



**PWYLLGOR ARCHWILIO A SICRWYDD RISG
AUDIT AND RISK ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	12 August 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Counter Fraud, Bribery and Corruption Policy Review
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Ben Rees, Head of Counter Fraud

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

A review of the Health Board's Counter Fraud, Bribery and Corruption Policy (815) has been undertaken, and minor amendments have been made, which include:

- The inclusion of the Economic Crime and Corporate Transparency Act 2023 - Failure to Prevent Fraud. This update includes a summary of the offence, offence examples and actions required by the Health Board to mitigate risks.
- A rework / update of current legislation and how they impact Counter Fraud Activity.
- A rewording of how parallel sanctions impact Counter Fraud Investigations, including the inclusion of a flow chart, outlining individual responsibilities.

In light of the above, the Audit and Risk Assurance Committee (ARAC) is being requested to approve the relevant changes.

Cefndir / Background

Brief summary of the Policy:

To inform all staff of the reporting procedures and subsequent action following the referral of any suspicion of fraud. To promote the deterrent and detection of fraud committed against the Hywel Dda University Health Board.

Scope:

This is an Organisation wide policy which relates to all forms of fraud, bribery and corruption and is intended to provide direction and guidance for employees on what fraud is in the NHS, our responsibilities as employees to prevent fraud, bribery, and corruption, and how to report it.

The Policy highlights each individual's role, including that of the Director of Finance, Fraud Champion, and Local Counter Fraud Specialist.

This policy applies to all employees of the Health Board, regardless of position held, as well as to consultants, vendors, contractors, and/or any other parties who have a business relationship with the Health Board.

Reason(s) for developing the Policy and subsequent review:

The Health Board is required to comply with Welsh Government Directions on Counter Fraud Measures and the Government Functional Standard 013 (GovS013) for Counter Fraud. Both the WG measures and GOVS013 Standards require the Health Board to have a Counter Fraud, Bribery and Corruption policy.

A review of the existing policy identified the need to include information on the recently introduced legislation under the Economic Crime and Corporate Transparency Act 2023, which created the new corporate offence of failure to prevent fraud following a Law Commission paper in June 2022 that sought ways to improve the law, to ensure that corporations are effectively held to account for committing serious crimes.

Under the offence, an organisation may be criminally liable where an employee, agent, subsidiary, or other 'associated person' commits a fraud intending to benefit the organisation and the organisation did not have reasonable fraud prevention procedures in place. A report on the new legislation and how it may impact the Health Board was provided to the Committee in December 2024.

Other minor amendments have been made to the wording of some paragraphs, inclusion of a parallel sanction flow chart and general formatting of the policy document, which included an updated Equality Impact Statement.

Owning group:
ARAC.

Asesiad / Assessment

At present, the Health Board has in place a Counter Fraud, Bribery and Corruption Policy. This was previously approved by relevant bodies, including the Audit and Risk Assurance Committee, thus complying with Welsh Government Directions on Counter Fraud Measures and the Government Functional Standard 013 (GovS013) for Counter Fraud (GovS013), therefore mitigating any risk associated with non-compliance.

Failure to have such a policy in place puts the Health Board at risk of breaching said standards, in addition to potentially exposing the Health Board to a risk that it does not have suitable measures in place to prevent:

1. Bribery and Corruption, an offence under Section 7 of the Bribery Act 2010.
2. Fraud, an offence under the Economic Crime and Corporate Transparency Act 2023.

The revised policy improves on the existing policy, reducing the risk of non-compliance against the above standards and strengthens the argument that the Health Board has in place suitable measures to reduce Fraud, Bribery and Corruption within the organisation.

Changes to the Policy are minimal, the overall scope remains; however, additional text relating to the new legislation has been added.

Due to the inclusion of new information and amendments made, the policy underwent a process of global review, which included notifying and requesting comment from both local and local partnership forums.

The Policy will be promoted within the Health Board's ongoing programme of fraud awareness. The strategy for the fraud awareness programme is contained in the annual Counter Fraud Work Plan.

Argymhelliad / Recommendation

The Audit and Risk Assurance Committee is invited to **REVIEW** and **APPROVE** the Health Board's Counter Fraud, Bribery and Corruption Policy (815).

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.2 In particular, the Committee will review the adequacy of: 3.2.4 the policies and procedures for all work related to fraud and corruption as set out in National Assembly for Wales Directions and as required by the Counter Fraud and Security Management Service.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	3. Effective 4. Efficient
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	4. Learning, improvement and research
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Striving teams
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	Legislation and national policy.
Rhestr Termiau: Glossary of Terms:	Contained within the policy document.

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg Parties / Committees consulted prior to Audit and Risk Assurance Committee:	In line with HB guidance, the policy underwent internal consultation for two weeks. In addition to this, the document was also shared with the Staff Partnership and Local Partnership forums for comment.
--	--

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable.
Gweithlu: Workforce:	Not applicable.
Risg: Risk:	Not applicable.
Cyfreithiol: Legal:	Not applicable.
Enw Da: Reputational:	Not applicable.
Gyfrinachedd: Privacy:	Not applicable.
Cydraddoldeb: Equality:	Not applicable.

