed:	Dated:

Please return this form to The Director of Corporate Governance c/o Office of the CEO and Chair.



#### **Director Code of Conduct**

#### Introduction

High standards of corporate and personal conduct are an essential component of public services. As an NHS Foundation Trust, Torbay and South Devon NHS Foundation Trust ('the Trust') is required to comply with the principles of best practice applicable to corporate governance in the NHS/health sector and with any relevant code of practice. The purpose of this Code is to provide clear guidance on the standards of conduct and behaviour expected of all Directors (in addition to the standard for employees set out in the Trust's standards of business conduct.

This Code, with the NHS Constitution, the Trust's Standing Orders, Scheme of Delegation, Standing Financial Instructions and Standards for Business Conduct, form a framework designed to promote the highest possible standards of conduct and behaviour within the Trust. It applies at all times when Directors are carrying out the business of the Trust or representing the Trust. The Board of Directors is collectively responsible for the exercise of its powers and the performance. The Code informs and governs the decisions and conduct of all Directors.

#### **General Principles**

Trust Boards of Directors have a duty to conduct business with probity, to respond to staff, patients and suppliers impartially, to achieve value for money from the public funds with which they are entrusted and to demonstrate high ethical standards of personal conduct.

The general duty of the Board of Directors and of each Director individually is to act with a view to promoting the success of the organisation so as to maximise the benefits for the members of the local community and for the wider public. The Board of Directors therefore undertakes to set an example in the conduct of its business and to promote the highest corporate standards of conduct:

- To act in the best interests of the Trust and those it serves and actively support the development and implementation of the Trust's vision and aims.
- To participate fully in the work of the Board of Directors, attending meetings on a regular basis and engaging in other Board activity, such as development and stakeholder engagement.
- To recognise the unitary nature of the Board which takes collective responsibility for the performance and decisions of the Trust and supports and assists the Accounting Officer in his/her duty to answer to regulators, commissioners, public, patients and stakeholders.
- To recognise the differing roles of the Chair, Chief Executive, Executive Directors and Non-Executive Directors.
- To raise concerns and provide appropriate challenge regarding the running of the Trust or a proposed action where appropriate, taking advice if needed.
- To adhere to good practice in the conduct of meetings and respecting the views of others.
- To accept responsibility for performance, effectiveness, learning and development of the whole Board and as an individual Director of the Board.

#### **Confidentiality and Access to Information**

Directors must comply with the Trust's confidentiality policies and procedures and Directors must not disclose any confidential information, except in specified lawful circumstances. Information on decisions made by the Board of Directors and information supporting those decisions should be made available in a way that is understandable. Positive responses should be given to reasonable requests for information and in accordance with the Freedom of Information Act 2000 and other applicable legislation; no-one should be prevented from gaining access to information to which they are legally entitled.

#### **Appendix 5 Director Code of Conduct Form (page 2 of 3)**

The Trust has adopted policies and procedures to protect confidentiality of personal information and to ensure compliance with the Data Protection Act (and General Data Protection Regulations), the Freedom of Information Act and other relevant legislation which will be followed at all times by the Board of Directors and all those who work for the Trust.

#### **Register of Interests and Conflicts of Interest**

Directors are required to register all relevant interests on the Trust's register of interests and it is the responsibility of each Director to update their register entry when their interests change. Failure to register a relevant interest in a timely manner will constitute a breach of this Code.

Directors have a statutory duty to avoid a situation in which they have (or can have) a direct or indirect interest that conflicts (or possibly may conflict) with the interests of the Trust. Directors have a further statutory duty not to accept a benefit from a third party by reason of being a Director or for doing (or not doing) anything in that capacity. Interests can be financial, non-financial, professional, personal, direct or indirect.

The Chair will advise Directors in respect of any conflicts of interest that arise during meetings of the Board of Directors, including whether the interest is such that the Director should withdraw from the meeting for the period of the discussion. In the event of disagreement, it is for the Board of Directors to decide whether a Director must withdraw from the meeting. The Trust Director of Corporate Governance will provide advice on any conflicts that arise between meetings.

