

## Local Anti-Fraud, Bribery and Corruption Policy (F-012)

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Author (name & job title)	Nikki Cooper, Local Counter Fraud Specialist
Executive Lead (name & job title):	Pete Beckwith, Executive Director of Finance
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*Policies should be accessed via the Trust intranet to ensure the current version is used*

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## 1. INTRODUCTION

As a trust that delivers publicly funded healthcare services, Humber Teaching NHS Foundation Trust (the Trust) is accountable for the provision of services in an open and transparent manner. Any failure to do so could potentially have significant negative impact on the Trust's reputation.

The Trust is committed to preventing and reducing fraud, bribery and corruption to an absolute minimum and keeping it at that level, freeing up public resources for better patient care. The Trust does not tolerate fraud, bribery or corruption and aims to eliminate all such activity as far as possible.

The Counter Fraud service for the Trust is provided by Audit Yorkshire. The Trust endorses and supports the Audit Yorkshire Counter Fraud Strategy, which aligns with the NHS Counter Fraud Authority Strategy 2023-26. For further information about the Audit Yorkshire Counter Fraud Strategy, please contact your Local Counter Fraud Specialist (LCFS).

The Trust will take all necessary steps to counter fraud, bribery and corruption in accordance with this policy and the Government Counter Fraud Functional Standard (the Standard). The Trust will seek the appropriate disciplinary, regulatory, civil and criminal sanctions against fraudsters and where possible will attempt to recover losses.

As directed by NHS England and in accordance with the Standard, the Trust is required to obtain the services of an accredited LCFS who is nominated to the NHS Counter Fraud Authority (NHSCFA). The LCFS is responsible for the completion of a range of preventative counter fraud and bribery tasks, in line with Trust-approved work plans, and for conducting any necessary criminal investigations. Locally, the LCFS is accountable to the Executive Director of Finance.

The policy is supported and endorsed by the Audit Committee and the Chief Executive. It is based on guidance issued by the NHSCFA in February 2022.

The policy is available to all staff on the intranet at <https://intranet.humber.nhs.uk/Policies/Corporate%20Policies/Local%20Anti%20Fraud%20Bribery%20and%20Corruption%20Policy.pdf>. The purpose of the policy is to inform those working for the Trust of their responsibilities and what they should do if they have a suspicion involving fraud, bribery or corruption.

The aims of the policy are:

- To ensure the Trust has appropriate counter fraud procedures in place in accordance with the Standard and the Bribery Act 2010
- To provide a guide for those working for the Trust on what fraud is and how to report concerns
- To inform those working for the Trust of their responsibility to prevent fraud, bribery and corruption
- To detail the roles and responsibilities of key staff and departments
- To detail the potential outcomes where fraud, bribery and corruption are suspected

## 2. SCOPE

This policy applies to all personnel working for or on behalf of the Trust, including but not limited to employees (regardless of position held or employment status), consultants, volunteers, contractors, staff engaged via a third-party supplier, honorary contract holders and/or any other parties that have a business relationship with the Trust.

The policy relates to all forms of fraud, bribery and corruption and is intended to provide direction and assistance to employees and those working on behalf of the Trust who may identify suspected fraud, bribery and corruption. It provides a framework for responding to suspicions of fraud, bribery and corruption, advice and information on various aspects of this and the implications of a criminal investigation. It is not intended to provide a comprehensive approach to preventing and detecting fraud, bribery and corruption.

The policy should be read in conjunction with the Trust's Disciplinary, Freedom to Speak Up, Standing Orders and Standing Financial Instructions, Standards of Business Conduct and Managing Conflicts of Interest for NHS Staff, Scheme of Delegation, Risk Management Strategy, Redress Procedure, Losses and Special Payments and Electronic Communications and Internet Acceptable Use policies.

## **DEFINITIONS**

### **NHS Counter Fraud Authority (NHSCFA)**

The NHSCFA has overall responsibility for the detection, investigation and prevention of fraud and economic crime within the NHS. Its aim is to lead the fight against fraud affecting the NHS and wider health service, by using intelligence to understand the nature of fraud risks, investigate serious and complex fraud, reduce its impact and drive forward improvements.

Trusts are primarily responsible for dealing with economic crime risks in their own organisation. The NHSCFA provides information and guidance to local counter fraud specialists to assist with the delivery of counter fraud, bribery and corruption work across the NHS and wider health group at a local level.