Counter Fraud, Bribery and Corruption Policy

Policy information

Policy number: 815

Classification: Corporate

Supersedes: 198 and previous versions

Version number: 3

Date of Equality Impact Assessment: 08/07/2025

Approval information

Approved by: Audit and Risk Assurance Committee

Date of approval:

Date made active:

Review date:

Summary of document:

To inform all staff of the reporting procedures and subsequent action following the referral of any suspicion of fraud. To promote the deterrent and detection of fraud committed against the Hywel Dda University Health Board (UHB).

Scope:

This is an Organisation wide policy which relates to all forms of fraud, bribery and corruption and is intended to provide direction and guidance for employees on what fraud is in the NHS, what everyone's responsibility is to prevent fraud, bribery, and corruption, and how to report it.

This policy applies to all employees of the UHB regardless of position held, as well as to consultants, vendors, contractors, and/or any other parties who have a business relationship with UHB.

To be read in conjunction with:

[435 – AW Raising Concerns \(Whistleblowing\) Policy](#) (opens in a new tab)

[201 – AW Disciplinary Policy](#) (opens in a new tab)

[248 – Standards of Behaviour Policy](#) (opens in a new tab)

[156 – Risk Management Policy](#) (opens in a new tab)

Patient information:

Owning group:

Finance

Executive Director job title:

Director of Finance

Reviews and updates:

1.0 – New Policy - 30.4.2019

2.0 – Full Review Process, Considering Government Functional Standard 013 For Counter Fraud –
16.08.2022

2.1 – Minor Change to Reference within Document.

3.0 – full review

Keywords

Fraud, Loss, Reporting, Staff Response, Concern

Glossary of terms

UHB – Hywel Dda University Health Board

WG – Welsh Government

WOD - and Workforce and Organisational Development

LCFS - Local Counter Fraud Specialist

FCRL - Fraud and Corruption Reporting Line

CFS Wales – Counter Fraud Services Wales.

NHSCFA – NHS Counter Fraud Authority

CPIA - Criminal Procedure Investigation Act – 1996

UK – United Kingdom

Table of Contents

POLICY INFORMATION	1
APPROVAL INFORMATION.....	1
INTRODUCTION	4
POLICY STATEMENT.....	5
SCOPE	6
AIMS.....	6
OBJECTIVES	6
COUNTER FRAUD STRATEGY	7
ROLES AND RESPONSIBILITIES.....	9
REPORTING CONCERNS	15
TRAINING.....	16
IMPLEMENTATION.....	16
APPENDIX A – STATUTORY AUTHORITY AND ASSOCIATED LEGISLATION	17
APPENDIX B – EXAMPLES OF NHS FRAUD, BRIBERY & CORRUPTION OFFENCES	21
APPENDIX C – PARALLEL INVESTIGATIONS FLOWCHART	23
APPENDIX D – ACTING ON SUSPICIONS – DO’S AND DON’TS	24

Introduction

One of the basic principles of a public sector organisation is the appropriate use of public funds. Hywel Dda University Health Board ('the UHB') is committed to reducing the level of fraud, bribery, and corruption within the NHS to an absolute minimum and keeping it at that level. The UHB will seek the appropriate disciplinary, regulatory, civil, and criminal sanctions against those who commit these crimes and will seek to recover losses wherever possible to free up public resources for better patient care.

To achieve this goal the UHB fully accepts that it must comply with the Statutory Authorities which have been introduced by both the UK and Welsh Governments, a summary of which can be found in [Appendix A](#). By ensuring that the above Statutory Authorities are followed, the UHB can demonstrate that it is fully committed to ensuring that the criminal investigation process it has in place, is designed to support the Criminal Justice System in delivering safe and robust prosecutions.

The NHS CFA definition of NHS fraud is used for the purposes of this Policy, which states:

'On a basic level, fraud is deception carried out for personal gain, usually for money. Fraud can also involve the abuse of a position of trust. By 'NHS fraud' we mean any fraud where the NHS is the victim.'

Bribery and corruption can be broadly defined as the offering or acceptance of inducements, gifts, favours, payment, or benefit-in-kind which may influence the action of any person. Corruption does not always result in a loss. The corrupt person does not need to benefit directly from their deeds; however, they may be unreasonably using their position to give some advantage to another.

This Policy provides clear guidance for staff considering reporting concerns of fraud, bribery and corruption which may have been perpetrated against the interests of the UHB and is accompanied by the response plan for action where suspicious activity is suspected or detected and/or may be reported.

The Executive Team have adopted a zero-tolerance approach towards fraud, bribery, and corruption; this document is approved by the Audit, Risk and Assurance committee as outlining the UHB's policy in dealing with fraud, bribery, and corruption.

The UHB believes that most people who work in and use the NHS are honest and professional; however, fraud committed even by a small minority is unacceptable as it ultimately leads to a reduction in the resources available for patient care, treatment, and services. All employees and workers should apply best practice to prevent fraud, bribery, or corruption against the UHB and wider NHS. The Local Counter Fraud, Bribery and Corruption policy should be used by staff as a guide to apply best practice.

