

Declaration of Gifts, Hospitality and Sponsorship

FOR COMPLETION

Please note this form is also available online [here](#)

- **All cash gifts, including gift vouchers, of any amount, must be declined.** Alternatively donations to the UHNM Charity can be accepted in accordance with the UHNM Charity Policy.
- Members of staff are required to declare any gifts between £25 to £50. Any gifts above £50 must be **declined** and declared. Any gifts above £6 from suppliers or contractors doing business (or likely to do business) with the Trust, must be **declined**.
- Any hospitality from suppliers or contractors doing business (or likely to do business) with the Trust, must be treated with **caution** and only accepted if modest and reasonable.
- Hospitality i.e. meals and refreshments between £25 to £75 must be declared. If the value is above £75 this may only accepted in **exceptional circumstances** and must be declared.
- Hospitality i.e. travel and accommodation must be declared. Any offers of first or business class travel and accommodation should only be accepted in **exceptional circumstances** and prior approval must be sought.
- The information submitted will be held by the Trust for personnel or other reasons specified on this form and to comply with the Trust's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 2018. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in public registers that the Trust holds.
- **Please note that any standing declarations of interests should be noted on Appendix 1A and declarations relating to sponsorship of posts should be declared by completing Appendix 2B.**

FOR COMPLETION BY THE EMPLOYEE

Name:		ID	
Job title:			
Directorate:			

CATEGORIES OF DECLARATIONS (please tick)

Declaration of Gift:		Declaration of Hospitality (meals and refreshments / travel / accommodation):	
Declaration of Sponsorship of Event:		Declaration of Sponsorship of Courses & Conferences:	
Declaration of Donation/Legacy: <i>Please inform the Director of Communications. If from a supplier or potential supplier, please inform the Associate Director for Procurement and Commercial Services</i>		Declaration of Sponsored Research: <i>Please inform the Director of Research and Development</i>	

Please complete the rest of the form and forward to your line manager for signature

Reason for the gift, hospitality, sponsorship, donation, research:			
Date offered:			
Date received / Date of event:			
Approximate value £: (please use an actual amount or an estimate)			
Have you previously accepted or received any offers from this supplier / offeror before? (If yes, please detail)			
Approximate number of attendees (for sponsored events):			
Name of company involved (if applicable):			
This was (please tick):	Accepted	<input type="checkbox"/>	Declined
It is an offence to accept a gift, inducement or reward to refrain from doing something or to show bias for or against a person. In accepting any gift, hospitality or sponsorship an employee will be deemed by the courts to have received it corruptly unless they can prove to the contrary.			

CONFIRMATION OF DECLARATION			
I confirm that the information provided is complete and correct. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, internal disciplinary, or professional regulatory action may result.			
<i>In exceptional circumstances, your name and other information can be redacted from the published register. If you would like this to be considered, please provide the reasons below:</i>			
Employee signature:		<input type="text"/>	Date:
Please forward this form to your line manager for counter signature			

FOR COMPLETION BY THE LINE MANAGER

Please note, any of the following requires prior approval from the Divisional Operations Director (or equivalent)

- **Meals and refreshments over £75 accepted in exceptional circumstances**
- **Travel - Any costs over the allowed limit; offers of business class or first class travel; offers of foreign travel**
- **Accommodation - Any costs over the allowed limit; Offers of business class or first class accommodation; offers of foreign accommodation**

I confirm that I have reviewed the information contained within this declaration and confirm that appropriate approvals have been obtained and that there is no further action to be taken in respect of this declaration

Manager's Name:		Managers Signature:	
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Designation:		Date:	
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IF THE ABOVE DECLARATION POSES A POTENTIAL CONFLICT, HOW IS THIS TO BE MITIGATED?	
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When completed, please forward this form to Jason Dutton, via email

jason.dutton@uhnm.nhs.uk

FOR COMPLETION BY THE DIVISIONAL OPERATIONS DIRECTOR (OR EQUIVALENT) (IF REQUIRED – RELATING TO THE ABOVE EXCEPTIONS)

I confirm that the there is no further action to be taken in respect of this declaration

Divisional Operations Director (or equivalent) Name:		Signature:	
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Designation:		Date:	
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IF THE ABOVE DECLARATION POSES A POTENTIAL CONFLICT, HOW IS THIS TO BE MITIGATED?	
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