The NHSCFA's objectives are:

- Deliver the Department of Health and Social Care's (DHSC) strategy, vision and strategic plan and lead counter fraud activity in the NHS in England
- Be the single expert intelligence led organisation providing a centralised investigation capacity for complex economic crime matters in the NHS
- Lead, guide and influence the improvement of standards in counter fraud work
- Take the lead and encourage fraud reporting across the NHS and wider health group
- Invest in and develop NHSCFA staff

More information about the NHSCFA strategy 2023-26 is available at: <https://cfa.nhs.uk/about-nhscfa/corporate-publications>.

### **Government Counter Fraud Functional Standard**

A requirement of the NHS Standard Contract is that relevant providers of NHS services (that hold a Monitor Licence or is an NHS trust) must take the necessary action to comply with the Standard, including having policies, procedures and processes in place to combat fraud, bribery and corruption to ensure compliance with the Standard. Other NHS funded providers should have due regard to requirements of the Standard. The NHSCFA carries out regular assessments of health organisations in line with the Standard. More information about the requirements of the Standard can be found at: <https://cfa.nhs.uk/government-functional-standard>.

The Trust's counter fraud work plan and annual report will encompass the requirements and detail work required to meet them.

## Fraud

There are several specific offences under the Fraud Act 2006, however there are three primary ways in which it can be committed that are likely to be investigated by the LCFS:

- **Fraud by false representation** (section 2) – lying about something using any means
- **Fraud by failing to disclose information** (section 3) – not saying something when you have a legal duty to do so
- **Fraud by abuse of position** (section 4) – abusing your position of trust where there is a duty to safeguard financial interests of another person or trust

It should be noted that all offences under the Fraud Act 2006 occur where the act or omission is committed dishonestly and with the intent to cause a gain or make a loss. The gain or loss does not have to succeed, as long as there is intent. Successful prosecutions under the Fraud Act 2006 may result in an unlimited fine and/or a custodial sentence of up to 10 years.

More information about the Fraud Act 2006 can be found at <https://www.legislation.gov.uk/ukpga/2006/35/crossheading/fraud>.

## Bribery and corruption

The Bribery Act 2010 came into force on 1 July 2011 and repeals previous corruption legislation. The Act introduced the criminal offences of both offering and receiving a bribe. It also places specific responsibility on trusts to have in place adequate procedures to prevent bribery and corruption taking place.

Bribery can generally be defined as offering, promising or giving a financial or other advantage to influence others to use their position in an improper way (i.e., to obtain a business advantage). A benefit can be money, gifts, rewards etc. and does not have to be of substantial financial value. No actual gain or loss has to be made.

A person has committed a criminal offence of offering a bribe even if the offer is declined, as does a person who accepts a bribe, even if they don't receive it.

A bribe does not have to be in cash; it may be the awarding of a contract, provision of a gift, hospitality or sponsorship or another benefit.

Anyone found guilty of either offering or receiving a bribe could face a custodial sentence of up to 10 years imprisonment.

Corruption is generally considered as an umbrella term covering various activity and behaviour including bribery, kickbacks, favours, corrupt preferential treatment or cronyism. Corruption can be broadly defined as the offering or acceptance of inducements, gifts, favours, payment or benefit-in-kind which may influence the action of any person. Corruption does not always result in a loss. The corrupt person may not benefit directly from their deeds; however, they may be unreasonably using their position to give some advantage to another.

All staff are reminded that they should be transparent in respect of recording any gifts, hospitality or sponsorship and they should refer to the Trust's Standards of Business Conduct and Managing Conflicts of Interest for NHS Staff for further information.

Section 7 of the Bribery Act 2010 introduced a new corporate offence of failure of commercial organisations to prevent bribery. The Trust can be held liable when someone associated with it bribes another in order to obtain or retain business for the Trust and be subject to an unlimited fine. However, the Trust will have a defense if it can demonstrate that it had adequate procedures

in place designed to prevent bribery.

The Act applies to everyone associated with the Trust who performs services on its behalf, or who provides the Trust with goods or services. This includes anyone working for or with the Trust, such as employees, agents, subsidiaries, contractors and suppliers.

