

**Supply Chain Coordination Limited (SCCL) Policy
Document**

Modern Slavery Policy

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1. Document Control

1.1. Version Control

Date	Version	Material / Non-material changes	Amended by	Approved By	Amendments
04/08/2025	1	Material	Jade Gaffney	Heidi Barnard	Published

1.2. Document Information

Document	Details
Reference Number	COM03
Title	Modern Slavery Policy
Function	Sustainability
Location	Link to Modern Slavery Policy and/or Policy Hub
Applicability	All NHS Supply Chain Colleagues
Prepared by/ Author	Jade Gaffney – Sustainability Advisor
Document Owner	Richard Evans - Commercial Executive Director
Policy Owner (Approver)	Heidi Barnard – Head of Sustainability
Last Reviewed	04/08/2025
Next Review Due	04/08/2026
Review Cycle	This policy will be reviewed annually
Contact(s)	Sustainability@supplychain.nhs.uk

1.3. Roles and Responsibilities

Role	Responsibilities
Policy Owner	The policy owner must approve any material changes to the policy and is accountable for ensuring that the requirements set out within this policy are delivered effectively.
Policy Author	The Policy Author is responsible for creating this policy in line with all current legal and regulatory requirements and maintaining it in accordance with the review cycle and change control requirements.
SCCL Executive Director	The Executive Director(s) are ultimately accountable for ensuring that their functional areas adhere to the requirements set out in this document.
Senior Leadership Team (SLT)	SLT members are responsible for ensuring that their teams adhere to the requirements set out in this policy.
All SCCL Colleagues	All colleagues, including contractors of Supply Chain Coordination Limited, are responsible for complying with the requirements of this policy.

All NHS Supply Chain Colleagues	All colleagues, working for NHS Supply Chain, are responsible for complying with the requirements of this policy.
Compliance Manager	The Compliance Manager is responsible for coordinating the publishing and communication of the approved policy and ensuring the policy is reviewed in accordance with the review cycle and change control procedures.

2. Key Definitions

Term	Definition
NHS Supply Chain	NHS Supply Chain manages the sourcing, delivery and supply of healthcare products, services for NHS trusts and healthcare organisations across England and Wales.
Supply Chain Coordination Ltd (SCCL)	SCCL is the legal entity through which NHS Supply Chain undertakes its procurement services and transacts with customers and suppliers.
Modern Slavery	Under the Modern Slavery Act 2015, modern slavery encompasses slavery, servitude, forced or compulsory labour, and human trafficking
International Labour Organization (ILO)	A United Nations agency that sets international labour standards and promotes rights at work, including the elimination of forced labour.
Forced Labour	The definition as per ILO consists of three elements: <ul style="list-style-type: none"> • Work or service refers to all types of work occurring in any activity, industry or sector including in the informal economy. • Menace of any penalty refers to a wide range of penalties used to compel someone to work. • Involuntariness: The terms “offered voluntarily” refer to the free and informed consent of a worker to take a job and his or her freedom to leave at any time. This is not the case for example when an employer or recruiter makes false promises so that a worker take a job he or she would not otherwise have accepted.
Abuse of vulnerability	Employers may exploit workers who are disadvantaged—due to language barriers, poverty, minority status, or disabilities—by imposing unfair conditions. Forced labour arises when this vulnerability is used to control workers, especially when they rely on the employer for multiple needs like housing or food.
Deception	Workers are misled about job conditions, pay, or location during recruitment. Once employed, they find the reality is far worse and feel trapped. Deception removes the possibility of informed consent, making the work situation coercive.
Restriction of movement	When workers are not free to leave the workplace or are constantly monitored, it signals forced labour. This includes being locked in, followed, or watched by guards or cameras, beyond what’s reasonable for safety.
Isolation	Workers may be physically or socially cut off—kept in remote areas, denied communication, or hidden from authorities. This isolation prevents them from seeking help or escaping abusive conditions.
Physical and sexual violence	Any use of physical or sexual abuse to control or punish workers is a clear sign of forced labour. This includes beatings, sexual exploitation, forced drug use, or kidnapping to compel work. Violence is never an acceptable form of discipline.
Intimidation and threats	Workers may be coerced through threats, such as violence, job loss, deportation, or harm to family, especially when they try to leave or complain. Even non-physical threats can create fear and dependency, especially when tailored to a worker’s vulnerabilities.
Retention of identity documents	When employers hold workers’ passports or ID documents and restrict access, it can trap workers in jobs. Without these, workers may fear leaving or seeking help, making this a strong indicator of forced labour.
Withholding of wages	Deliberately delaying or denying wages to prevent workers from leaving or changing jobs is a form of coercion. While occasional late payments