#### Gifts and Hospitality

The Board of Directors will set an example in the use of public funds and the need for good value in incurring public expenditure which must comply with the Trust's Standards for Business Conduct and the Bribery Act. The use of Trust funds for hospitality and entertainment, including hospitality at conferences or seminars, will be carefully considered. All expenditure on these items should be capable of justification as reasonable in the light of the general practice in the public sector. The Board of Directors is conscious of the fact that expenditure on hospitality or entertainment is the responsibility of management and is open to be challenged by the internal and external auditors and that ill-considered actions can damage the reputation of the Trust in the eyes of the community.

#### Freedom to Speak Up (Whistle-blowing)

The Board of Directors acknowledges that staff must have a proper and widely publicised procedure for voicing complaints or concerns about maladministration, malpractice, breaches of this code and other concerns of an ethical nature. The Board of Directors has adopted a policy on raising matters of concern which will be followed at all times.

#### **Personal Conduct**

Directors are expected to conduct themselves in a manner that reflects positively on the Trust and not in a way that could reasonably be regarded as bringing their office or the Trust into disrepute. Directors should also remember that the Trust is an apolitical organisation. Directors are expected:

- To uphold the Trust's values and operate with honesty, integrity and probity.
- To accept responsibility for their own actions.
- To value and respect others, treating them with fairly and with dignity and to discrimination.
- To operate within the Trust's policy framework and within the codes and standards expected of Directors of an NHS Board.
- Not to use their position for personal advantage or seek to gain preferential treatment; nor seek improperly to confer an advantage or disadvantage on any other person.
- Not to make, permit or knowingly allow to be made, any untrue or misleading statement(s) about the Trust, its work, or the Board of Directors.

#### **Appendix 5 Director Code of Conduct Form** (page 3 of 3)

To remain a Fit and Proper Person as defined by Regulation 5 of the Care Quality Committee (see separate declaration).

#### **DECLARATION**

I confirm that I have read and understood this Code of Conduct.

With my signature below, I declare that I will abide by its provisions and immediately bring to the attention of the Trust any matter which renders me unable to make or maintain this declaration.

I understand that I must make this declaration on appointment and annually.

Name:	Designation:	
Signature:	Date:	

Please return this form to The Director of Corporate Governance c/o Office of the CEO and Chair.



#### THE FIT AND PROPER PERSONS - SELF-DECLARATION FORM

- 1. Board roles in the NHS are positions of significant public responsibility and it is important that those appointed can maintain the confidence of the public, patients and NHS staff. The Trust has a duty to ensure that those who serve on the Board are of good character, will ensure an open and honest culture across all levels of the organisation. The "Fit and Proper Person" requirements are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- 2. By signing the declaration below, you are confirming that you are a "fit and proper person" outlined at (2), that you do not fall within any of the categories outlined at (4) or (5) below and that you are not aware of any pending proceedings or matters which may call such a declaration into question in the future.
- 3. The regulations require that you are:
  - (a) of good character;
  - (b) have the necessary qualifications, competence, skills and experience, and
  - (c) are able by reason of your health, after reasonable adjustments are made, of properly performing tasks which are intrinsic to the office or position.
- 4. Do any of the following conditions apply to you? Please confirm that you are not:
  - (a) a person who has been convicted in the United Kingdom of any offence or been convicted elsewhere of any offence which, if committed in any part of the United Kingdom, would constitute an offence;
  - (b) a person who has been erased, removed or struck off a register of professionals maintained by a regulator of health care or social work professionals;
  - (c) an undischarged bankrupt, or a person whose estate has had a sequestration awarded in respect of it and who has not been discharged;
  - (d) the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland;
  - (e) a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986(40);
  - (f) a person who has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it;
  - (g) included in the children's barred list or the adults' barred list maintained under section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland;
  - (h) a person who has been responsible for, privy to, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying on a regulated activity, or discharging any functions relating to any office or employment with a service provider.

#### **Appendix 6 FPPR Self-Declaration Form** (page 2 of 2)

- 5. In addition, the following conditions **disqualify** you from appointment as a **Chair or Non-Executive Director** of an NHS Trust. However for all those who serve on the Board, even those who serve in an Executive capacity, we ask you to confirm that you are not:
  - (a) an employee of the NHS Trust with the vacancy; Non-Executive Directors only
  - (b) a Chair or member of the Governing Body of a Clinical Commissioning Group, or employees of such group;
  - (c) a serving MP nor MEP or a candidate for election as MP or MEP;
  - (d) a person who has been dismissed (except by redundancy) by any NHS body;
  - (e) a person whose earlier appointment as Chair or Non-Executive Director of an NHS trust was terminated;
  - (f) under a disqualification order under the Company Directors Disqualification Act 1986, and / or
  - (g) a person who has been removed from trusteeship of a charity.

