NHS
Scarborough and Ryedale
Clinical Commissioning Group

POLICY AND GUIDANCE FOR JOINT WORKING AND COMMERCIAL SPONSORSHIP WITH THE PHARMACEUTICAL INDUSTRY

Guidelines on Contacts between CCG Members and Staff and Pharmaceutical Company Representatives

(the principles of which also apply to other private companies)

January 2014

Authorship:	**CSU Legal & Governance Lead/CSU Head of Medicines Management**
Committee Approved:	**Governing Body**
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Equality Impact Assessment	**Completed - Screening**
Sustainability Impact Assessment	**Completed**
Target Audience:	**CCG Members and Staff**
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The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by	Approved Date	Date on Intranet
1		Approved version of Policy	SRCCG Governing Body	29/01/14	04/02/14

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1 INTRODUCTION

DH Guidance encourages NHS organisations and their staff to consider opportunities for joint working with the pharmaceutical industry and for commercial sponsorship, where the benefits that this could bring to patient care and the difference it can make to their health and well-being are clearly advantageous.

This policy must be read in conjunction with the CCG's Policies on Business Conduct (including Gifts and Hospitality) and Conflicts of Interest and nothing in this policy should be taken to override the requirements of those other two policies.

The principles, advice and procedures detailed in this policy should also be followed for any joint working arrangements and sponsorship opportunities with the private sector in general.

2 ENGAGEMENT

The CSU Legal and Governance Lead, in liaison with the CSU Medicines Management Lead, produced the initial draft policy which was then circulated to Governing Body members and offices prior to approval by the Governing Body.

3 IMPACT ANALYSES

3.1 Equality

As a result of performing the analysis, the policy does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage. The supporting paperwork is attached at Appendix D.

3.2 Sustainability

As a result of performing the analysis, the policy does not have any effects in terms of sustainability. The support paperwork is attached at Appendix E.

3.3 Anti-Fraud, Bribery & Corruption

The Bribery Act 2010 is particularly relevant to this policy. Under the Bribery Act it is a criminal offence to:

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.

These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.
It is therefore, extremely important that staff adhere to this and other related policies and documentation (as detailed on the CCG's intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

If fraud is suspected, first refer to Local Anti-Fraud, Bribery & Corruption Policy. To raise any suspicions of fraud and/or corruption please contact the Local Counter Fraud Specialist (LCFS) 01904 725145.

The LCFS will inform the Chief Finance Officer if the suspicion seems well founded and will conduct a thorough investigation. Concerns may also be discussed with the Chief Finance Officer or the Audit Committee Chair.

If staff prefer, they may call the NHS Fraud & Corruption Reporting Line on 0800 028 40 60 between 8am-6pm Monday-Friday or report online at www.reportnhsfraud.nhs.uk. This would be the suggested contact if there is a concern that the LCFS or the Chief Finance Officer themselves may be implicated in suspected fraud, bribery or corruption.

4 SCOPE

This document is intended as policy for Scarborough and Ryedale CCG and its staff who are involved in joint working and commercial sponsorship with the pharmaceutical industry, as well as to provide guidance and instructions for the wider relationship with the industry. For the purposes of this policy, the term 'staff' refers to all employees and contractors who are engaged to undertake duties on behalf of the Scarborough and Ryedale CCG as well as members of the CCG and its committees.

It is important that all parties recognise that operating outside of this policy and guidance could give rise to allegations of improper conduct on the part of either the individual CCG member/staff member concerned or the pharmaceutical company.

5 POLICY PURPOSE & AIMS

The aim of this policy is to:

- Assist Scarborough and Ryedale CCG achieve its objectives and delivery of national and local priorities by building effective and appropriate working relationships with the pharmaceutical industry.

- Inform and advise staff of their main responsibilities when entering into joint working arrangements and commercial sponsorship with the pharmaceutical industry. Specifically, it aims to:

    - Assist NHS employers and staff in maintaining appropriate ethical standards in the conduct of NHS business.
    - Highlight that NHS staff are accountable for achieving the best possible health care within the resources available.

- Avoid situations where approaches from representatives of the pharmaceutical industry could amount to inducements or bribes.

