2 2

2

4

8 8

8

8 9

9

GP01 Corporate Governance – Principles of Public Life

Contents Page Sections 1.0 **Policy Statement** 2.0 Definitions Accountabilities 3.0 4.0 Policy Detail 5.0 Financial Risk Assessment 6.0 Equality Impact Assessment Maintenance 7.0 8.0 Communication and Training 9.0 Audit Process 10.0 References

Attachments Appendices

Appendix 1.0 - NHS Management and Leadership

Appendix 1.1 - NHS leadership competency framework for board members

Appendix 2 - Code of Practice on Openness in the NHS

1.0 Policy Statement (Purpose / Objectives of the policy)

This policy identifies <u>The Seven Principles of Public Life</u> which underpin corporate governance. These principles were set out in the first report of the Committee on the Standards in Public Life (the Nolan Committee), published in 1995. The Nolan Committee recommended that these principles should apply throughout public services. It sets out the Good Governance Standard for Public Services). The Standards for Members of NHS Boards and Governing Bodies in England are appended (Professional Standards Authority, November 2012).

In adhering to this Policy, all applicable aspects of the Conflicts of Interest Policy must be considered and addressed. In the case of any inconsistency, the Conflicts of Interest Policy is to be considered the primary and overriding Policy.

2.0 Definitions

"Standing Orders, Standing Financial Instructions and the associated Scheme of Delegation" (SO's, SFI's and SoD) mean the comprehensive framework under which the Trust does its business, including how significant decisions are made, and standards of business conduct such as declarations of interest as defined in the Trust Conflicts of Interests Policy. The Standing Orders of the Trust contain a schedule of matters which are formally reserved for Board decision. This is designed to ensure that the Board maintains full and effective control of the organisation.

"Standing Financial Instructions" means the detailed rules on procedures and responsibilities which the Trust Board has approved.

"Audit Committee" means a committee established by the Trust which comprises non-executive directors and is attended by the internal and external auditors and the Trust's Chief Financial Officer. It is the means by which the Board receives independent and objective reviews of its systems, information and compliance with the laws, guidance and regulations governing the NHS. It monitors compliance with Standing Orders and Standing Financial Instructions and reviews the annual governance statement and the annual financial statement prior to their submission to the Board.

The Board can also delegate, under the SoD, the power to review and approve the annual governance statement and the annual financial statement prior to their submission to NHS Improvement, NHS England and the Parliamentary Library.

3.0 Accountabilities

The Group Chief Executive, Chairman and Directors of the Trust Board will ensure that high standards of corporate governance and personal integrity are maintained in the conduct of Trust business and will ensure that Directors and staff adhere to the codes of conduct referred to in this policy. In particular, the Chairman and Directors will:

• Ensure that all their relevant interests have been declared and included in the

Trust's register of interests;

- Declare any interests which may arise at Board meetings, or at meetings of Board Committees;
- Adhere to the rules and guidance about gifts and hospitality;
- Meet the requirements of the fit and proper persons requirements;
- Make an annual declaration to this effect.

The Group Chief Financial Officer is responsible for advising the Chairman and Directors of the Trust board on the interpretation of Standing Orders and Standing Financial Instructions. The CFO is also responsible for reminding staff every two years of the Standards of Business Conduct for NHS Staff.

Managers must comply with the Code of Conduct for NHS Managers.

By their own conduct they will exemplify the seven principles of public life. They will also advise staff on how these principles apply, including in relation to the declaration of interests, gifts and hospitality. In particular, managers will seek to ensure that the best interests of the public and clients are upheld in decision-making and that decisions are not improperly influenced by gifts or inducements.

They will also seek to ensure that NHS resources are protected from fraud, bribery and/or corruption and that any incident of this kind is reported to the Local Counter Fraud Specialist or the NHS Counter Fraud Authority.

All Trust staff must observe the seven principles of public life and comply with the rules and procedures set out in the Trust's Standing Orders and Standing Financial Instructions. In particular, it is the responsibility of all staff to ensure that they do not:

- Abuse their official position for personal gain or to benefit their family or friends;
- Seek to advantage or further private business or other interests in the course of their official duties.

Members of the Trust will also be required to observe the seven principles of public life when engaged in anything connected to this role in the organisation.

4.0 Policy Detail

The Seven Principles of Public Life

The seven principles of public life are: selflessness, integrity, objectivity, accountability, openness, honesty and leadership.

