




Anti-Fraud Bribery and Corruption Policy

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|----------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------|
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| Executive director | Executive Director of Finance | |
| Policy lead | Head of Financial Services | |
| Policy author (if different from above) | Local Counter Fraud Specialist (LCFS) for the respective provider | |
| Exec Sign off Signature (electronic) |  | |
| Disclosable under Freedom of Information Act 2000 | Yes | |

Policy context

Fraud is a hidden crime that, if left unchecked, can impact greatly upon all staff and patients at the Trust. Fraud is not a victimless crime – it takes money away from patient care and society as a whole ultimately pays for fraud.

One of the basic principles of public sector organisations is the proper use of public funds. It is therefore important that all Trust employees are aware of the risk of and means of enforcing the rules against any acts involving bribery.

Policy requirement (see Section 2)

Any member of staff who has a reason to suspect a colleague, patient, contractor or other person of fraud, corruption or bribery or an offence against the trust or a serious infringement of Trust or NHS rules, is required to and responsible for informing the Executive Director of Finance, or the Local Counter Fraud Specialist.

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1: Introduction

1.1 Birmingham and Solihull NHS Mental Health Trust (BSMH) is committed to reducing fraud, bribery or corruption in the NHS. The Trust will seek the most appropriate disciplinary, regulatory, civil and criminal sanctions where fraud has been committed and where possible will attempt to recover losses. To this end, the Trust's assets and interests must be accounted for and be safeguarded from losses arising from fraud, bribery or corruption. Included within this document are extracts from sections of the criminal law under which charges might be brought. The policy provides information on what consists of fraud, bribery and corruption and the process which is followed when an allegation is received.

1.2 Any concerns of fraud, bribery or corruption must be reported to:

The Trust's Local Counter Fraud Specialists:

- Erin Sims – Associate Director and LCFS – erin.sims@nhs.net 07800 617456
- Emily Wood – Senior Consultant and LCFS – emily.wood10@nhs.net

Further information can be found on the Trust's Counter Fraud Intranet Page (<http://connect/corporate/counter-fraud/Pages/default.aspx>) or the Trust's website.

NHS Counter Fraud Authority

<https://cfa.nhs.uk/reportfraud>

1.3 Scope

This policy applies to all staff within Trust, regardless of position held, including all substantive employees as well as, agency staff, consultants, vendors, contractors, and/or any other parties who have a business relationship with the Trust. It will be brought to the attention of all staff and form part of the induction process for new staff. All staff have a responsibility to protect the assets of the Trust, including all buildings, equipment and monies from fraud, theft, or bribery. It is incumbent on all of the above to report any concerns they may have concerning fraud and/or bribery.

1.4 Principles

The Trust has a zero-tolerance approach to fraud, bribery and corruption. All matters concerning these matters will be dealt with accordingly and in line with this Policy. All suspicions of fraud, bribery and corruption should be report to the Local Counter Fraud Specialist as soon as practicable.

The Trust positively supports individuals with learning disabilities and ensures that no-one is prevented from accessing the full range of mental health services available. Staff will work collaboratively with colleagues from learning disabilities services and other organisations, in order to ensure that service users and carers have a positive episode of care whilst in our services. Information is shared appropriately in order to support this.

2: The Policy

2.1 This document provides a guide for staff on what fraud is in the NHS, what everyone's responsibility is to prevent fraud, bribery and corruption and how to report it. It is not intended to provide a comprehensive approach to preventing and detecting fraud and bribery. The overall aims of this policy are to:

- improve the knowledge and understanding of everyone in the Trust, irrespective of their position, about the risk of fraud and bribery within the organisation and its unacceptability
- assist in promoting a climate of openness and a culture and environment where staff feel able to raise concerns sensibly and responsibly

- set out the Trust’s responsibilities in terms of the deterrence, prevention, detection and investigation of fraud and bribery
- ensure the appropriate sanctions are considered following an investigation, which may include any or all of the following:
 - Criminal prosecution
 - civil prosecution
 - internal/external disciplinary action(including professional/regulatory bodies)

2.2 NHS Counter Fraud Authority

The NHS Counter Fraud Authority (NHSCFA) is a Special Health Authority, established on 1 November 2017 and charged with identifying, investigating and preventing fraud within the NHS and the wider health group. The legislation which created the NHSCFA transferred all functions and powers from NHS Protect to the NHSCFA. The NHSCFA is independent from other NHS bodies and is directly accountable to the Department of Health and Social Care.

A copy of the NHS strategy, “NHS Fraud: Organisational Strategy 2020-2023 is available at: <https://cfa.nhs.uk/about-nhscfa/corporate-publications>

The Trust’s anti-fraud, bribery and corruption work is aligned and strives to meet the requirements as required by the NHSCFA under the *Government Functional Standards 013: Counter Fraud*.

2.3 Fraud Act 2006

The Fraud Act 2006 represents an entirely new way of investigating fraud. It is no longer necessary to prove that a person has been deceived. The focus is now on the dishonest behaviour of the suspect and their intent to make a gain or cause a loss.