All employees and workers have a responsibility to comply with all applicable laws and regulations relating to ethical business behaviour, procurement, personal expenses, conflicts of interest, confidentiality, and the acceptance of gifts (including bequests in patients' Wills that become known to staff) and hospitality. This means, in addition to maintaining the normal standards of personal honesty and integrity, all employees should always:

- Make appropriate and timely declarations on the UHB's Declaration of Interest and Gift & Hospitality electronic registers, relating to any self-employment or other employment or where any outside interest, offers by patients, suppliers or third parties may be considered as a cause for concern or may be considered to create a conflict of interest against the UHB.
- Avoid acting in any way that might cause others to allege or suspect them of dishonesty.
- Behave in a way that would not give cause for others to doubt that the UHB's employees deal fairly and impartially with official matters.
- Be alert to the possibility that others might be attempting to deceive.
- Employees and workers are also expected to act in accordance with the standards laid down by their Professional Bodies where applicable.

If an employee or worker suspects that fraud, bribery, or corruption has taken place against the UHB or wider NHS, they have a duty to ensure it is reported by contacting the Local Counter Fraud Specialist directly or by using the other reporting methods outlined in this policy.

Policy Statement

This policy is required to demonstrate compliance with the WG Directions in Countering Fraud in the NHS, and the promotion and implementation of the policy is monitored by the Audit, Risk and Assurance Committee through the Annual Counter Fraud Workplan.

Statement of the Hywel Dda University Health Board:

The Board is absolutely committed to maintaining an honest, open, and well-intentioned atmosphere within the UHB. It is also committed to the elimination of any fraud within the organisation, and to the rigorous investigation of any such cases.

The Board wishes to encourage anyone having reasonable suspicions of fraud to report them. Therefore, it is also the Board's policy, which will be rigorously enforced, that no employee will suffer in any way as a result of reporting reasonably held suspicions. For these purposes "reasonably held suspicions" shall mean any suspicions other than those that are raised maliciously.

The UHB has a duty to protect individuals and the UHB from false, malicious, or vexatious expressions of concern. Disciplinary action may be taken against any member of staff who is discovered:

- A. To have made allegations falsely and maliciously,
- B. To have externally disclosed the information before using the internal procedures which have been established,
- C. To have victimised employees or deterred them from raising a concern.

In order to endorse this commitment, the UHB has an approved [435 - All Wales Raising Concerns \(Whistleblowing\) Policy](#) (*opens in a new tab*) for dealing with such cases, which protects the individual and ensures that matters are fully and thoroughly investigated.

Scope

This is an Organisation wide policy which relates to all forms of fraud, bribery and corruption and is intended to provide direction and guidance for employees on what fraud is in the NHS, what everyone's responsibility is to prevent fraud, bribery, and corruption, and how to report it.

This policy applies to all employees of the UHB regardless of position held, as well as to consultants, vendors, contractors, and/or any other parties who have a business relationship with UHB.

Aims

This policy aims to:

- Safeguard public funds by reducing fraud, bribery, and corruption within the UHB.
- Foster a culture of integrity, transparency, and accountability across the organisation.
- Ensure compliance with legal and regulatory obligations related to the prevention, detection, and investigation of fraud, bribery, and corruption.
- Protect staff and workers who suspect fraud, bribery, or corruption, providing a safe reporting process in accordance with the All-Wales Procedure for NHS Staff to Raise Concerns and the Public Interest Disclosure Act (1998).
- Preserve resources for their intended purpose of delivering high-quality patient care.
- Minimise fraud, bribery, and corruption to the lowest possible level and maintain that standard.

Objectives

The objectives of this policy are to:

- Enhance understanding of fraud, bribery, and corruption through comprehensive training and guidance.
- Provide clarity on operational arrangements, including collaboration with NHS Counter Fraud Service Wales and the NHS Counter Fraud Authority (NHS CFA).
- Establish clear roles and responsibilities to ensure accountability.
- Ensure compliance with the Government Functional Standard GovS 013: Counter Fraud, relevant legal frameworks, and ethical obligations, including but not limited to:
 - The Criminal Procedure and Investigations Act (CPIA) 1996
 - The Fraud Act 2006
 - The Bribery Act 2010
 - The Economic Crime and Corporate Transparency Act 2023
 - The Police and Criminal Evidence Act 1984 Codes of Practice
 - Welsh Government Directions to NHS Bodies on Counter Fraud Measures.

Further information on the above legislation can be found in [Appendix A](#).

Common examples of Fraud, Bribery and Corruption offences can be found in [Appendix B](#).

Counter Fraud Strategy

Creating a Strong Counter Fraud, Corruption and Bribery Culture

The UHB has a responsibility to protect the organisation and its resources. Stakeholders must work together to raise awareness of the UHB's zero tolerance approach to fraud, corruption, and bribery, to report concerns and enforce the message that such matters are not acceptable within the NHS and will be dealt with accordingly.

