

Anti-Fraud, Bribery & Corruption Policy

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1. STATEMENT OF INTENT

Airedale NHS Foundation Trust is committed to reducing the level of fraud, bribery and corruption within both the Trust and the wider NHS to an absolute minimum and keeping it at that level, freeing up public resources for better patient care. The Trust does not tolerate fraud, bribery and corruption and aims to eliminate all such activity as far as possible.

The Trust wishes to encourage anyone having reasonable suspicions of fraud, bribery or corruption to report them. It is also the Trust's policy that no employee will suffer in any way as a result of reporting reasonably held suspicions.

All members of staff can therefore be confident that they will not suffer in any way as a result of reporting reasonably held suspicions. This protection is given under the Public Interest Disclosure Act that the Trust is obliged to comply with.

For the purposes of this policy "reasonably held suspicions" shall mean any suspicions other than those which are totally groundless (and/or raised maliciously).

This policy has been produced by the Local Counter Fraud Specialist (LCFS) and is intended as both a guide for all employees on the counter fraud, bribery and corruption activities being undertaken within the Trust and NHS; as well as informing all Trust staff how to report any concerns or suspicions they may have.

The Trust's LCFS service is provided under contract by Mersey Internal Audit Agency (MIAA), an NHS agency. **The Trust's nominated LCFS is JACQUI PROCTER.**

All genuine suspicions of fraud, bribery or corruption can be reported to the LCFS directly, via MIAA, on 0161 206 1909 (or 0151 285 4500). If the Trust LCFS is not available, please report your concerns to another member of the MIAA Counter Fraud Team.

Alternatively, report your suspicions through the NHS Fraud and Corruption Reporting Line (FCRL) (Mon-Fri 8am-6pm) on freephone 0800 028 40 60; or, via the NHS Online Fraud Reporting Form www.reportnhsfraud.nhs.uk; or, via the Trust's Director of Finance.

2. INTRODUCTION

2.1 General

One of the basic principles of public sector organisations is the proper use of public funds. The majority of people who work in the NHS are honest and professional and they find that fraud, bribery and corruption committed by a minority is wholly unacceptable as it ultimately leads to a reduction in the resources available for patient care.

NHS Protect, formerly NHS CFSMS (Counter Fraud & Security Management Service), is a business unit of the NHS Business Services Authority. It has responsibility for all policy and operational matters relating to the prevention, detection and investigation of fraud, bribery and corruption, as well as the management of security, across the entire NHS. All instances where fraud, bribery or corruption is suspected are properly investigated until their conclusion by staff trained by NHS Protect.

Each Trust is required to appoint its own dedicated Local Counter Fraud Specialist (LCFS) who is accredited by NHS Protect and accountable to them professionally for the completion of a range of preventative counter fraud and corruption work, as well as for undertaking any necessary investigations. Locally, the LCFS is accountable on a day-to-day basis to the Trust Director of Finance and also reports, periodically, to the Trust Audit Committee.

2.2 Strategic Approach

Airedale NHS Foundation Trust is committed to taking all necessary steps to counter fraud, bribery and corruption. To meet this objective, it has adopted the national strategic approach, originally developed by NHS CFSMS, which specifies the following:

- create and embed an anti-fraud and corruption culture across the Trust;
- maximise the deterrence of fraud and corruption;
- successfully prevent fraud and corruption which cannot be deterred;
- promptly detect fraud and corruption which cannot be prevented;
- professionally investigate actual or suspected instances of fraud and corruption;
- effectively apply sanctions, including appropriate legal action. against those proven to have committing fraud, bribery and corruption; and,
- effectively apply methods of seeking redress in respect of any lost money, assets or resources.

The 2012 NHS Protect updated strategy takes a more unified approach to tackling all crime against the NHS and interprets the above seven-step approach as part of its new 'three key principles for action'. These being:

- a) Inform and Involve;
- b) Prevent and Deter; and,
- c) Hold to Account.

2.3 Aims and Scope

This policy relates to all forms of fraud, bribery and corruption and is intended to provide direction and help to all interested/concerned parties who may identify suspected criminality. It provides a framework for responding to suspicions of fraud, bribery or corruption, as well as advice and information on various aspects of those offences and the implications of an investigation. It is not intended, in itself, to provide a comprehensive approach to preventing and detecting all NHS fraud, bribery and corruption.