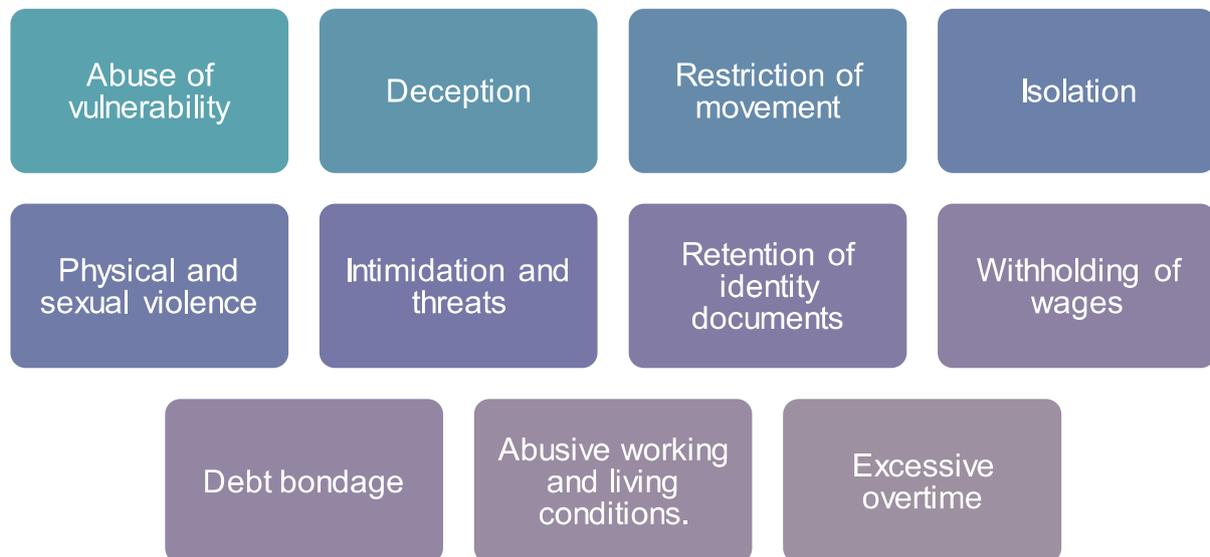
	aren't necessarily forced labour, systematic withholding to control workers is.
Debt bondage	A situation where workers are trapped in jobs to repay debts, often due to inflated charges or manipulated accounts. The debt may stem from recruitment, living, or emergency costs, and can even be inherited. This creates a power imbalance, binding workers to employers indefinitely, sometimes across generations.
Abusive working and living conditions	Forced labourers often face dangerous, degrading, or illegal work environments and live in overcrowded, unhealthy housing. While poor conditions alone don't prove forced labour, they are strong indicators when workers are unable to leave due to coercion.
Excessive overtime	When workers are forced to work beyond legal limits—without breaks or days off—under threats or to earn minimum wage, it may constitute forced labour. The key factor is whether the overtime is coerced rather than voluntary.

3. Introduction

Modern slavery refers to situations where individuals are exploited and unable to refuse or leave due to threats, violence, coercion, deception, or abuse of power. This crime represents a severe violation of human rights and is addressed under the Modern Slavery Act 2015, which includes offences such as slavery, servitude, forced or compulsory labour, and human trafficking.

According to the latest Global Estimates of Modern Slavery, approximately 27.6 million people were subjected to forced labour in 2021, including 3.3 million children.

The International Labour Organisation (ILO) has identified 11 key indicators of forced labour, which can help in recognising situations of modern slavery. These indicators include:



NHS Supply Chain Modern Slavery Statement can be found [here](#)

The NHS Supply Chain Modern Slavery Policy expands on the statement and describes in more detail how we are tackling and working to eliminate modern slavery within our organisation and our supply chains.

4. Policy Summary

This policy sets out NHS Supply Chain's commitment to preventing modern slavery and human trafficking in all aspects of our operations and supply chains. It reflects our zero-tolerance approach to any form of exploitation and aligns with our legal obligations under the Modern Slavery Act 2015, as well as the latest government guidance including PPN 009 and the Home Office statutory guidance (May 2025).

We expect all employees, suppliers, and partners to uphold the highest standards of ethical conduct. This includes ensuring fair treatment, safe working conditions, and respect for human rights throughout the supply chain. Our policy applies to all procurement activities, regardless of supplier size or turnover, and is embedded across the contract lifecycle.