The most effective deterrent will come from within the NHS, those who value the service provided and disapprove of those who abuse the system through fraud, corruption, bribery, and other dishonest acts. In addition, publicity surrounding counter fraud, corruption and bribery work will deter some who perpetrate or consider perpetrating related offences. The UHB will publicise successful investigation outcomes both internally and externally as appropriate to aid the deterrent effect.

Proactive Prevention and Detection

The UHB will ensure (through 'fraud proofing') that its systems, policies, and processes are sufficiently robust so that the risk of fraud, corruption and bribery is reduced to a minimum. Checks will be conducted in areas identified to be most at risk to fraud, corruption, or bribery to proactively detect instances that might otherwise be unreported.

All staff must be aware of and comply with the UHB's Standing Financial Instructions and Standing Orders, the [Standards of Behaviour Policy](#) (opens in a new tab) for conflicts and declarations of interest (incorporating gifts, hospitality, and commercial sponsorship) and the associated requirement to declare other interests.

Professional Investigation of Detected Fraud, Corruption and Bribery

Criminal offences of fraud, corruption or bribery will be investigated in a professional, objective, and timely manner by an accredited NHS Counter Fraud Specialist appointed by the UHB.

Investigations will be conducted in accordance with all applicable legislation including:

- Welsh Government directions to Counter Fraud in the NHS in Wales
- Data Protection Act 2018 (DPA)
- The Police and Criminal Evidence Act 1984 (PACE)
- The Criminal Procedure and Investigations Act 1996 (CPIA)
- The Public Interest Disclosure Act 1998. (PIDA)
- The NHS CFA Fraud and Corruption Manual
- Attorney General's Revised Guidelines for Disclosure

There is a likelihood that most cases where employees or workers are under investigation for fraud, bribery or corruption will have a disciplinary investigation which will run parallel. For this reason, it is important to ensure effective joint working between the Local Counter Fraud Specialist (LCFS), Workforce and Organisational Development (WOD) representative and if applicable, the appointed disciplinary investigation officer.

The criminal and disciplinary investigations must be conducted separately and by different people. Criminal investigations must be conducted in accordance with PACE, the CPIA, and other relevant criminal legislation; disciplinary investigations must be carried out in accordance with the All-Wales Disciplinary Policy or Upholding Professional Standards in Wales, which follows the ACAS Code of Practice on Disciplinary and Grievance Procedures and relevant employment law.

The criminal investigation may be given precedence over the disciplinary investigation if there is a risk of serious prejudice to the former from running the two processes concurrently. However, there may be a compelling public interest in suspending or removing an individual from their post before the conclusion of the criminal case; in this situation, a case conference should be held to discuss the circumstances and relevant disclosure issues. Information may be shared between the LCFS and WOD representative where and when it is lawful and appropriate.

A parallel investigations flowchart can be found in [Appendix C](#).

Effective Sanctions

Where fraud, corruption or bribery offences are committed, criminal sanctions (including prosecution) will be pursued. Civil proceedings may be initiated to recover fraudulently obtained money or assets, including associated interest and costs. Actions such as freezing assets or recovering losses may also be taken. Employees of the UHB found to have committed such offences will also be dealt with in accordance with internal disciplinary procedures and referred to professional bodies where appropriate.

Multiple sanctions may be pursued simultaneously for the same incident. Each case is evaluated individually, considering its unique facts and merits.

Seeking Redress

In cases investigated by the Local Counter Fraud Team or NHS Counter Fraud Service Wales, where losses are identified, financial recovery will always be considered. Recovery efforts aim to return resources lost to fraud, bribery, or corruption to the NHS for their intended use-delivering high-quality patient care and services. Redress options include:

- Confiscation or compensation orders.
- Civil repayment agreements.
- Local settlements between the organisation and the offender.
- Recovery from ongoing salary payments.

In more significant cases, the NHS Counter Fraud Service Wales may seek restraining or confiscation orders under the Proceeds of Crime Act 2002 (POCA) to recover financial benefits.

Recovery efforts will begin promptly once a loss is identified. Collaboration between departments may be necessary to select the most appropriate recovery option. In some cases, with guidance from the LCFS and approval from the Executive Director of Finance and NHS Counter Fraud Service Wales, it may be decided that no further recovery action will be taken.

Risk Assessment and Identification

To ensure that risks are appropriately identified, managed, and addressed, risk assessments related to fraud, bribery and corruption will be carried out. All identified risks will be investigated by the Local Counter Fraud Team and mitigating measures recommended wherever possible.

The management of risk will be conducted in line with the UHB Risk Management Framework.

The lead LCFS/ Head of Local Counter Fraud Service will provide assurance around risk related to fraud, bribery and corruption to the Executive Board and Audit Committee and identify mitigation plans via the Counter Fraud Annual Workplan.

Any risks identified will be referred to the Audit Committee and the relevant directorate.

