

1 Introduction

1.1 General

- 1.1.1 Practice Plus Group is committed to maintaining honesty and integrity in all of its activities. It is also committed to the prevention of fraud, bribery and corruption (“**FBC**”) and to the rigorous investigation of any such allegations.
- 1.1.2 The Practice Plus Group executive team and the board have overall responsibility for ensuring this policy complies with our legal and ethical obligations, and that all those under our control comply with it.
- 1.1.3 Practice Plus Group wholly endorses the [NHS Counter Fraud Authority \(“NHSCFA”\)](#)¹ strategy towards the elimination of fraud affecting the National Health Service (“**NHS**”).
- 1.1.4 Practice Plus Group wishes to encourage anyone that has reasonable suspicions of FBC to report them. All staff, patients and contractors can be confident that they will not suffer in any way as a result of reporting reasonably held suspicions of any of FBC. For these purposes reasonably held suspicions shall mean any suspicions other than those which are raised maliciously and found to be groundless.
- 1.1.5 Practice Plus Group has approved a ‘Whistle Blowing Policy’ in accordance with the Public Interest Disclosure Act 1998 (“**1998 Act**”). The 1998 Act protects individuals from victimisation who make certain disclosures of information in the public interest and allows them to bring an action in respect of victimisation. Under the terms of the 1998 Act, a member of staff is protected if they act reasonably and responsibly.
- 1.1.6 Bribery and corruption are punishable for individuals (even if done for the benefit of the company) by up to ten years’ imprisonment and if the company is found to have taken part in FBC Practice Plus Group could face an unlimited fine, be excluded from tendering for public contracts and face damage to our reputation. We therefore take our legal responsibilities very seriously. As we know you do.
- 1.1.7 Particular emphasis has been added to certain sections of this policy where it has been deemed necessary.

1.2 Aims and objectives

- 1.2.1 This anti-FBC policy is intended to ensure that staff, patients and contractors of Practice Plus Group are aware of the correct reporting requirements and of the action the organisation will take to counter FBC. The policy is also intended to ensure that FBC are able to be recognised and be able to be reported by staff, patients and contractors who are aware of their responsibility to safeguard company and also (because we derive a large proportion of our revenues therefrom) NHS funds.
- 1.2.2 It is our policy to conduct all of our business in an honest and ethical way. We take a zero-tolerance approach to FBC and are committed to acting professionally, fairly and with integrity in all our business dealings and relationships wherever we operate and implementing and enforcing effective systems to prevent and stop FBC.

¹ For further details, see 2.2 and 3.7 below

1.3 Scope

- 1.3.1 This policy will set out our responsibilities, and of those working for us, in observing and upholding our position on FBC and provide information and guidance to those working for us on how to recognise and deal with FBC issues.
- 1.3.2 This document is intended to provide direction and help, to those officers and directors of Practice Plus Group who become aware of what they believe may be FBC against us, any parties we contract with, as well as the NHS. It is not intended to provide direction on the prevention of fraud; that is the role of the organisations nominated Local Counter Fraud Specialist (“LCFS”)².
- 1.3.3 This policy applies to staff working at all levels and grades, including senior directors and managers, officers, employees (whether permanent, fixed-term or temporary), contractors, consultants, trainees, seconded staff, homeworkers, casual workers and agency staff, volunteers, interns, agents, sponsors, and other internal and external stakeholders engaged by Practice Plus Group (collectively referred to as “staff” in this policy).
- 1.3.4 We have also identified some particular risks for our business. These are set out in [Appendix 1](#) to this policy, along with the steps we have taken or are taking to address those risks. If you do have suggestions or comments as to how to improve our FBC policy, whether by way of identifying particular risks and how to manage them, or otherwise, please do tell your manager, who will ensure that this is considered and, if appropriate, added to the FBC policy.

2 Definitions

2.1 Third party

- 2.1.1 A third party is any individual or organisation we come into contact with during the course of our work. This includes actual and potential clients, suppliers (and their employees), distributors, business contacts, agents, advisers, and government and public bodies, including their advisors, representatives and officials, politicians and political parties.

2.2 NHS Counter Fraud Authority

- 2.2.1 Crime against the NHS can seriously undermine its effectiveness and ability to deliver healthcare services. We, as a major supplier to the NHS, have agreed to participate in, implement and support the NHSCFA and its requirements. The NHSCFA has responsibility for all policy and operational matters relating to the prevention, detection and investigation of FBC in the NHS. It also has a responsibility to ensure that any investigations are conducted in accordance with NHSCFA guidance and other relevant legislation and regulations.

2.3 Fraud

- 2.3.1 Fraud is defined as a dishonest act (or a failure to act) made with the intention of making a financial gain or causing a financial loss (or risk of loss).

² For further details on the LCFS, see 3.6 below.