Employees of the Trust must not request or receive a bribe from anybody, nor imply that such an act might be considered. This means they will not agree to receive or accept a financial or other advantage from a former, current or future client, business partner, contractor or supplier or any other person as an incentive or reward to improperly perform their function or activities. More information on the Bribery Act 2010 can be found at <https://www.legislation.gov.uk/ukpga/2010/23/crossheading/general-bribery-offences>.

### **3. DUTIES AND RESPONSIBILITIES**

Through day to day work, employees are in the best position to recognise any specific fraud risks within their own areas of responsibility. They also have a duty to ensure that those risks, however large or small, are identified and eliminated. Where it is believed fraud, bribery and corruption could occur, or has occurred, this should be reported to the LCFS or the Executive Director of Finance immediately.

#### **Chief Executive**

The Trust's Chief Executive has overall responsibility for funds, assets and resources entrusted to it and the Trust's systems of internal control. This includes instances of fraud, bribery and corruption.

The Chief Executive must ensure adequate policies, procedures and processes are in place to protect the Trust and the funds it receives. However, responsibility for the operation and maintenance of systems and controls falls directly to managers and requires the involvement of everyone working on behalf of the Trust. The Chief Executive, via the Executive Director of Finance, will monitor and ensure compliance with this policy.

#### **The Board**

The Trust's board should provide clear and demonstrable support and strategic direction for counter fraud, bribery and corruption work. They should review the proactive management, control and evaluation of such work to ensure that the Trust's funds, people and assets are adequately protected against criminal activity including fraud, bribery and corruption. The board and its members should scrutinise NHSCFA assessment reports, when available, and ensure that recommendations are fully actioned.

#### **Executive Director of Finance**

The Executive Director of Finance, in conjunction with the Chief Executive, will monitor and ensure the Trust's compliance against Service Condition 24 of the NHS Standard Contract and the Bribery Act 2010.

The Executive Director of Finance has power to approve financial transactions initiated by the Trust's directorates.

The Executive Director of Finance prepares, documents and maintains detailed financial procedures and systems, and applies the principles of separation of duties and internal checks to supplement those procedures and systems

The Executive Director of Finance will report annually to the board on the adequacy of internal

financial controls and risk management as part of the board's overall responsibility to prepare a statement of internal control for inclusion in the Trust's annual report.

The Executive Director of Finance will review annually the suitability, adequacy and effectiveness of the Trust's counter fraud, bribery and corruption arrangements and implement improvements as and when appropriate.

The Executive Director of Finance will, depending on the outcome of initial investigations, inform appropriate senior management of suspected cases of fraud, bribery and corruption, especially in cases where the loss may be above an agreed limit or where the incident may lead to adverse publicity.

The Executive Director of Finance will liaise with the LCFS regarding any identified concerns.

### **Counter Fraud Champion**

All NHS bodies are expected to appoint a Counter Fraud Champion. The role of the Counter Fraud Champion is as follows:

- To promote awareness of fraud, bribery and corruption
- To understand the threat posed by fraud, bribery and corruption
- To understand best practice on counter fraud

The Counter Fraud Champion is not expected to take referrals if a member of staff has concerns. If a member of staff contacts the Counter Fraud Champion to make a report, they will be signposted to the available reporting routes (via the LCFS, Executive Director of Finance or NHSCFA Reporting Line).

The LCFS and the Counter Fraud Champion will work closely together to ensure that there is no duplication of effort. The Counter Fraud Champion for the Trust is Iain Omand, Deputy Director of Finance and Contracting who can be contacted on 07970025144 or email: [iain.omand@nhs.net](mailto:iain.omand@nhs.net).

### **Audit Committee**

The Audit Committee is responsible for reviewing, approving and monitoring the Trust's counter fraud workplan. The committee will receive regular updates on counter fraud activity, will monitor the implementation of action plans, and will provide direct access and liaison with those responsible for counter fraud work. The committee will review annual reports on counter fraud, discuss NHSCFA quality assessment reports and will provide independent scrutiny to ensure any necessary post assessment action plans are carried out.

Further information which may assist the committee in discharging its functions effectively can be found in the NHS Audit Committee Handbook 2018, published by Healthcare Financial Management Association (HFMA) at: <https://www.hfma.org.uk/publications/details/nhs-audit-committee-handbook>.