Roles and Responsibilities

Chief Executive

The Chief Executive has overall responsibility for ensuring compliance with Welsh Government Directions to NHS Bodies on Counter Fraud Measures 2006 issued by the Welsh Assembly Government. The Chief Executive shall further ensure that action to counter fraud and corruption is taken in accordance with the NHS Executive Counter Fraud and Corruption Manual, and in accordance with the Table annexed to Directions, which sets out the respective operational and liaison responsibilities.

The Chief Executive may delegate the day-to-day operational involvement in relation to the counter fraud activity to the Director of Finance, who shall liaise and reach agreement with the NHS Counter Fraud Service (Wales) and/or LCFS before any decision is reached on the referral of a case of fraud or corruption to the Police or any other external body for investigative action.

Director Of Finance

The Director of Finance is responsible for monitoring compliance with Welsh Government Directions to NHS Bodies on Counter Fraud Measures and with any other instructions issued by the NHS CFA or NHS CFS Wales.

The Director of Finance has day to day responsibility for monitoring and ensuring compliance with Directions, and also ensuring that action to counter fraud and corruption is taken in accordance with the NHS Counter Fraud and Corruption Manual and in accordance with the Table annexed to Directions, which sets out the respective operational and liaison responsibilities of Local Health Boards, the Welsh Government (WG), NHS Counter Fraud Authority and the NHS Counter Fraud Service Wales.

The Director of Finance is the accountable individual and member of the Executive Team who has a clearly defined responsibility for the strategic management of, and support for counter fraud and counter fraud, bribery, and corruption work within the UHB.

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

The Director of Finance retains corporate responsibility for the strategic management of the UHB 's Local Counter Fraud Service and may delegate the operational management of the Local Counter Fraud Service team to their deputy.

The Head of Local Counter Fraud Service will retain direct access to the Director of Finance as and when required, to ensure compliance with Welsh Government Directions to NHS Bodies on Counter Fraud Measures.

The Head of Local Counter Fraud will meet privately with the Chair of the Audit Committee and independent members, to ensure compliance with good governance arrangements and emerging risks of fraud, bribery or corruption facing the UHB.

Audit, Risk and Assurance Committee

The role of the Audit, Risk and Assurance Committee is to receive reports of counter fraud activity and to monitor compliance with the Welsh Assembly Government Directions 2006. The UHB must effectively seek to promote the counter fraud agenda and ensure that the appropriate action is taken when an allegation of fraud is received.

The Audit, Risk and Assurance Committee will approve the annual Counter Fraud Work Plan.

Head of Internal Audit

The Head of Internal Audit will ensure that any detected systems weaknesses are reported to the LCFS so that they can be examined pro-actively to detect fraud.

Internal Auditors will inform the LCFS of any instances of potential or suspected fraudulent activity identified during their work or from other sources.

Internal Audit and LCFS will work together in line with the agreed Internal Audit and LCFS Liaison Protocol.

Workforce and Organisational Development

Close liaison between the LCFS and Workforce and Organisational Development ('WOD') are essential to ensure that any parallel sanctions (i.e., criminal, civil and disciplinary) are applied effectively and in a coordinated manner. A liaison protocol between the LCFS and WOD will be agreed for this purpose. WOD staff 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 liaison protocols. A parallel investigations flowchart can be found in Appendix C.

WOD staff are responsible for ensuring the appropriate application of the UHB's internal disciplinary procedures. In the event of an investigation, the Workforce team will advise those involved in matters of employment law and in procedural matters, such as disciplinary and complaints procedures, as required.

In instances where an internal investigation is being undertaken and fraud, bribery or corruption is suspected WOD staff must inform the LCFS immediately.

Referral to Professional Regulatory Bodies will be considered where applicable. The Professional Regulatory Body concerned will in such instances be requested to commence external disciplinary proceedings to investigate if the Fitness to Practice of the registered professional has been impaired and if appropriate sanctions should be applied.

Trade Unions/Professional Associations

Where staff face allegations of Fraud Act offences Trade Unions/Professional Associations may be able to support staff with access to legal representation if the staff member is invited to attend a Police Officer and Criminal Evidence Act 1984 interview under caution.

Local Counter Fraud Specialist

The UHB employs a Local Counter Fraud Service team which is led by a Head of Local Counter Fraud Service who has managerial responsibility for the team. The Head of Local Counter Fraud will take forward all counter fraud work locally in accordance with Welsh Government Directions to NHS Bodies on Counter Fraud Arrangements and the NHS CFA Quality Assurance Programme which includes the annual submission of the Counter Fraud Functional Standard Return (CFFSR).

NHS CFA validate the CFFSR to provide assurance to the Cabinet Office of the NHS including the UHB's compliance with the Government Functional Standard 013 for Counter Fraud (GovS013). The LCFS will work with key colleagues and stakeholders to promote and advance counter fraud, bribery, and corruption work, to develop an anti-fraud, bribery, and corruption culture, to effectively identify and respond to system weaknesses and to investigate allegations of fraud, bribery, and corruption.

The Local Counter Fraud Service team represent the UHB when dealing with fraud matters. This includes undertaking work across all areas of activity and in accordance with all components of Functional Standard GovS013.