Put simply, fraud is a dishonest act of deception intended for personal gain or to cause a loss to another party such as the "Intentional distortion of financial statements or other records to conceal the misappropriation of assets or otherwise for gain".

The offences of fraud can be committed in three ways:

- Fraud by false representation (section 2) – being dishonest about something using any means e.g. by words or actions;
- Fraud by failure to disclose (section 3) – dishonestly not saying something when you have a legal duty to do so;
- Fraud by abuse of position (section 4) – dishonestly abusing a position where there is an expectation to safeguard the financial interests of another person or organisation.

It should be noted that all offences under the Fraud Act 2006 occur where the act or omission is committed dishonestly and with the intention to make a gain or cause a loss for an individual or another. The act of making a gain or loss does not have to be successful in order for the offence to be complete.

Examples of fraud include, but are not limited to:

- Staff claiming for additional hours not worked
- Staff claiming false expenses
- Staff using false documents to obtain employment

- Staff working elsewhere whilst claiming sick pay
- Managers obtaining goods and services for personal use
- Suppliers intentionally inflating or duplicating invoices
- Overseas patient claiming free NHS care that they are not entitled to

2.4 Bribery Act 2010

The Bribery Act 2010 modernises the law on bribery. It came into force on 1 July 2011. Bribery is defined as offering someone or accepting a financial or other incentive to encourage that person to perform their functions or activities improperly or to reward that person for having already done so.

Bribery does not have to involve cash or an actual payment exchanging hands and can take many forms such as a gift, lavish treatment during a business trip or tickets to an event. Bribery does not always result in a loss. The corrupt person may benefit directly from their deeds; however, they may be unreasonably using their position to give some advantage to another.

It is imperative that gifts and hospitality, including cash payments, are not received in return for services provided or to obtain or retain business; this includes political contributions and charitable donations. Should a service user or client wish to express gratitude through tokens of goodwill, they should be reported to your line manager or Director immediately and it should be ensured that the Trust's Gifts and Hospitality Policy is followed.

An organisation can commit an offence under Section 7 of the Bribery Act 2010, which is failing to prevent a bribe, if an employee, subsidiary, or associated person commits bribery within it. The organisation has a defence against this offence if it can demonstrate it has adequate anti-bribery controls and procedures in place.

2.5 Theft Act 1968

Theft is defined as dishonestly appropriating property belonging to another with the intention of permanently depriving them of it (i.e. stealing). Fraud is distinct from theft because it involves an element of deception; for example, making a false representation. All instances of theft within the Trust should be referred to the Trusts LSMS (Local Security Management Specialist).

2.6 Computer Misuse Act 1990

Depending on the circumstances, acts of fraud can also include computer misuse. The Computer Misuse Act 1990 includes such offences as:

- Unauthorised access to computer material, which includes ID and password misuse, to alter, copy delete or move a program or data or simply to output a program or data, laying a trap to obtain a password.
- Unauthorised access to a computer with intent, this includes gaining access to financial or administrative records.
- Unauthorised modification of computer material including destroying another's files creation of a virus, introduction of a virus and any deliberate action to cause a system malfunction.

Any examples of the above must be reported to the Head of Information Security and the LCFS.

3: The Procedure

3.1 Strategic Approach

The Trust is committed to taking all necessary steps to counter fraud, bribery and corruption. To meet its objectives, the Trust has adopted the key principles set out in the NHSCFA (NHS Counter Fraud Authority) strategy.

3.2 In line with the NHSCFA's strategy, the Trust intends to operate procedures which will place emphasis upon the following steps during all transactions and ongoing relationships:

- Ensure top level commitment in managing, overseeing and ultimately ensuring that there is a zero-tolerance approach to fraud, bribery and corruption throughout the Trust.
- Risk Assessments shall be carried out in areas vulnerable to fraud, bribery and corruption.
- Ensure Due Diligence occurs within all business transactions.
- Cover all areas of risk with clear, practical and accessible policies and procedures that are applicable to the Trust's employees and its business partners.
- Embed anti-fraud and bribery measures into internal controls.
- Monitor and Review progress to obtain assurance that adequate measures are in place against fraud and bribery.
- Communicate the importance of this issue to all members of staff, partnering organisations and contractors.

3.3 Bribery Act proportionate procedures

The Trust has considered how bribery and corruption may affect the organisation and proportionate procedures have been put in place to mitigate the risks.

To limit BSMH exposure to bribery, the Trust has in place an Anti-Fraud, Bribery and Corruption Policy, a Declarations Policy, and a Raising Concerns Policy. These apply to all staff and to individuals and organisations who act on behalf of BSMH. The Trust also employs a Local Counter Fraud Specialist who will investigate, as appropriate, any allegations of fraud, bribery or corruption

Whilst BSMH recognises that hospitality, gifts and sponsorship may be offered as part of legitimate business relationships, all individuals must refer to the Standards of Business Conduct Policy to ensure they understand what they must do and what is expected of them in such circumstances.