- 2.3.2 The dishonest act does not need to be successful for fraud to be committed, as long as the intention exists. Neither does the financial gain have to be personal, but can be for the benefit of another. Where the intent is to cause a loss to the organisation, no gain by the perpetrator needs to be shown. Essentially, if the fraud doesn't succeed, it doesn't mean it isn't fraud.
- 2.3.3 Petty theft, without the distortion of financial statements or other records, will normally be dealt with by the Local Security Management Specialist (“**LSMS**”) and reported to the Police. However, where an employee abuses their position to misappropriate cash or other income this may be considered to be fraud and dealt with under this policy.
- 2.3.4 The Fraud Act 2006 (“**FA 2006**”) is the relevant legislation. The Act includes eight separate offences; the most relevant of which for us are listed below:
- Fraud by false representation (s2) - a person may be guilty of an offence if he dishonestly makes a false representation, and intends, by making the representation to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, an employee claiming travel expenses for journeys they have not done.
 - Fraud by failing to disclose information (s3) - a person may be guilty of an offence if he dishonestly fails to disclose to another person information which he is under a legal duty to disclose, and intends, by failing to disclose the information to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, failing to disclose criminal convictions when required to do so as part of the recruitment process, in order to obtain employment.
 - Fraud by abuse of position (s4) - a person may be guilty of an offence if he occupies a position in which he is expected to safeguard, or not to act against, the financial interests of another person, dishonestly abuses that position, and intends, by means of the abuse of that position to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, a Nurse using prescriptions to obtain drugs for personal use.
 - Possession of articles for use fraud(s) (s6) - a person may be guilty of an offence if he has in his possession or under his control any article for use in the course of or in connection with any fraud. For example, using a false passport or other documentation to secure employment.
 - Making or supplying articles for use in fraud(s) (s7) - a person may be guilty of an offence if he 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. For example, producing a prescription in a patient's name with the intention of obtaining drugs and retaining them for personal use, or supplying them to another.

2.4 Bribery

- 2.4.1 A bribe is an inducement or reward which is offered, promised or provided in order to gain any commercial, contractual, regulatory or personal advantage. Some examples are explained in [Appendix 2](#) to this policy.
- 2.4.2 The Bribery Act 2010 is the relevant legislation. The Act creates a number of criminal offences, the most relevant of which are listed below:
- Offence of bribing another person (s1) – It is an offence for a person (“**P**”) to offer, promise or give a financial or other advantage (bribe) to another person where P intends the advantage to induce another person to improperly perform a relevant

function or activity or to reward a person for the improper performance of such. P is also guilty of an offence if P offers, promises or gives a bribe to another and P knows or believes that the acceptance of that advantage would itself constitute the improper performance of a relevant function or activity. The necessary conduct can occur either directly or indirectly through a third party. In summary, it is an offence for a person to offer, promise, or give a bribe to another person as an inducement for them improperly performing any duty. For example, this may include providing excess hospitality to a potential purchaser or commissioner of the organisation's services.

- Offence of being bribed (s2) –Section 2 provides a number of ways in which the offence of being bribed can be committed, broadly, it is an offence for a person to request, or agree to receive, or accept a financial or other advantage as an inducement to, or as a reward for, the improper performance of any function or activity. For example, where an employee who sells confidential information to a third party or provides preferential treatment to suppliers or patients for a fee.
- Bribery of a foreign public official (s6) A section 6 offence is committed where a person offers, promises or gives a financial or other advantage to a foreign public official with the intention of influencing the official in the performance of his or her official functions. That person must also intend to obtain or retain business or an advantage in the conduct of business. The official must be neither permitted nor required by the applicable written law to be influenced by the advantage. For example, facilitation payments made to release items from customs.
- Failure of a commercial organisation to prevent bribery (s7) if an individual bribes another person to obtain or retain business, or an advantage in the conduct of business for an organisation, then that organisation may also be guilty of an offence. For example if an organisation fails to put adequate controls in place to prevent bribery and an employee offers a bribe to a commissioning CCG to secure or attempt to secure a contract.

2.4.3 A financial or other advantage has a wide meaning and could include holidays or entertainment, contracts, non-monetary gifts and offers of employment etc. The term is not defined in the Bribery Act 2010 and is left to be determined as a matter of common sense by the company however employees should bear in mind that hospitality and gifts must be proportionate and also declared (see section 4)

2.4.4 A relevant function or activity covers any function of a public nature; any activity connected with a business, trade or profession; any activity performed in the course of a person's employment; or any activity performed by or on behalf of a body of persons whether corporate or unincorporated.

2.4.5 The conditions attached are that the person performing the function should be expected to perform it in good faith or with impartiality, or that an element of trust attaches to that person's role.

2.4.6 Activity may be considered to be improperly performed when there is a breach of good faith, impartiality or a position of trust.

2.4.7 The standard in deciding what would be expected is defined by what a reasonable person in the UK might expect of a person in such a position.