5. Policy Purpose & Scope

5.1 Purpose

This Modern Slavery Policy outlines NHS Supply Chain's commitment to ethical procurement and compliance with the Modern Slavery Act 2015. It covers key stages of the procurement lifecycle, from sourcing strategy to contract management and enforcement. The policy emphasizes a risk-based approach, clear roles and responsibilities, training and monitoring, and a victim-centric approach. Key performance indicators (KPIs) and feedback mechanisms are included to measure the effectiveness of the policy and ensure continuous improvement.

This policy sets out how NHS Supply Chain will enact measures to seek to prevent modern slavery and human trafficking in all areas of its operations.

It provides a framework for identifying, assessing, and mitigating risks related to modern slavery within our organisation and supply chains.

It supports our broader ethical and social responsibility objectives, including safeguarding human rights and promoting fair labour practices.

It outlines the expectations placed on employees, suppliers, and partners in upholding our zero-tolerance approach to modern slavery.

5.2 Scope

The scope of this policy will apply to

- all NHS Supply Chain employees, contractors, and temporary staff.
- all procurement activities, regardless of contract value or supplier size.
- all suppliers, subcontractors, and third parties involved in delivering goods or services to NHS Supply Chain.

It complements and should be read alongside related policies, including our Code of Conduct, Whistleblowing Policy, and Supplier Code of Conduct.

6. Policy

6.1 Preventing Modern Slavery within NHS Supply Chain

We conduct thorough checks on all employees, recruitment agencies, and suppliers to ensure we know who is working for us or on our behalf.

Every employee receives a written employment contract and is compensated in accordance with legal requirements. We adhere to all legal obligations to safeguard the health and safety

of our employees and workers, including regulations on working hours, rest breaks, and holidays.

We provide mandatory annual training on modern slavery, empowering our staff to recognise the signs and report any concerns, as necessary.

Additionally, we have related policies in place to support our commitment to preventing modern slavery, including our Whistleblowing Policy, Anti-Fraud, Bribery and Corruption Policy and Supplier Code of Conduct.

6.2 Preventing Modern Slavery throughout our Supply Chains

In February 2025 PPN 009 “Tackling Modern Slavery in Government Supply Chains” was published. This PPN specifically calls out the NHS bodies as being in scope. The PPN requires the risk of Modern Slavery to be identified for each Procurement activity, and appropriate due diligence conducted to manage these risks.

Additionally, we adhere to the latest Home Office statutory guidance on modern slavery, published in May 2025. This guidance emphasises the importance of identifying, protecting, and supporting victims of modern slavery. It outlines the responsibilities of organisations to ensure that their supply chains are free from modern slavery and human trafficking.

The following sections will break down how we manage modern slavery and labour standards across each part of the contract life cycle.

6.2.0 Modern Slavery Assessment Tool (MSAT)

As part of our commitment to ethical sourcing and the prevention of modern slavery, we engage with the UK Government’s Modern Slavery Assessment Tool (MSAT), developed by the Cabinet Office. The MSAT is a structured self-assessment designed to help suppliers identify, manage, and mitigate the risks of modern slavery within their operations and supply chains.

The MSAT is accessed via the SRS Supplier Registration System, also referred to as the NQC portal, as it is operated by NQC Ltd on behalf of the UK Government.

<https://supplierregistration.cabinetoffice.gov.uk/msat>

The MSAT assesses maturity across key areas including:

- Governance and policy
- Risk assessment and due diligence
- Training and awareness
- Remediation and reporting

To meet our compliance standards, suppliers must achieve a minimum MSAT score of **41%**. This score is treated as a pass/fail threshold. Any supplier scoring below **41%** will be considered non-compliant and may be excluded from further procurement processes unless and until sufficient improvements are made.

This requirement ensures that all suppliers demonstrate a baseline level of commitment and capability in addressing modern slavery risks. We encourage continuous improvement and may support suppliers in developing action plans to raise their scores where appropriate.

Suppliers are required to review and update their MSAT submission at least annually to ensure that the information remains accurate and reflects any improvements or changes in their practices. This ongoing commitment supports transparency, continuous improvement, and alignment with evolving legal and ethical expectations.

6.2.1 Category Strategy

At Category Strategy stage there will be a review of the risk profile across the frameworks sat across the category.

A review of the contract management information available for incumbent suppliers should also be undertaken to understand any challenges or opportunities that may be present in the category.