The overall aims of this policy are to:

- improve the knowledge and understanding of everyone in Airedale NHS Foundation Trust, irrespective of their position, about the risk of fraud, bribery and corruption within the organisation and make clear its unacceptability.
- assist in promoting a climate of openness and a culture and environment where staff feel able to raise concerns sensibly and responsibly, yet discreetly.
- set out Airedale NHS Foundation Trust's responsibilities in terms of the deterrence, prevention, detection and investigation of fraud, bribery and corruption.
- 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

This policy applies to all employees and volunteers of Airedale NHS Foundation Trust, regardless of position held, as well as governors, 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 employees by various methods and will form part of the induction process for new staff.

3. DEFINITIONS

3.1 Fraud

The Fraud Act 2006 introduced an entirely new way of investigating and prosecuting fraud. Previously, the word 'fraud' was an "umbrella" term used to cover a variety of criminal offences falling under various legislative acts. It is no longer necessary to prove that a person has been deceived, or for a fraud to be successful. The focus is now on the dishonest behaviour of the suspect and their intent to make a gain either for themselves or another; to cause a loss to another; or, expose another to a risk of a loss.

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

- a. **Fraud by false representation** (section 2)
i.e. lying on a CV or NHS job application form.
- b. **Fraud by failing to disclose information**, when under a legal obligation to do so (section 3)
i.e. failing to declare a conviction, disqualification or commercial interest when such information may have an impact on your NHS role, duties or obligations and where you are required to declare such information as part of a legal commitment to do so.
- c. **Fraud by abuse of a position of trust** (section 4)
i.e. a carer abusing their access to patient monies, or an employee using commercially confidential NHS information to make a personal gain. (The abuse of position occurs where there is an expectation on the individual to safeguard the financial interests of another person or organisation, i.e. the NHS.)

It should be noted that successful prosecutions under the Fraud Act 2006 may result in an unlimited fine and/or a potential custodial sentence of up to 10 years.

3.2 Bribery & Corruption

Bribery and corruption prosecutions can be brought using specific pieces of legislation:

- Prevention of Corruption Acts 1906 and 1916, for offences committed prior to 1st July 2011, and,
- Bribery Act 2010, for offences committed on or after 1st July 2011.

The Bribery Act 2010 [‘the Act’] has updated UK law by making it a criminal offence to:

- **offer, promise, or give a bribe [section 1]**; and/or,
- **request, agree to receive, or accept a bribe [section 2]**.

Corruption is generally considered to be an "umbrella" term covering such various activities as bribery, corrupt preferential treatment, kickbacks, cronyism, graft or embezzlement.

Under the 2010 Act, however, bribery is now a series of specific offences. Generally, bribery is defined as: ***an inducement or reward offered, promised or provided to someone to perform their functions or activities improperly in order to gain a personal, commercial, regulatory and/or contractual advantage.***

Examples of bribery in an NHS context could be a contractor attempting to influence a procurement decision-maker by giving them an extra benefit or gift as part of a tender exercise; or, a medical or pharmaceutical company providing holidays or other excessive hospitality to a clinician in order to influence them to persuade their Trust to purchase that company's particular clinical supplies.

A bribe does not have to be in cash; it may be the awarding of a contract, the provision of gifts, hospitality, sponsorship, the promise of work or some other benefit. The persons making and receiving the bribe may be acting on behalf of others – under the Bribery Act 2010, all parties involved may be prosecuted for a bribery offence.

The Act is also extra-territorial in nature. This means that anyone involved in bribery activity overseas may be liable to prosecution in the UK if the bribe is in respect of any UK activity, contract or organisation. To this end, the Act also includes **an offence of bribing a foreign public official [section 6]**.

In addition, the Act introduces **a new 'corporate offence' [section 7] of the failure of commercial organisations to prevent bribery**. The Department of Health Legal Service has stated that NHS bodies are deemed to be 'relevant commercial organisations' to which the Act applies. As a result, an NHS body may be held liable (and punished with a potentially unlimited fine) when someone "associated" with it bribes another in order to get, keep or retain business for the organisation. However, the organisation will have a defence, and avoid prosecution, if it can show it had adequate procedures in place designed to prevent bribery.

Finally, under **section 14 of the Act, a senior officer of the organisation (eg a Senior Manager, an Executive or Non Executive Director) would also be liable for prosecution if they consented to or connived in a bribery offence carried out by another**. Under such circumstances, the senior officer may be prosecuted for a parallel offence to that brought against the primary perpetrator. Furthermore, the organisation could also be subject to an unlimited fine because of the senior officer's consent or connivance.

To re-iterate, the Bribery Act is applicable to NHS organisations including Airedale NHS Foundation Trust and, consequently, it also applies to (and can be triggered by) everyone "associated" with this Trust who performs services for us, or on our behalf, or who provides us with goods. This includes those who work for and with us, such as employees, Governors, agents, subsidiaries, contractors and suppliers (regardless of whether they are incorporated or not). The term 'associated persons' has an intentionally wide interpretation under the Act.