### **Internal and External Audit**

The Trust utilises both internal and external audit functions, which include reviewing the Trust's controls and systems, and ensuring compliance with financial instructions. It will be expected that any incident or suspicion of fraud, bribery or corruption identified by either internal or external audit will be shared immediately to the nominated LCFS and Executive Director of Finance.

### **Human Resources**

Human Resources (HR) colleagues are responsible for informing the LCFS about any suspicions of fraud, bribery and corruption they may become aware of. HR are responsible for the conduct of any internal disciplinary investigation and instigating any necessary internal action, including

disciplinary action against those who fail to comply with Trust policies, procedures and processes.

Criminal and disciplinary processes have different purposes, are governed by different rules and/or legislation and require different standards of proof. These differences mean that one investigator must not conduct both the criminal and disciplinary investigations into the same matter.

There is no legal rule giving precedence to the criminal process over the disciplinary process and the Trust may undertake disciplinary proceedings even if a criminal investigation is ongoing. All decisions will be based on the individual circumstances of each case and discussed with the LCFS.

However, a disciplinary hearing should not normally take place if it would prejudice ongoing criminal proceedings. In all cases, public protection is paramount; the decision to give precedence to the criminal process over the disciplinary one must be subject to overriding public interest considerations – namely the risk to the provision of services, patients and/or the wider public caused by a delay in applying disciplinary sanctions.

Coordination of parallel criminal and disciplinary investigations in order to achieve the most appropriate outcome requires regular liaison between HR colleagues and the LCFS. Beside routine interaction, specific consultation should occur at the following points:

- All referrals received by HR that contain an element of suspected fraud, bribery and corruption must be reported to the LCFS and/or Executive Director of Finance immediately
- Wherever parallel sanctions are being pursued, the investigating officer and/or HR should meet regularly with the LCFS to provide updates and ensure the flow of information
- HR should inform the LCFS where there are serious health and safety risks (i.e. a clinician identified as not holding the appropriate qualifications) or cases involving vulnerable individuals that may take precedence over a criminal investigation
- HR must advise the LCFS of disciplinary hearing outcomes as this may impact on any criminal sanctions. The Trust will ensure there are appropriate protocols in place to cover this.

### **Local Counter Fraud Specialist (LCFS)**

The LCFS is responsible for taking forward all counter fraud work locally in accordance with national standards and reports directly to the Executive Director of Finance.

Adherence to the Standard is important not only to ensure contractual obligations are complied with, but also to ensure that the Trust has appropriate counter fraud, bribery and corruption arrangements in place. To this end, the LCFS will look to achieve the highest standards possible in their work.

The LCFS will work with key colleagues and stakeholders to promote counter fraud work, apply effective preventative measures and investigate allegations of fraud, bribery and corruption. In consultation with the Executive Director of Finance, the LCFS will report any cases to the NHSCFA. Where necessary, the LCFS will ensure that other relevant parties are informed of allegations, such as HR if an employee is the subject of a referral.

The LCFS will utilise a risk planning toolkit to help identify fraud, bribery and corruption risks at the Trust and the resulting information will be used to inform future counter fraud work.

The LCFS has been specifically trained in counter fraud procedures and has been nominated by



the Trust to undertake work in this field. The LCFS will work with all staff and stakeholders to promote counter fraud work and will effectively respond to system weaknesses and investigate allegations of fraud, bribery and corruption. The LCFS has a number of duties to perform including:

- Receive any fraud, bribery and corruption referrals directly from staff, the public or a contractor
- Investigate all cases of fraud within the Trust and report on these to the Audit Committee
- Publicise counter fraud work and the fraud awareness message within the Trust
- Undertake local proactive counter fraud work with the aim of fraud prevention and/or detection
- Report any system weaknesses to the Trust and the NHSCFA

The LCFS will adhere to the Counter Fraud Professional Accreditation Board (CFPAB)'s Principles of Professional Conduct as set out in the NHS Counter Fraud Manual.

## **Managers**

All managers within the Trust are responsible for ensuring that policies, procedures and processes within their local area are adhered to and kept under constant review. Managers should be alert to the possibility that unusual events, requests or transactions could be indications of fraud, bribery or corruption.

All managers have a responsibility to ensure that staff and those working within their team are aware of fraud, bribery and corruption, understand the importance of protecting the Trust from it, and managers will bring this policy to their staff's attention. The desktop guide at Appendix 2 provides a reminder of the key contacts and actions to be followed if fraud, bribery and corruption acts are suspected. Managers are encouraged to publicise the desktop guide within their local area.