2.4.8 Any concerns about bribery should be referred to the LCFS.

2.5 Corruption

2.5.1 Corruption is the abuse of entrusted power or position for private gain. Corruption is often used as an umbrella term and can cover any form of fraud or serious misconduct such as: facilitation payments, bribery, gifts constituting undue influence, kickbacks favouritism, extortion, embezzlement, misuse of confidential information, theft and procurement fraud. It is not limited to interactions with public officials and covers active and passive corruption as well as monetary and non-monetary corruption.

2.6 Money Laundering

2.6.1 Money Laundering can be defined as “the process by which the proceeds of criminal conduct are dealt with in a way to disguise their criminal origins.” Various offences are set out in the Proceeds of Crime Act 2002 (“**POCA**”), the three primary offences being as follows:

1. The concealing offence (s327): to conceal, disguise, convert or transfer the proceeds of crime, or to remove the proceeds of crime from the jurisdiction of England and Wales.
2. The arranging offence (s328): to enter into, or become concerned in an arrangement, in which the person knows or suspects the retention, use or control of the proceeds of crime.
3. The acquisition, use and possession offence (s329): to acquire, use or possess the proceeds of crime, also known as, the handling of stolen goods offence.

2.6.2 POCA also sets out various secondary offences concerned with a person’s action or inaction upon discovering potential money laundering including failure to disclose, tipping off and prejudicing an investigation.

2.6.3 The Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 (“**MLR 2017**”) imposes further obligations regarding money laundering legislation. For further details, please read our ‘Anti-Money Laundering Policy’, which is available on the intranet or from your manager or the HR department. The key contact in the business for the purposes of the Money Laundering policy is our Chief Financial Officer and he can be contacted at 0333 999 2570.

2.6.4 Obligations in respect of preventing money laundering impact on certain areas of our business and require us to maintain internal procedures to prevent the use of their services for money laundering. A key difference of the MLR 2017 is to require relevant persons to adopt a more risk-based approach towards anti-money laundering, particularly in the conduct of due diligence. Determining the appropriate level of due diligence requires analysis of risk factors which are set out in MLR 2017.

2.6.5 MLR 2017 creates a new criminal offence of any individual who recklessly makes a statement in the context of money laundering, which is false or misleading, commits an offence punishable by a fine and/or up to 2 years’ imprisonment. Appropriate systems of internal control need to be in place to prevent activities relating to money laundering and terrorist financing. There must be management controls in place to identify the possibility that criminals may be attempting to launder money or fund terrorism, so as to enable appropriate action to prevent or report it to be taken.

3 Facilitation payments and kickbacks

- 3.1.1 We do not make, and will not accept, facilitation payments or 'kickbacks' of any kind. Facilitation payments are typically small, unofficial payments made to secure or expedite a routine government action by a government official.
- 3.1.2 If you are asked to make a payment on our behalf, you should always be mindful of what the payment is for and whether the amount requested is proportionate to the goods or services provided. You should always ask for a receipt, which details the reasons for the payment. If you have any suspicious or concerns regarding a payment, you should raise these with our Chief Financial Officer, who can be contacted at 0333 999 2570.
- 3.1.3 Kickbacks are typically payments made in return for a business favour or advantage. All staff must avoid any activity that might lead to, or suggest, that a facilitation payment or kickback will be made or accepted by us.

4 Gifts and hospitality

- 4.1.1 This policy does not prohibit normal and appropriate hospitality (given and received) to or from third parties so long as it complies with both the terms of this policy and with Practice Plus Group's Gifts and Hospitality policy.
- 4.1.2 The giving or receipt of gifts is not prohibited if all of the following requirements are met:
 - 1. it is not made with the intention of influencing a third party to obtain or retain business or a business advantage, or to reward the provision or retention of business or a business advantage, or in explicit or implicit exchange for favours or benefits;
 - 2. taking into account the reason for the gift, it is of an appropriate type and value and given at an appropriate time;
 - 3. it is given openly, not secretly;
 - 4. it is given in our name, not in your name;
 - 5. it does not include cash or a cash equivalent (such as gift certificates or vouchers); and
 - 6. it is appropriate in the circumstances – for example, in the UK it is customary for small gifts to be given at Christmas time.
- 4.1.3 Gifts should not be offered to, or accepted from, government officials or representatives, or politicians or political parties, or from anyone working in the public sector (including, for example, educational institutions and their subsidiary companies), without the prior approval of any of the Practice Plus Group executive team, they can be contacted at 0333 999 2570

5 Donations

5.1.1 We do not make contributions to political parties without approval from the Practice Plus Group executive team, see contact details above, and contributions are never made in an attempt to influence any decision or gain a business advantage and are always disclosed. We only make charitable donations that are legal and ethical under local laws and practices.

6 Roles and Responsibilities

6.1 Chief Executive Health Care

6.1.1 The Chief Executive has the overall responsibility for funds entrusted to the organisation as the Accountable Officer. They must ensure adequate policies and procedures are in place to protect the organisation and the public funds entrusted to it from incidents of FBC.