6 DEFINITIONS

For the purpose of this policy, joint working is defined as situations where, for the benefit of patients, organisations pool skills, experience and/or resources for the joint development and implementation of patient centred projects and share a commitment to successful delivery.

Joint working agreements and management arrangements are conducted in an open and transparent manner. Joint working differs from sponsorship, where pharmaceutical companies simply provide funds for a specific event or work programme.

Sponsorship is the term commonly used for financial or other support given by business or members of the public, to support the activities and aims of a third party.

For the purpose of this guidance, sponsorship is defined as funding to the NHS from an external source including:

- Funding of all or part of the costs of a member of staff
- NHS research
- Staff
- Training
- Equipment
- Meetings
- Costs associated with meetings
- Gifts
- Hospitality including the provision of meals
- Hotel and Transport costs (including trips abroad)
- Provision of free services (speakers)
- Provision of free or discounted products
- Provision of free stationery bearing commercial advertising

7 ROLES / RESPONSIBILITIES / DUTIES

7.1 Meetings of the Governing Body

The CCG holds meetings of the Governing Body in public and indeed is required to do so both by statute and by reference to the Constitution. They are often attended by representatives of pharmaceutical companies.

Those representatives attend meetings in their capacity as members of the public and have no special privileges when they do so. They should receive no greater or lesser opportunity to participate in the meeting or engage with individual members of the Governing Body than would any other member of the public.

GP members of the Governing Body may be approached by representatives who seek to engage with them for the purpose of promoting their particular products or canvassing support for products or projects.

It is recommended in the strongest possible terms that GPs politely but firmly decline to engage with pharmaceutical representatives in these circumstances. Governing Body members who choose to disregard this recommendation should be aware that they may place themselves in breach of this policy or even commit one of the criminal offences described below.

7.2 Policy Statement, Standards and Values

In line with the NHS Code of Conduct three public service values underpin the work of the NHS:

- accountability – everything done by those who work in the NHS must be able to stand the test of parliamentary scrutiny, public judgements of propriety and professional codes of conduct as well, potentially, as judicial scrutiny in the courts;

- probity – there should be an absolute standard of honesty in dealing with the assets of the NHS. Integrity should be the hallmark of all personal conduct in decisions affecting patients, staff and suppliers, and in the use of information acquired in the course of NHS duties; and
- openness – there should be sufficient transparency about NHS activities to promote confidence between the organisation and its staff, patients and the public

Where staff enter into any joint working with the pharmaceutical industry, their conduct should also adhere to the following values:

- Transparency and trust
- Appropriateness of projects
- Patient focused
- Value for money
- Reasonable contact
- Responsibility
- Impartiality and honesty
- Truthfulness and fairness.

Staff are reminded that at all times they have a responsibility to comply with their own professional codes of conduct, and that representatives of the pharmaceutical industry must comply with the ABPI Code of Practice for the Pharmaceutical Industry.

Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure'.

7.3 Principles

Joint working must be for the benefit of patients or of the NHS and preserve patient care. Any joint working between the NHS and the pharmaceutical industry should be conducted in an open and transparent manner. Arrangements should be of mutual benefit, the principal beneficiary being the patient. The length of the arrangement, the potential implications for patients and the NHS, together with the perceived benefits for all parties, should be clearly outlined before entering into any joint working.

The following principles will also apply to joint working:

- Staff should be aware of NHS guidance, the legal position and appropriate and relevant professional codes of conduct as described in extant NHS guidance.
- Contract negotiations will be conducted in line with NHS values.
- Confidentiality of information received in the course of duty must be respected and never used outside the scope of the specific project. Joint working arrangements should take place at a corporate, rather than an individual, level.
- Clinical and financial outcomes will be assessed through a process of risk assessment.
- A mutually agreed and effective exit strategy will be in place at the outset of any joint working arrangement, detailing the responsibilities of each party and capable of dealing with a situation where premature termination may become necessary.

7.4 Conflicts of Interest, Payments and Hospitality

NHS Staff are required to declare and record financial or personal interests (e.g. company shares, research grant, consultancies) in any organisation with which they have to deal, and be prepared to withdraw from those dealings if required, thereby ensuring that their professional judgement is not influenced by such considerations. Nor should they misuse their official position or information acquired in the course of their official duties to further the private interests of themselves or others.

