

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		Date Associated Documents/ Information was reviewed	
N/A			
Template control		June 2020	

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APPENDICIES

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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.

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 (Medirect), 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.

All requests for hospitality should be logged via the FM Help Desk on internal extension 3005, via email Hospitalitykingsmill@compas-group.co.uk 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)

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Compliance with the policy	Senior Soft FM Manager	Review of hospitality orders. Physical review of education centre	Monthly	Estates Governance

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

APPENDIX 1 - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of service/policy/procedure being reviewed: Hospitality Policy			
New or existing service/policy/procedure: existing policy			
Date of Assessment: 1 June 2022			
For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)			
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 implementation 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

Marriage and Civil Partnership	None	Not applicable	None
Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	None	Not applicable	None
What consultation with protected characteristic groups including patient groups have you carried out? <ul style="list-style-type: none"> None for this version 			
What data or information did you use in support of this EqIA? <ul style="list-style-type: none"> Trust policy approach to availability of alternative versions 			
As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments? <ul style="list-style-type: none"> No 			
Level of impact From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (click here), please indicate the perceived level of impact: Low Level of Impact			
Name of Responsible Person undertaking this assessment: Julie Dennis			
Signature: J.DENNIS			
Date: 1.6.2022			