The Local Counter Fraud Service team will adhere to the Counter Fraud Professional Accreditation Board (CFPAB) Principles of Professional Conduct as set out in the "NHS CFA Counter Fraud Manual."

The Local Counter Fraud Service team and CFS Wales have responsibility for undertaking fraud investigations within NHS Wales and ensuring that all appropriate sanctions are considered and imposed which may include criminal prosecution, civil proceedings or disciplinary sanction, or a combination of all three sanctions. All cases considered for prosecution will be discussed by the Head of Local Counter Fraud Service and the Head of CFS Wales. The approval of the Executive Director of Finance will be required before the case is referred, via CFS Wales to the Specialised Fraud Division of the Crown Prosecution Service.

The Local Counter Fraud Service team will undertake a programme of proactive counter fraud work as agreed in the Annual Counter Fraud Workplan, which is approved by the Audit Committee to prevent and detect cases of fraud, bribery, and corruption. Where system weaknesses are identified, appropriate fraud proofing recommendations will be made to ensure that the UHB is protected in the future and that good governance procedures are in place.

Any fraud referrals which are received which involves more than one NHS health body, cross border enquiries or offences involving Bribery and Corruption, will be referred to the Head of CFS Wales for investigation. The Local Counter Fraud Service team may be asked for practicality to assist in such cases.

The Head of Local Counter Fraud Service will be entitled to attend Audit Committee meetings to provide formal written progress reports on all counter fraud activity undertaken within the UHB and to report the number of cases where fraud, bribery or corruption alleged, and investigations are being undertaken.

The Local Counter Fraud Service team will report to the Audit Committee and the NHS CFA, details of system weaknesses which are identified during criminal fraud investigations or other proactive counter fraud work undertaken which have fraud-related implications.

To embed zero-tolerance to NHS fraud and ensure a strong counter fraud culture, the Audit Committee and Executive Team agreed that Fraud Awareness is to be made mandatory for all UHB staff. An e-Learning module relating to the awareness, of fraud, bribery, and corruption, is available to staff for completion. The LCFS should be a senior employee who is authorised to treat enquiries confidentially and anonymously, if so, requested by the employee contacting them. The LCFS will be professionally trained and will have achieved accreditation.

Counter Fraud Service Wales

The NHS CFS Wales team provide specialist criminal investigation and financial investigation services to all Health Bodies in Wales. The CFS Wales team consists of experienced investigators who deal with large scale, cross-border, complex frauds, and all issues involving bribery or corruption against NHS Wales.

The team work closely with other investigative bodies including the Police and provide support and guidance to the network of LCFS who are based at Health Bodies in Wales. The Head of CFS Wales can be contacted by calling telephone number 01495 334101 direct or by e-mail to graham.dainty@nhscfswales.gov.uk

The Head of CFS Wales is responsible for liaison between the NHS CFA and all the LCFS employed or contracted by Health Boards and Trusts within Wales and is responsible for managing the NHS CFS Wales team.

Additionally, CFS Wales are responsible for reviewing all local investigation files, evidence and witness statements submitted for the consideration of the Specialised Fraud Division of the Crown Prosecution Service.

The Head of CFS Wales is responsible for ensuring that local investigations are conducted in accordance with legislative guidelines and within the components of the Government Functional Standard GovS013 and guidance provided in the NHS Counter Fraud Manual, to the highest standards in respect of all allegations of fraud, bribery, or corruption against NHS Wales.

The Head of CFS Wales provides support and advice to all key stakeholders in Wales including Welsh Government, Health Boards and Trusts, Executive Directors of Finance, Audit Committees, and the individual Local Counter Fraud Service teams operating in NHS Wales. Counter Fraud Service (CFS Wales) is hosted by NHS Wales Shared Service Partnership (NWSSP) and operationally managed by NHS Counter Fraud Authority ('NHSCFA').

NHS Counter Fraud Authority

The NHS Counter Fraud Authority (NHS CFA) is a health authority charged with identifying, investigating and preventing fraud and other economic crime within the NHS and the wider health group. As a health authority focused entirely on counter fraud work, the NHS CFA is independent from other NHS bodies and directly accountable to the Department of Health and Social Care (DHSC).

To ensure compliance with the Government Functional Standard 013, NHS CFA set out the NHS requirements. The UHB will ensure compliance with these requirements and will submit an annual Counter Fraud Functional Standard Return, detailing compliance with each component.

The UHB will also work in line with the NHS CFA Fighting Fraud Strategy, the framework of which will shape the contents of the UHB's Annual Counter Fraud Workplan.

Fraud Champion

The Fraud Champion's role forms part of the UHB's counter fraud provision and is to strengthen the fight against fraud and raise awareness within the organisation. Having a Fraud Champion is an essential part of the Government Functional Standard GovS013.