6.2 Board of Directors

6.2.1 The Board of Directors take overall responsibility for the effective design, implementation and operation of the anti-FBC initiatives. The Board will ensure that senior management is aware of and accepts the FBC initiatives, and to ensure that they are embedded in the corporate culture.

6.3 Chief Financial Officer

6.3.1 The delivery of all anti-FBC work within the organisation is overseen by the Chief Financial Officer. They shall be responsible for operational matters such as authorising the investigation of alleged fraud, interviews under caution and the recovery or write-off of any sums lost to fraud.

6.3.2 The Chief Financial Officer will inform the LCFS of any incidents where fraud, bribery or corruption is suspected within the organisation. Depending on the outcome of initial investigations, the Chief Financial Officer shall inform and consult appropriate senior management in cases where there may be a material loss due to fraud, bribery or corruption, or where the Chief Financial Officer feels the incident may lead to adverse publicity.

6.3.3 A decision on whether to refer the matter wholly to the Police (or another agency), or to seek Police assistance, or to commence criminal proceedings, will be made with the agreement of the Chief Financial Officer, the LCFS and, where applicable, the NHSCFA.

6.4 Internal and external audit

6.4.1 The role of internal and external audit includes reviewing controls and systems and ensuring compliance with financial instructions.

6.4.2 Internal audits will be completed on an ad hoc basis, as and when required.

- 6.4.3 External audits will be completed by independent auditors on an annual basis. KPMG LLP is the currently appointed external audit provider.
- 6.4.4 The internal and external auditors have a duty to pass on any suspicions of fraud, bribery or corruption to the LCFS.
- 6.4.5 The Audit and Risk Committee will be comprised of the Board of Directors. The role of the audit committee is to provide oversight of the financial reporting process, the audit process, application of accounting policies and the company's system of internal controls as well as liaising with the LCFS at least annually in respect of reporting obligations (see section 6.6).

Human Resources (HR)

6.5

- 6.5.1 Human Resources staff have a vital part in identifying and reporting incidents of suspected FBC.
- 6.5.2 Criminal and disciplinary processes have different purposes, different standards of proof, and are governed by different rules. As such, it would not be appropriate for one investigation to cover both criminal and disciplinary matters. However, a disciplinary enquiry can proceed in parallel with a criminal investigation as long as there is close co-operation between Human Resources staff; the organisation's investigating officer and the LCFS.
- A criminal investigation seeks to establish the facts in relation to a suspected criminal offence. Investigators are bound by rules of evidence, including the Criminal Procedure and Investigations Act 1996 and the Police and Criminal Evidence Act 1984 and its Codes of Practice. Guilt in a criminal prosecution must be proved 'beyond reasonable doubt'.
 - The purpose of a disciplinary investigation is to establish the facts of the case, i.e. to ascertain whether there is a reasonable belief that the alleged misconduct has occurred; whether the employee has any explanation for the alleged misconduct; and whether there are any special circumstances to be taken into account. Disciplinary investigations and ensuing proceedings must adhere to the Advisory, Conciliation and Arbitration Services (ACAS) Code of Practice on Disciplinary and Grievance Procedures, as well as any local HR policies. The standard of proof in disciplinary matters has a lower threshold than for criminal cases, disciplinary matters must be proved 'on the balance of probabilities'.
- 6.5.3 The NHSCFA approach to pursuing sanctions in cases of FBC affecting NHS resources is that the full range of possible sanctions – including criminal, civil, disciplinary and regulatory – should be considered at the earliest opportunity, and any or all of these may be pursued where and when appropriate. The consistent use of an appropriate combination of investigative processes in each case demonstrates an organisation's commitment to take FBC seriously and ultimately contributes to the deterrence and prevention of such actions.
- 6.5.4 It is not unusual for the criminal and disciplinary processes to overlap. For example, an employee who is being investigated for suspected fraud may also be the subject of disciplinary proceedings by their employer arising out of the same set of circumstances.

- 6.5.5 In the case of parallel criminal and disciplinary processes, these should be conducted separately, but there needs to be close liaison between the LCFS and the HR functions since one process may impact on the other. This may include the sharing of information where it is lawful to do so.
- 6.5.6 A joint working protocol has been established and agreed between the LCFS and our HR Directors. The protocol indicates the responsibilities of specific individuals; the frequency of liaison meetings; and specific interaction points during parallel investigations. Support and oversight is provided by the Chief Financial Officer and senior management as required to ensure this is implemented effectively.

6.6 Local Counter Fraud Specialist

- 6.6.1 The LCFS is responsible for tackling FBC affecting NHS resources managed by Practice Plus Group, in accordance with national NHSCFA standards. The LCFS reports to the Chief Financial Officer and reporting is done at least annually to the Audit Committee.
- 6.6.2 The LCFS will work with key colleagues and stakeholders to promote anti-fraud work and effectively respond to system weaknesses and investigate allegations of FBC.
- 6.6.3 The LCFS will ensure that the NHSCFA case management system is used to record all allegations of suspected FBC, to provide information to inform national intelligence, and to support and progress the investigation of FBC allegations, in line with NHSCFA guidance.
- 6.6.4 The LCFS will follow NHSCFA guidance, as set out in the NHS anti-fraud manual and current case acceptance criteria, in supporting the investigation of all allegations of fraud, bribery and corruption. The LCFS will ensure that relevant legislation, such as the Police and Criminal Evidence Act 1984 and the Criminal Procedure and Investigations Act 1996, is adhered to.