Airedale NHS Foundation Trust adopts a 'zero tolerance' attitude towards bribery and does not, and will not, pay or accept bribes or offers of inducement to or from anyone, for any purpose. The Trust is fully committed to the objective of preventing bribery and will ensure that adequate procedures, which are proportionate to our risks, are in place to prevent bribery and which will be regularly reviewed. We will, in conjunction with NHS Protect, seek to obtain the strongest penalties – including criminal prosecution, disciplinary and/or civil sanctions – against anyone associated with Airedale NHS Foundation Trust who is found to be involved in any bribery or corruption activities.

As with the Fraud Act, a conviction under the Bribery Act may ultimately result in an unlimited fine and/or a custodial sentence of up to 10 years imprisonment.

[**NB.** For staff awareness, theft issues are usually dealt with by security management, not the LCFS. However, the LCFS will be mindful of any potential criminality identified in the course of any investigation and will, with the agreement of the Director of Finance, notify the appropriate investigating authority.]

3.3 Employees

For the purposes of this policy, 'employees' includes all Airedale NHS Foundation Trust staff and volunteers, as well as governors, executive and non executive directors (including co-opted members) and honorary members.

4. CODES OF CONDUCT

The Codes of Conduct for NHS Boards and NHS Managers set out the key public service values. They state that high standards of corporate and personal conduct, based on the recognition that patients come first, have been a requirement throughout the NHS since its inception. These values are summarised as:

Accountability: Everything done by those who work in the authority must be able to stand the tests of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.

Probity: Absolute honesty and integrity should be exercised in dealing with NHS patients, assets, staff, suppliers and customers.

Openness: The health body's activities should be sufficiently public and transparent to promote confidence between the authority and its staff and the public.

All staff should be aware of, and act in accordance with, these values. In addition, staff are expected to:

- act impartially in all their work;
- refuse gifts, benefits, hospitality or sponsorship of any kind that might reasonably be seen to compromise their judgement or integrity; and, to avoid seeking to exert influence to obtain preferential consideration. All such gifts should be returned and hospitality refused.
- declare and register gifts, benefits or sponsorship of any kind, in accordance with time limits agreed locally (provided that they are worth at least £25), whether refused or accepted;
- declare and record financial, non-financial or personal interest (e.g. company shares, research grant) in any organisation with which they have to deal, and be prepared to withdraw from those dealings if required, thereby ensuring that their professional judgement is not influenced by such considerations;
- make it a matter of policy that offers of sponsorship that could possibly breach the Code be reported to the Board;
- not misuse their official position or information acquired in the course of their official duties, to further their private interests or those of others;
- ensure professional registration (if applicable) and/or status are not used in the promotion of commercial products or services;
- beware of bias generated through sponsorship, where this might impinge on professional judgement or impartiality;

- neither agree to practice under any conditions which compromise professional independence or judgement, nor impose such conditions on other professionals.

All staff are also reminded that every NHS employee, regardless of position or status, must comply with the NHS Standards of Business Conduct [HSG (93)5] which may be accessed at:

http://www.dh.gov.uk/en/PublicationsAndStatistics/LettersAndCirculars/HealthServiceGuidelines/DH_4017845

Relevant personnel are also reminded that their professional bodies will also have codes of conduct or standards of behaviour which they will be expected to adhere to.

5. ROLES & RESPONSIBILITIES

Through our day-to-day work, we are in the best position to recognise any specific fraud or corruption risks within our own areas of responsibility. We also have a duty to ensure that those risks – however large or small – are identified and eliminated. Where you believe an opportunity for fraud, bribery or corruption exists, whether because of poor procedures or a lack of oversight, you should report it to one of the reporting channels as referred to in this policy. This section states the roles and responsibilities of employees and other relevant parties in reporting fraud or corruption.

Airedale NHS Foundation Trust will take all necessary steps to counter fraud, bribery and corruption in accordance with: this policy; with the NHS Counter Fraud and Corruption Manual; the document entitled 'Applying Appropriate Sanctions Consistently', published by the NHS Counter Fraud Service (now NHS Protect); and, any other relevant guidance or advice issued by NHS Protect.

Airedale NHS Foundation Trust actively implements, through its LCFS, NHS Protect counter fraud strategy as outlined below.