The LCFS will support managers in encouraging a counter fraud, bribery and corruption culture and the LCFS will proactively undertake work to raise awareness of this.

All instances of actual or suspected fraud, bribery and corruption which come to the attention of a manager must be reported to the LCFS immediately. It is appreciated that some employees may initially raise concerns with their manager; however, under no circumstances should managers investigate the allegation(s) themselves. There is a clear responsibility for managers to refer concerns to the LCFS and/or Executive Director of Finance as soon as possible.

Managers at all levels are responsible for ensuring that fraud risks are included in any local risk assessments and for mitigating any identified risks. The responsibility for the prevention and detection of fraud, bribery and corruption therefore primarily rests with managers but requires the co-operation of all employees. The LCFS is available to provide any advice and guidance as necessary.

## **All Employees**

All employees are required to comply with the Trust's policies, procedures and processes and apply best practice in order to prevent fraud, bribery and corruption (e.g. procurement, expenses and ethical behaviour.)

Employees are expected to act in accordance with the standards laid down by their professional institutes, where applicable, and have a personal responsibility to ensure they are familiar with them. Employees and those working on behalf of the Trust should be made aware of their own responsibilities in accordance with the Trust's policies and in protecting the Trust from fraud, bribery and corruption. Employees have a duty to protect the assets of the Trust, including information and property.

In addition, all employees have a responsibility to comply with all applicable laws, regulations and Trust policies relating to ethical business behaviour, procurement, personal expenses, conflicts of interest, confidentiality and the acceptance of gifts and hospitality. This means that, in addition to maintaining the normal standards of personal honesty and integrity, employees should always:

- Avoid acting in any way that might cause others to allege or suspect them of dishonesty
- Behave in a way that would not give cause for others to doubt that the Trust's employees deal fairly and impartially with official matters
- Be alert to the possibility that others might be attempting to deceive

All employees have a duty to ensure that the Trust's funds, including NHS funds, are safeguarded whether they are involved with cash or payment systems, managing budgets or dealing with contractors or suppliers.

If an employee suspects that there has been fraud, bribery or corruption, or has seen any suspicious acts or events, they must report the matter to the LCFS and/or Executive Director of Finance.

Humber Teaching NHS Foundation Trust's counter fraud service is provided under contract by Audit Yorkshire and any relevant information can be reported using the contact information set out in section 4 below.

### **Information Management and Technology**

The YHCR Programme Manager & CIO will contact the LCFS and/or the Executive Director of Finance immediately in all cases where there is a suspicion that IT is being used for fraudulent purposes. There may also be offences under the Computer Misuse Act 1990.

Similarly, the YHCR Programme Manager & CIO will liaise with the LCFS to ensure that a subject's access (both physical and electronic) to the Trust's IT resources is restricted, suspended or removed where an economic crime investigation identifies that it is appropriate to do so.

## **4. PROCEDURES RELATING TO THE POLICY**

### **Bribery and Corruption**

The Trust will conduct risk assessments in line with Ministry of Justice guidance to assess how bribery and corruption may affect it, and proportionate procedures will be implemented to mitigate identified risks.

The Trust has Standards of Business Conduct and Managing Conflicts of Interest for NHS Staff, this outlines how declarations of interest, and gifts and hospitality should be managed and declared.

### **Reporting fraud, bribery and corruption**

This section details the action to be taken if fraud, bribery or corruption is discovered or suspected.

If an employee suspects that fraud, bribery or corruption has taken place they should ensure it is reported to the Local Counter Fraud team:

via the LCFS, Nikki Cooper, on 07872 988939, [nikki.cooper1@nhs.net](mailto:nikki.cooper1@nhs.net), the counter fraud team at [yhs-tr.counterfraudyork@nhs.net](mailto:yhs-tr.counterfraudyork@nhs.net) or Steve Moss, Head of Anti-Crime Services, on 07717

356707 or [steven.moss@nhs.net](mailto:steven.moss@nhs.net).

A referral form can be found at Appendix 1; this can also be used to refer any suspicions to the LCFS.

Alternatively, reports can be made directly to the Director of Finance. If the referrer believes that the Director of Finance or LCFS may be implicated in a fraud they should notify whichever party is not believed to be involved, who will then inform the Chief Executive.