6.7 The NHS Counter Fraud Authority

- 6.7.1 All fraud allegations entered onto the national case management system by the LCFS will be controlled by Information Management Officers who will be overseen by a Senior Information Management Officer. Their role is to process the allegations on the case management system and consider any data requests received from LCFSs. They are not able to offer any advice on how to progress an investigation; this is the responsibility of the LCFS and their managers.
- 6.7.2 The NHSCFA will act as a gateway for initial file submissions to the Crown Prosecution Service (“**CPS**”) in relation to LCFS investigations. The National Investigation Service within the NHSCFA will review case material to ensure that the submission to CPS meets the requirements of the National File Standard and will ensure the safe and secure transmission of material for CPS consideration. Thereafter, it is expected that CPS will liaise directly with the LCFS, and not via the NHSCFA.

6.8 Managers

- 6.8.1 Any instances of actual or suspected FBC brought to the attention of a manager should be immediately reported to the LCFS or via the national Fraud and Corruption Reporting Line (“**FCRL**”) operated by Crimestoppers.

- 6.8.2 The NHS FCRL can be contacted on 0800 028 4060, or alternatively, fraud can be reported confidentially online at <https://cfa.nhs.uk/reportfraud>. These reporting methods are not intended to replace existing local reporting lines, rather to provide a way for those who feel unable to report concerns internally.
- 6.8.3 It is important that managers should not investigate any suspected financial crimes themselves.
- 6.8.4 Managers will promptly provide support and information to the LCFS to enable them to carry out their duties. In particular, managers and their staff will co-operate with, and participate in, activities at the request of the NHSCFA and the LCFS upon approval by the Chief Financial Officer, including the implementation of national anti-FBC measures. Managers will also ensure that staff are informed of guidance provided in intelligence alerts, bulletins, fraud prevention notices and local warnings issued by the NHSCFA and the LCFS.
- 6.8.5 Managers will proactively identify and report any system weaknesses that could facilitate FBC.

6.9 All staff

- 6.9.1 All staff must read, understand and comply with this policy and apply best practice in order to prevent FBC. All staff have a responsibility to protect both our and NHS resources from such crimes.
- 6.9.2 Staff who are involved in, or manage, internal control systems should ensure that they receive adequate training and support in order to carry out their responsibilities. Training on the Bribery Act 2010 and on this anti-FBC policy forms part of the induction process for the benefit of all new starters. All existing workers will receive organised training on (i) the Bribery Act 2010, (ii) Practice Plus Group's position on bribery, and (iii) on the relevant Practice Plus Group policies for all managers, to be led by our Chief Executive and our HR Directors.
- 6.9.3 The prevention, detection and reporting of FBC are the responsibility of all Practice Plus Group staff. We are all required to avoid any activity that might lead to, or suggest, a breach of this policy.
- 6.9.4 If a staff member suspects that FBC has taken place (such as if you are offered a bribe by a third party, are asked to make one, suspect that this may happen in the future, or believe that you are a victim of another form of unlawful activity) they should ensure notify their line manager or via one of the other reporting methods explained section 9 of this policy.
- 6.9.5 All staff are obligated to report FBC to the LCFS or Chief Financial Officer as soon as possible if they believe or suspect that a conflict with this policy has occurred, or may occur in the future. This might happen if, for example, a client or potential client offers something to gain a business advantage with us, or indicates that a gift or payment is required in order to secure their business. Further 'red flags' that may indicate bribery or corruption are set out in the [Appendix 3](#) to this policy.
- 6.9.6 If you feel that there is nobody at Practice Plus Group you can talk to, you can get free, confidential advice from the independent charity Protect on 020 3117 2520 or via their online form at <https://protect-advice.org.uk/contact-protect-advice-line/> and is referred to in the rest of this policy as the 'confidential helpline'.

- 6.9.7 Any employee who breaches this policy will face disciplinary action, which could result in dismissal for gross misconduct. Practice Plus Group reserves the right to terminate our contractual relationship with other staff if they breach this policy.
- 6.9.8 Under no circumstances should a member of staff speak or write (including email) to representatives of the press, TV, radio, or to another third party, about suspected FBC (see the [Human Resources “Code of Conduct” which can be found on MyPracticePlus](#)). The established lines of reporting concerns to either the Chief Financial Officer, the LCFS or via the Fraud and Corruption Reporting Line should be used and staff can be reassured that all information is treated in the strictest confidence and that all allegations will be investigated.

