
Local Counter Fraud, Bribery and Corruption Policy

Please be aware that this printed version of the Policy may NOT be the latest version. Staff are reminded that they should always refer to the Intranet for the latest version.

Purpose of Agreement	The purpose of this policy is to provide direction to directors, managers and staff who find themselves having to deal with suspected cases of fraud or corruption.
Document Type	Policy
Reference Number	SNHS/Policy/Operational Policy/GO09
Version	7
Name of Approving Committees/Groups	Audit & Risk Committee Policy Steering Group Clinical Executive Group
Operational Date	March 2022
Document Review Date	March 2025
Document Sponsor (Job Title)	Chief Finance Officer (CFO)
Document Manager (Job Title)	Company Secretary / Local Counter Fraud Specialist (LCFS)
Document developed in consultation with	LCFS, CFO, Chief People Officer
SolNet Location	Business Zone > Policies, SOPs and Clinical Guidelines
Website Location	FOI Publication Scheme
Keywords (for website/intranet uploading)	Fraud, Corruption, Bribery, Policy, GO09

Amendments Summary:

Amend No	Issued	Page	Subject	Action Date
1	Version 4	1	Policy title and keywords for search are changed.	Nov 2016
2		3	Title of policy is updated from Whistleblowing Policy to Freedom to Speak Up Policy from this page and throughout the document.	Nov 2016
3		3	Policy Summary is added.	Nov 2016
4		4	Table of Content is updated.	Nov 2016
5		5	Name of Policy- Anti-Fraud, Corruption & Bribery Policy is updated throughout the document from this page onwards.	Nov 2016
6		5	Wording 'fraud and corruption' is updated as 'fraud, corruption and bribery' throughout the policy from this page onwards.	Nov 2016
7		5	Definition of Bribery is added.	Nov 2016
8		6	Equal Opportunities Document is updated as Equality, Diversity and Human Rights Policy.	Nov 2016
9		8	NHS Protect NHS Counter Fraud and Corruption Manual is updated as NHS Protect NHS Fraud Manual.	Nov 2016
10		10	The whole section for 'Sanctions and Redress' is added.	Nov 2016
11		10	Contact details are updated.	Nov 2016
12		11	Review section is updated.	Nov 2016
13		11	Useful links are updated.	Nov 2016
14			Footer is updated with the correct term of policy title.	Nov 2016
15	Version 5	Various	Policy reviewed by LCFS to conform to NHS Counter Fraud Authority template policy Policy title amended Reference to NHS Counter Fraud Authority instead of NHS Protect Inclusion of the role of the Board, Audit & Risk Committee, Managers, All Employees and IM&T under section 7 (and deletion of Area Anti-Fraud Specialists)	Oct 2018
16	Version 7	Various	Policy reviewed by LCFS Introduction – further reference to Fraud added Definitions of Fraud and Bribery updated at 1.4 Appendix of Examples removed given updated definitions Reference added to the Government Functional Standard (GovS013) and NHS Requirements Clarified who should receive reports at 5.2 – 5.5 Added guidance around incident reporting in respect of fraud matters at 5.7 Role of Fraud Champion added in compliance with GovS013 and NHS Requirements at 7.5 Additional and updated useful links added at section 15	February 2022

Review Log:

Version Number	Review Date	Lead Name	Ratification Process	Notes
Version 4	November 2016	Rachel Cheal	Audit & Risk Committee, PSG, Assurance Committee	
Version 5	October 2018	Karen Travers and Rachel Cheal	Audit & Risk Committee, PSG, Assurance Committee	
Version 6	December 2021	Rachel Cheal	Chair's action – approved extensions to April 2022, no risk posed	No changes made to policy
Version 7	December 2021	Sandra Glaister (with Colin Edwards – LCFS)	Audit & Risk Committee, PSG	Standard 3 year review

Policy Summary and Statement on Fraud, Bribery and Corruption

Solent NHS Trust is committed to supporting anti-fraud, bribery and corruption initiatives and recognises the importance of ensuring that there are appropriate policies and procedures in place to make sure that all staff are aware of their responsibilities.

The Fraud Act 2006 provides for a general offence of fraud with three ways of committing it, which are by false representation, by failing to disclose information and by abuse of position. It creates new offences of obtaining services dishonestly and of possessing, making and supplying articles for use in frauds.