3.4 Reporting Fraud, Bribery or Corruption

All reports of fraud, bribery and corruption are taken seriously and thoroughly investigated. If you suspect or have discovered fraud, bribery or corruption you should:

- Inform the nominated LCFS or contact the Head of Financial Services, Deputy Director of Finance or the Executive Director of Finance.
- If the Executive Director of Finance or LCFS is implicated, please report your concerns to the Chief Executive, who will decide on the action to be taken.
- Staff can also call the NHS Counter Fraud Authority's Fraud and Corruption Reporting Line on Freephone 0800 028 40 60 or online at <https://reportfraud.cfa.nhs.uk/>. This allows individuals to report their concerns in the strictest confidence or anonymously.

- Anonymous letters, telephone calls etc. can be used to raise matters of concern.

All staff should be assured that there will be no recriminations against staff that report reasonably held suspicions. This, and the confidentiality of reporting fraud allegation, is outlined in more detail in the Trust's Whistleblowing Policy. Victimising or deterring staff from reporting concerns is a serious disciplinary matter. Any contravention of this policy must be reported to the Chief Executive or Chair of the Audit Committee. Equally however, abuse of the process by raising malicious allegations could be regarded as a disciplinary matter.

In some cases, e.g. if a major diversion of funds is suspected, speed of response will be crucial to avoid financial loss in following the processes laid out within this policy.

3.5 Clinical Considerations

When investigating suspicions of fraud, bribery or corruption, it is important to consider whether there may be any clinical or health and safety implications, which could have an adverse impact on patients and the organisation. An example of this would be an individual who is working with patients or vulnerable people, and is suspected of using a false name/identity. In such cases, the overriding consideration must be one of patient care.

Fraud investigations will not compromise clinical issues and/or patient care.

3.6 Managing the Investigation

The LCFS must be aware that staff under an investigation, which could lead to disciplinary action, have the right to be represented at all stages. In certain circumstances, evidence may best be protected by the LCFS recommending to the Trust that the staff member is suspended from duty. The Trust will make a decision, based on HR advice, on the disciplinary options, which include suspension.

The Trust will follow its disciplinary procedure if there is evidence that an employee has committed an act of fraud or corruption.

3.7 Gathering evidence

The LCFS will take control of any physical evidence, and record this in accordance with the procedures outlined in the NHS Anti-Fraud Manual and the Criminal Procedure and Investigations Act 1996. If evidence consists of several items, such as many documents, LCFSs should record each one with a separate reference number, corresponding to the written record.

Interviews under caution or to gather evidence will only be carried out by the LCFS, if appropriate, or the investigating Police officer in accordance with the Police and Criminal Evidence Act 1984 (PACE). The LCFS will take written statements where necessary.

All employees have a right to be represented at internal disciplinary interviews by a trade union representative or accompanied by a friend, colleague or any other person of their choice, not acting in a legal capacity in connection with the case.

The application of the Anti-Fraud, Bribery and Corruption Policy will at all times be in tandem with all other appropriate Trust policies, e.g. Standing Financial Instructions (SFIs).

3.8 Reporting the results of the investigation

The investigation process requires the LCFS to review the systems in operation to determine whether there are any inherent weaknesses. Any such weaknesses identified should be corrected immediately.

If fraud bribery or corruption is found to have occurred, the LCFS will prepare a report for the Executive Finance Director and the Trust's Audit Committee, setting out the following details:

- the circumstances,
- the investigation process,
- the estimated loss,
- the steps taken to prevent a recurrence,
- The steps taken to recover the loss.

3.9 Sanctions and Redress

It is important that sanctions are applied in a consistent manner, according to the seriousness of the crime involved. A policy statement on **applying appropriate sanctions consistently** has been produced by NHSCFA.

The Trust will consider all options available when a financial offence has occurred:

- **Civil** – civil sanctions can be taken against those who commit fraud, bribery and corruption to recover money and/or assets which have been fraudulently obtained, including interest and costs.
- **Criminal** –the LCFS will work in partnership with NHS Counter Fraud Authority, the police and/or the Crown Prosecution Service to bring a case to court against an alleged offender. Outcomes can range from a criminal conviction to fines and imprisonment.
- **Disciplinary** - disciplinary procedures will be initiated where an employee is suspected of being involved in a fraudulent, illegal or inappropriate act.
- **Professional body disciplinary** – if warranted, staff may be reported to their professional body as a result of a successful investigation/prosecution.

3.10 Disciplinary Action

BSMH's disciplinary procedures will be initiated where an employee is suspected of being involved in a fraudulent, illegal or inappropriate act.

It should be noted, however, that the duty to follow disciplinary procedures will not override the need for legal action to be taken (e.g. consideration of criminal action). It is important that there is adequate liaison between the LCFS, Executive Director of Finance and HR in these instances.

3.11 Police involvement

In accordance with NHSCFA guidance, the Executive Director of Finance in conjunction with the LCFS, will decide whether or not a case should be referred to the Police. Any referral to the Police will not prohibit action being taken under the local disciplinary procedures of the Trust.

The LCFS, in consultation with the Trust's Executive Director of Finance, will investigate allegations in accordance with procedures documented in the NHSCFA's Fraud Manual.