If the referrer feels for any reason that they are unable to report the matter internally, referrals can be made to the NHSCFA, via the Fraud and Corruption Reporting Line on 0800 028 4060 (powered by Crimestoppers) or online at: <https://cfa.nhs.uk/reportfraud>.

All suspicions of fraud should be reported using the processes outline above. However, to support employees in reporting suspicions, the Trust has a Freedom to Speak Up Procedure policy which is available to all staff.

The LCFS will undertake sufficient enquiries to establish whether there is any foundation to any allegation received. If the allegation is substantiated, the LCFS and/or NHSCFA will undertake a criminal investigation and seek to apply criminal and civil sanctions, where appropriate, and in accordance with criminal legislation and set investigative procedures. Financial recovery will also be sought wherever possible.

### **Disciplinary action**

Disciplinary procedures will be initiated where an employee is suspected of being involved in an act of fraud, bribery or corruption, or where their negligent action has led to an economic crime being perpetrated. A copy of the Trust's Disciplinary Policy can be accessed [here](#).

### **Sanctions and redress**

The Trust's approach to pursuing sanctions in cases of fraud, bribery and corruption is that the full range of sanctions, including criminal, civil, disciplinary and regulatory, will be considered at the earliest opportunity and any or all of these may be pursued where appropriate. Consistency in this approach demonstrates the Trust's commitment to take fraud, bribery and corruption seriously and ultimately contributes to the deterrence and prevention of such actions.

The types of sanctions that the Trust will consider applying when a fraud, bribery or corruption offence has occurred are:

**Civil** – the Trust will seek financial redress wherever possible, to recover sums lost (of money or assets) including interest and costs of investigating fraud, bribery and corruption. Redress can be sought in various ways including confiscation or compensation orders, the use of Proceeds of Crime Act 2002 (POCA) legislation in criminal courts, as well as civil sanctions such as an order of repayment, attachment of earnings, locally agreed voluntary negotiations or repayments. The Trust will actively publicise any redress obtained, where appropriate, with a view to creating a deterrent effect.

**Criminal prosecution** – the LCFS will work in partnership with the NHSCFA, the police, and/or the Crown Prosecution Service where necessary to bring a case to court against an alleged offender. Sentences can include, but are not limited to, community service, fines and imprisonment. The Trust will actively publicise any criminal sanctions obtained, where appropriate, with a view to creating a deterrent effect.

**Disciplinary** – the Trust will take disciplinary action where an employee is suspected of being involved in an economic crime act. A copy of the Trust's disciplinary policy can be accessed via the Disciplinary action section of this policy, above.

**Professional** – where appropriate, the Trust reserves the right to also report staff and employees working on behalf of the Trust to their professional/regulatory body as a result of an investigation and/or prosecution.

## 5. EQUALITY AND DIVERSITY

The Trust aims to ensure that all of its policies are equitable with regard to age, disability, gender, race, religion and belief or sexual orientation.

An Equality Impact Assessment has been carried out by the author which confirms that this policy does not impact on any equality group (Appendix 4).

## 6. MENTAL CAPACITY ACT

This is a non-clinical policy and therefore not relevant.

## 7. BRIBERY ACT

For further information see

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/832012/bribery-act-2010-quick-start-guide.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/832012/bribery-act-2010-quick-start-guide.pdf)

If you require assistance in determining the implications of the Bribery Act please contact the Trust Secretary on 01482 389194, the Local Counter Fraud Specialist on 07872 988939 / email [nikki.cooper1@nhs.net](mailto:nikki.cooper1@nhs.net) or Head of Anti-Crime Services on 07717 356707 / email [steven.moss@nhs.net](mailto:steven.moss@nhs.net).

## 8. IMPLEMENTATION AND MONITORING

This policy will be disseminated by the method described in the Document Control Sheet (Appendix 3).

The implementation of this policy requires no additional financial resource.

## 9. MONITORING AND AUDIT

Monitoring is essential to ensuring that controls are appropriate and robust enough to prevent or reduce fraud. To ensure compliance with Service Condition 24 of the NHS Standard Contract, and the Government Counter Fraud Functional Standard, arrangements include reviewing system controls on an ongoing basis and identifying weaknesses in processes. More information can be found at: <https://cfa.nhs.uk/government-functional-standard>.