Staff and Governing Body members are reminded of the requirement to acquaint themselves with the CCG policy on the acceptance of gifts and other benefits in kind. This policy follows the guidance contained in the Department of Health circular HSG (93) 5 'Standards of Business Conduct for NHS Staff' and is also deemed to be an integral part of Standing Orders and Prime Financial Policies. The CCG's rules on business conduct and the management of conflicts of interest are included in the Constitution which is available on the intranet.

Staff and independent contractors working in Scarborough and Ryedale CCG should follow existing Professional codes of conduct and the Standards of Business Conduct for NHS Staff. All Staff are also expected to:

- Refuse gifts, benefits, hospitality or sponsorship which might reasonably be seen to compromise their personal judgement or integrity;
- Declare and register gifts, hospitality, benefits, or sponsorship within 20 working days of the offer being made (provided that they are worth over £20) if accepted. Gifts and hospitality up to £20 in value may be accepted and not declared. Benefits arising from work for other organisations eg lecturing etc undertaken in normal working hours can be accepted if the value is under £20 but must be declared.
- In addition gifts should be declared if several small gifts worth a total of over £100 are received from the same or closely related source in a 12 month period.

8 IMPLEMENTATION

8.1 Procedure

Before entering into joint working arrangements or agreeing to commercial sponsorship staff must:

- Satisfy themselves, with reference to information available that there are no potential irregularities that may affect the company's ability to meet the conditions of the agreement or impact on it in any way eg. checking financial standing by referring to company accounts.
- Assess the costs and benefits of alternative options where applicable and to ensure that the decision- making process is transparent and defensible.
- Ensure that legal and ethical restrictions on the disclosure of confidential patient information, or data derived from such information, are complied with. Additionally, disclosure for research purposes should not take place without the approval of the appropriate research committees.
- Determine how clinical and financial outcomes will be monitored.
- Ensure that the sponsorship agreement has provision to enable the agreement to be terminated if it becomes clear that it is not providing expected VFM/ Clinical Outcomes.

The following general guidelines seek to put the relationship between the pharmaceutical industry and CCG staff on a sound and professional footing:

- Staff will extend co-operation to pharmaceutical and other companies where this is in direct interest of patient care.
- Company representatives will be seen by the most appropriate member of staff by appointment. The purpose of the visit should be stated in advance. A request for a meeting by a representative does not create an obligation to see that person and may be politely declined.
- All Pharmaceutical Industry activity should comply with the ABPI Code of Practice published most recently in 2012 or any future revision thereof.
- Medical representatives should be well informed about the products which they are reporting. They should be able to provide information on what is being promoted, the basis of promotion, the specific place the product is expected to have in therapy and technical and clinical data.
- Pharmaceutical companies planning to undertake clinical trials of a drug may seek the co-operation of the CCG (for example by identifying the appropriate patient cohort). The member of staff will require a copy of the trial protocol and has a responsibility to ensure appropriate support for the trial, patient safety, patient confidentiality and compliance with the law. It will normally be appropriate to seek specialist advice to ensure these requirements are met.
- For reasons of security, representatives must wear an identification badge while on the premises.
- No attempts should be made to seek information of a confidential nature from any member of staff (e.g. relating to a competitor's price).
- The CCG has a strict "No Sample Policy" and members of staff should not accept any drug samples other than with the express approval, in writing, of the Chief Officer.

Complete the Quality Standards checklist for confidential commercial partnerships and attach it to the application form (Appendices A & B).

Submit the application form for approval but **do not enter into any agreement until specific approval has been given.**

8.2 Approval of Joint Working Arrangements

Approval of the Chief Finance Officer will be required if there are financial implications. However, larger more complex initiatives will require Governing Body approval in accordance with the scheme of delegation. A decision to seek the approval of the Governing Body is for the Chief Finance Officer or the Chief Officer.

8.3 Approval of Commercial Sponsorship

The following arrangements for approval of commercial sponsorship are to be followed.