6.2.2 Sourcing Strategy

Each NHS Supply Chain procurement will be assessed, using a standard methodology.

The NHS England methodology has been adopted, which is based on the 6 factors set out in PPN 009

Each NHS Supply Chain procurement will be assessed, using a standard methodology. The methodology has been developed using a database of risk, mapped to EClass codes, this has been mapped to the procurement activity to assess the level of risk associated with the activity, prior to knowing which specific suppliers and value chains are going to be used.



Based on that risk the following tools will need to be applied to understand the specific risk in the proposed supply chains:

Procurement Risk	Tools to Use
Low Risk	MSAT

Medium Risk	MSAT + Evidence Review
High Risk	MSAT + Evidence Review + 3 rd Party Audit

The results of the tools will then be used to assess the level of risk in the Suppliers Value chain at the Sourcing Execution Stage.

Modern Slavery Act versus MSAT:

In the UK, the primary piece of legislation relating to human rights disclosures is the Modern Slavery Act, introduced in 2015. Commercial organisations conducting business in the UK, with an annual turnover of £36 million or more must comply with the UK MSA. (Requiring a modern Slavery statement)

However, the requirement to complete the MSAT comes from our requirements for due diligence, and PPN 009 on modern slavery in public contracts, which applies to all our suppliers, irrespective of size.

In High-Risk Procurements, during the preliminary premarket engagement NHS Supply Chain will reach out to understand more about the specific supply chain(s) and the market structure to enable an appropriate approach to be taken. This involves gathering detailed information from suppliers and stakeholders to assess risks and opportunities within the supply chain.

The Category teams will be engaged with the Sustainability team to support them in identifying the best approach per category. This collaboration aims to ensure that each procurement activity is tailored to the specific needs and risks associated with different categories. By examining the lotting structure, the teams will avoid taking a blanket approach, instead opting for a more nuanced strategy that addresses the unique challenges and requirements of each category.

Some of the themes that have emerged from previous high-risk procurements include:

- Understanding where the items are being made and by whom.
- Ensuring audit schedules cover all manufacturing during the life of the contract.
- Audit frequency to be determined by the bidding entity – Suppliers need to understand the specific risk in their specific supply chains – and these will vary across the many product lines in a framework.
- Directing the focus to “Taking Action” rather than “Passing an audit”
 - Placing emphasis on understanding the audit outcomes and putting in place appropriate and timely actions to address any issues found.
 - Ensuring a victim centric approach and safeguarding them, as per best practice and PPN 009

Taking on board what has been learnt in the pre-market engagement the category team will need to complete [E. High Procurements Specific Framework Approach.url](#)
This will support them to complete the High-Risk Approach Document that will determine the 3rd party Audit approach.

6.2.3 Sourcing Execution

Requirement	Procurement Risk Rating			Assessment	
	Low	Medium	High		
MSAT completed within 12 months of tender close date	✓	✓	✓	Pass	MSAT completed within 12 months prior to the tender close date
				Fail	MSAT has not been completed within 12 months prior to the tender close date. MSAT has not been shared
MSAT Score	✓	✓	✓	Pass	Score of 41% or above
				Fail	Score of 40% or below
Medium and High-Risk Procurements – Evidence Review	x	✓	✓	Pass	Review concludes Medium or Low Risk
				Fail	Review concludes High Risk
High-Risk Procurements - Evidence of 3 rd Party Audit	x	x	✓	Pass	3 rd Party Audit evidence shows Low and Medium Risk outcomes only
				Fail	3 rd Party Audit evidence shows 1 or more High Risk outcomes

All Suppliers will be cross-checked against the Debarment List as part of the Pre-Qualification Questionnaire (PSQ) process.

NHS Supply Chain may be legally required or have discretion to exclude suppliers listed. The PSQ also requires disclosure of any Associated Persons (e.g. subcontractors or consortium members) who appear on the Debarment List and are relied upon to fulfil the contract.

Low Risk - MSAT

NHS Supply Chain Category Team will review the MSAT question completed by the supplier within the SRS portal.

Pass/Fail requirement as detailed below.

Medium Risk - Evidence Review

This Evidence Review will take all evidence required to be presented to NHS Supply Chain during the tender process into account to assess the holistic risk the supplier presents (including, where relevant, information relating to the supplier's supply chain).

This will include where appropriate:

- Modern Slavery Statements (*As applicable under the Modern Slavery Act 2015 for Companies £36 Million or over annual turnover only),
- MSAT Responses

- Third-Party Audit Results (**Applicable for High Risk).

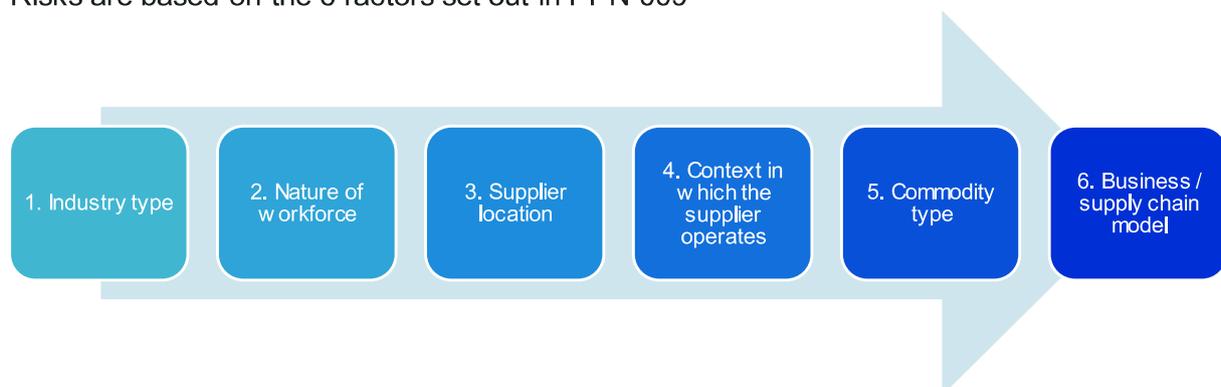
KEY	Modern Slavery Statement*	MSAT Review			Third Party Audit**	Supplier Risk Level
		MSAT Score	MSAT Score Change	MSAT Answer Consistency		
Low Risk	Has Board/Company approval Published on Website Updated annually. Has all information detailed as required under the Modern Slavery Act 2015	70% or higher	Improved Score, or Stayed the same, or no previous score	Consistent	Results of Audit demonstrate Low Risk/Impact on all 11 ILO indicators of Modern Slavery	All aspects Low Risk
Medium Risk	N/A	41% to 69%	Declined by up to 5% points	N/A	Results of Audit demonstrate Medium Risk/Impact on all 11 ILO indicators of Modern Slavery	Aspects a mix of Medium and Low Risk
High Risk	Does not Contain Board/Company approval. Not Published on Website Not updated annually Has no information minimally required under the Modern Slavery ACT	N/A	Declined more than 5	Inconsistent	Results of Audit demonstrate High Risk/Impact on all 11 ILO indicators of Modern Slavery	Presence of 1 or more High Risks

High Risk Procurement – 3rd Party Audits

The breadth of items that NHS Supply Chain procures, makes it challenging to prescribe a single auditing approach appropriate to all supply chains, we are therefore not stipulating which auditing bodies suppliers use if they are independent.

Depending on the risk identified at the beginning of the individual procurement, the 3rd party Audit requirement will need to reflect and satisfy the risks identified.

Risks are based on the 6 factors set out in PPN 009



6.2.4 Contract Launch

The contract launch phase is critical for ensuring that modern slavery considerations are integrated into the operational aspects of our agreements. During this phase, the Category teams will lead the implementation of the contract. This ensures that all suppliers are aware of their obligations and that robust mechanisms are in place to monitor compliance.

Contractual Obligations:

- Ensure all supplier contracts include clauses that mandate compliance with modern slavery laws and our policy.
- Highlight the importance of completing MSAT responses annually and maintaining a score above 41%.
- Emphasise the need for annual Modern Slavery Statements and compliance with audit schedules.
- Require the use of our standard template terms and conditions, which include modern slavery compliance clauses.
- Do not deviate from our standard terms and conditions relating to modern slavery without prior approval, to ensure consistency and enforceability across all supplier engagements.

Monitoring and Reporting:

- The Category team will set up a monitoring spreadsheet to track supplier compliance with modern slavery regulations.
- Require suppliers to update MSAT annually.
- Review these reports and audit findings to identify any potential risks or issues.

Corrective Actions:

1. Refer to the existing corrective action plan in the audit document for addressing any non-compliance identified during audits or reviews.
2. Conduct follow-up reviews to ensure that corrective actions have been effectively implemented.

Continuous Improvement:

- Regularly review and update contract management practices to ensure they remain effective and aligned with current regulations.
- Use feedback from supplier interactions and audits to enhance our approach to managing modern slavery risks.

6.2.5 Contract management

Throughout the framework agreement, the category teams will be responsible for checking the due diligence requirements of suppliers. This includes (where appropriate)

- **Contractual Obligations:** All supplier contracts will include clauses that mandate compliance with modern slavery laws and our policy. This includes.
 - **MSAT Responses:** Ensuring they are completed annually, are above 41% and reviewing the action plans and progress.
 - **Modern Slavery Statements:** Ensuring they are completed annually and compliant.
 - **Standard Terms and Conditions:** Teams must use our standard template terms and conditions, which include embedded modern slavery compliance clauses. No deviations from these standard clauses are permitted without prior approval, to ensure consistency and enforceability.
 -

- **Reviewing Audits:** Suppliers are required to submit audit schedules, and audits detailing their compliance with modern slavery regulations. The category teams will review these audits to identify any potential risks or issues. This includes reviewing plans for
 - **Corrective Actions:** If any non-compliance is identified, suppliers must develop and implement a corrective action plan within a specified timeframe. Follow-up reviews will be conducted to ensure that corrective actions have been effectively implemented.
 - **Continuous Improvement:** We will regularly review and update our contract management practices to ensure they remain effective and aligned with current regulations. Feedback from audits and supplier interactions will be used to enhance our approach to managing modern slavery risks.

6.3 Notification of an issue

During the course of contract management NHS Supply Chain may become aware of an allegation of an issue within its supply chains. This may come in the form of, but is not limited to:

- An Audit Finding
- Whistleblowing
- A Third-party report to NHS Supply Chain
- Report in the Media

The following process should be undertaken – if the supplier is part of the Supplier Relationship Management programme, this would be led by the Supplier Manager with support from the Category and Sustainability teams. For suppliers outside this programme,

this will be led by the Category team with support from the Sustainability team.



6.3.1 Expectations of timelines for response

Consequences

Potentially any breach and/or Incident and/or allegation and/or risk may lead to suspension of contractual obligations and supply of goods/services. Specific details are laid out in the contract or framework.

Timelines

The supplier should notify to the contracting Authority NHS Supply Chain within 5 Business Days of risk being confirmed or identified.

The time it takes to investigate and understand root cause will vary depending on the nature of the finding or issue. Irrespective an Initial proposed action plans for remedial action

should be reported to the contracting authority within 10 Business Days of risk being confirmed or identified. These should be updated at appropriate junctures depending on the circumstances.

Action Plans

Depending on the issue or risk that has been identified a number of different types of action may be required.

	Definition:	Purpose:	Example:	Timescale
Immediate Action	A quick response taken right after a problem is identified to stop it from continuing or worsening.	To contain the issue and minimise immediate harm or disruption.	Shutting down a malfunctioning machine to prevent injury.	Short term (Within 30 days)
Containment Action	A temporary fix to isolate or control a problem until a permanent solution is implemented.	To limit the impact while corrective actions are being developed.	Quarantining defective products to prevent them from reaching customers.	Short term (Within 30 days)
Corrective Action	A long-term solution aimed at eliminating the root cause of a problem to prevent it from recurring.	To fix the underlying issue, not just the symptoms.	Revising a faulty process that led to a product defect.	Medium term (Within 90 days)
Preventative Action	A proactive measure taken to eliminate the causes of potential problems before they occur.	To reduce the risk of future issues	Implementing training to avoid common human errors.	Long term (Within 180 days)

The nature of the risk will determine the appropriate actions and timelines.

Indicator	Audit Finding
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Low risk	(no issues, or isolated issues with low severity and adequate management/remedy)
Moderate risk	(either high prevalence, severity, or lack of effective systems)
High risk	(a combination of 2 of the 3 factors (i.e. high prevalence, severity, or lack of effective systems))
Confirmed finding	(where the presence of an indicator is confirmed by our assessment, due to non-isolated, systemic issues found involving either menace of penalty or involuntariness of work)

6.3.2 Enforcement of the Remedial Proposal:

If the Supplier:

- a) Does not cooperate with investigations, including concealing information or unreasonably delay sharing information.
- b) Does not put the victims first.
- c) Continues to employ child labour illegally, or in what the Authority in its sole discretion determines are hazardous conditions.
- d) Does not implement the phasing out child labour.
- e) Continues to employ people who are victims of Modern Slavery and/or Human Trafficking.
- f) Does not implement a Remedial Proposal to the satisfaction of the Authority and/or third parties and/or third parties operating on behalf of the Authority; Refuses to improve their practice.

The Authority will consider additional steps, including:

- a) Suspension of the Framework Agreement.
- b) Termination of the Framework Agreement, and
- c) sharing past performance information with other public sector contracting authorities

The Authority will where it considers it to be appropriate, in its sole discretion:

- a) Work with the Supplier and its supply chain, where appropriate, to remedy any identified instances of and potential victims of Modern Slavery and/or Human Trafficking and/or child labour abuses.
- b) Work with the Supplier and our other suppliers to share lessons learnt, raise aware.

Where the Authority determines that the Supplier has failed to comply with its obligations under this policy, including failure to implement an acceptable Remedial Proposal or continued engagement in modern slavery practices, the Authority may refer the Supplier to the relevant Minister for consideration under the Procurement Act 2023 Debarment Regime. This may result in the Supplier being placed on the Debarment List, excluding them from future public sector procurements.

6.3.3 Third Party Reports:

We recognise that information regarding potential instances of modern slavery or human trafficking may come to our attention through individuals or organisations outside of our direct employees, workers, or supply chain. These are considered third-party reports.

A third-party report can originate from a variety of sources, including but not limited to:

- Non-governmental organisations (NGOs) and charities: Organisations dedicated to combating modern slavery and supporting victims may share information or concerns they have encountered.
- Law enforcement agencies: Local, national, or international law enforcement bodies may provide intelligence or reports related to potential modern slavery activities that may involve our operations or supply chain.
- Whistleblowing organisations: Independent entities that facilitate the reporting of wrongdoing may forward disclosures related to modern slavery.
- Community members and the general public: Individuals who have witnessed or have concerns about potential modern slavery situations connected to our business activities.
- Media outlets: Reports published by news organisations may highlight potential issues that require our attention.
- Other businesses: Entities within our industry or related sectors may share information about potential risks or incidents they have identified.
- Customers: Clients or end-users may raise concerns or report observations related to modern slavery risks associated with our operations or supply chain.
- It is important to understand that while third-party reports can be valuable sources of information, the details provided may vary in terms of specificity and corroboration. All third-party reports received will be treated seriously and will be subject to our due diligence and investigation processes as outlined in this policy.

6.4 Managing reports/ allegations

NHS Supply Chain encourages whistleblowers and third-party reporters to come forward with any concerns regarding modern slavery. Anonymous reporting channels are available and protections for whistleblowers are in place. Feedback will be acknowledged, and reporters will be updated on the progress and outcome of their reports. Please also refer to Whistleblowing policy (see section 9)

In addition to direct reports, concerns may also be raised through Freedom of Information (FOI) requests or press enquiries, which will be handled with the same level of seriousness and in accordance with our internal procedures.

- All reports will be acknowledged within 5 working
- Reporters will be updated at key stages of the investigation, including:
 - Confirmation of receipt and initial review.
 - Notification of whether the report has been escalated for further investigation.
 - Summary of outcomes or actions taken (subject to confidentiality and legal constraints).
- Where reports are made anonymously, updates may be limited depending on the information provided.

We are committed to transparency and continuous improvement and will use feedback from reports to enhance our policies, training, and supplier engagement.

6.4.1 Acknowledge Receipt

- a) Timing: Immediately upon receiving the allegation.
- b) Content: Confirm receipt, thank the source, and outline the next steps.
- c) Tone: Respectful, neutral, and non-committal (avoid assumptions before investigation).

6.4.2 Conduct Investigation

- a) Gather facts from internal teams and suppliers.
- b) Interview relevant parties.
- c) Review documentation and site conditions.
- d) Engage third-party auditors if needed.

6.4.3 Assess Findings

- a) Determine:
 - a. Whether the allegation is substantiated.
 - b. The severity and scope of the issue.
 - c. Any breaches of the code of conduct, legal obligations or terms and conditions.

6.4.4 Prepare Feedback

Tailor the response based on the outcome:

If Substantiated:

- a) Acknowledge the issue.
- b) Summarize the findings (without breaching confidentiality).
- c) Outline corrective and preventative actions taken.
- d) Share timelines and monitoring plans.

If Not Substantiated:

- a) Explain the scope and method of the investigation.
- b) Clarify why the allegation could not be confirmed.
- c) Reaffirm your commitment to ethical sourcing and invite further dialogue.

6.4.5 Deliver the Feedback

- a) Format: Written communication (email or letter), possibly followed by a call or meeting.
- b) Tone: Transparent, respectful, and appreciative of the source's concern.
- c) Confidentiality: Protect identities and sensitive information.