3.12 Financial redress and recovery

The Trust is committed to seeking the recovery of all funds that have been diverted by any criminal action. One of the key aims of the Trust's Counter Fraud Strategy is to maximise resources for the provision of high-quality patient care and services, thus where there is evidence that fraud has occurred it will seek to recover this as soon as practicable after the loss has been identified.

Financial redress or recovery of losses should be considered in all cases of fraud, bribery or corruption that are investigated by either the LCFS or NHSCFA, where a loss is identified. Redress allows resources that are lost to fraud, bribery and corruption to be returned to the NHS for use as intended, for the provision of high-quality patient care and services. This will limit the financial impact, deter others from committing fraud and minimise any reputational damage to the Trust.

Action to recover losses should commence as soon as practicable after the loss has been identified; in accordance with the Counter Fraud Strategy the Trust shall seek to recover monies that have been lost due to fraud, bribery and corruption. It is also important that sanctions are applied in a consistent manner. At all times, the Trust procedures for debt recovery shall be applied and modified where necessary.

Financial recovery as a result of fraud, bribery and corruption can take place in a number of ways, the Trust will consider adopting the following procedures:

- **Voluntary Repayment**

An attempt will be made to obtain a voluntary repayment from the member of staff responsible for the loss.

- **Civil Recovery**

If the member of staff declines then appropriate legal action will be considered, normally through the civil courts.

The civil recovery route is also available to the Trust if this is cost-effective and desirable for deterrence purposes. This could involve a number of options such as applying through the Small Claims Court and / or recovery through debt collection agencies. Each case will be discussed with the Executive Director of Finance to determine the most appropriate action.

- **Deductions from Salary**

Arrangements may be made to recover losses via payroll if the subject is still employed by the Trust. In all cases, current legislation must be complied with.

- **Proceeds of Crime Act 2002**

The NHSCFA can also apply to the courts to make a restraining order or confiscation order under the Proceeds of Crime Act 2002 (POCA). This means that a person's money is taken away from them if it is believed that the person benefited from the crime. It could also include restraining assets, such as property owned by the member of staff during the course of the investigation

- **NHS Pensions**

For employees in the NHS Pension scheme, any benefits or other amounts payable can be reduced. The Pensions Act 1995 specifically states: If a loss of public funds occurs because of a member's criminal, negligent or fraudulent act or omission, the

Secretary of State, may reduce any benefits or other amounts payable to, or in respect of, the member by any amount equal to the loss.

4: Responsibilities

| Post(s) | Responsibilities | Ref |
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| Chief Executive | <ul style="list-style-type: none"> • Overall responsibility for Trust Funds; including instances of fraud, bribery and corruption. • Ensure all adequate policies and procedures are in place to protect the organisation and the public funds it receives. | |
| Executive Director of Finance | <ul style="list-style-type: none"> • Approve financial transactions initiated by directorates across the organisation. • Prepares documents and maintains detailed financial procedures and systems, and that the Trust applies the principles of separation of duties and internal checks to supplement those procedures and systems. • Ensure that appropriate resources are made available for the Local Counter Fraud Specialist, so that all reported suspicions can be promptly and adequately investigated. • Agree and monitor the work plan for Anti-Fraud and Bribery work, or delegate this responsibility to an appropriate person. • In the event of an investigation, the Executive Director of Finance and the LCFS will ensure that appropriate consultation with Human Resources, where appropriate, is undertaken to enable the effective co-ordination of NHS parallel sanction practices (criminal, civil and disciplinary actions). Where fraud or other criminal act is proven, to ensure that perpetrators are appropriately dealt with, the Trust will also take appropriate steps to recover any assets lost as a result of fraud. | |
| Audit Committee | <ul style="list-style-type: none"> • Monitor the anti-fraud and bribery work plan and ensure the Trust remains committed to a zero tolerance approach to fraud, bribery and corruption, and to the rigorous investigation of any such cases as required by the Government Standard 013: Counter Fraud. | |

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| | <ul style="list-style-type: none"> • Be provided with an overview of ongoing anti-fraud and bribery activity, subject to sensitivity of legal proceedings; • Receive reasonable assurances that the Trust is complying with the requirements of the Government Standard 013: Counter Fraud and NHS Contract regarding anti-fraud and bribery work. | |
| The Board | <ul style="list-style-type: none"> • Ensure that it provides a secure environment in which to work, and one where people are confident to raise concerns without worrying that it will reflect badly on them. This extends to ensuring that staff feel protected when carrying out their official duties and are not placed in a vulnerable position. If staff have concerns about any procedures or processes that they are asked to be involved in, the Trust has a duty to ensure that those concerns are listened to and addressed. • Liable to be called to account for failing to prevent bribery. The Trust therefore has a duty to ensure employees receive adequate training and support in order to carry out their responsibilities. The Chief Executive and Executive Director of Finance will monitor and ensure compliance with this policy. | |
| Internal and External Audit | <ul style="list-style-type: none"> • Reviewing controls and systems and ensuring compliance with financial instructions. This includes a duty to pass on any suspicions of fraud, bribery or corruption to the LCFS. | |
| Human Resources | <ul style="list-style-type: none"> • Liaison with the LCFS and Executive Director of Finance and advice in relation to matters of employment law and in other procedural matters, such as disciplinary and complaints procedures, as requested. The consideration of 'triple tracking' options, namely criminal, civil and disciplinary sanctions (including professional regulatory body disciplinary sanctions) shall be taken in conjunction with HR, Executive Director of Finance and the LCFS. | |
| Local Counter Fraud Specialist | <ul style="list-style-type: none"> • Responsible for taking forward all anti-fraud work locally in accordance with national standards and locally agreed work plans. | |