7 Protection

- 7.1.1 Staff who refuse to accept or offer a bribe, or those who raise concerns or report another's wrongdoing, are sometimes worried about possible repercussions. We aim to encourage openness and will support anyone who raises genuine concerns in good faith under this policy, even if they turn out to be mistaken.
- 7.1.2 We are committed to ensuring no one suffers any detrimental treatment as a result of refusing to take part in bribery or corruption, or because of reporting in good faith their suspicion that an actual or potential bribery or other corruption offence has taken place, or may take place in the future.
- 7.1.3 Detrimental treatment includes dismissal, disciplinary action, threats or other unfavourable treatment connected with raising a concern. If you believe that you have suffered any such treatment, you should inform the Practice Plus Group executive team immediately, their details can be found at 4.1.3 above.
- 7.1.4 If the matter is not resolved, and you are an employee, you should raise it formally using our Grievance Procedure, which can be found on the internal intranet system known as MyPracticePlus, or alternatively from a member of the HR department. The key HR contacts to report an FBC concern are Secondary Care HR Director and Primary Care HR Operations Manager and they can be contacted at 0333 999 2570.

Record-Keeping

8

- 8.1.1 All staff must keep financial records and have appropriate internal controls in place which will evidence the business reason for making payments to third parties.
- 8.1.2 All staff must declare and keep a written record of all hospitality or any gifts accepted or offered, which will be subject to managerial review in accordance with this policy.
- 8.1.3 All staff must ensure that all expense claims relating to hospitality, gifts or expenses incurred to third parties are submitted in accordance with our expenses policy and specifically record the reason for the expenditure.
- 8.1.4 All accounts, invoices, memoranda and other documents and records relating to dealings with third parties, such as clients, suppliers and business contacts, should be

prepared and maintained with strict accuracy and completeness. No accounts must be kept 'off-book' to facilitate or conceal improper payments.

9 Information management and technology

- 9.1.1 The Computer Misuse Act became law in 1990; the Act identifies three specific offences:
- Unauthorised access to computer material;
 - Unauthorised access with intent to commit or facilitate commission of further offences; and
 - Unauthorised acts with intent to impair, or with recklessness as to impairing, operation of computers, etc.
- 9.1.2 Unauthorised access to computer material could include using another person's identifier and password without proper authority in order to use data or a program, or to alter, delete, copy or move a program or data.
- 9.1.3 Unauthorised access with intent to commit or facilitate the commission of further offences, could include gaining unauthorised access to financial or administrative records with intent.
- 9.1.4 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 (see the "Computer Use Policy" which can be [found here](#) on My PracticePlus).
- 9.1.5 The fraudulent use of information technology should be reported by the Chief Information Officer at 0333 999 2570 to the LCFS.

10 The Response Plan

10.1 How to raise a concern

- 10.1.1 All staff are encouraged to raise concerns about any issue or suspicion of malpractice at the earliest possible stage. If you are unsure whether a particular act constitutes bribery or corruption, or if you have any other queries, these should be raised with your line manager or through the confidential helpline (020 3117 2520).
- 10.1.2 Concerns should be reported by following the procedure set out in our "Whistleblowing Policy", which can be found on [My Practice Plus Group](#), or obtained from a member of the HR department. The key HR contacts are Secondary Care HR Director and Primary Care HR Operations Manager and they can be contacted at 0333 999 2570. Alternatively, concerns can also be reported through the confidential helpline (020 3117 2520).

10.2 Reporting FBC

- 10.2.1 Any employee of Practice Plus Group discovering or suspecting FBC should report the matter immediately to the LCFS or the Chief Financial Officer. All information received is treated in the strictest confidence.

- 10.2.2 The LCFS for Practice Plus Group is Andy Knight, they can be contacted by telephone, 07920 295 097 or by email andyknight@nhs.net.
- 10.2.3 The Chief Financial officer for Practice Plus Group can be contacted by telephone 0333 999 2570
- 10.2.4 If an employee is concerned that the LCFS or the Chief Financial Officer themselves may be implicated in suspected FBC, the matter should be reported to the Chief Executive who can be contacted by telephone 0333 999 2570
- 10.2.5 Suspicions of FBC can also be reported using the NHS Fraud and Corruption Reporting Line on free-phone 0800 028 4060 or by filling in an online form at <https://cfa.nhs.uk/reportfraud>, as an alternative to internal reporting procedures.
- 10.2.6 All reports of FBC, however they are reported, will be treated in the strictest confidence, will be taken seriously and thoroughly investigated in accordance with NHSCFA guidance and relevant legislation.