4.1 Selflessness

Holders of public office must act solely in terms of the public interest. They must not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

It is the responsibility of staff to ensure that they do not abuse their official position for personal gain or to benefit their family or friends, or to seek to advantage or promote private business or other interests in the course of their official duties.

4.2 Integrity

Holders of public office must not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

For example, staff must not seek or accept preferential rates or benefits in kind for private transactions carried out with companies with which they have had, or may have, official dealings on behalf of their NHS employer.

4.3 Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office must make choices on merit.

Fair and open competition between prospective contractors or suppliers for NHS contracts is a requirement of the Trust's Standing Orders and Standing Financial Instructions, as well as of UK Directives on Public Purchasing for Works and Supplies. This requires that no public, private or voluntary organisation that may bid for NHS business will be given any advantage over its competitors, such as advance notice of the Trust's detailed requirements e.g., specifications or selection criteria. This applies to all potential contractors whether or not there is a relationship between them and the Trust, such as a long running series of previous contracts or bespoke framework arrangements.

Each new contract will be awarded solely on merit, taking into account the requirements of the Trust and the ability of the potential contractors to fulfil them.

It is the policy of the Trust not to show any special favour to current or former employees or their close relatives or associates in awarding contracts to a private or other business run by them or employing them in any capacity. Contracts may be awarded to such businesses where they are won in fair competition against other tenders, but scrupulous care must be taken to ensure that the selection process is conducted impartially, and that staff known to have a relevant interest



play no part in the selection.

4.4 Accountability

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to whatever scrutiny is appropriate to their office.

The Board and all employees of the Trust must have regard to public service values, including accountability, in carrying out their functions. The Trust is accountable, in various ways, to the general public, CQC, professional bodies, NHS Improvement, Clinical Commissioning Groups and other local health economy partners, NHS England, and a host of other partner and commissioning organisations.

4.5 Openness

Holders of public office must be as open as possible about all of the decisions and actions that they take. They must give reasons for their decisions and restrict information only when the wider public interest clearly demands.

The Trust subscribes to the Code of Practice on Openness in the NHS (<u>Appendix</u> <u>2</u>). It is also committed to positive engagement with public, patients and employees as changes are proposed to patterns of provision of health care. As part of consulting on major changes before decisions are made, it is Trust policy to make information around those proposals available in an accessible and positive manner. The Trust is committed to meeting its duties for the provision of information when requested, under the Freedom of Information Act, and within approved information sharing provisions.

4.6 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 which protects the public interest.

In accordance with the Standing Orders of the Trust, members of the Trust Board and all members of staff are required to record details of any controlling and, or significant financial interest in any organisation (public sector, private or voluntary) or in any other activity or pursuit which does or could compete with the Trust for the supply of goods or services to any third party or compromise an objective choice between potential suppliers of goods or services to the Trust. Such an interest must be declared upon appointment, or on starting employment, or when the interest subsequently arises so that the Trust can consider whether or not any conflict of interest arises and advise the member of staff accordingly. Similarly, the Trust needs to ensure that the decisions taken in awarding contracts for the supply of goods and services or dealing with underperformance by an existing supplier are beyond criticism. It is the policy of the Trust that gifts and hospitality (including sponsorship) must be recorded in a register maintained by the Chief Financial Officer.

The Royal Wolverhampton

receive or to receive any financial or any advantage as an inducement to, or reward for, improper behaviour by them or anyone else. Employees, in particular, need to be aware that a breach of the provisions of this Act renders them liable to prosecution.

Section 7 of the Bribery Act 2010, states Organisations, including Acute Trusts, can commit an offence if they do not have sufficiently robust arrangements in place to try to prevent staff committing the first offence. For further information concerning the Bribery Act please refer to the Trust's frequently asked questions guidance, which can be found on the Trust Intranet.

The Standing Orders of the Trust require declarations to be made by the Chairman and Directors of the Trust in regard to pecuniary interests in contracts and other matters.

4.7 Leadership

Holders of public office must promote and support these principles by leadership and example.

The Trust is headed by a Board which is collectively responsible for the formulation, promotion and achievement of the objectives of the organisation. Its role is to provide leadership of the organisation within a framework of prudent and effective controls which enable risk to be assessed and managed. It sets the organisation's strategic aims and ensures that the necessary financial and human resources are in place for the organisation to meet its objectives, and to review performance management. The Board also sets the standards and values of the organisation and ensures that its obligations to patients, the local community, employees and other external bodies and partners are understood and met.