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| | <ul style="list-style-type: none"> • Reports directly to the Executive Director of Finance, delegated to the Head of Financial Services. • It is important that the organisation has appropriate anti-fraud, bribery and corruption arrangements in place and that the LCFS will look to achieve the highest standards possible in their work. • Work with key colleagues and stakeholders to promote anti-fraud work, apply effective preventative measures and investigate allegations of fraud and corruption. • Conduct risk assessments and local proactive exercises in relation to their work to prevent fraud, bribery and corruption. • Fraud investigations must only be undertaken by an accredited and nominated LCFS. Therefore any cases being investigated, within the Trust, where fraudulent activity is suspected, must be referred to the LCFS. | |
| <p>Managers</p> | <ul style="list-style-type: none"> • Responsibility for the operation and maintenance of controls (policies, procedures and processes) falls directly to line managers and requires the involvement of all Trust staff. The Trust therefore has a duty to ensure staff who are involved in, or who are managing internal control systems, receive adequate training and support in order to carry out their responsibilities. • Ensure that policies, procedures and processes within their local area are adhered to and kept under constant review. This includes ensuring that staff are aware of fraud, bribery and corruption and understand the importance of protecting the organisation from it. • Report any instances of actual or suspected fraud, bribery or corruption brought to their attention to the LCFS immediately. It is appreciated that some staff will initially raise concerns with their manager, however, in such cases, managers must not attempt to | |

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| | investigate the allegation themselves; they have the clear responsibility to refer the concerns to the Local Counter Fraud Specialist as soon as possible. | |
| All Staff | <ul style="list-style-type: none"> • Through the normal working day, those providing BSMH services (employees, regardless of position held, as well as Non-Executive Directors, agency staff, consultants, vendors, contractors, and/or any other parties who have a business relationship with the Trust) are in the best position to recognise any specific risks within their own areas of responsibility. All have a duty to ensure that those risks, however large or small, are identified and eliminated. • Staff must act in accordance with the Trust's Declarations Policy, which include guidance on the receipt of gifts or hospitality. • A 'Code of Conduct for NHS Boards' was first published by the NHS Executive in April 1994 and set out the initial public service values. This has been superseded by the seven fundamental public service values specified in the Nolan report. A further Code of Conduct was issued in October 2002 titled "Code of Conduct for NHS Managers". All those who work in the Trust should be aware of, and act in accordance with the public service values and the Nolan principles for standards in public life: <ul style="list-style-type: none"> • Selflessness: Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their families or their friends. • Integrity: Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that may influence them in the performance of their official duties. • Objectivity: In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders | |

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| | <p>of public office should make choices on merit.</p> <ul style="list-style-type: none"> • Accountability: Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office. • Openness: Holders of public office should be as open as possible about all their decisions and the actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands. • Honesty: Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest. • Leadership: Holders of public office should promote and support these principles by leadership and example. • Staff are required to comply with the Trust’s policies and procedures and apply best practice in order to prevent fraud, bribery and corruption (for example in the areas of procurement, personal expenses and ethical business behaviour). Staff should be made aware of their own responsibilities in protecting the organisation from these crimes. | |
| <p>Procurement</p> | <ul style="list-style-type: none"> • Procurement policies and processes will be conducted in a fair and transparent manner and not deal with contractors and suppliers known to be paying bribes. Before engaging contractors and suppliers, the Trust will undertake properly documented due diligence. Unless prospective contractors and suppliers have effective anti-bribery programmes in place, the Trust will contractually require them to comply with its Anti-Fraud & Bribery Policy. • Agreements with contractors and suppliers shall, at all times, provide for the necessary contractual mechanisms to enforce compliance with the anti-bribery arrangements. The Trust will monitor performance and, in case of non- | |

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| | <p>compliance, require the correction of deficiencies, apply sanctions, or eventually terminate the agreement.</p> <ul style="list-style-type: none"> • Further information provided by the NHS Counter Fraud Authority on Procurement can be found at: https://cfa.nhs.uk/fraud-prevention/fraud-guidance | |
| <p>Information Management and Technology</p> | <ul style="list-style-type: none"> • For staff with access to information technology and the internet, usage is linked to the performance of their duties and any private use specifically agreed beforehand. Any instance of deliberate viewing of offensive material (e.g. pornography or hate material) must be reported immediately. The fraudulent use of information technology (this includes inappropriate internet/intranet, e-mail, telephone and tablet/PDA use) will be reported by the Head of Information Technology to the LCFS. | |