Scenario	To be approved by:
Joint working arrangements where there are significant financial implications	Governing Body
Joint working arrangements where there are minor or no financial implications	Chief Finance Officer
Commercial sponsorship greater than £200 per sponsor	Governing Body
Commercial sponsorship less than £200 per sponsor	Chief Finance Officer

The documents that must be submitted are the Application Form, the Quality Standards check list and any other supporting documentation that will support the case.

8.4 Value Added Tax for Commercial Sponsorship

Sponsorship is the term commonly used for financial or other support given by business or members of the public, to support the activities and aims of a third party.

If sponsors receive benefits directly linked to the event then the support must be subject to VAT, i.e the correct proportion of the monies received must be accounted for to HMRC. If the sponsor gives the money without requiring anything in return then the monies can be regarded as a donation. If it is thought that this would be the case, further advice should be sought from the Chief Finance Officer.

Unless advice has been given to the contrary it must be assumed that the sponsorship is subject to VAT and in order to account for this correctly, an invoice should be sent to the sponsor showing the amount of the sponsorship and then adding VAT. All invoices must be raised on SBS by the Finance Department and this can be arranged by contacting your Finance Manager.

8.5 Confidentiality and Data Protection

It is the policy of the CCG that all processing of personal data by, or on behalf of the CCG, will be in accordance with the requirements, as currently understood, of:-

- The Data Protection Act 1998 and any subsequent amendments or sub-ordinate legislation together with any relevant Directions from the DH or other government department.

- The Data Protection Registration of Scarborough and Ryedale CCG currently operative.

- Work within requirements set out in Scarborough and Ryedale CCG's Information Governance Policy.

Staff need to be aware that pharmaceutical companies will often seek to impose very wide ranging confidentiality agreements in their dealings with the NHS. Legal advice has been obtained which suggests that such agreements will often be contrary to public policy in that they seek to limit the application of the Freedom of Information Act and are contrary to both the statutory Code of Practice issued by the Lord Chancellor on the FOIA as well as the Information Commissioners Guidance to Public Authorities on confidentiality. Specialist advice should be sought in these circumstances.

9 TRAINING & AWARENESS

Following approval by the Governing Body, the policy will be placed on the CCG's website and everyone in the CCG will be made aware of how to access it via the team briefing process.

Any queries on the content of the policy can be raised with the CSU Legal & Governance Lead or the CSU Head of Medicines Management or the CCG's Head of Programme Management & Integrated Governance.

10 MONITORING & AUDIT

All offers of, or requests for sponsorship/collaborative projects, (including full or part funding – specialist posts, events, training, visits etc) must be considered by the Chief Finance Officer before any arrangement is entered into (see Application Form at Appendix A).

The Audit and Governance Committee will oversee the operation of this policy. If the Chief Finance Officer has any concerns with regard to an application, this will be discussed with the Chair of the Audit Committee.

A register of joint working/sponsorship will be maintained by Head of Integrated Governance and Programme Management. The contents of the register will be reported to the Audit and Governance Committee on a quarterly basis.

11 POLICY REVIEW

This policy will be reviewed in 2 years. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation/guidance, as instructed by the senior manager responsible for this policy.

12 REFERENCES

- Standards of Business Conduct for NHS Staff HSG (93) 5
- DH Best Practice Guidance for Joint Working between the NHS and the Pharmaceutical Industry, February 2008 Department of Health, 2008.
- Best practice guidance for joint working between the NHS and the pharmaceutical industry ABPI 2006 (Gateway Reference 8926)
- Code of Practice for the Pharmaceutical Industry Department of Health, 2004
- Code of Conduct: Code of Accountability in the NHS. 2nd Ed

13 ASSOCIATED DOCUMENTATION

See Appendix C

Appendices

A Application Form
B Quality Standards Checklist
C Extract from the Human Medicines Regulations 2012
D Equality Impact Screening Assessment
E Sustainability Impact Assessment

Appendix A

NHS
Scarborough and Ryedale
Clinical Commissioning Group

APPLICATION FOR JOINT WORKING & SPONSORSHIP AND ARRANGEMENTS

All offers of, or requests for sponsorship/collaborative projects, (including full or part funding – specialist posts, events, training, visits etc) must be considered by the Chief Finance Officer before any arrangement is entered into. Before completing this application, reference should be made to the CCG's position on Business Conduct and Conflicts of Interest contained in the Constitution.