11 Sanctions and Redress

- 11.1.1 Where an objective investigation has found that FBC (and bear in mind that this is on the less strict 'balance of probabilities' basis) is present, Practice Plus Group will consider applying all appropriate sanctions. It is important that sanctions are applied in a consistent manner according to the seriousness of the circumstances involved. There are different types of sanctions, including disciplinary, professional, civil and criminal sanctions. These are not mutually exclusive.
- **Civil** – The use of civil sanctions enables the organisation to seek the recovery of money and/or assets which have been obtained fraudulently, costs and interest can also be recovered.
 - **Criminal** – Following an investigation and where there is evidence of FBC, the LCFS will work in partnership with the Chief Financial Officer, NHSCFA, the police and/or the CPS to bring a case to court against an alleged offender. The maximum penalty for offences under the FA 2006 is 12 months' imprisonment on summary conviction and 10 years' imprisonment on conviction on indictment.
 - **Disciplinary** – Disciplinary procedures will be initiated in accordance with Practice Plus Group's "Disciplinary Policy" ([which can be found on MyPracticePlus](#)) where there is sufficient evidence to suspect that an employee has been involved in a fraudulent act.
 - **Professional/Regulatory Sanctions** - Where there is sufficient evidence to suspect that fraud has been committed by a member of a professional body, i.e. a Nurse or Doctor; following consultation with the LCFS, Practice Plus Group will refer the matter to the relevant professional body. Through their statutory committees, professional bodies have powers to place conditions on, suspend, or remove the registration of professionals who are judged to be guilty of serious professional misconduct or who have been convicted in the British Isles of a criminal offence.

11.1.2 Practice Plus Group will seek financial redress whenever possible to recover losses from FBC. This redress can take the form of confiscation and compensation orders, a civil order for repayment, or a local agreement between the organisation and the offender to repay monies lost.

12 Review of policy

12.1 How often will this policy be reviewed?

12.1.1 This policy will be reviewed in response to new guidance, legislation or regulation, or after two years.

12.2 Monitoring and auditing of policy effectiveness

12.2.1 Practice Plus Group and the LCFS will monitor the effectiveness of this policy to ensure that it remains appropriate and continues to provide clear direction and help to those Officers and Directors of Practice Plus Group who become aware of FBC.

12.2.2 Where deficiencies are identified as a result of monitoring, the LCFS will make appropriate recommendations for improvement. These will be considered by the Chief Financial Officer and the Audit Committee (if appropriate).

12.2.3 The Practice Plus Group executive team will monitor the effectiveness and review the implementation of this policy, regularly considering its suitability, adequacy and effectiveness. Any improvements identified will be made as soon as possible.

12.2.4 Internal control systems and procedures will be subject to regular audits to provide assurance that they are effective in countering FBC.

12.2.5 All staff are responsible for the success of this policy and should ensure they use it to disclose any suspected danger or wrongdoing.

12.2.6 This policy does not form part of any employee's contract of employment and it may be amended at any time.

12.3 Dissemination of the policy

12.3.1 This policy should be accessible to all Practice Plus Group staff and all staff should be reminded of the existence and scope of this policy at least annually.

12.4 Quality Impact Assessment Statement

12.4.1 As part of its development, this policy and its impact on equality have been reviewed in line with the NHSLA Equality Scheme and Equal Opportunities Policy. The purpose of the assessment is to minimise and if possible remove any disproportionate impact on service users and people employed by Practice Plus Group on the grounds of race, sex, disability, age, sexual orientation or religious belief. This policy was reviewed and no detriment was identified.

12.5 Associated Internal Policies & Procedures

- [Human Resources Code of Conduct](#)
- [Disciplinary Policy](#)
- [Whistle Blowing Policy](#)

- Anti-Money Laundering Policy

12.6 Associated External Policies & Procedures

- [NHSCFA Standards the counter-fraud standards and guidance](#) (issued from time to time by NHSCFA)
- [NHS Standard Contract 2020/21](#)
- [NHS Standard Contract 2020/21 Service Conditions](#)
- [NHS Standard Contract 2020/21 General Conditions](#)
- [Committee on Standards in Public Life - Ethical Standards for Providers of Public Services](#)

Appendix 1 Particular risks for our business and the steps taken to address those risks

We have identified that the following are particular risks for our business:

- 1) Our procurement and tender processes and (more broadly) the selection of external suppliers to supply us with goods and services - this is where something might be offered to us or to our staff (or might be requested, either openly or implied, by our staff) in order to encourage us to choose a particular supplier (an 'inducement' to contract).
- 2) Our payment of invoices where a supplier, without our knowledge, has paid a bribe on our behalf and has passed this cost on to Practice Plus Group - the supplier may have added the cost of the bribe to the total invoice, without clearly stating what the extra payment relates to.
- 3) Our purchase of goods (such as medical supplies) from any overseas supplier - such goods will first need to clear Customs & Excise prior to being exported out of that country and prior to being imported into the United Kingdom. Where we need goods quickly we may be looking to speed up the process, or the overseas supplier may be looking to speed up the process for us by paying some money or other benefit to a foreign public official.
- 4) Our participation in any selection process for the award of a service contract to Practice Plus Group - (such as the participation in a tender process for a CCG contract for the supply of healthcare services) and anything that could be considered to be a bribe for the awarding body to choose Practice Plus Group to perform that contract instead of a competitor of Practice Plus Group's.
- 5) Our checking the identification of foreign individuals - when we wish to give them a job working for Practice Plus Group, and if we do anything to speed up or facilitate this process, for example by paying a foreign public official for the request to be dealt with more quickly.
- 6) The donation of gifts to Practice Plus Group by Practice Plus Group's suppliers - for Practice Plus Group to use in charity fundraising events that are organised by Practice Plus Group and its staff (such as using these gifts as raffle prizes).