The Bribery Act 2010, effective from 1st July 2011, has been introduced to make it easier to tackle the issue of bribery. Solent NHS Trust does not, and will not, pay bribes or offer improper inducements to anyone for any purpose; nor do we, or will we, accept bribes or improper inducements. This approach applies to everyone who works for us, or with us. To use a third party as a conduit to channel bribes to others is a criminal offence. We do not, and will not, engage indirectly in, or otherwise encourage, bribery.

The Bribery Act further introduces a corporate offence of failing to prevent bribery by the organisation not having adequate preventative procedures in place (“the section 7 offence”). We are as committed to the prevention, deterrence and detection of bribery just as we are to combating fraud in the NHS.

As an organisation, we have a zero-tolerance attitude towards fraud bribery and corruption and we aim to maintain anti-fraud, bribery and corruption compliance as “business as usual”, rather than as a one off exercise. To this end, everyone associated with the Trust is expected to play their part.

Existing Arrangements

Solent NHS Trust already has a number of policies and procedures in place, including:

- Risk assessments to identify high risk areas
- Requirement for all staff to adhere to the codes of conduct
- Requirement for staff to comply with the Register of Interests, Gifts & Hospitality Policy
- Freedom to Speak Up Policy
- Supplier contracts / tenders updated in line with the Act.

In addition, there are a number of routes through which staff can raise any concerns or suspicions:

- Via your line manager
- Our Local Counter Fraud Specialist
- NHS Fraud and Corruption Reporting Line 0800 028 40 60 or
- Online fraud reporting form at www.cfa.nhs.uk/reportfraud

This policy deals with the reporting of suspected fraud, bribery and/or corruption and provides detail within section 5 in relation to the procedure staff should follow if they suspect the misuse of public funds.

Table of Contents

	SECTION	PAGE
1	PURPOSE	6
2	SCOPE	8
3	PRINCIPLES	8
4	RESPONSIBILITIES	9
5	PROCEDURE – WHAT TO DO IF FRAUD, CORRUPTION or BRIBERY IS SUSPECTED	9
6	THE ROLE OF THE LOCAL COUNTER FRAUD SPECIALIST (LCFS)	10
7	OTHER ROLES AND RESPONSIBILITIES	11
8	SANCTION AND REDRESS	13
9	LINKS WITH OTHER POLICIES	14
10	EDUCATION & TRAINING IMPLICATIONS	14
11	MONITORING POLICY EFFECTIVENESS	14
12	REVIEW	14
13	USEFUL LINKS	14
	APPENDIX 1 – EQUALITY IMPACT ASSESSMENT	16
	APPENDIX 2 – CONTACT DETAILS	19

LOCAL COUNTER FRAUD, CORRUPTION & BRIBERY POLICY

1. PURPOSE

1.1 The Audit Commission Report *“Protecting the Public Purse”* recognised that the incidences of fraud and corruption in the NHS are low in comparison to the volume of expenditure, and that the vast majority of the people who work in the NHS are honest and diligent. The report however stressed that there should be no room for complacency and required all NHS bodies to review and consolidate their policies to ensure that all staff continue to have concern for the correct use of public funds.

1.2 NHS Counter Fraud Authority (NHSCFA)

The NHS Counter Fraud Authority (NHSCFA) has the 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. The NHSCFA produces a Strategy triennially which should be considered with this policy.

1.3 Counter fraud standards

A requirement in the NHS standard contract is that providers of NHS services (that hold a Monitor’s Licence or is an NHS Trust) must put in place and maintain appropriate measures to prevent, detect and investigate fraud, bribery and corruption, having regard to NHSCFA Requirements. Other’s should have due regard to the standards. The Trust is required to comply with the Government Functional Standard (GovSO13).

The Trust operates in line with the associated NHSCFA requirements to ensure that the appropriate arrangements are in place to manage fraud, bribery and corruption and minimise risk.

1.4 Definitions of Fraud, Corruption and Bribery are as follows:

Fraud - *“a deliberate and dishonest misrepresentation, intended to cause gain for oneself or loss to another”*. This definition implies deliberate intent and thus excludes negligence or simple error.