Member of Staff initiating the sponsorship or to whom an approach has been made ***Use block capitals***	Name: Post:
Manager completing the application and detailed proposal) ***Use block capitals***	Name: Post:
Type and Purpose of the sponsorship**	
Details of sponsorship**	Organisation: Contact details:
Monetary value of the sponsorship	£
Are there any conflicts of interest with the members of staff involved	Yes/No*
If Yes, give details**	
Have other options been explored for funding?	Yes/No*
If yes, give details**	
Who has been involved in the decision to apply for approval of this sponsorship?	
Please give details of the benefits and risks of the proposal**	

State how clinical and financial aspects will be developed and monitored (if appropriate)**	
Give details of any competition within the market place for the proposal.**	
Are there any issues around confidentiality that need to be considered? If so, please give details.	

*delete as appropriate
**attach on a separate sheet, if necessary

I declare that the information I have given on this form is correct and complete. I understand that if I knowingly provide false information, this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the CCG and NHS Counter Fraud and Security Management Service for the purpose of verification, prevention, detection and prosecution of fraud.

Signature …… Date ……..……...

Name (Please print) ……..…

Title ……Department.…….

Name of Chief Finance Officer ……...

Signature of Chief Finance Officer…….……

Name of Head of Medicines Management……..…..
(Block capitals)

Signature of Head of Medicines Management……..

Date ……..

Please return completed form to:
Leanne Douglas on leannedouglas1@nhs.net

Enquiries to the above Tel: 01723 343660

Use of Information and Data Protection
The information you have provided on this form will be included in a Register of Joint Working/Sponsorship that will be available to the public on request. The information will not be used for any other purpose without seeking the permission of the person submitting the information.

For use by Senior Officers only

Date of receipt……..

Date passed to Chief Finance Officer……..

Date passed to Governing Body (if appropriate)…….

Approved/Not Approved ……Date ……

Date decision conveyed to applicant……..

Date added to register……..

APPENDIX B

Quality Standards Checklist for Considering Commercial Partnerships			
No.	**Consideration**	**Yes**	**No**
		Please tick	
1	Is the company or organisation "legitimate" – that is, is it a registered company capable of being independently audited?		
2	Does the scheme have aims and objectives?		
3	Does the sponsorship offer any benefits to the following aspects of health care?		
a)	Diagnostic and referral		
b)	Investigations and measurements		
c)	Informing and educating patients (if yes answer 3c (i))		
c (i)	Is the material non-promotional accurate and culturally appropriate		
c (ii)	Will the material be checked by the CCG before it is distributed		
d)	Informing and educating health professionals (if yes answer 3d (i)		
d) (i)	Is the information valid, complete, balanced and up to date		
4	**Sponsorship that is directly related to patient treatment**		
a)	Is the sponsorship related to patient treatment? (if no go to question 5)		
b)	Have alternative treatments been considered and evaluated?		
c)	Has an assessment of the costs and benefits of the package in relation to alternative options been investigated?		
d)	Has monitoring of the patients been considered as part of the treatment?		
e)	Has a criteria for success of the project been established?		
f)	Has patient perceptions been included as part of the criteria?		
g)	Has a health care professional been designated clinically responsible for the patient at each stage of the package?		
h)	Has an assessment been made as to how the package fits with existing systems of primary and secondary care?		
5	**Sponsorship that relates to information systems or flows**		
a)	Is the sponsorship related to the collection of data? *(if no go to question 6)*		
b)	Who will own the data?		
	The CCG		
	The Sponsor		
c)	Will the sponsor have access to the data?		
d)	Have the provisions of the Data Protection Act been taken into consideration?		
e)	Who will evaluate the data?		
	The CCG		