As the Accountable Officer, the Group Chief Executive is accountable to the Board for meeting their objectives and to the Chief Executive of the NHS for the performance of the organisation. The Group Chief Executive provides leadership through helping to create the vision for the Board and for the organisation to modernise and improve services and to communicate this vision to others by empowering them to deliver the organisation's agenda.

<u>The Healthy NHS Board; Principles for Good Governance</u> sets out guidance for Boards of all NHS organisations about how they may give suitable leadership and example. This reinforces the expectation that Boards will establish a positive culture – "the Board also takes the lead in establishing and promoting values and standards of conduct for the organisation and its staff".

The Good Governance Standard for Public Services

In 2004 the Independent Commission on Good Governance and Public Services (supported by the Joseph Rowntree Foundation, CIPFA and the Office for Public Management) developed a common code and set of principles for good governance across public services, including the NHS. This Standard builds on the seven principles for the conduct of people in public life that were established by the Committee on Standards in Public Life (the Nolan Principles). These standards are.

(Note: the use of the word "governing body" in the Standard is defined as "the body with overall responsibility for directing and controlling an organisation", such as the Board of the Trust. The use of the word "Governor" in the Standard denotes "a Director of the Trust, whether an executive or non-executive director.")

Good governance means focusing on the organisation's purpose and on outcomes for citizens and service users.

~ Being clear about the organisation's purpose and its intended outcomes for citizens and service users.

- ~ Making sure that users receive a high-quality service.
- ~ Making sure that taxpayers receive value for money.

Good Governance means performing effectively in clearly defined functions and roles. ~ Being clear about the functions of the governing body.

- ~ Being clear about the responsibilities of non-executive and executive directors, and
- making sure that those responsibilities are carried out.
- ~ Being clear about relationships between governors and the public,

Good governance means promoting values for the whole organisation and demonstrating the values of good governance through behaviour.

- ~ Putting organisational values into practice.
- ~ Individual directors behaving in ways that uphold and exemplify effective governance

Good governance means taking informed, transparent decisions and managing risk.

- ~ Being rigorous and transparent about how decisions are taken.
- ~ Having and using good quality information, advice and support.

~ Making sure that an effective risk management system is in operation.

Good governance means developing the capacity and capability of the governing body to be effective.

~ Making sure that appointed and elected governors have the skills, knowledge and experience they need to perform well.

~ Developing the capability of people with governance responsibilities and evaluating their performance as individuals and as a group.

~ Striking a balance, in the membership of the governing body, between continuity and renewal.

Good governance means engaging stakeholders and making accountability real.

- ~ Understanding formal and informal accountability relationships.
- ~ Taking an active and planned approach to dialogue with and accountability to the public.
- ~ Taking an active and planned approach to responsibility to staff.
- ~ Engaging effectively with institutional stakeholders.

The Royal Wolverhampton

5.0 Financial Risk Assessment

1	Does the implementation of this policy require any additional Capital resources	No
2	Does the implementation revenue resources of this policy require additional	No
3	Doe the implementation of this policy require additional manpower	No
4	Does the implementation of this policy release any manpower costs through a change in practice	No
5	Are there additional staff training costs associated with implementing this policy which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments	

6.0 Equality Impact Assessment

An equality analysis has been carried out and it indicates that:

Tick	Options
х	A. There is no impact in relation to Personal Protected Characteristics as defined by the Equality Act 2010.

7.0 Maintenance

This Policy will normally be reviewed every three years in line with the standard set by OP01 Development and control of trust policy and procedural documents.

8.0 Communication and Training

This policy will be cascaded through the Trust's management information/communication systems and will be made available to all staff on the section of the Trust's intranet and public website which hosts its policies.

Failure to comply:

If you suspect any fraud or bribery has occurred in relation to the Corporate Governance - Principles of Public Life policy, please report this to the Local Counter Fraud Specialist (LCFS) for short, or the Trust Counter Fraud Champion. Failure to comply may result in civil, criminal or disciplinary proceedings.

9.0 Audit Process

The policy supports delivery of all of the Trust's Visions and Values.

This policy and its implementation will be reviewed through both internal and external auditors and human resource processes.