Fraud is a criminal offence as defined by the Fraud Act 2006. Most commonly, it occurs when a person dishonestly makes a false representation to gain for themselves or cause loss to another. The main types of offences for which a person could be prosecuted include:

- **Fraud by False Representation** – lying about something with the intention to cause a gain or a loss.
- **Fraud by Failure to Disclose Information** – not declaring something when you have a legal duty to do so with the intention to cause a gain or a loss.
- **Fraud by Abuse of Position** – where someone abuses a position of trust; where there is an expectation to safeguard the financial interest of another and places another at financial risk or causes a loss.
- **Fraud by Making or Supplying articles for use in frauds** – where a person makes, adapts, supplies or offers to supply any article knowing that it is designed or adapted for use in the course of or in connection with fraud, or intending it to be used to commit, or assist in the commission of, fraud.

In each instance the action must be shown to have been dishonest. It is not possible to commit fraud accidentally; it must be shown that the individual knew their actions to be wrong at the time.

As well as being a criminal offence, if a person is found to have committed fraud it is likely that they will have and/or also broken the terms of their contract of employment or professional codes of conduct.

Corruption - *“the offering, giving, soliciting or acceptance of an inducement or reward which may influence a person to act against the interests of the organisation.”*

Bribery – *“giving someone a financial or other advantage to encourage that person to perform their functions or activities improperly, or to reward that person for having already done so.”*

Bribery and corruption involve offering, promising or giving a payment or benefit-in-kind in order to influence others to use their position in an improper way to gain an advantage. There are four main offences:

- Offering a bribe - To offer, promise or give a bribe to another person to perform a relevant ‘function or activity’ improperly, or to reward a person for the improper performance of such a function or activity.
- Accepting a bribe - Requesting, agreeing to receive or accepting a bribe to perform a function or activity improperly, irrespective of whether the recipient of the bribe requests or receives it directly or through a third party, and irrespective of whether it is for the recipient’s benefit.
- Bribing a foreign public official.
- Failure of a commercial organisation to prevent bribery (An NHS health body is considered a ‘commercial organisation’).

The Trust supports appropriate criminal and internal action against all individuals that are alleged to have acted corruptly.

1.5 There are three fundamental public service values underpinning all public sector work:

- **Accountability** - Everything done by those who work in the organisation must be able to withstand public and parliamentary scrutiny.
- **Probity** - Absolute honesty and integrity should be exercised in dealing with service providers, assets, staff, suppliers and customers.
- **Openness** - The Trust’s activities should be sufficiently public and transparent to promote confidence between the organisation, patients, staff, and the public.

1.6 All those who work in the Trust should be aware of, and act in accordance with these values.

1.7 Solent NHS Trust is absolutely committed to maintaining an honest, open and well-intentioned atmosphere. It is also committed to the elimination of any fraud within the Trust and to the rigorous investigation of any such cases.

- 1.8 The Trust wishes to encourage anyone having reasonable suspicions of fraud to report them. It is also therefore the policy of the Trust, which will be rigorously enforced, that no employee will suffer in any way because of reporting reasonably held suspicions.
- 1.9 The Trust will ensure that all persons that are the subject of a fraud, bribery and/or corruption investigation in line with this policy will be treated fairly and without discrimination. All allegations will be investigated without different treatment stemming from personal characteristics or attributes, including the protected characteristics defined in the Equality Act 2010. This policy recognises the Human Rights Act 1998 and reference is made to Article 6 - A right to a fair trial and Article 7 - No punishment without law. The Trust further supports 'a Just Culture' as outlined by NHS England guidance.
- 1.10 The Trust recognises that sometimes accusations of fraud, bribery or corruption can be vexatious or motivated by discrimination on the grounds of a protected characteristic. We will ensure that all cases are investigated fairly and action under this policy will be stopped where this is the case. Staff making such alleged vexatious allegations will be investigated and appropriate action will be taken in line with the Trusts Disciplinary Policy.
- 1.11 The Trust has approved a Freedom to Speak Up policy in accordance with the Public Interest Disclosure Act 1998. Under the terms of this Act a member of staff is protected if they act reasonably and responsibly. In reporting cases of alleged fraud, bribery and/or corruption it is encouraged that staff will adhere to this policy rather than use the Trust's Freedom to Speak Up policy. However, this does not preclude an employee's right to use the Trust's Freedom to Speak Up policy should they feel it more appropriate.
- 1.12 Advice on any matter relating to fraud, bribery and/or corruption not specifically covered by this policy should always be sought from the nominated Local Counter Fraud Specialist (LCFS) in the first instance.