	The Sponsor		
6	**Sponsorship related to the provision of events or hospitality**		
a)	Is the sponsorship related to the provision of events/hospitality *(if no go to 7)*		
b)	Is the event organised by:		
	The CCG		
	The sponsor		
c)	Will the sponsor be represented at the event?		
d)	Will the sponsor advertise at the event?		
e)	Has sponsorship of the event been open to other sponsors?		
f)	Have other sponsors offered sponsorship?		
g)	Has other sponsorship been:		
	Accepted		
	Declined		
7	**Sponsorship related to the provision of products**		
	Is the sponsorship related to any of the following:- *(if no go to question 8)*		
a)	Provision of clinical products? *(if yes answer questions a (i) and a (ii))*		
a) (i)	If clinical products will this encourage the use of a particular product in the future?		
a) (ii)	Will the use of the product limit patient choice?		
b)	Provision of equipment – *(if yes answer b(i) and b(ii))*		
b) (i)	Is the equipment linked to the use of one particular brand of consumables?		
b) (ii)	Has an assessment been undertaken to establish that it is the best for purpose?		
c)	Provision of free stationery:- *(if yes answer c(i) and c(ii)*		
c) (i)	Does the stationery include commercial advertising?		
c) (ii)	Has the CCG control over the content of the advertising?		
8	Are there any recurring costs for the scheme?		
9	Who will be responsible for recurring costs?		
10	Has VAT been considered? (see paragraph 6)		
Notes.	**Further Information**		
Question **1**	Answer all questions with one of the following:- Yes No Where additional information is shown on the bottom section of the page, add 'N/A' for questions which are 'not applicable' to the type of sponsorship		
2	Any application to have commercial sponsorship agreed must have this checklist attached		

Appendix C

Extract from the Human Medicines Regulations 2012

Regulation 300

(1) A person may not, in connection with the promotion of medicinal products to persons qualified to prescribe or supply them, supply, offer, or promise any gift, pecuniary advantage or benefit unless it is –

a. Inexpensive; and
b. Relevant to the practice of medicine or pharmacy.

(2) A person may not provide hospitality at a meeting or event held for the purposes fo the promotion of medicinal product unless –

a. The hospitality is stri8ctly limited to the main purposes of the meeting or event; and
b. The person to whom it is provide or offered is a health care professional.

(3) Nothing in this regulation shall prevent any person providing hospitality at an event held for purely professional or scientific purposes provided that –

a. The hospitality is strictly limited to the main scientific objective of the event; and
b. The person to whom it is provided or offered is a health care professional

(4) A person qualified to prescribe or supply medicinal products may not solicitor or accept any gift, pecuniary advantage, benefit or hospitality that is prohibited by this regulation.

(5) In this regulation "hospitality" includes –

a. Sponsorship of a person's attendance at a meeting or event; and
b. The payment of travelling or accommodation expenses.

(6) This regulation does not apply in relation to measures or trade practices relating to prices, margins or discounts that were in existence on 1st January 1993.

The Regulations create criminal offences for breach of these requirements which carry a maximum fine of £5,000 and a term of imprisonment of up to two years. Particularly egregious examples may also amount to offences under the Bribery Act 2010 in which case the maximum prison sentence is increased to 10 years and both the individual and their employer can be fined an unlimited sum.

1. Equality Impact Analysis	
Policy / Project / Function:	Policy & Guidance for Joint Working with the Pharmaceutical Industry *(and other private companies)*
Date of Analysis:	1 October 2013
This Equality Impact Analysis was completed by: **(Name and Department)**	Marlene Wharton CSU Corporate Strategy & Policy Manager
What are the aims and intended effects of this policy, project or function?	Assist Scarborough and Ryedale CCG achieve its objectives and delivery of national and local priorities by building effective and appropriate working relationships with the pharmaceutical industry. Inform and advise staff of their main responsibilities when entering into joint working arrangements and commercial sponsorship with the pharmaceutical industry.
Please list any other policies that are related to or referred to as part of this analysis	Conflicts of Interest Policy Business Conduct Policy
Who does the policy, project or function affect? Please Tick ✔	Employees √☐ Service Users ☐ Members of the Public ☐ Other (List Below) √☐ CCG Members Governing Body Council of Members Committee and sub-committee Members Individuals contracted to work on behalf of or provide services or facilities to, the CCG