5: Development and Consultation process

- An outline of who has been involved in developing the policy and procedure including Trust forums and service user and carer groups.

| Consultation summary | | |
|-------------------------------------------------------|---------------------|--------------------|
| Date policy issued for consultation | | |
| Number of versions produced for consultation | | |
| Committees / meetings where policy formally discussed | | Date(s) |
| Audit Committee | | |
| Board | | |
| Where received | Summary of feedback | Actions / Response |
| | | |
| | | |

(*Add rows as necessary)

6: Reference documents

- Standing Financial Instructions
- Standing Orders
- Standards of Business Conduct Policy
- Declarations Policy
- Raising Concerns Policy
- Procurement Policy
- Management of Sickness Absence Policy
- ICT Policy
- Disposal of Assets Policy
- Disciplinary Policy
- Pay Policy
- Recruitment and Selection Policy
- Risk Management Policy

7: Bibliography:

- Secretary of State Directions to NHS Trusts and Special Health Bodies 2017:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/677254/Directions_to_NHS_Bodies_2017.pdf
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/677255/Directions_to_NHSCFA_2017.pdf
 - NHS Counter Fraud Authority Strategy: 2020 to 2023:
https://cfa.nhs.uk/resources/downloads/documents/corporate-publications/NHSCFA_Strategy_2020-23.pdf
 - NHS Counter Fraud Authority NHS Requirements: Government Functional Standard 013: Counter Fraud
<https://cfa.nhs.uk/government-functional-standard/NHS-requirements>
 - NHS Counter Fraud Authority:
<https://cfa.nhs.uk/>
 - About the NHS Counter Fraud Authority:
<https://cfa.nhs.uk/about-nhscfa/what-we-do>
 - Code of Conduct for Board Members of Public Bodies June 2019:
<https://www.nhsbsa.nhs.uk/sites/default/files/2019-09/Code%20of%20Conduct%20for%20Board%20Members%20of%20Public%20Bodies%20June%202019.pdf>
- Acts of Parliament:**
- Bribery Act 2010.
www.gov.uk/government/publications/bribery-act-2010-guidance

www.legislation.gov.uk/ukpga/2010/23/notes/division/5/22

- Computer Misuse Act 1990.

www.legislation.gov.uk/ukpga/1990/18/contents

- Fraud Act 2006.

www.cps.gov.uk/legal/d_to_g/fraud_act/

www.legislation.gov.uk/ukpga/2006/35/contents

- Police and Criminal Evidence Act 1984

www.legislation.gov.uk/ukpga/1984/60/contents

- Proceeds of Crime Act 2002.

www.legislation.gov.uk/ukpga/2002/29/contents

www.gov.uk/government/uploads/system/uploads/attachment_data/file/317904/Fact_Sheet_-_Overview_of_POCA__2_.pdf

- Public Interest Disclosure Act.

www.gov.uk/government/publications/the-public-interest-disclosure-act

8: Glossary

All definitions are provided within the Policy.

9: Audit and assurance

9.1 Monitoring and auditing of policy effectiveness

Monitoring is essential to ensuring that controls are appropriate and robust enough to prevent or reduce fraud. The Trust reviews system controls on an ongoing basis to ensure compliance and identify weaknesses in processes; this is mainly achieved through a fraud and bribery risk assessment but also through local proactive exercise.

Where deficiencies are identified as a result of monitoring, recommendations will be made to strengthen the controls in that area. Such recommendations will be considered and implemented as appropriate. Changes made will be subject to further review to ensure that they have had the desired effect.

The LCFS should consider when measuring policy effectiveness, the number of referrals received and where the referrals came from. Consideration should also be given to any initiatives undertaken to increase readership; this can be measured through staff surveys, eLearning engagement and a review of traffic to the Counter Fraud Intranet pages.

The Local Counter Fraud Specialist is responsible for updating the Anti-Fraud and Bribery Policy and the Audit Committee is responsible for ratifying the Policy.

| Element to be monitored | Lead | Tool | Frequency | Reporting Committee |
|-------------------------|-------------------------------------|-------------------------------------------------------------------------------|-----------|---------------------|
| Awareness and training | LCFS and Head of Financial Services | E learning, induction and face to face training, intranet and communications. | Annual | Audit |

| | | | | |
|----------------------------|-------------------------------------|--------------------------------------------------|---------------|-------|
| NHS CFA standards and KPIs | LCFS and Head of Financial Services | Annual Counter Fraud Functional Standards Return | Annual | Audit |
| Policy review | LCFS and Head of Financial Services | Policy review | Every 3 years | Audit |

9.2 Dissemination of the policy

It is important that all staff understand and are aware of this policy.

It will be available to all staff on the Trust's intranet and will be brought to the attention of all employees and will form part of the induction process for new staff.

9.3 Review of the policy

This policy will be reviewed every three years – or earlier if significant changes are required - to ensure that it remains current.

The LCFS will be responsible for reviewing this policy and making appropriate amendments prior to submission to the Trust's Audit Committee for final approval.