2. SCOPE

- 2.1 This policy applies to bank, locum, permanent and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), Patient Safety Partners, Non-Executive Directors, and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, internal and external stakeholders, Agency workers, and other workers who are assigned to Solent NHS Trust.
- 2.2 An Equalities Impact Assessment has been conducted in relation to this policy and can be found in Appendix 2, no equality issues were identified.

3 PRINCIPLES

- 3.1 This policy deals with the reporting of suspected fraud, bribery and corruption, which must be seen in the context of several key principles:
- a) Staff or their family and friends must not profit in any way from their employment with the Trust apart from their salary and other entitlements.
 - b) Staff must declare any interests, which may prejudice their requirement to act honestly and fairly.

- c) Staff must be, and be seen to be honest, and incorruptible in their dealings with colleagues, patients and other persons or organisations.
- d) The systems and procedures used by the Trust must be designed so that the opportunity for employees to commit theft or fraud or engage in corrupt practices is kept to a minimum.
- e) Employees are required to report any suspicions they may have of fraud or corruption to the appropriate authority. Failure to reasonably do this will be regarded with the same seriousness as the committing of the act itself.
- f) No member of staff will be penalised for following these guidelines, unless it can be proved they did so maliciously knowing that there was **no** reason to suspect fraud, bribery and/or corruption.
- g) Any case of suggested fraud, bribery or corruption found or reported will be investigated and the results of the enquiry will be communicated to the person (where this is possible) who made the original allegation or complaint.
- h) The Trust will enforce a 'zero tolerance' stance against fraud, bribery and/or corruption and will seek to achieve all appropriate criminal and civil sanctions against those that defraud the NHS, including criminal prosecution, internal conduct action and referral to professional body. The Trust will take all possible actions to recover losses identified by the LCFS.

4. RESPONSIBILITIES

- 4.1 Any member of staff who suspects fraud, corruption or bribery is required to follow these procedures.
- 4.2 It is recognised that on rare occasions mistakes may be made concerning payroll. Staff members are therefore asked to take personal responsibility and to check their monthly payslips for any errors (i.e. if the staff member was paid more than the usual monthly amount) and to inform HR / Payroll immediately in line with the Trusts Salary Overpayment and Underpayment Policy.
- 4.3 It is the responsibility of Directors and Service Managers to ensure that all members of staff for whom they are responsible are made aware of the requirements of the policy.
- 4.4 The Chief Finance Officer is the Executive Director with responsibility for the management of Counter Fraud including anti-bribery and corruption.

5. PROCEDURE – WHAT TO DO IF FRAUD OR CORRUPTION IS SUSPECTED

- 5.1 Reasonably held suspicions of fraud, bribery and/or corruption should be reported at the earliest instance directly to the LCFS or alternatively via the NHS Fraud and Corruption Reporting Line. Staff can also report to the Chief Finance Officer or Chief Executive if they wish. Contact details of those who should be contacted to report a suspicion can be viewed in Appendix 2.

- 5.2 Should a Manager or Director receive notification of suspected fraud, bribery and/or corruption they should immediately notify the LCFS or the Chief Finance Officer.
- 5.3 When a member of staff holds suspicion that fraud, bribery and/or corruption may be occurring, they should not start their own investigation or confront the suspected person(s).

Staff should direct their concerns, in the first instance, to the LCFS and/or the Chief Finance Officer (if they are not alleged to be part of the fraud, bribery or corruption).

Whilst staff can also report fraud, bribery and corruption concerns to the Freedom to Speak Up Guardian, they are encouraged to report matters to the LCFS.