Create and embed an anti-fraud and corruption culture

Airedale NHS Foundation Trust uses counter fraud, bribery and corruption publicity material to inform personnel across the Trust that fraud, bribery and corruption is a serious issue and takes away resources from important patient services. Such material demonstrates that fraud, bribery and corruption is not acceptable and is being tackled effectively.

Maximise the deterrence of fraud and corruption

Deterrence is about increasing the expectation that someone will be caught and punished if they attempt to defraud the Trust or act corruptly. This is more than just applying tough sanctions. Airedale NHS Foundation Trust supports the use of appropriate measures to minimise occurrences of fraud, bribery and corruption.

Successfully prevent fraud and corruption which cannot be deterred

Airedale NHS Foundation Trust has policies and procedures in place to reduce the likelihood of fraud, bribery and corruption occurring. These include a system of internal controls, Standing Financial Instructions and documented operational procedures which involve a range of supervisory checks, physical security measures, financial reconciliations, segregation/rotation of duties and clear statements of roles and responsibilities. Where fraud, bribery or corruption has occurred, Airedale NHS Foundation Trust will ensure that any necessary changes to systems and procedures take place immediately to prevent similar incidents from happening in the future.

Promptly detect fraud and corruption which cannot be prevented

Airedale NHS Foundation Trust continually develops and maintains a positive programme of counter fraud and corruption activities, supplemented by the monitoring of internal control compliance, the completion of internal audit reviews and the LCFS undertaking an annual plan of proactive detection exercises. Any suspected or actual instances of fraud, bribery or corruption which are detected are referred to the LCFS for investigation.

Professionally investigate detected instances of fraud and corruption

A professionally trained and NHS Protect accredited LCFS undertakes investigations, carried out to the highest standards and legal criteria, into any suspicions of fraud, bribery and corruption. Through liaison with the NHS Protect, the LCFS will investigate thoroughly to prove or disprove any allegations made.

Effectively apply sanctions, including appropriate legal action, against those committing fraud, bribery and corruption

Following the conclusion of an investigation, if there is evidence of fraud, bribery or corruption, available sanctions are considered by the Trust in accordance with NHS policy. This may include criminal prosecution, the application of civil proceedings and/or internal disciplinary action, as well as referral to a professional or regulatory body.

Effectively apply methods for seeking redress in respect of any losses incurred

Recovery of any losses incurred may also be sought through civil proceedings, if appropriate, to ensure losses to Airedale NHS Foundation Trust and the NHS are recovered and returned for their proper NHS use.

5.1 Role of Airedale NHS Foundation Trust

Airedale NHS Foundation Trust has a duty to ensure that it provides a secure environment in which to work and one where people are confident about raising 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, Airedale NHS Foundation Trust has a duty to ensure that those concerns are listened to and addressed.

The Trust's Chief Executive is ultimately accountable for specific failures in Airedale NHS Foundation Trust's system of internal controls. However, responsibility for the operation and maintenance of controls and procedures falls directly to line managers and requires the involvement and support of all the Trust's employees. The Trust therefore has a duty to ensure employees who are involved in, or who are managing, internal control systems receive adequate training and support in order to carry out their responsibilities. Therefore, the Chief Executive and Director of Finance will monitor and ensure compliance with this policy.

5.2 Employees

Airedale NHS Foundation Trust's Standing Orders, Standing Financial Instructions, policies and procedures place an obligation on all employees, regardless of status, to act in accordance with best practice.

Employees are expected to familiarise themselves with and abide by the various standards and codes of conduct referred to in Section 4, above.

Employees also have a duty to protect the assets of Airedale NHS Foundation Trust, including information assets, 'goodwill' and any tangible (i.e. property) assets.

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

- avoid acting in any way that might cause others to suspect or accuse them of dishonesty;
- behave in a way that would not give cause for others to doubt that Airedale NHS Foundation Trust's employees deal fairly and impartially with official matters; and,
- be alert to the possibility that others might be attempting to deceive the Trust/NHS.

All employees have a duty to ensure that public funds are safeguarded, whether or not they are involved with cash or payment systems, managing budgets or dealing with contractors or suppliers.

If an employee suspects that there has been (or might be) fraud, bribery or corruption against the Trust or wider NHS, or has seen any suspicious acts or events, they must report the matter to the LCFS or via one of the other appropriate reporting channels specified within this policy (See Section 6).

5.3 Managers

Managers must be vigilant and ensure that procedures to guard against fraud, bribery and corruption are applied and monitored. They should be alert to the possibility that unusual events or transactions could be symptoms of fraud, bribery or corruption. If they have any doubts, they must seek advice from the LCFS or Director of Finance.