Criterion	Lead	Monitoring method	Frequency	Committee/ Group
Incident and staff disciplinary case monitoring (e.g., failure to comply with relevant SFIs) (gross misconduct)	Group Chief People Officer	Records of incidents and Disciplinary cases	Ongoing	Group People Committee
Fit and Proper Persons Requirements	Group Company Secretary (NEDs)	Personal files containing relevant documentation	Upon appointment and annual appraisal	Trust Board
Managers responsibility for compliance (own, and subordinate staff) with guidelines on the Gifts and Hospitality, and the Conflict of Interest Registers	GCFO Group Company Secretary	Declarations made/register entries	Ongoing	Audit Committee

10.0 References - Legal, professional or national guidelines

- ABPI Code of Professional Conduct Relating to Hospitality/Gifts from Pharmaceutical/External Industry.
- Code of Conduct, Code of Accountability in the NHS, DoH/Appointments Commission, 2004
- Code of Conduct for NHS Managers Department of Health, 2002
- CQC Regulation 19 Fit and Proper Persons Regulations
- HSC 1998\207 Opening Up NHS Board Meetings to the Public Governing the NHS a Guide for NHS Boards
- <u>GP02 Local Anti-Fraud, Bribery and Corruption Policy</u>
- <u>GOP109 Conflicts of Interest Policy</u>
- Standards of Business Conduct for NHS Staff NHS Management Executive HSG [93] 5 Code of Practice on openness in the NHS – EL [95] 60
- Standards for members of NHS Boards and Clinical Commissioning Group governing bodies in England Professional Standards Authority, November 2013
- Standing Orders and Standing Financial Instructions of RWT
- The First Report of the Committee on Standards in Public Life, 1995 (The Nolan Committee)
- The Good Governance Standard for Public Services The Independent Commission on Good Governance in Public Services (2004)
- The Healthy NHS Board Principles for Good Governance, NHS Leadership Academy 2013

Part A - Document Control

Reference Number and Policy name:	Version: V6.0	Status: Final		Author: Group Company Secretary	
GP01 Corporate Governance – Principles of Public Life	June 2025			Director Sponsor: Group Chief Executive/ Chief Nursing Officer	
Version /	Version	Date	Author	Reason	
Amendment History	1	November 2005	Head of Governance and Legal	New policy	
	2	January 2012	Chief Nursing Officer	Standard review	
	2.1	Dec 2013	Trust Board Secretary	Minor amendments following Internal Audit Report on Registering of Interests	
	3	Feb 2016	Trust Board Secretary	Standard review	
	4	March 2019	Company Secretary	Standard review	
	4.1	April 2022	Company Secretary	Extension to policy	
	5.0	May 2022	Company Secretary	Standard review	
	6.0	June 2025	Group Company Secretary	Standard review	
Intended Recipient					
March 2025				s and Deputy Chairman –	
Name and date of group where review		Trust Policy Group – June 2025			
Name and date of final approval committee		Trust Policy Group – June 2025			
Date of Policy issue		June 2025			
Review Date and F (standard review fre yearly unless otherw	quency is 3 vise indicated –	Every 2 yea	ars (June 2027)		
see section 3.8.1 of Training and Disse	/	l uction, and bi	-annual reminder	via payslips	
Publishing Require	ements: Can this	document k	be published on	the Trust's public page:	

Yes

If yes you must ensure that you have read and have fully considered it meets the requirements outlined in sections 1.9, 3.7 and 3.9 of <u>OP01, Governance of Trust-wide</u> <u>Strategy/Policy/Procedure/Guidelines and Local Procedure and Guidelines</u>, as well as considering any redactions that will be required prior to publication.

To be read in conjunction with: Trust Standing Orders, Conflicts of Interest Policy, Standards of Public Life, Standards of Business Conduct for NHS Staff, Code of Conduct, Code of Accountability in the NHS, Code of Conduct for NHS Managers

Initial Equality Impact Assessment (all policies):Completed Yes - unchangedFull Equality Impact assessment (as required):Completed Yes / No / NA If yourequire this document in an alternative format e.g., larger print please contact PolicyAdministrator8904

Monitoring arrangements and	Workforce & organisational Development Committee		
Committee	(WODC) monitors HR processes.		

Document summary/key issues covered.

This is a summary of the seven principles of public life (the Nolan Principles) and the Good Governance Standards for Public Services, with a brief explanation of how they apply to the activities of employees including Directors and Non-executive Directors.

Key words for intranet searching purposes: Governance, Corporate, Nolan Principles	
 High Risk Policy? Definition: Contains information in the public domain that may present additional risk to the public e.g., contains detailed images of means of strangulation. References to individually identifiable cases. References to commercially sensitive or confidential systems. If a policy is considered to be high risk, it will be the responsibility of the author and chief officer sponsor to ensure it is redacted to the requestee. 	No If Yes include the following sentence and relevant information in the Intended Recipients section above – In the event that this is policy is made available to the public the following information should be redacted: