

# Sherwood Forest Hospitals NHS Foundation Trust

# **HOSPITALITY POLICY**

			POLICY
Reference	E&F005		
Approving Body	Estates Governance Committee / Policy Sponsor		
Date Approved	15/09/22		
For publication to external SFH website	Positive confirmation received from the approving body that the content does not risk the safety of patients or the public:		
	YES	NO	N/A
	X		
Issue Date	September 2022		
Version	5.0		
Summary of Changes from Previous Version	Update on to new Trust Policy template and update email contact address		
Supersedes	4.0		
Document Category	Estates & Facilities		
Consultation Undertaken	Performance Monitoring Audit and Validation Meeting		
Date of Completion of Equality Impact Assessment	1 June 2022		
Date of Environmental Impact Assessment (if applicable)	N/A		
Legal and/or Accreditation Implications	N/A		
Target Audience	All Trust staff, The Trust's PFI partners contractors		
Review Date	1 June 2025		
Sponsor (Position)	Chief Financial Officer		
Author (Position & Name)	Senior Soft FM Manager, Julie Dennis		
Lead Division/ Directorate	Estates and Facilities		
Lead Specialty/ Service/ Department	Estates and Facilities		
Position of Person able to provide Further Guidance/Information	Senior Soft FM Manager		
Associated Documents/ Information	, 		ated Documents/ was reviewed
N/A			
Template control		June 2020	



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# **APPENDICIES**

Appendix 1	Appendix 1 Equality Impact Assessment	

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#### 1.0 INTRODUCTION

This Policy is issued and maintained by the Associate Director of Estates and Facilities on behalf of the Trust and supersedes and replaces all previous versions.

The intention is to outline the circumstances where Sherwood Forest Hospital deem it appropriate to provide refreshments that are funded out of the Hospitality budget and defines the level of hospitality that should be provided.

This Policy is intended to ensure that the financial resources within the Trust are spent in the most appropriate way. Sherwood Forest Hospitals NHS Foundation Trust is committed to keeping the Hospitality spends to an absolute minimum and this Policy provides clarity regarding when Hospitality should be provided and the extent of provision that is appropriate.

#### 2.0 POLICY STATEMENT

The Trust has developed this policy to control hospitality expenditure and to ensure that funds are spent in the most appropriate way. Specific criteria have been identified in relation to the booking of hospitality. All requests for Hospitality must be authorized by a Divisional Manager, Director of Nursing or Trust Director, to ensure that spend is appropriate

#### 3.0 DEFINITIONS/ ABBREVIATIONS

**The Trust:** Means the Sherwood Forest Hospitals NHS Foundation Trust.

**Staff:** Means all employees of the Trust including those managed by a third-party

organisation on behalf of the Trust.

**PFI Project Agreement:** The agreement or contract between the Trust and partners for

the building of the new hospital buildings and the provision of a facilities

management services.

**Project Co:** This is the term used for the Central Nottinghamshire Hospitals PLC [or CNH].

It is the organisation appointed by the Trust who built the new hospital buildings, provide facilities services, and then manage these facilities for the life of the

contract.

#### 4.0 ROLES AND RESPONSIBILITIES

All managers are responsible for ensuring that any hospitality requests that they authorise comply with this policy.

All staff, making hospitality bookings, has a responsibility to consider the contents of this policy when making arrangements.

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#### 5.0 APPROVAL

Performance Monitoring Audit and Validation Meeting; Estates Governance Committee

#### 6.0 DOCUMENT REQUIREMENTS

The Trust recognises that there are situations where hospitality is required in order to ensure that staff members are able to attend meetings/study, however, the use of hospitality must be appropriate.

Hospitality may only be ordered in the following circumstances

- Tea/Coffee may be ordered for a meeting lasting more than 1.5 hours, and/or meetings scheduled to commence at 8.00am or earlier. Similarly, if the meeting is to take place after 6.00pm.
- Where meetings are held over a lunchtime period, they must be timed to enable staff to take a minimum of twenty minutes break or else staff should be advised that they should bring their own lunch into the meeting. There should not be an expectation that lunch will be provided.
- Hospitality must not be used for staff personal use.
- Hospitality must be booked using the Soft FM Provider (Medirest), with whom the Trust has a contract. Catering, other than that provided by individuals for their own personal consumption, cannot be brought in from other sources to prevent breach of the PFI contract and additional food safety issues
- Hospitality required for external courses will require the cost of the catering to be re-charged to the booker.
- Trust funded Hospitality will be provided in exceptional circumstances but will be limited to a Basic Working Lunch only. This must also be approved in advance by the Divisional Manager/ Director of Nursing or Trust Director.
- Where the Trust is providing hospitality as part of a training course for external visitors who pay to attend, these restrictions do not apply, although the hospitality offered should not be excessive. This will be monitored by the Training, Education and Development Department.