Where deficiencies are identified as a result of monitoring, appropriate recommendations and action plans will be developed and implemented.

As set out in section 3, managers will ensure staff are aware of the existence of this policy. The LCFS will also raise awareness of the policy, wherever possible.

It is important that staff are aware of the policy and understand it and it is available to all staff on the intranet at

<https://intranet.humber.nhs.uk/Policies/Corporate%20Policies/Local%20Anti%20Fraud%20Brib>

[ery%20and%20Corruption%20Policy.pdf](#).

This policy will be reviewed by the LCFS every 3 years, or where legislative changes dictate. Regular review will ensure that it remains fit for purpose and current.

## **10. MONITORING COMPLIANCE**

See Appendix 3.

## Appendix 1: NHS Fraud, Bribery and Corruption Referral Form

If you wish to report a potential fraud, bribery or corruption please complete this form and email it to Nikki Cooper, Local Counter Fraud Specialist, [nikki.cooper1@nhs.net](mailto:nikki.cooper1@nhs.net) or [yhs-tr.counterfraudyork@nhs.net](mailto:yhs-tr.counterfraudyork@nhs.net).

### YOUR DETAILS

It is not necessary to provide your contact details; however, it is possible that more information may be required in order for any investigation to take place. All reported incidents will be investigated, and where appropriate the offenders prosecuted. As a result, the Police may also be contacted. All concerns will be treated sensitively and in the strictest confidence. You will not suffer any recriminations as a result of raising a reasonable and justified suspicion.

Your Name:

Address:

Telephone:

E-mail:

### SUSPECT DETAILS

Name and role:

Description:

### FRAUD, BRIBERY OR CORRUPTION DETAILS

Location:

Details:  
**(Please attach  
any available  
information)**

Signed:

Dated:

The Trust Local Counter Fraud Specialist will undertake to acknowledge receipt of this referral within 5 working days unless otherwise requested.

## Appendix 2: Fraud, Bribery and Corruption Dos and Don'ts A desktop guide for staff

**FRAUD** is the dishonest intent to obtain a financial gain from, or cause a financial loss to, a person or party through false representation, failing to disclose information or abuse of position.

**BRIBERY** is the deliberate use of inducement or payment of benefit-in-kind to influence an individual to use their position in an unreasonable way

### DO:

- **Note your concerns**  
Record details such as your concerns, names, dates, times, details of conversations and possible witnesses. Time, date and sign your notes.
- **Retain evidence**  
Retain any evidence that may be destroyed, or make a note and advise your LCFS.
- **Report your suspicion**  
Confidentiality will be respected – delays may lead to further financial loss.

### DO NOT:

- **Confront the suspect or convey concerns to anyone other than those authorised as listed below.**  
Never attempt to question a suspect yourself; this could alert a fraudster or accuse an innocent person
- **Try to investigate, or contact the police directly**  
Never attempt to gather evidence yourself unless it is about to be destroyed; gathering evidence must take into account legal procedures in order for it to be useful. Your LCFS can conduct an investigation in accordance with legislation.

If you suspect that fraud against the NHS has taken place, you must report it immediately, by:

- Directly contacting the Local Counter Fraud Specialist
- Telephone the freephone NHS Fraud and Corruption Reporting Line
- Online at <https://cfa.nhs.uk/reportfraud>

[Do you have concerns about a fraud taking place in the NHS?](#)

*If so, any information can be passed to the NHS Fraud and Bribery Reporting Line: 0800 028 40 60*

*All calls will be treated in confidence and investigated by professionally trained staff*

Your Local Counter Fraud Specialist can be contacted by telephoning 07872 988939 or emailing [nikki.cooper1@nhs.net](mailto:nikki.cooper1@nhs.net)

If you would like further information about the NHS Counter Fraud Authority, please visit <https://cfa.nhs.uk/>

## Appendix 3: Document Control Sheet

This document control sheet must be completed in full to provide assurance to the approving committee.