The Fraud Champion is committed in joining the fight and promoting a zero-tolerance approach to NHS fraud and when aimed against the UHB. The role of the Fraud Champion is to:

- Promote and raise awareness of fraud, bribery, and corruption within the organisation.
- Understand the threat posed by fraud, bribery, and corruption by monitoring the intelligence provided as part of NHS CFA's strategic intelligence assessment.
- Understand the level and quality of counter fraud provision received by the organisation by using the benchmarking information provided by NHS CFA, and raise any successes, concerns, or opportunities for improvement with the Executive Director of Finance and/or Audit Committee Chair.
- Support counter fraud colleagues in ensuring that all information relating to fraud is recorded and reported (if this is not undertaken, then it could impact on the NHS organisation as well as the healthcare sector involved, as potential fraud alerts may not be shared).
- Contribute to the sharing of information and best practice on counter fraud via NHS CFA's extranet when this becomes available.

- Raise awareness of fraud at a strategic level and support the work that Local Counter Fraud Specialists already undertake.
- Facilitate and support fraud awareness and fraud prevention work within the organisation and ensure that everyone knows how to recognise and report fraud.
- Ensure that fraud risks are recorded and managed in line with the organisation's [156 - Risk Management Policy.\(opens in a new tab\)](#).
- Escalate any fraud concerns to the Executive Director of Finance and/or Audit Committee Chair.

UHB Management

Managers are responsible for ensuring that policies, procedures, and processes within their local area are adhered to and kept under review. They have a responsibility to ensure that staff are aware of fraud, bribery and corruption and understand the importance of protecting the UHB from it. They are also responsible for the enforcement of disciplinary action against staff who do not comply with policies and procedures.

Managers at all levels have a responsibility to ensure that an adequate system of internal control exists within their areas of responsibility and that controls operate effectively. Managers are therefore the first line of defence against 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 to the LCFS immediately. It is appreciated that some employees will initially raise concerns with their manager. In such cases, managers must not attempt to investigate the allegation themselves; they have a clear responsibility to refer concerns to the LCFS instead.

Managers have a responsibility to ensure that the LCFS or other persons authorised to carry out investigations have access to premises, records, data, and staff who may have relevant information as soon as practical, or within 7 working days of the request for information or access, or an application under the Data Protection Act 2018 and UK General Data Protection Regulation Act 2018.

Managers must understand, when drafting new procedures, processes, or controls for their area of work, any responsibility which may change or have effect on financial resources. It is recommended that managers seek appropriate advice from the Local Counter Fraud Service team, with a view to fraud proofing new procedures, processes, and controls to ensure these are robust and provide the best defence to any improper use or loss of public funds.

Managers at all levels have a responsibility to ensure that an adequate system of internal control exists within their areas of responsibility and that controls operate effectively. The responsibility for the prevention and detection of fraud, bribery, and corruption therefore primarily rests with managers, but requires the co-operation of all employees.

All Staff Responsibility

This section is intended to cover all employees and workers which may include Consultants, vendors, contractors, and those with a business relationship with the UHB.

All employees and workers are required to comply with the UHB's policies and procedures. Breach of the UHB's policies and procedures may render staff liable to disciplinary action and when economic crime is suspected will lead to a referral to the Local Counter Fraud Service team for investigation. This may lead to a criminal prosecution, dismissal and financial recovery of NHS losses which may include loss of NHS Pension rights.

All employees and workers have a duty to protect the assets of the UHB. Assets include buildings, equipment, vehicles, monies, information, and goodwill.

All employees and workers have a duty to ensure that public funds are safeguarded, whether they are involved with cash or payment systems, receipts or dealing with contractors or suppliers.

All employees and workers should apply best practice to prevent fraud, bribery, or corruption against the UHB and wider NHS. The Local Counter Fraud, Bribery and Corruption policy should be used by staff as a guide to apply best practice.

All employees and workers of the UHB have a right and a duty to bring to their manager's attention, any matter which they consider to be damaging to the interests of patients, members of the public or other staff. However, where these concerns relate to potential fraud, bribery or corruption, the report should be made to the Local Counter Fraud Specialist or the NHS CFA via the details noted in [Appendix D](#).

It is not usually possible for informants to be made aware of the outcome of any investigation unless the matter is progressed criminally through the criminal justice system, in which case the proceedings will be in the public domain.

These arrangements do not replace UHB's procedures for handling complaints, grievances, incident reporting or matters reported through the [All Wales NHS staff to Raise Concerns Procedure](#) (opens in a new tab) (Public Interest Disclosure Act 1998).

Reporting Concerns

All employees / workers have a responsibility to report concerns of Fraud, Bribery and Corruption. It is imperative therefore that all employees and workers feel confident to report any concerns without a risk to themselves. To support this policy, the UHB has adopted the [AW Raising Concerns \(Whistleblowing\) Policy](#) (opens in a new tab).

Details of how to report your concerns can be found in [Appendix D](#) or via the UHB Counter Fraud Intranet pages ([click here for further information](#)).