Managers must instil and encourage an open, honest and transparent culture within their team and ensure that information on any necessary policy or procedure is made available to all employees. The LCFS will proactively assist the embedding of this culture by undertaking work that will raise awareness of the risks of fraud, bribery and corruption.

All instances of actual or suspected fraud, bribery or corruption which come to the attention of a manager must be reported immediately. It is appreciated that some employees will initially raise concerns with their manager. However, in such cases, managers must not attempt to investigate allegations themselves; they have the clear responsibility to refer the concerns to the LCFS or Director of Finance as soon as possible.

Line managers at all levels have a responsibility to ensure that an adequate system of internal control exists and operates effectively within their areas of responsibility to help prevent fraud, bribery and corruption from occurring – and to mitigate its impact if it does occur.

As part of that responsibility, line managers need to:

- inform staff for whom they are accountable of the requirements of Airedale NHS Foundation Trust's Anti-Fraud, Bribery and Corruption Policy and also other relevant Trust policies and procedures (including Standing Orders and SFIs), as part of the staff induction process.
- assess the types of possible fraud and corruption risks which may impact on the operations for which they are responsible.
- ensure that adequate control measures are put in place to minimise those risks. This must include clear roles and responsibilities, supervisory checks, staff rotation (particularly in key posts) and separation of duties wherever possible so that control of

a key function is not invested in one individual; as well as regular reviews, reconciliations and testing checks to ensure that control measures continue to operate effectively.

- ensure that any access to and use of computers by employees is linked to the performance of their recognised duties within the Trust.
- contribute to any assessment of the risks and controls within their business area, which feeds into Airedale NHS Foundation Trust's and the Department of Health Accounting Officer's overall statements of accountability and internal control.

5.4 Local Counter Fraud Specialist (LCFS)

Clause 43 and Schedule 13 of the pre-2012/13 standard NHS contract (replaced by Clause 37 of standard contracts from 2012/13 forwards) require Airedale NHS Foundation Trust to have appointed and nominated an LCFS, as well as facilitate the implementation of a number of additional counter fraud and corruption measures. [These clauses/schedule are developed from the Secretary of State for Health's Directions for Countering Fraud and Corruption in the NHS, 2004.]

The LCFS is operationally accountable to the Trust Director of Finance and reports on the progress of all counter fraud and corruption activity to the Trust Audit Committee.

With regard to their investigatory remit, the LCFS will:

- ensure that the Director of Finance is informed about all referrals/cases and approves any necessary investigation activity.
- in particular, conduct investigations of all alleged fraud, bribery and corruption in accordance with the NHS Counter Fraud and Corruption Manual and relevant criminal law.
- in consultation with the Director of Finance, report any relevant case to the police or NHS Protect.
- report and update any case and the outcome of an investigation through NHS Protect's national case management system (FIRST).
- ensure that other relevant parties are informed of investigations where necessary, e.g. Human Resources (HR), if an employee is the subject of a referral.
- ensure that Airedale NHS Foundation Trust's incident and losses reporting systems are followed.
- ensure that any system weaknesses identified as part of an investigation are followed up with management and reported to internal audit.
- At all times, adhere to the Counter Fraud Professional Accreditation Board (CFPAB)'s Principles of Professional Conduct, as set out in the NHS Counter Fraud and Corruption Manual, which are – professionalism, objectivity, fairness, expertise, propriety and vision.
- ensure that the Director of Finance is informed of regional NHS Protect investigations which may impact upon the Trust.

In addition, the LCFS will be responsible for the day-to-day implementation of the generic areas of counter fraud, bribery and corruption strategy, as agreed in the annual work plan.

The LCFS will not have responsibility for, or be in any way engaged in, the management of security for any NHS body.

5.5 NHS Protect Area Anti-Fraud Lead

Each Area Anti-Fraud Lead (AAFL) works as part of the NHS Protect Operations Directorate, whose key objective is to combat fraud, bribery and corruption in the National

Health Service within a specific geographical region. The AAFL liaises closely with both the LCFS and the Trust on a range of required counter fraud and corruption activities, including investigations.

5.6 Director of Finance

The Director of Finance monitors and ensures compliance with the counter fraud and corruption requirements included in the NHS contract.

The Director of Finance will:

- provide any necessary Trust support to the LCFS required to pursue an investigation.
- depending on the outcome of investigations (whether on an interim or concluding basis) and/or the potential significance of suspicions that have been raised, inform appropriate senior management colleagues accordingly.
- be responsible, in consultation with the LCFS, for informing third parties such as external audit or the police at the earliest opportunity, as circumstances dictate.
- inform and consult the Chief Executive in cases where the Trust loss may be excessive, or where the incident may lead to adverse publicity.
- inform the Head of Internal Audit if an investigation identifies significant control failings in key business areas.
- consult and take advice from the Director of HR if a member of staff is to be interviewed, suspended or disciplined. The Director of Finance or LCFS will not conduct a disciplinary investigation, but the employee may be the subject of a parallel investigation by HR.