#### **DECLARATION**

	NON-EXECUTIVE MEMBERS OF THE BOARD:
	I confirm that I do not fit within any of the categories listed at sections 4 or 5 and that there are no other grounds under which would make me ineligible. I undertake to notify the Trust immediately of any change of circumstances that may affect my eligibility to remain in post.
	EXECUTIVE MEMBERS OF THE BOARD:
	I confirm that I do not fit within any of the categories listed at sections 4 or 5 (with the exception of 5a) and that there are no other grounds under which would make me ineligible. I undertake to notify the Trust immediately of any change of circumstances that may affect my eligibility to remain in post.
	I wish to declare the following information which may be relevant to my eligibility for this role:
SIGNA	ATURE:
NAME	<b>:</b>
DESIG	NATION:
DATE:	

Please return this form to The Director of Corporate Governance c/o Office of the CEO and Chair.



## **Equalities Monitoring Form**

Name			
Date completed			
Age	☐ Under 21 ☐ 21-30 ☐ 31-40 ☐ 41-50 ☐ 51-60 ☐ 61-64 ☐ 65 and over ☐ I do not wish to disclose this		
Gender	☐ Male ☐ Female ☐ Transgender (Male) ☐ Transgender (Female) ☐ I do not wish to disclose this		
Marital status	Are you married or in a same sex civil partnership?  ☐ Yes ☐ No ☐ I do not wish to disclose this		
Race relations (Amendr	nent) Act 2000		
I would describe my et	nnic origin as:		
Black or Black British ☐ Caribbean ☐ Somali African ☐ Other African ☐ Any other Black back	kground	Mixed  ☐ White & Asian  ☐ White & Black African  ☐ White & Black Caribbean  ☐ Any other mixed background  Please specify:  White ☐ British ☐ Irish ☐ Any other White background  Please specify:  ☐ I do not wish to disclose this	
Disability			
Do you consider yourself to have a disability?		☐ Yes ☐ No ☐ I do not wish to disclose this	
Please state the type of ir case you may indicate r impairment:	npairment that applies to you. People may expendence than one. If none of the categories app	erience more than one type of impairment, in which oly, please mark 'Other' and specify the type of	

☐ Physical Impairment ☐ Sensory Impairment ☐ Mental Health Condition	<ul> <li>□ Learning Disability/Difficulty</li> <li>□ Long-standing illness</li> <li>□ Other</li> <li>Please specify:</li> </ul>
☐ I do not wish to disclose this	Please specify:

## **Appendix 7 Equalities Monitoring Form** (page 2 of 2)

Please select the option which best describes your sexuality			
□ Lesbian/Gay woman □ Gay man □ Bisexual	☐ Heterosexual/Straight ☐ I do not wish to disclose this		
Please indicate you religion or belief			
☐ Atheism ☐ Buddhism ☐ Christianity ☐ Hinduism ☐ Islam	☐ Jainism ☐ Judaism ☐ Sikhism ☐ Other Please specify:		
☐ I do not wish to disclose this			
Do you provide care on a substantial and regular basis, for a family member or friend who needs care/ help/ support because of sickness, frailty or disability? ☐ Yes ☐ No ☐ I do not wish to disclose this			

Please return this form to The Director of Corporate Governance c/o Office of the CEO and Chair.



**Contact No:** 

**Contact No:** 

Grade:

### **Secondary Employment Form – Executive Directors**

Torbay and South Devon NHS Foundation Trust employees must complete this form if they undertake any paid or unpaid work in addition to their Contract of Employment with the Trust. Further information can be found in the Working Time Regulations and Standards of Business Conduct policies. Executive Directors should update this form **annually** and submit it to their line manager for review and discussion.