- 5.4 In the event where a member of staff has a concern in respect of the LCFS or Chief Finance Officer being compromised and alleged to be involved in fraud, bribery or corruption they should raise their report with one of the following who will take responsibility for putting in place measures to investigate the concerns; The Chief Executive Officer; Chair of the Audit & Risk Committee; the Chief Nurse or Deputy Chief Nurse or the People Services Team (HR team). Alternatively reports can be made through the national NHS Fraud and Corruption Reporting Line.
- 5.5 In rare occasions (for example if a staff member did not feel confident that reporting matters via the internal routes above would ensure the matter was dealt with satisfactorily) the staff member could contact the police.
- 5.6 When a member of staff holds suspicion that fraud, bribery and/or corruption may be occurring, they should:
- Report their concerns immediately.
 - Secure any evidence until the LCFS (or an appropriate person as outlined in 5.4) can investigate.
- 5.7 Prior to recording any allegations of fraud, bribery and/or corruption within the Trusts Incident Reporting System staff should, with the aim of preserving the integrity of any criminal investigation, seek advice from the LCFS prior to making an Incident Report.

6. THE ROLE OF THE LOCAL COUNTER FRAUD SPECIALIST

- 6.1 The LCFS will act in accordance with NHSCFA Government Functional Standard for countering fraud (GoVS013) and the NHS Counter Fraud Manual.
- 6.2 All allegations of fraud will be investigated in accordance with relevant criminal legislation including (but not limited to):
- The Fraud Act 2006
 - The Theft Act 1968
 - The Police and Criminal Evidence Act 1984
 - The Criminal Procedure and Investigations Act 1996
 - The Human Rights Act 1998
 - The Data Protection Act 2018 and General Data Protection Regulations
 - The Regulation of Investigatory Powers Act 2000.

- 6.3 Allegations of corruption will be investigated in accordance with all appropriate legislation including the Acts listed above, plus the Bribery Act 2010.
- 6.4 Where it is identified that members of Trust staff may be involved, the LCFS will liaise with the People Services Team (HR Team) at the earliest opportunity. The LCFS will work with the People Services Team in accordance with the NHSCFA Counter Fraud Manual which deals with parallel investigations. The LCFS will make evidence gathered as part of a criminal investigation that is disclosable in line with the Data Protection Act 2018 and Criminal Procedures and Investigations Act 1996, available to the People Services Team for use during internal disciplinary proceedings.
- 6.5 The LCFS will advise the Chief Finance Officer on appropriate methods of recovering money lost to fraud, bribery and/or corruption. The LCFS will make all evidence gathered available to the Trust (where lawfully allowable) for use during financial recovery procedures and in accordance with the Salary Overpayment and Underpayment Policy, where necessary.

7. OTHER ROLES AND RESPONSIBILITIES

7.1 Chief Executive

The Chief Executive, as the organisation's accountable officer, has the overall responsibility for funds entrusted to it. This includes instances of fraud, bribery and corruption. The Chief Executive must ensure adequate policies and procedures are in place to protect the organisation and the public funds it receives.

7.2 Board

The organisation's Board and Non-executive directors should provide a clear and demonstrable support and strategic direction for counter fraud, bribery and corruption work. They should review the proactive management, controls and the evaluation of counter fraud, bribery and corruption work. The Board and Non-executive directors should scrutinise NHSCFA assessment reports, where applicable, and ensure that the recommendations are fully actioned.

7.3 Chief Finance Officer

The Chief Finance Officer has powers to approve financial transactions initiated by directorates across the organisation.

The Chief Finance Officer prepares documents and maintains detailed financial procedures and systems and that they apply the principles of separation of duties and internal checks to supplement those procedures and systems.

The Chief Finance Officer 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 NHS body's annual report.

The Chief Finance Officer 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.

7.4 Audit & Risk Committee

The role of Audit and Risk Committee is reviewing, approving and monitoring counter fraud, bribery and corruption work plans, receiving regular updates on counter fraud activity, monitoring the implementation of action plans, providing direct access and liaison with

those responsible for counter fraud, reviewing annual reports on counter fraud, and discussing NHSCFA quality assessment reports. Further guidance can be found in the NHS Audit Committee Handbook 2018 <https://www.hfma.org.uk/publications?Type=Guide>

7.5 **Fraud Champion**

The Fraud Champion's role in line with the Government Functional Standard (GoVS013) and NHS Requirement 1b will be to support and promote the fight against fraud at a strategic level and with other colleagues within the organisation. The Fraud Champion will be nominated by the Chief Finance officer and will support the LCFS in the work that they already do. The role of a Fraud Champion as defined by the NHSCFA includes:

- Promoting awareness of fraud, bribery and corruption within the Trust.
- Understanding the threat posed by fraud, bribery and corruption.
- Understanding best practice to countering fraud, bribery and corruption.