To address those risks we have:

- a) carried out a comprehensive and group-wide risk assessment so that Practice Plus Group can put in place adequate procedures in the appropriate areas, in order to minimise the risk of FBC happening.
- b) consulted with our policy managers, senior finance, procurement, governance, human resources and legal teams in order to assess how we can address the risk of FBC.
- c) put together this anti-FBC policy to be made available to our staff for review, and planned associated policy documents and an updated whistleblowing policy.
- d) consulted our procurement team about procurement processes and put together procurement policies which encourage us to be careful and to carry out due diligence at the point of entering into and managing business relationships, so that we do not, for example, enter into contracts with suppliers who have a habit of paying bribes.
- e) organised training on (i) the Bribery Act 2010, (ii) Practice Plus Group's position on bribery, and (iii) on the relevant Practice Plus Group policies for all managers, to be led by our Chief Executive and our HR Directors.
- f) added training on the Bribery Act 2010 and on this anti-FBC policy to our induction packs for the benefit of all new starters.
- g) updated the staff handbook to address the issue of FBC in the light of the Bribery Act 2010.

Appendix 2 Examples of bribery

1 Offering a bribe

We offer a potential client tickets to a major sporting event, but only if they agree to do business with us.

This would be an offence as we are making the offer to gain a commercial and contractual advantage. We may also be found to have committed an offence because the offer has been made to obtain business for us. It may also be an offence for the potential client to accept our offer.

2 Receiving a bribe

A supplier gives your nephew a job, but makes it clear that in return they expect you to use your influence in our organisation to ensure we continue to do business with them.

It is an offence for a supplier to make such an offer. It would be an offence for you to accept the offer as you would be doing so to gain a personal advantage.

3 Bribing a foreign official

You arrange for the business to pay an additional payment to a foreign official to speed up an administrative process. This might include something like making a payment to speed up the clearing of goods you have purchased on behalf of Practice Plus Group from an overseas supplier through customs. This might also include securing or speeding up identity checks for individuals that Practice Plus Group wishes to employ or engage.

The offence of bribing a foreign public official has been committed as soon as the offer is made. This is because it is made to gain a business advantage for us. We may also be found to have committed an offence.

Appendix 3 Potential risk scenarios: "red flags"

The following is a list of possible red flags that may arise during the course of you working for us and which may raise concerns under various anti-bribery and anti-corruption laws.

This list is not intended to be all-inclusive, and it is for illustrative purposes only. There may well be other scenarios which raise legitimate concerns under the anti-corruption laws.

If you encounter any of these red flags while working for us, you must report them promptly to your line manager or using the procedure set out in the Whistleblowing policy:

- (a) you become aware that a third party (such as a supplier) carries out, or has been accused of carrying out, improper business practices such as paying bribes in return for a business benefit;
- (b) you learn that a third party has a reputation for paying bribes, or requiring that bribes are paid to them, or has a reputation for having a "special relationship" with foreign government officials;
- (c) a third party insists on receiving a dubious commission or fee payment before committing to sign up to a contract with us, or before carrying out a government function or process for us;
- (d) a third party requests payment in cash and/or refuses to sign a formal commission or fee agreement, or to provide an invoice or receipt for a payment made;
- (e) a third party requests that payment is made to a country or geographic location which is different from where the third party lives or carries out its business;
- (f) a third party requests an unexpected additional fee or commission to "facilitate" a service;
- (g) a third party demands lavish entertainment or gifts before commencing or continuing contractual negotiations or provision of services;
- (h) a third party requests that a payment is made to "overlook" potential legal violations
- (i) a third party requests that you provide employment or some other advantage to a friend or relative in return for a particular benefit to you;
- (j) you receive an invoice from a third party that appears to be non-standard or customised;
- (k) when contracting with a third party, they insist on the use of side letters, or refuse to put all the terms agreed in writing, and you think that this is because they may be hiding something;
- (l) you notice that we have been invoiced for a commission or fee payment that appears large given the service stated to have been provided;
- (m) a third party requests or requires the use of an agent, intermediary, consultant, distributor or supplier that is not typically used by or known to us, and you suspect that this is because this will create some benefit for that third party;
- (n) you are offered an unusually generous gift or offered lavish hospitality by a third party;
- (o) suppliers in which Practice Plus Group staff have a personal or business interest or other close connection are being engaged by Practice Plus Group for a seemingly inflated fee; or
- (p) any cash or sizeable non-cash inducement is offered, given, requested or accepted in return for the award of a contract to a particular person, company or any other type of supplier.