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All requests for hospitality should be logged via the FM Help Desk on internal extension 3005, via email <a href="mailto:Hospitalitykingsmill@compas-group.co.uk">Hospitalitykingsmill@compas-group.co.uk</a> or through Reach and followed up with a hard copy booking form

Hospitality offered by the Trust should only be offered in line with the Trust "Conflicts of Interest Policy

### Hospitality

- Staff should not ask for or accept hospitality that may affect, or be seen to affect, their professional judgement
- Hospitality must only be accepted when there is a legitimate business reason, and it is proportionate to the nature and purpose of the event
- Particular caution should be exercised when hospitality provision costs are offered by actual or potential suppliers or contractors. This can be accepted, and must be declared, if modest and reasonable. Senior approval must be obtained providing name and job title of approving manager

#### Meals and refreshments:

- Under a value of £25 may be accepted and need not be declared
- Of a value between £25 and £75 may be accepted and must be declared
- Over a value of £75 should be refused unless (in exceptional circumstances) senior approval is given. A clear reason should be recorded on the organisation's register(s) of interest as to why it was permissible to accept and authorising managers name and job title must be provided
- A common sense approach should be applied to the valuing of meals and refreshments (using an actual amount, if known, or a reasonable estimate)

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## 7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

of	Responsible Individual or
Monitoring	Committee/
	Group for Review of
(WHEN – will	Results (WHERE – Which
his element be	individual/ committee or
monitored	group will this be reported
` '	to, in what format (eg verbal, formal report etc)
now onenny	and by who)
Monthly	Estates Governance
(\ <b>h</b> i	Monitoring  WHEN – will is element be monitored (frequency/ how often))

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#### 8.0 TRAINING AND IMPLEMENTATION

All staff employed by Sherwood Forest Hospital including those requesting provision of hospitality bookings and the managers responsible for authorising requests. The policy will be available to all staff via the Trust Intranet

#### 9.0 IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1
- This document has been subject to an Environmental Impact Assessment, see completed form at Appendix 2

# 10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

#### **Evidence Base:**

Not applicable

#### **Related SFHFT Documents:**

- SFHFT Conflict of Interests Policy
- SFHFT Standing orders and scheme of delegation

#### 11.0 KEYWORDS

Hospitality, catering

#### 12.0 APPENDICES

- Appendix 1 Equality Impact Assessment
- Appendix 2 Environmental Impact Assessment

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# **APPENDIX 1 - EQUALITY IMPACT ASSESSMENT FORM (EQIA)**

Name of service/policy/prod	cedure being reviewed: Hospitality F	Policy	
New or existing service/pol	icy/procedure: existing policy	-	
Date of Assessment: 1 Jun	e 2022		
	edure and its implementation answithe policy or implementation down	<u>-</u>	ainst each characteristic (if
Protected Characteristic	a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?	b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?	c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality
The area of policy or its imp	plementation being assessed:		
Race and Ethnicity	Availability of this Policy in languages other than English	Alternative versions can be created on request	None
Gender	None	Not applicable	None
Age	None	Not applicable	None
Religion	None	Not applicable	None
Disability	None	Not applicable	None
Sexuality	None	Not applicable	None
Pregnancy and Maternity	None	Not applicable	None
Gender Reassignment	None	Not applicable	None

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			NHS Founda
Marriage and Civil Partnership	None	Not applicable	None
Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	None	Not applicable	None
<ul><li>What consultation with pro</li><li>None for this version</li></ul>	tected characteristic g	roups including patient groups have yo	u carried out?
What data or information d  Trust policy approach	id you use in support of availability of alternat	-	
As far as you are aware are questionnaires, comments  No		hts issues be taken into account such a s or compliments?	s arising from surveys,
Level of impact			
From the information provide indicate the perceived level of	•	EQIA guidance document Guidance on how	v to complete an EIA ( <u>click here</u> ), please
Low Level of Impact			
Name of Responsible Person	on undertaking this as	sessment: Julie Dennis	
Signature: J.DENNIS			

Date: 1.6.2022

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