7.6 **Internal and External Audit**

The role of Internal and External Audit includes reviewing controls and systems and ensuring compliance with financial instructions. There is a requirement for Internal and External Audit to pass on any suspicions of fraud, bribery and/or corruption to the LCFS.

7.7 **People Services Team (HR)**

The People Services Team play a key role in identifying incidents for investigation and reporting these incidents to the LCFS. The People Services Team and the LCFS will liaise on the investigation of cases to ensure that there is a joined up and consistent approach as outlined in the NHS Counter Fraud Manual. The LCFS and the Chief People Officer have a working protocol defining the relationship between the LCFS and the People Services Team.

7.8 **Managers**

All managers are responsible for ensuring that policies, procedures and processes within their local area are adhered to and kept under constant review.

Managers have a responsibility to ensure that staff are aware of fraud, bribery and corruption and understand the importance of protecting the organisation from it. Managers will also be responsible for applying the Managing and Improving Conduct Policy in matters where there are allegations of staff not complying with these policies, procedures and processes.

Managers should report any instances of actual or suspected fraud, bribery or corruption brought to their attention to the LCFS immediately unless the concern relates to the LCFS (see 5.4). It is important that managers do not investigate any suspected financial crimes themselves.

Managers will proactively identify and report any system weaknesses that could facilitate fraud, bribery or corruption.

7.9 **All employees**

Employees are required to comply with the Trusts' policies, procedures and processes 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 accordance with the organisation's standards of behaviour and in protecting the organisation from these crimes.

Employees who are involved in or manage internal control systems should receive adequate training and support in order to carry out their responsibilities.

If an employee suspects that fraud, bribery or corruption has taken place, they should ensure it is reported to the LCFS and/or to NHSCFA as explained in 5.2 – 5.7.

7.10 **Information management and technology**

The Computer Misuse Act became law in 1990; the Act identifies three specific offences:

1. Unauthorised access to computer material
2. Unauthorised access with intent to commit or facilitate commission of further offences
3. Unauthorised acts with intent to impair, or with recklessness as to impairing, operation of computer, etc.

Unauthorised access to computer material could include using another person's identifier (ID) and password without proper authority to use data or a program, or to alter, delete copy or move a program or data.

Unauthorised access with intent to commit or facilitate commission of further offences could include gaining unauthorised access to financial or administrative records with intent.

Unauthorised acts with intent to impair, or with recklessness as to impairing the operation of computer, could include: destroying another user's files; modifying system files; creation of a virus; changing clinical records; and deliberately generating information to cause a complete system malfunction.

The fraudulent use of information technology will be reported by the Head of Information Security (or equivalent) to the LCFS.

8. SANCTIONS AND REDRESS

- 8.1 Concerns relating to fraud, bribery and/or corruption are considered in accordance with the criminal law. Criminal and disciplinary processes have different purposes, different standards of proof, and are governed by different rules. In reporting cases of suspected fraud, bribery and/or corruption it is expected that staff will adhere to this policy which aims to ensure that any anti-fraud, bribery and/or corruption enquiries do not breach criminal law processes.
- 8.2 All allegations of fraud will be investigated in accordance with relevant criminal legislation including: the Fraud Act 2006, the Theft Act 1968, the Police and Criminal Evidence Act 1984, the Criminal Procedure and Investigations Act 1996, the Regulation of Investigatory Powers Act 2000 and all relevant Codes of Practice. Allegations of bribery and/or corruption will be investigated by the LCFS and the NHSCFA in accordance with all appropriate legislation including the Acts listed above and the Bribery Act 2010.
- 8.3 Where it is identified that members of staff may be involved in the commission of an offence or offences, the LCFS will liaise with the People Services Team at the earliest opportunity. The LCFS will work with the People Services Team in accordance with the NHS Counter Fraud Manual which outlines the types of sanction which the organisation may apply when a financial offence has occurred i.e.:
 - Civil – civil sanctions can be taken against those who commit fraud, bribery and/or corruption to recover money and/or assets, which have been fraudulently obtained, including interest and costs.