Monitoring of policy effectiveness is essential to ensure that controls are appropriate and robust enough to prevent or reduce fraud. Ongoing review of system controls and identification of weaknesses in processes, resulting in action plans or recommendations that are implemented, will all be taken into consideration when this policy is reviewed to ensure the policy remains up to date.

9.4 Standards / Key performance Indicators

The Trust is required to complete the NHS Counter Fraud Authority's Counter Fraud Functional Standards Return and submit this annually to NHSCFA. The Trust must mark itself against each component of the Government Function Standard 013: Counter Fraud, as either compliant (green), partially compliant (amber) or non-compliant (red). A workplan is required to address all non-compliant standards, which will be monitored by the Audit Committee.

An assessment process may be conducted by NHS Counter Fraud Authority's Quality and Compliance team, in partnership with the Trust. This is a means of evaluating the Trust's effectiveness in dealing with the fraud, bribery and corruption risks it faces through one of four types of assessment: full, focused, thematic or triggered.

9.5 Monitoring Compliance

The LCFS reports regularly to the Executive Director of Finance. The Audit Committee receives regular progress reports and an annual report containing details of reported and investigated cases of fraud from the LCFS. The NHSCFA monitors the work of the LCFS.

9.6 Awareness, Training and Implementation

The LCFS raises fraud awareness by arranging road shows, giving presentations to staff teams, keeping the fraud awareness page on the intranet updated and participating in the Induction Programme. This Policy will be brought to the attention of all employees by the LCFS through the induction process for new staff and will be included in the induction of new

Non-Executive Directors. The Anti-Fraud and Bribery Policy is available on the Trust Intranet to all staff.

10. Appendices:

- ✦ **Appendix A equality assessment**
- ✦ **Appendix B Reporting lines summary**

Equality Analysis Screening Form

A word version of this document can be found on the HR support pages on Connect

<http://connect/corporate/humanresources/managementsupport/Pages/default.aspx>

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| Title of Proposal | Anti-Fraud and Bribery Policy | | | |
| Person Completing this proposal | Lead LCFS | Role or title | Local Counter Fraud Specialist | |
| Division | Finance | Service Area | Counter Fraud | |
| Date Started | February 2022 | Date completed | | |
| Main purpose and aims of the proposal and how it fits in with the wider strategic aims and objectives of the organisation. | | | | |
| The policy aims to inform staff of the expectations required to help prevent and detect fraud and advises how concerns can be reported. The policy details how allegations of fraud, bribery and corruption are managed at the Trust and possible action taken against those who have committed an offence. | | | | |
| Who will benefit from the proposal? | | | | |
| Staff, patients, service users, contractors, non-executive roles, service providers will benefit from a Trust with a zero tolerance approach to fraud bribery and corruption. | | | | |
| Impacts on different Personal Protected Characteristics – Helpful Questions: | | | | |
| <i>Does this proposal promote equality of opportunity?</i> | | <i>Promote good community relations?</i> | | |
| <i>Eliminate discrimination?</i> | | <i>Promote positive attitudes towards disabled people?</i> | | |
| <i>Eliminate harassment?</i> | | <i>Consider more favourable treatment of disabled people?</i> | | |
| <i>Eliminate victimisation?</i> | | <i>Promote involvement and consultation?</i> | | |
| | | <i>Protect and promote human rights?</i> | | |
| Please click in the relevant impact box or leave blank if you feel there is no particular impact. | | | | |
| Personal Protected Characteristic | No/Minimum Impact | Negative Impact | Positive Impact | Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics. |
| Age | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| Including children and people over 65 Is it easy for someone of any age to find out about your service or access your proposal? | | | | |

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--|--|----------------------------------------------------------------------------------------------|
| Are you able to justify the legal or lawful reasons when your service excludes certain age groups | | | | |
| Disability | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability? Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families? | | | | |
| Gender | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your proposal? | | | | |
| Marriage or Civil Partnerships | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships? | | | | |
| Pregnancy or Maternity | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| This includes women having a baby and women just after they have had a baby Does your service accommodate the needs of expectant and post-natal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity? | | | | |
| Race or Ethnicity | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language? | | | | |
| Religion or Belief | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met? | | | | |

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sexual Orientation | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea? | | | | |
| Transgender or Gender Reassignment | x | | | All individuals involved in a fraud or bribery investigation are treated equally and fairly. |
| This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your proposal or service? | | | | |
| Human Rights | x | x | | All investigations are carried out in line with Article 6, right to a fair trial and most do not impact the other human rights of the subject. However, depending on the scope of the investigation, Article 8 regarding private and family life may be negatively impacted; any surveillance requirements will be appropriately applied for under the Regulation of Investigatory Powers Act 2000. |
| Affecting someone's right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position? | | | | |
| If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998) | | | | |
| | Yes | No x | | |
| What do you consider the level of negative impact to be? | High Impact | Medium Impact | Low Impact | No Impact |
| | | | x | |
| If the impact could be discriminatory in law, please contact the Equality and Diversity Lead immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required. | | | | |
| If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the Equality and Diversity Lead before proceeding. | | | | |

If the proposal does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the **Equality and Diversity Lead**.

