

From the Chair



OFFICE OF THE ADVISORY COMMITTEE ON BUSINESS APPOINTMENTS

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BUSINESS APPOINTMENT APPLICATION: the Rt Hon Andrew Stephenson CBE, former Minister of State for Health and Secondary Care at the Department for Health and Social Care. Paid appointment with the University Hospitals of Morecambe Bay NHS Foundation Trust.

1. You approached the Advisory Committee on Business Appointments (the Committee) under the government's Business Appointment Rules for Former Ministers (the Rules) seeking advice on taking up a paid appointment with the University Hospitals of Morecambe Bay NHS Foundation Trust (UHMBT) as Chair of the Board.
2. The purpose of the Rules is to protect the integrity of the government. The Committee has considered the risks associated with the actions and decisions made during your time in office, alongside the information and influence you may offer UHMBT as a former minister. The material information taken into consideration by the Committee is set out in the annex below.
3. The Committee's advice is not an endorsement of the appointment – it imposes a number of conditions to mitigate the potential risks to the government associated with the appointment under the Rules.
4. The Ministerial Code sets out that ministers must abide by the Committee's advice. It is an applicant's personal responsibility to manage the propriety of any appointment. Former ministers of the Crown and Members of Parliament are expected to uphold the highest standards of propriety and act in accordance with the 7 Principles of Public Life.

The Committee's consideration of the risks presented

5. UHMBT is an NHS Trust in North-West England. There is a general overlap between your role as a minister at the Department for Health and Social Care (DHSC) and the role with UHMBT, given that it delivers healthcare services (though it does so independently from government). In office you had contact with numerous NHS Trusts, though you made no decisions specific to UHMBT. These factors, coupled with the competitive selection process to appoint a Chair, means the Committee¹ considered that the risk that you were offered this role as a reward for decisions made in office is low.
6. Your role in office will undoubtedly have given you access and insight into privileged information about matters related to health and social care. This general insight impacts the sector as a whole, as opposed to UHMBT specifically. The Committee agrees with DHSC that your access to information would not offer an unfair advantage, especially given that you are prevented from making use of privileged information from your time in office, and are moving to a role in the wider public sector.
7. You have told the Committee that this role will involve contact with DHSC and NHS bodies at arm's length from government. The Committee considered whether this would be improper, given the lobbying ban which applies to all ministers for two years on leaving office.
8. The Committee considered the risks associated with your influence and network of contacts within government. It determined the risk that you could be perceived to offer unfair access to government is limited given the nature of the organisation. As Chair, you will have contact with the government regarding existing reporting requirements between UHMBT and His Majesty's Government or its arm's length bodies. This would be in keeping with the lobbying ban that applies to all former officials – though you must not take action that could reasonably be seen as making improper use of your contacts or influence from your time at DHSC.

The Committee's advice

9. Generally, it is the committee's view that, where interactions between the government and a public organisation delivering for citizens are done transparently and on the record there is a limited risk for undue influence. This is in keeping with the conditions below.

¹ This application for advice was considered by Andrew Cumpsty; Isabel Doverty; Hedley Finn OBE; Sarah de Gay; Dawid Konotey-Ahulu CBE DL; Michael Prescott; The Baroness Thornton; and Mike Weir.

10. The Committee determined that the risks can be appropriately mitigated by the following conditions. These seek to prevent you from making improper use of your privileged access to information, contacts and influence from your time in office.
11. In accordance with the government's Business Appointment Rules, the Committee advises that this appointment with the **University Hospitals of Morecambe Bay NHS Foundation Trust** be subject to the following conditions:
- you should not draw on (disclose or use for the benefit of yourself or the persons or organisations to which this advice refers) any privileged information available to you from your time in ministerial office;
 - for two years from your last day in ministerial office, you should not become personally involved in lobbying the UK government or any of its arm's length bodies on behalf of University Hospitals of Morecambe Bay NHS Foundation Trust (including parent companies, subsidiaries, partners and clients). This condition does not prevent you from undertaking the duties as Chair as described. However, it does prevent you from making use, directly or indirectly, of privileged access derived from your role as a minister to influence government policy on behalf of the University Hospitals of Morecambe Bay NHS Foundation Trust or its partners; and
 - for two years from your last day in ministerial office, you should not provide advice to on behalf of University Hospitals of Morecambe Bay NHS Foundation Trust (including parent companies, subsidiaries, partners and clients) on the terms of, or with regard to the subject matter of, a bid with, or contract relating directly to the work of the UK government or any of its arm's length bodies;
12. The advice and the conditions under the government's Business Appointment Rules relate to your previous role in government only; they are separate from rules administered by other bodies such as the Office of the Registrar of Consultant Lobbyists, the Parliamentary Commissioner for Standards and the Registrar of Lords' Interests.² It is an applicant's personal responsibility to understand any other rules and regulations they may be subject to in parallel with this Committee's advice.
13. By 'privileged information' we mean official information to which a minister or Crown servant has had access as a consequence of his or her office or employment and which has not been made publicly available. Applicants are also

² All Peers and Members of Parliament are prevented from paid lobbying under the House of Commons Code of Conduct and the Code of Conduct for Members of the House of Lords. Advice on obligations under the Code can be sought from the Parliamentary Commissioners for Standards, in the case of MPs, or the Registrar of Lords' Interests, in the case of peers.

reminded that they may be subject to other duties of confidentiality, whether under the Official Secrets Act, the Civil Service Code or otherwise.

14. The Business Appointment Rules explain that the restriction on lobbying means that the former Crown servant/minister *'should not engage in communication with government (Ministers, civil servants, including special advisers, and other relevant officials/public office holders) – wherever it takes place – with a view to influencing a government decision, policy or contract award/grant in relation to their own interests or the interests of the organisation by which they are employed, or to whom they are contracted or with which they hold office.'*
15. You must inform us as soon as you take up employment with this organisation(s), or if it is announced that you will do so. Please also inform us if you propose to extend or otherwise change the nature of your role as, depending on the circumstances, it may be necessary for you to make a fresh application.
16. Once the appointment has been publicly announced or taken up, we will publish this letter on the Committee's website, and where appropriate, refer to it in the relevant annual report.

Isabel Doverty

Interim Chair
ACOPA

Annex - Material Information

The role

1. Foundation Trusts have more independence and autonomy from government and are accountable to local communities, as opposed to DHSC/the Secretary of State for Health and Social Care. There is a funding relationship between DHSC and the University Hospitals of Morecambe Bay NHS Foundation Trust (UHMBT) – it receives funding routed through NHS England (NHSE) rather directly from DHSC.
2. You said that you seek to undertake a paid, part-time role as Chair of the Board. NHS boards, led by an independent chair, hold the organisation to account for the delivery of strategy and ensure value for money. The board itself holds collective responsibility for the performance of the organisation. The Chair's responsibilities³ are:
 - Strategic leadership (including adherence to the Nolan principles).
 - Leading on governance and accountability.
 - People - shaping the culture, ensuring diversity, skills development
 - Acting as an ambassador - leading in developing relationships and partnerships.
 - Developing a culture of innovation and learning.
3. You said that this role would include contact with government departments and bodies. You said that NHS Trust chairs come into regular contact with DHSC, NHSE, NHSE regional teams, and the wider healthcare system.
4. You also told the Committee that as a former Councillor and MP you had regular dealings with NHS Trusts for 20 years, and that you went through a competitive selection process to secure this role.

Dealings in office

5. As regards your time in ministerial office as Minister of State for Health and Secondary Care at DHSC, you told the Committee:
 - You had contact with multiple NHS trusts in office.
 - You did not have any contact with UHMBT.
 - UHMBT is part of the 'New Hospitals Programme' but this was not under your purview.
 - You made general policy decisions relating to NHS trusts, though did not make any specifically impacting UHMBT.

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<https://www.england.nhs.uk/non-executive-opportunities/wp-content/uploads/sites/54/2023/06/NHS-Chair-Role.pdf>

- You had no access to information that could grant UHMBT an unfair advantage.

Departmental Assessment

6. DHSC confirmed the details you provided, including that as minister of State for Health and Secondary Care, you were responsible for general policy decisions related to NHS trusts, generally, though none specifically affecting UHMBT. It recommended the standard conditions.