2. Equality Impact Analysis: Screening

	Could this policy have a positive impact on…		Could this policy have a negative impact on…		Is there any evidence which already exists from previous (e.g. from previous engagement) to evidence this impact
	Yes	No	Yes	No	
Race	☐	√	☐	√	
Age	☐	√	☐	√	
Sexual Orientation	☐	√	☐	√	
Disabled People	☐	√	☐	√	
Gender	☐	√	☐	√	
Transgender People	☐	√	☐	√	
Pregnancy and Maternity	☐	√	☐	√	
Marital Status	☐	√	☐	√	
Religion and Belief	☐	√	☐	√	

Reasoning	This policy will have neither a positive nor negative impact on the protected characteristics as it relates to the principles which should be adhered to when entering into any joint working or sponsorship arrangements with the pharmaceutical industry (or any other private companies) and are applicable to everyone outlined within the scope of the policy.

If there is no positive or negative impact on any of the Nine Protected Characteristics go to Section 7

7 Equality Impact Analysis Findings				
Analysis Rating:	□ Red	□ Red/Amber	□ Amber	√Green

		Actions	Wording for Policy / Project / Function
Red **Stop and remove the policy**	**Red:** As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share *Protected Characteristics.* It is recommended that the use of the policy be suspended until further work or analysis is performed.	**Remove the policy** Complete the action plan above to identify the areas of discrimination and the work or actions which needs to be carried out to minimise the risk of discrimination.	No wording needed as policy is being removed
Red Amber **Continue the policy**	As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share *Protected Characteristics.* However, a genuine determining reason may exist that could legitimise or justify the use of this policy and further professional advice should be taken.	**The policy can be published with the EIA** List the justification of the discrimination and source the evidence (i.e. clinical need as advised by NICE). Consider if there are any potential actions which would reduce the risk of discrimination. Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.	As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share *Protected Characteristics.* However, a genuine determining reason exists which justifies the use of this policy and further professional advice. ***[Insert what the discrimination is and the justification of the discrimination plus any actions which could help what reduce the risk]***

Amber **Adjust the Policy**	As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the *Action Planning s*ection of this document.	**The policy can be published with the EIA** The policy can still be published but the Action Plan must be monitored to ensure that work is being carried out to remove or reduce the discrimination. Any changes identified and made to the service/policy/ strategy etc. should be included in the policy. Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.	As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the *Action Planning s*ection of this document. ***[Insert what the discrimination is and what work will be carried out to reduce/eliminate the risk]***
Green **No major change**	As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage.	**The policy can be published with the EIA** Another EIA must be completed if the policy is changed, reviewed or if any discrimination is identified at a later date	As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage.

Brief Summary/Further comments	Not applicable – see results of the assessment.

Approved By		
Job Title:	Name:	Date:
Chief Finance Officer		

Appendix E

SUSTAINABILITY IMPACT ASSESSMENT

Sustainability is one of the CCG's key Strategies and the CCG has made a corporate commitment to address the environmental effects of activities across the CCG. The purpose of this Sustainability Impact Assessment is to record any positive or negative impacts that this policy is likely to have on each of the Sustainability Themes.

Policy Title: Policy & Guidance for Joint Working with the Pharmaceutical Industry *(and other private companies)*

Theme (Potential impacts of the activity)	Positive Impact	Negative Impact	No specific impact	What will the impact be? If the impact is negative, how can it be mitigated? (action)
Reduce Carbon Emission from buildings by 12.5% by 2010-11 then 30% by 2020			√	
New builds and refurbishments over £2million (capital costs) comply with BREEAM Healthcare requirements.			√	
Reduce the risk of pollution and avoid any breaches in legislation.			√	
Goods and services are procured more sustainability.			√	
Reduce carbon emissions from road vehicles.			√	
Reduce water consumption by 25% by 2020.			√	
Ensure legal compliance with waste legislation.			√	
Reduce the amount of waste produced by 5% by 2010 and by 25% by 2020			√	
Increase the amount of waste being recycled to 40%.			√	
Sustainability training and communications for employees.			√	
Partnership working with local groups and organisations to support sustainable development.			√	
Financial aspects of sustainable development are considered in line with policy requirements and commitments.			√	