6.4.6 Follow-Up

- a) Offer a channel for further questions or concerns.
- b) Provide updates if new developments arise.
- c) Use the case to improve internal processes and training.

6.5 Strengthening of our Preventive Measures

6.5.1 Contract Clauses

NHS Supply Chain may terminate Agreement & Contracts forth with by notice in writing to the Supplier where there has been a failure by the Supplier and/or one its Sub-contractors to comply with legal obligations in the fields of environmental, social, or labour Law. Where the failure to comply with legal obligations in the fields of environmental, social, or labour Law is a failure by one of the Supplier's.

6.5.2 Supply Chain Visibility

As part of the procurement process, the Category teams will ask suppliers about their supply chains to ensure transparency and accountability. This involves gathering detailed information on the suppliers' operations, including their sourcing practices, manufacturing processes, and distribution networks.

Additionally, NHS Supply Chain is part of the Global Supply Chain Intelligence Programme (GSCIP). The GSCIP enhances visibility of the UK's supply chains by combining several large commercial datasets. This programme helps in identifying supply chain opportunities and risks, ensuring that our procurement practices are robust and resilient.

7. Training

7.1 Training Requirements

Training staff on modern slavery is crucial to ensure that they are equipped with the knowledge and skills to identify and address issues within our supply chains. This training helps in fostering a culture of vigilance and responsibility, ensuring that all employees understand the importance of combating modern slavery.

Given that the majority of our staff are involved in procurement for the NHS, it is essential to train them on how to incorporate modern slavery considerations into the procurement process. This includes understanding the risks, conducting due diligence, and engaging with suppliers to ensure compliance.

The following training programmes are available:

- **Mandatory Modern Slavery Training Annually:** All staff are required to complete this training annually to stay updated on the latest practices and regulations.
- **Tackling Modern Slavery in Supply Chains - Crown Commercial College:** This specialised training focuses on the complexities of modern slavery within supply chains and provides practical guidance on how to address these issues effectively.

8. Monitoring Compliance

We are committed to ensuring ongoing compliance with the Modern Slavery Act 2015 across our organisation and supply chain. To support this, we have implemented robust monitoring mechanisms for both employees and suppliers.

8.1 Employee Compliance

All employees are required to complete mandatory Modern Slavery training on an annual basis. Completion rates are actively monitored and reported to ensure full participation. This training reinforces our zero-tolerance approach to modern slavery and equips staff with the knowledge to identify and report any concerns.

8.2 Supplier Compliance

Suppliers must meet minimum requirements related to modern slavery compliance, including achieving a satisfactory score on the Modern Slavery Assessment Tool (MSAT), as a condition of entry onto our procurement frameworks.

- For suppliers within our Supplier Relationship Management (SRM) programme, ongoing compliance is monitored and managed by the SRM team.
- For suppliers outside of the SRM programme, responsibility for monitoring rests with the relevant category management teams.

We regularly review supplier performance and take appropriate action where non-compliance is identified, including engagement, remediation, or, where necessary, removal from our supply chain.

8.3 Key Performance Indicators (KPIs)

To measure the effectiveness of this policy, NHS Supply Chain will track the following KPIs:

- % of suppliers completing MSAT annually
- - % of high-risk suppliers audited
- - % of staff completing training on time

8.4 Escalation Procedure

- Initial Response – Category Manager
- First Escalation – Sustainability Advisor cc Supplier Manager
- Second Escalation – Category Lead, Sustainability Manager cc Supplier Relationship and Dev Lead
- Third Escalation – Head of Category, Head of Sustainability, Lead Procurement Lawyer cc Supplier Management Director cc Category Director cc Executive Director of Governance and Legal
- Fourth Escalation – Commercial Executive Director NHSE cc Crown Rep and Customer Groups

9. Related Documents

This Modern Slavery Policy is supported by related policies such as the Whistleblowing Policy and the Anti-Fraud Policy. These policies provide additional mechanisms for reporting concerns and ensuring ethical practices throughout NHS Supply Chain 's operations.

Document Reference No.	Title	Location
1.	Supplier Code of conduct	Hyperlink
2.	Whistleblowing Policy	Navex Link
3.	Anti-Fraud, Bribery and Corruption Policy	Navex Link

Appendix A –

Document Reference No.	Title	Location
1.	Modern Slavery Act 2015	Hyperlink
2.	Modern Slavery Assessment Tool	Hyperlink
3.	PPN 009	Hyperlink
4.	Statutory guidance - Modern Slavery	Hyperlink
5.	ILO Indicators	Hyperlink