5.7 Internal & External Audit

Any incident or suspicion of fraud, bribery or corruption that comes to internal or external audit's attention will be passed immediately to the LCFS. The outcome of the investigation may necessitate further work by audit to review systems and procedures.

5.8 Human Resources

HR will liaise closely with managers and the LCFS from the outset if an employee is suspected of being involved in fraud, bribery or corruption, in accordance with agreed protocols. HR staff are responsible for ensuring the appropriate use of Airedale NHS Foundation Trust's disciplinary policy. HR will advise those involved in the investigation on matters of employment law and other procedural issues, such as disciplinary and complaints procedures, as required. Close liaison between the LCFS and HR will be essential in respect of any decision as to whether to exclude an employee from the Trust while necessary enquiries are on-going. Close liaison will also be necessary to ensure that any parallel sanctions (ie criminal, civil and disciplinary sanctions) are applied effectively and in a coordinated manner.

HR will take steps at the recruitment stage to establish, as far as possible, the previous record of potential employees, as well as the veracity of required qualifications and memberships of professional bodies, in terms of their propriety and integrity. In this regard, temporary and fixed-term contract employees are treated in the same manner as permanent employees.

5.9 Information Management and Technology

The Head of Information Security (or equivalent) will contact the LCFS immediately in all cases where there is suspicion that Trust ICT is being used for fraudulent purposes.

Similarly, the Head of Information Security will liaise closely with the LCFS to ensure that a subject's access (both physical and electronic) to Trust ICT resources is suspended or removed where an investigation identifies that it is appropriate to do so.

6. Reporting Fraud, Bribery and Corruption

This section outlines the action to be taken if fraud, bribery or corruption is discovered or suspected. If an employee holds any of the concerns or suspicions referred to in this document, they must report it immediately.

The Trust LCFS is JACQUI PROCTER. Her contact details are:
Telephone: 0161 206 1909 / 0151 285 4500
Email: Jacqui.Procter@miaa.nhs.uk or jacqui.procter@nhs.net

If the referrer believes that the Director of Finance or LCFS is implicated, they should notify whichever party is not believed to be involved who will then inform the Chief Executive and Audit Committee Chairperson. They will then inform the NHS Protect Area Anti-Fraud Lead.

If an employee feels unable, for any reason, to report the matter internally, employees can also call the **NHS Fraud and Corruption Reporting Line on Freephone 08000 28 40 60 (Mon-Fri 8am-6pm) or report their concerns via the NHS Online Fraud Reporting Form www.reportnhsfraud.nhs.uk**

These NHS reporting options provide easily accessible routes for the reporting of genuine suspicions of fraud, bribery or corruption within or affecting the Trust or wider NHS. It allows NHS staff who are unsure of internal reporting procedures to report their concerns in the strictest confidence. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so.

Anonymous letters, telephone calls, etc are occasionally received from individuals who wish to raise matters of concern, but may not wish to identify themselves for whatever reason. While the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern and will always be taken seriously and investigated.

The LCFS will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised. If the allegations are found to be malicious, they will also be considered for further investigation to establish their source and, if they originate with a Trust employee, disciplinary action will be instigated.

Staff are encouraged to report all reasonably held suspicions directly to the LCFS.

Appendix 1 provides a reminder of the key contacts and a checklist of the actions to follow if fraud, bribery and corruption, or other illegal acts, are discovered or suspected. Managers are encouraged to copy this document to staff and to place it on staff notice boards.

Airedale NHS Foundation Trust wants all employees to feel confident that they can expose any wrongdoing without any risk to themselves. In accordance with the provisions of the Public Interest Disclosure Act 1998, Airedale NHS Foundation Trust has produced a Whistleblowing Policy. This procedure is intended to complement the Trust's Anti-Fraud, Bribery & Corruption Policy, as well as other relevant Trust policies. Corporate policies can be found on the Trust's Intranet site.

7. Equality and Diversity Statement

Airedale NHS Foundation Trust is committed to the overarching principles of Equality and Diversity. The Trust is committed towards ensuring all forms of prejudicial, unfair basis and/or actions which result in discriminatory practices are eliminated. The Trust makes this stand based not only on meeting its legislative duties but also a moral strand on ensuring equitable outcomes for all of its staff and patients.