**Personal Information:** 

Line Manager:

**Declaration** 

Position and hours worked:

Name:

I confirm that I do/do not* have any secondary employment	to declare (* delete as appropriate)
If you do not have any secondary employment to declare still employee signature).	sign and date the form below (under
Please provide full details of your proposed/actual sec	ondary/additional employment:
Name of Employer:	
Line Manager:	Contact No:
Have you already started this job? Yes / No*	
If so when did you start this job? (please give date)	
Is this paid or unpaid secondary employment? Paid	/ Unpaid*
Nature of Work (Brief description of duties and responsible	pilities)
<b>Proposed/actual working days/hours</b> (include details of shift work pattern)	f actual days/hours worked or details of

#### **Appendix 8 Secondary Employment Form – Executive Directors** (page 2 of 3)

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Have you any reason to believe that there will be employment could conflict with your work at the performance, attendance or where the organisation are in receipt of a Trust on call allowance you are whilst on call.	ne Trust? for ex n has financial/d	ample in terms o other interests in	of time, the Trust. If you
Please circle as appropriate	YES	NO	N/A
If yes, please give details below:			

I state that the above information is correct and that secondary employment in this instance will not have a detrimental effect on my work at the Trust. I will inform my Line Manager with immediate effect if there are any changes to the above. I understand that in line with the European Working Time Directive, Torbay and South Devon NHS Foundation Trust's Working Time Regulation Policy and Standards of Business Conduct Policies I must not:

- Exceed 48 hours/week in a 17 week period;
- Ensure that I have 11 hour rest periods between shifts when working for both organisations; and
- Do not undertake any secondary employment whilst on sickness absence from the Trust without written permission.

I understand that false information given with regard to this Policy could be treated as Gross Misconduct or fraudulent and dealt with accordingly under the Disciplinary/Counter Fraud Policy.

Employee's signature	
Signed:	Dated:
Name	

#### **Appendix 8 Secondary Employment Form – Executive Directors** (page 3 of 3)

#### Manager's response

I have reviewed the information provided in respect of the employee's secondary employment request.

I have / have not\* advised the employee that their proposed secondary employment conflicts with (\* delete as appropriate)

- The interests of the Trust:
- The performance of normal duties within the Trust,; and
- The requirements of the Working Time Regulations.

and that their pursuance of said secondary employment may lead to disciplinary action.

State reason for conflict	
Manager's signature:	
Signed	_ Dated
Print Name	

Please return this form to: The Director of Corporate Governance c/o Office of the CEO and Chair.

## **Appendix 9 – FPPR Assurance Tracker Recruitment Stage**

		Contract of Employment	Job Description / Person Specification / Role Profile	Application Form	Interview Panel Questions & Answers	References	Right to Work in UK	Proof of Qualifications	Professional Registration	Occupational Health Questionnaire	Occupational Health Fit Letter
SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										
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SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										
SURNAME	FORENAME										

**Non-Executive Director** 

**Executive Director** 

## **Appendix 9 FPPR Assurance Tracker – Recruitment Stage** (page 2 of 2)

		DBS – Standard or enhanced check	Identity documentation received & Certified	DBS certificate number (entered on completion)	Search of Registers & Financial Check	Google and News Searches	Declaration of interests form	Professional Standards Declaration form	Director Code of Conduct Form	Fit and Proper Persons Self- declaration Form	Equalities Monitoring Form	Secondary Employment Form
SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
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SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
SURNAME	FORENAME											
				Non-Execu	itivo Direct	O.F.			Executive	Director		

## Appendix 10 – FPPR Assurance Tracker – Ongoing Basis

		Professional Registration	Occupational Health Questionnaire	Occupational Health Fit Letter	DBS – Standard or Enhanced Check	Identity documents certified and passed to HR for processing DBS	DBS Certificate Number (Entered on completion)	Search of Registers & Financial Check	Google and News Searches
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
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SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
				Non-Executi	ve Director			Executive Dire	ector

## **Appendix 10 FPPR Assurance Tracker – Ongoing Basis** (page 2 of 2)

		Declaration of Interests	Professional Standards Declaration form	Director Code of Conduct Form	Fit and proper persons Self- Declaration Form	Equalities Monitoring Form	Secondary Employment Form	Appraisal	Record of supervision
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								
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SURNAME	FORENAME								
SURNAME	FORENAME								
SURNAME	FORENAME								

Non-Executive Director	Executive Director
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