- Criminal – the LCFS will work in partnership with NHSCFA, 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.
- Conduct – the improving and managing conduct procedures will be initiated where an employee is suspected of being involved in a fraudulent or illegal act in accordance with the Improving and Managing Conduct Policy.
- Reporting to the Professional body – if warranted, staff may be reported to their professional body because of formal conduct action/prosecution.

9. LINKS WITH OTHER DOCUMENTS

- Policy for the Treatment of Salary Overpayments and Underpayments
- Standing Financial Instructions
- Giving our people the freedom to speak up and raise concerns Policy
- Improving and Managing Conduct Policy
- Resolution Policy
- Managing Conflicts of Interest Policy
- Disclosure and Barring Service (DBS) Policy

10. EDUCATION AND TRAINING IMPLICATIONS

- 10.1 There are no specific training requirements concerning this policy. However, Managers are responsible for ensuring that staff are made aware of this policy and that they receive Fraud, Bribery and Corruption Awareness training.

11. MONITORING POLICY EFFECTIVENESS

- 11.1 The effectiveness of this policy will be monitored by the Audit & Risk Committee and by the LCFS who will provide regular updates regarding the number of cases being investigated.

12. REVIEW

- 12.1 This document may be reviewed at any time at the request of either staff side or management but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.

13. USEFUL LINKS

- **Fraud and Security Management Service**
<https://nhsfraudandsecurity.co.uk/>
- **NHS Counter Fraud Authority**
<https://cfa.nhs.uk>
- **The NHSCFA Strategy**
https://cfa.nhs.uk/resources/downloads/documents/corporate-publications/NHSCFA_Strategy_2020-23.pdf

- **Public Interest Disclosure Act 1998**
<https://www.legislation.gov.uk/ukpga/1998/23/contents>
- **NHS Code of Conduct and Accountability**
https://www.nhsbsa.nhs.uk/sites/default/files/2017-02/Sect_1_-_D_-_Codes_of_Conduct_Acc.pdf
- **HSG (96) 12 – Department of Health Directions on Financial Management**
- **The Government Functional Standard for countering fraud (GovS013)**
<https://www.gov.uk/government/publications/government-functional-standard-govs-013-counter-fraud>
- **The NHSCFA Requirements**
<https://cfa.nhs.uk/government-functional-standard/NHS-requirements>
- **The Fraud Act 2006**
<https://www.legislation.gov.uk/ukpga/2006/35/contents>
- **The Bribery Act 2006**
<https://www.legislation.gov.uk/ukpga/2010/23/contents>
- **The Ministry of Justice Guidance (The Bribery Act 2010)**
<https://www.justice.gov.uk/downloads/legislation/bribery-act-2010-guidance.pdf>
- **Data Protection Act 2018**
<https://www.legislation.gov.uk/ukpga/2018/12/contents/enacted>
- **Human Rights Act 1998**
<https://www.legislation.gov.uk/ukpga/1998/42/contents>
- **Police and Criminal Evidence Act 1984**
<https://www.legislation.gov.uk/ukpga/1984/60/contents>
- **Criminal Procedures and Investigations Act 1996**
<https://www.legislation.gov.uk/ukpga/1996/25/contents>
- **A Just Culture Guide**
<https://www.england.nhs.uk/patient-safety/a-just-culture-guide/>

APPENDIX 1

Equality Analysis and Equality Impact Assessment

Equality Analysis is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not;
- **foster good relations** between people who share a protected characteristic and people who do not.

Equality Impact Assessment (EIA) is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- **considering the current situation**
- **deciding the aims and intended outcomes of a function or policy**
- **considering what evidence there is to support the decision and identifying any gaps**
- **ensuring it is an informed decision**

You can find further information via the e-learning module [here](#)

Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims	
Service Line / Department	Finance
Title of Change:	
What are you completing this EIA for? (Please select):	Policy <i>(If other please specify here)</i>
What are the main aims / objectives of the changes	To inform all staff regarding the process to follow if fraud, bribery or corruption or are suspected
Step 2: Assessing the Impact	

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: <i>(e.g. adjustment to the policy)</i>
Sex			NA	
Gender reassignment			NA	
Disability			NA	
Age			NA	
Sexual Orientation			NA	
Pregnancy and maternity			NA	
Marriage and civil partnership			NA	
Religion or belief			NA	
Race			NA	

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.

Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document development, did you consult with others, for example, external organisations, service users, carers or other voluntary sector groups?)	No	
Have you taken into consideration any regulations, professional standards?	Yes	The Trust will ensure that all persons that are the subject of a fraud, bribery and/or corruption investigation in line with this policy will be treated fairly and without discrimination. All allegations will be investigated without different treatment stemming from personal characteristics or attributes, including the protected characteristics defined in the Equality Act 2010. This policy recognises the Human Rights Act 1998 and in particular, reference is made to Article 6 - A right to a fair trial and Article 7 - No punishment without law.

Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact / risk to the organisation if no action taken?	Low	Medium	High
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What action needs to be taken to reduce or eliminate the negative impact?	The Trust recognises that sometimes accusations of fraud, bribery or corruption can be vexatious or motivated by discrimination on the grounds of a protected characteristic. We will ensure that all cases are investigated fairly and action under the policy stopped where this is the case. Staff making such accusations may be subject to action under the Trust Disciplinary Policy.		
Who will be responsible for monitoring and regular review of the document / policy?	The LCFS, Company Secretary and CFO.		

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality Assessor:	C Edwards (LCFS)	Date:	22 February 2022
---------------------------	------------------	--------------	------------------

Additional Guidance

Protected characteristic		Who to Consider	Example issues to consider	Further guidance
1.	Disability	A person has a disability if they have a physical or mental impairment which has a substantial and long term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	<ul style="list-style-type: none"> • Accessibility • Communication formats (visual & auditory) • Reasonable adjustments. • Vulnerable to harassment and hate crime. 	Further guidance can be sought from: Solent Disability Resource Group
2.	Sex	A man or woman	<ul style="list-style-type: none"> • Caring responsibilities • Domestic Violence • Equal pay • Under (over) representation 	Further guidance can be sought from: Solent HR Team
3	Race	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	<ul style="list-style-type: none"> • Communication • Language • Cultural traditions • Customs • Harassment and hate crime • "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic 	Further guidance can be sought from: BAME Resource Group
4	Age	Refers to a person belonging to a particular age range of ages (eg, 18-30 year olds) Equality Act legislation defines age as 18 years and above	<ul style="list-style-type: none"> • Assumptions based on the age range • Capabilities & experience • Access to services technology skills/knowledge 	Further guidance can be sought from: Solent HR Team
5	Gender Reassignment	" The expression of gender characteristics that are not stereotypically associated with ones sex at birth" World Professional Association Transgender Health 2011	<ul style="list-style-type: none"> • Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use. 	Further guidance can be sought from: Solent LGBT+ Resource Group
6	Sexual Orientation	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	<ul style="list-style-type: none"> • Lifestyle • Family • Partners • Vulnerable to harassment and hate crime 	Further guidance can be sought from: Solent LGBT+ Resource Group
7	Religion and/or belief	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs, including lack of belief (e.g Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	<ul style="list-style-type: none"> • Disrespect and lack of awareness • Religious significance dates/events • Space for worship or reflection 	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8	Marriage	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	<ul style="list-style-type: none"> • Pensions • Childcare • Flexible working • Adoption leave 	Further guidance can be sought from: Solent HR Team
9	Pregnancy and Maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	<ul style="list-style-type: none"> • Employment rights during pregnancy and post pregnancy • Treating a woman unfavourably because she is breastfeeding • Childcare responsibilities • Flexibility 	Further guidance can be sought from: Solent HR team

APPENDIX 2

CONTACT DETAILS

Colin Edwards Local Counter Fraud Specialist Mobile: 07881 954 851 Email: colin.edwards1@nhs.net	Chief Finance Officer Details as per board portfolios on SolNET/Public website
Fraud and Corruption Reporting Line Tel: 0800 028 40 60 www.cfa.nhs.uk/reportfraud	Chief Executive Details as per board portfolios on SolNET/Public website
	Calum Mercer Non-Executive Director Chair of Audit & Risk Committee Sandra Glaister, Company Secretary Email: c/o sandra.glaister@solent.nhs.uk