The Trust is continually working towards eradicating all forms of harassment and discrimination, exclusion, victimisation, harassment and bullying to make certain it meets its legal duties by ensuring that:

- *Unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2012 are eliminated*
- *Equality of opportunity between people from different groups; is advanced and*
- *Good relationships between people from different groups are fostered*

The Trust treats any complaints it receives very seriously and as such any complaint received in respect of this policy or associated policies (in terms of application or adherence) will be investigated by Trust Staff. Within any investigation undertaken, the Trust will ensure that complainant/s, patients, relatives and carers are not discriminated or victimised in any form whatsoever on the grounds of their disability, gender, marital status, sexuality, colour, race, nationality, ethnic origin, religious belief or age. The Trust will ensure that no individual is treated in a detrimental manner as a result of having made a complaint.

The policy will be continually reviewed to ensure that there are no elements within the policy, practice or procedures that are prejudicial on any grounds in the respect of the protected equality characteristics mentioned above. Using the guidance produced under the auspices of Equality legislation, this document has also been analysed in respect of Equality and Diversity. The analysis is attached at the end of the policy document.

A Desktop Guide to Reporting NHS Fraud, Bribery and Corruption

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

CORRUPTION is the deliberate use of bribery or payment of a benefit-in-kind to influence an individual to use their position in an unreasonable way to help gain an unfair or illegal advantage for oneself or another.

DO

- **Note down your concerns**

Record details such as your concerns, names, dates, times, details of conversations and possible witnesses. Time, date and sign your notes.

- **Retain or secure evidence**

Retain any evidence that may be destroyed, but do not alter or write on it in any way.

- **Report your suspicions promptly and appropriately**

Confidentiality will be respected – delays may lead to further loss or harm. Report through one of the contact options below.

- **Be discreet**

Don't discuss your concerns with anyone who doesn't need to know.

DO NOT

- **Confront the suspect(s) or convey your concerns to anyone other than those authorised**

Never attempt to question a suspect yourself; this could alert a fraudster and place you at harm.

- **Try to investigate the concern yourself**

Never attempt to gather evidence yourself unless it is about to be destroyed. Criminal investigations must be conducted to specific legal standards.

- **Be afraid of raising your concerns**

The Public Interest Disclosure Act 1998 protects employees who have reasonable concerns. You will not suffer discrimination or victimisation by following the correct procedures.

- **Do nothing!**

If you suspect that fraud or corruption against the NHS has taken (or is taking) place, you must report it immediately by:

- directly contacting the **Local Counter Fraud Specialist**; or,
- telephoning the freephone **NHS Fraud, and Corruption Reporting Line**; or,
- online, via the **NHS Fraud Reporting Form**; or,
- contacting the **Director of Finance**.

Report NHS Fraud, Bribery & Corruption - Contact Details:

Your Trust LCFS: **0161 206 1909** or **0151 285 4500** (MIAA)
NHS Fraud, Bribery and Corruption Reporting Line: **0800 028 40 60**
NHS Online Reporting Form: www.reportnhsfraud.nhs.uk

All calls will be treated in confidence and investigated by professionally trained personnel.

If you would like further information about NHS Protect, or the work of the LCFS, please visit www.nhsbsa.nhs.uk/fraud

Protecting your NHS from Fraud, Bribery & Corruption

Equality Impact Analysis Form

Appendix 2

In carrying out the Impact Analysis please check for statements, conditions, rules or requirements which when applied could exclude or cause an adverse impact upon patients and/or staff in respect of the “protected characteristics” – (Race, Gender, Disability, Sexual Orientation, Age, Religion/ Faith, Trans). The process will help in identifying;

- Overall improvements required to ensure the service is provided equitably
- Those areas the service needs to address and / or improve, which have an impact upon patients and members of staff
- Specific actions needed to ensure equitable provision for all concerned.

Name of Document	Anti-Fraud, Bribery and Corruption Policy		
Department			
Effective From	September 2012	Review date	September 2015

Please ✓ the appropriate box(s) to indicate appropriate nature of document	Which elements of the document being assessed pertain to <i>the NHS Constitution</i>. Please ✓ the appropriate box(s)		
Function of the service		1. The NHS provides a comprehensive service, available to all.	
Policy	✓	2. Access to NHS services is based on clinical need, not an individual's ability to pay.	
Procedure		3. The NHS aspires to the highest standards of excellence and professionalism.	✓
Strategy		4. NHS services must reflect the needs and preferences of patients, their families and their carers.	
Other (please state)		5. The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.	
		6. The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources.	
		7. The NHS is accountable to the public, communities and patients that it serves.	