Document Type	Policy		
Document Purpose	The policy has been produced to assist staff with actions to take when suspicions of fraud exist and to raise awareness of anti-fraud work		
Consultation/Peer Review:	Date:	Group/Individual	
<i>List in right hand columns consultation groups and dates</i>		ODG	
Approving Committee:	Audit Committee	Date of Approval:	
Ratified at:	n/a as minor changes	Date of Ratification:	n/a as minor changes
Training Needs Analysis: <i>(please indicate training required and the timescale for providing assurance to the approving committee that this has been delivered)</i>		Financial Resource Impact	
Equality Impact Assessment undertaken?	Yes [ ]	No [ ]	N/A [ ]
Publication and Dissemination	Intranet [ <input checked="" type="checkbox"/> ]	Internet [ ]	Staff Email [ <input checked="" type="checkbox"/> ]
Master version held by:	Author [ ]	HealthAssure [ <input checked="" type="checkbox"/> ]	
Implementation:	<i>Describe implementation plans below - to be delivered by the Author:</i>		
	Implementation will consist of: <ul style="list-style-type: none"> <li>Email to all staff of updated policy</li> <li>Publication on website</li> </ul>		
Monitoring and Compliance:			

<b>Document Change History: (please copy from the current version of the document and update with the changes from your latest version)</b>			
Version number/name of procedural document this supersedes	Type of change, e.g. review/legislation	Date	Details of change and approving group or executive lead (if done outside of the formal revision process)
1.00	New policy	27/01/14	Replacing Local Counter Fraud Policy P047 as instructed by NHS Protect.
1.01	Minor	28/02/14	following feedback from Governance Committee Section 4' replaced by 'Section 6'.
1.02	Review	13/05/16	Updated job titles, email and website references and appendices
1.03	Review	15/05/19	Updated policy to reflect changes to NHS Counter Fraud Authority, job titles, email addresses and associated policy names
1.04	Review	02/08/21	Updated policy to merge with Bribery Prevention Policy, reflect changes to Counter Fraud provider, job titles, email addresses and associated policy names
1.05	Review	26/09/23	Reviewed with minor wording amends and update to reporting info, job titles, email addresses, etc. Approved at ODG (26 September 2023).



## Appendix 4: Equality Impact Assessment (EIA)

### For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

1. Document or Process or Service Name: Local Anti-Fraud, Bribery & Corruption Policy
2. EIA Reviewer (name, job title, base and contact details): Nikki Cooper, Local Counter Fraud Specialist, [nikki.cooper1@nhs.net](mailto:nikki.cooper1@nhs.net)
3. Is it a Policy, Strategy, Procedure, Process, Tender, Service or Other? Policy

#### Main Aims of the Document, Process or Service

Advise staff what to do when suspicions of fraud exist and raise awareness of anti-fraud work/

Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma.

Equality Target Group	Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?	How have you arrived at the equality impact score?
1. Age	<p>Equality Impact Score</p> <p>Low = Little or No evidence or concern (Green)</p> <p>Medium = some evidence or concern (Amber)</p> <p>High = significant evidence or concern (Red)</p>	a) who have you consulted with
2. Disability		b) what have they said
3. Sex		c) what information or data have you used
4. Marriage/Civil Partnership		d) where are the gaps in your analysis
5. Pregnancy/Maternity		e) how will your document/process or service promote equality and diversity good practice
6. Race		
7. Religion/Belief		
8. Sexual Orientation		
9. Gender re- assignment		

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
<b>Age</b>	Including specific ages and age groups:  Older people Young people Children Early years	Low	The policy sets out responsibilities and arrangements regardless of age
<b>Disability</b>	Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities:  Sensory,Physical, Learning, Mental Health  (including cancer, HIV, multiple sclerosis)	Low	The requirements of the policy apply equally
<b>Sex</b>	Men/Male Women/Female	Low	The requirements of the policy apply equally
<b>Marriage/Civil Partnership</b>		Low	The requirements of the policy apply equally
<b>Pregnancy/ Maternity</b>		Low	The requirements of the policy apply equally
<b>Race</b>	Colour Nationality Ethnic/national origins	Low	The requirements of the policy apply equally to any race.
<b>Religion or Belief</b>	All religions  Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	The requirements of the policy apply equally to any religion or belief
<b>Sexual Orientation</b>	Lesbian Gay men Bisexual	Low	The requirements of the policy apply equally to any sexual orientation
<b>Gender Reassignment</b>	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	The requirements of the policy apply equally to any gender

**Summary**

Please describe the main points/actions arising from your assessment that supports your decision above

The policy is low risk and will not have a negative effect on any of the above equality target group.

EIA Reviewer: Nikki Cooper, Local Counter Fraud Specialist

Date completed: 26/09/2023

Signature: N Cooper