Action Planning:

How could you minimise or remove any negative impact identified even if this is of low significance?

All investigations are thoroughly reviewed, and no action is taken without proper authority and approval. The impact on human rights is taken into account throughout the investigation process and is thoroughly scrutinised by the Crown Prosecution Service at Trial.

How will any impact or planned actions be monitored and reviewed?

All investigations are reviewed periodically by the LCFS and Reactive Management Team.

How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.

All individuals are treated equally throughout any counter fraud or bribery work. A right to private and family life might be effected, depending on the type of investigation, however this is not impacted by personal protected characteristics.

Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at bsmhft.hr@nhs.net. The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.

Full Equality Analysis Form

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------|--|
| Title of Proposal | | | |
| Person Completing this proposal | | Role or title | |
| Division/Department | | Service Area | |
| Date Started | | Date completed | |
| Looking back at the screening tool, in what areas are there concerns that the proposal treats groups differently, unfairly or disproportionately as a result of their personal protected characteristics? | | | |
| | | | |
| Summarise the likely negative impacts | | Summarise the likely positive impact | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| | | | |
| What previous or planned consultation or research on this proposal has taken place with groups from different sections of the community? | | | |
| | | Please provide list of groups consulted. | Summary of consultation / research carried out or planned. If already carried out, what does it tell you about the negative impact? |
| Group(s) (Community, service user, stakeholders or carers) | | | |
| Staff Group(s) | | | |
| What up-to-date information or data is available about the different groups the proposal may have a negative impact on? | | | |
| | | | |
| Are there any gaps in your previous or planned consultations, research or information? If so are there any other experts, groups that could be contacted to get further views or evidence? | | | |
| Yes | | No | |
| If yes please list below | | | |
| | | | |
| As a result of this Full Equality Analysis and consultation, what changes need to be made to the proposal? (You may wish to put this information into an action plan and attach to the proposal) | | | |
| | | | |
| Will any negative impact now be: | | | |

| | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------|--|---------------------|--|
| Low: | | Legal: | | Justifiable: | |
| Will the changes made ensure that any negative impact is lawful or justifiable? | | | | | |
| | | | | | |
| Have you established a monitoring system and review process to assess the successful implementation of the proposal? Please explain how this will be done below. | | | | | |
| | | | | | |
| Action Planning: How could you minimise or remove any negative impact identified even if this is of low significance? | | | | | |
| | | | | | |
| How will any impact or planned actions be monitored and reviewed? | | | | | |
| | | | | | |
| How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic? | | | | | |
| | | | | | |

Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at bsmhft.hr@nhs.net. The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.

Appendix B – Fraud Reporting Lines summary

Action to be taken if you discover or suspect THEFT, FRAUD, BRIBERY, CORRUPTION or other IRREGULARITY

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| THEFT/ASSAULT | Opportunist crime resulting in loss of Trust / patient property. Violence against staff, physical or verbal abuse, Security issues. | If you suspect theft, criminal/illegal act such as physical or verbal assault, violence towards staff or security issues please contact the Trust's Local Security Management Specialist (LSMS). |
| FRAUD BRIBERY | Any deliberate intent to permanently deprive an employer of money or goods through the falsification of any records or documents (i.e. submission of false invoices, inflated time records, the use of orders to obtain goods for personal use). Where someone is influenced by bribery, payment or benefit in kind to use his or her position to give some advantage to another. | This needs to be reported IMMEDIATELY to the Trust's Executive Director of Finance or Local Counter Fraud Specialist (LCFS). You therefore should discuss your suspicions or what you have discovered with one of the following: <ul style="list-style-type: none"> • The Trust's LCFS directly : Erin Sims – Associate Director and LCFS erin.sims@nhs.net 07800 617456 and Emily Wood – Senior Consultant and LCFS emily.wood10@nhs.net • Further information can be found on the Trust's Counter Fraud Intranet Page http://connect/corporate/counter-fraud/Pages/default.aspx and the Trust's website; • Or the Executive Director of Finance |
| OTHER IRREGULARITY | E.g. Viewing any offensive material on the internet. This includes fraudulently misappropriating Trust time. | Tell your line manager who must liaise with Human Resources and the LCFS. All instances of deliberate viewing of offensive and /or illegal material must be reported to Human Resources and the LCFS IMMEDIATELY. If you cannot inform your line manager for whatever reason, then contact Human Resources or the LCFS directly. |
| <p>If you are suspicious or have concerns</p> <p>DO tell someone – confidentiality will be respected.</p> <p>DO be persistent if you cannot get through to your LCFS or Executive Director of Finance first time</p> <p>DO keep or copy any document that arouses suspicions</p> | | <p>DO NOT be afraid to ring your LCFS for advice.</p> <p>DO NOT confront the individual with your suspicions</p> <p>DO NOT discuss the matter with anyone you think could be involved</p> <p>For Fraud DO NOT contact the police – notify your LCFS or Executive Director of Finance</p> <p>For Fraud DO NOT suspend without taking advice from Human Resources/LCFS</p> |