Does the document being assessed impact: (Please ✓ as appropriate)

Directly upon staff	✓	Indirectly on staff		Directly upon patients		Indirectly on patients	✓
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In relation to the assessment of this document which EDS	http://www.airedale-trust.nhs.uk/About/equalitydiversity/edframework	EDS Goal: Goal 3 <i>Empowered, engaged and well-supported</i>
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Goals will be addressed? Click on following link for the EDS	pdf	<i>staff</i>
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Please provide brief details of the main aims, objectives and intended outcomes/benefits from the document being assessed
 The purpose of this policy is to provide guidance to staff on the action that can, or should, be taken in the event that they are offered gifts and/or hospitality. There is a limited set of exceptions and this policy sets out the standards and procedures that staff should follow to protect both them and the organisation.

From the document being assessed and taking into consideration the EDS goal/s who will benefit and in what way
 This policy supports a culture of openness and transparency in the Trusts business transactions. The policy should be read in conjunction with the following documents, which also set out generic guidelines and responsibilities for NHS Trusts in relation to gifts and hospitality:

- Standards of Business Conduct for NHS Staff¹
- Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions²
- Code of Conduct for Managers³
- Bribery Guidance – various legislation
- Declarations of Interests
- Whistleblowing Policy

This policy applies to all employees of Airedale NHSFT and any staff who are seconded to the Trust, contract and agency staff and any other individual working on Trust premises.
 The policy also applies to members of the Board and its Committees.

What consultation was/ has been undertaken in relation to the document being assessed. Please also list operational / policy groups where the document has been tabled.

The policy was tabled at the Executive Directors Group

Bearing in mind the NHS constitution above and the EDS Goals, what evidence can be provided to demonstrate show that application of information within the document being assessed does not have any detrimental impact in respect of each of the protected characteristic mentioned below. Please do not just type in N/A.

	Y	N	Possible adverse impact upon patients	Possible adverse impact upon staff
1.Race		✓	There is no evidence to suggest that there are any statements, conditions, rules or	There is no evidence to suggest that there are any statements, conditions, rules or requirements which

¹ Standards of Business Conduct for NHS Staff – HSG(39)5, Department of Health, Jan 1993
² Airedale NHSFT Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions -
³ Code of Conduct for NHS Manager, Department of Health, Oct 2002

			requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of race.	could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of race.
2. Gender		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of gender.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of gender.
3. Disability		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of disability.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of disability.
4. Sexual Orientation		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of sexual orientation.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of sexual orientation.
5. Age		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of age.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of age.
6. Religious Belief		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of religious belief.	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of religious belief.
7. Dependants / Caring Responsibilities		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of Dependents / Caring Responsibilities	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in respect of Dependents / Caring Responsibilities
8. Transgendered or Transsexual		✓	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against	There is no evidence to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or when applied, cause an adverse impact against any group of individuals, in

		any group of individuals, in respect of Trans gendered or Transsexuals	respect of Trans gendered or Transsexuals
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<i>If there has been a differential impact identified above, could this lead to an adverse impact in the delivery of the service in respect of the document being assessed? (please tick)</i>	Y	N ✓
<i>Comments (Irrespective of "Yes" or "No" please explain)</i>		
As indicated in the policy, proactive consideration will be made to ensure that all aspects pertinent to receipt of any form of "gift" is assessed and documented to ensure that a culture of transparency is in operation. As per our commitment anyone found to breaching this policy will be liable to disciplinary action, loss of employment and pension rights in the NHS, prosecution, fine and possible imprisonment.		

<i>Please indicate if there any actions that need to be undertaken to mitigate risks, minimise any adverse impact and ensure equity for all equality groups indicated above</i>			
<i>Proposed action in relation to the equality strands above</i>	<i>Timeframe</i>	<i>Resource implications</i>	<i>Lead</i>
<ul style="list-style-type: none"> • <i>Ensure that all staff are made aware of the policy and its implications.</i> • <i>Ensure that senior managers explain to their members of staff the appropriate procedures that need to be undertaken when and if they were to receive any gift/s.</i> 	June 2012	Existing communication methods to be utilised.	Board lead Director of Finance/ Company Secretary
<i>Completed by and Date of Impact Assessment</i>	6 th June 2012		
<i>Date approved by Head of Equality and Diversity</i>	6 th June 2012		

<i>Please attach this assessment with the document being Assessed.</i>	
<i>Signed (completing officer)</i>	<i>Signed: Head of Equality and Diversity</i> K Sohanpal