The UHB Counter Fraud Team may receive reports from a number of sources which may include but is not limited to:

- Direct reports from staff/workers, patients, or members of the public or stakeholders
- Direct anonymous reports via telephone, email, or letter
- Reports via the NHS CFA reporting line or online reporting tool
- Reports made directly to the NHS Counter Fraud Service Wales
- Self-generated during preventative work

All reports will be taken seriously and dealt with appropriately. The Local Counter Fraud Team will triage each report, and a decision will be made by the Head of Local Counter Fraud Service for the UHB on how the investigation will proceed.

There will be no recriminations against staff that report reasonably held suspicions. Victimising or deterring staff from reporting concerns is a serious disciplinary matter.

Training

The LCFS will promote fraud, corruption, and bribery awareness through the delivery of face-to-face presentations, the provision of mandatory eLearning modules and/or the distribution of newsletters and other materials. Should staff require any other assistance, or advice, they should contact the LCFS.

Implementation

Implementation is in accordance with the Counter Fraud work plan monitored by the Audit, Risk and Assurance Committee and audited by WAO and NHSCFA.

Appendix A – Statutory authority and associated legislation

FRAUD

The NHS CFA definition of NHS fraud is used for the purposes of this Policy:

'On a basic level, fraud is deception carried out for personal gain, usually for money. Fraud can also involve the abuse of a position of trust. By 'NHS fraud' we mean any fraud where the NHS is the victim.'

Fraud Act 2006

The act came into force on 15 January 2007 and focusses on the dishonest behaviour of the suspect and their intent to make a financial gain or cause a loss. The introduction of the offences under the Fraud Act 2006 made it no longer necessary to prove that a person had been deceived. The Fraud Act 2006 identifies the following main offences:

- Section 2: Fraud by false representation (active fraud; lying about something using any means e.g., by words or actions taken)
- Section 3: Fraud by failing to disclose information (passive fraud; not saying something when you have a legal duty to do so)
- Section 4: Fraud by abuse of position (abusing a position where there is an expectation to safeguard the financial interests of another person or organisation)

Additional offences under the Fraud Act 2006 can be found at

<http://www.legislation.gov.uk/ukpga/2006/35/contents>

It should be noted that all offences under the Fraud Act 2006 occur where the act or omission is committed dishonestly and with intent to cause a gain or loss. The dishonest behaviour to cause the gain or loss does not have to succeed, the mere exposure to the risk of loss is sufficient, as long as the intent is present.

Economic Crime and Corporate Transparency Act 2023 - Failure to Prevent Fraud

This offence will hold organisations to account for fraud committed by their employees, agents, subsidiaries or other "associated persons" who provide services for or on behalf of the organisation, where the fraud was committed with the intention of benefiting the organisation or their clients. It does not need to be demonstrated that the organisation's senior managers or directors ordered or knew about the fraud. The offence will not extend to individual liability for persons within the organisations who may have failed to prevent the fraudulent behaviour. However, this does not preclude the employee or agent who committed the base fraud, or anyone who encouraged or assisted them, being prosecuted for the base fraud in addition to the corporate being prosecuted for failing to prevent it.

The offence is set out in sections 199-206 and Schedule 13 of the Economic Crime and Corporate Transparency Act 2023. HDdUHB does meet the scope for an organisation as defined within the Act and if found guilty, the organisation can receive an unlimited fine.

Where fraud is committed within the organisation, HDdUHB will have a reasonable defence of reasonable fraud prevention procedures. If a case comes to court, the onus will be on the organisation to prove that it had reasonable procedures in place to prevent fraud at the time that the fraud was committed. In accordance with established case law, the standard of proof in this case is the balance of probabilities. The fraud prevention framework put in place by relevant organisations should be informed by the following six principles:

- Top level commitment
- Risk assessment
- Proportionate risk-based prevention procedures
- Due diligence
- Communication (including training)
- Monitoring and review.

Bribery and Corruption

This can be broadly defined as the offering or acceptance of inducements, gifts, favours, payment, or benefit-in-kind which may influence the action of any person. Corruption does not always result in a loss. The corrupt person does not need to benefit directly from their deeds; however, they may be unreasonably using their position to give some advantage to another.

It is a common law offence of corruption to bribe the holder of a public office, and it is similarly an offence for the office holder to accept a bribe.

In July 2011, the Bribery Act 2010 came into force reforming the criminal law of bribery, enabling simpler prosecution of offences.

The relevant sections of the Bribery Act are: -

- Section 1 – Offences of bribing another person.
- Section 2 – Offences related to being bribed.
- Section 6 – Bribing a foreign public official; and
- Section 7 – Failure of commercial organisations to prevent bribery.

Very simply, bribery is defined as accepting an incentive to do something which they would not normally do. For example.

- If a person were responsible for recruiting an individual and they were offered and accepted tickets to an event by one of the candidates to give them preferential treatment; or
- If a person was responsible for purchasing goods or services and they were offered and accepted a meal by a supplier to accept a contract.

In these examples both the person offering a bribe and the person accepting it would be guilty of committing an offence under the Bribery Act 2010.

The Bribery Act 2010 brought in a new corporate offence under Section 7 which states that an organisation is guilty of an offence if a person associated with the organisation bribes another

person or receives a bribe to obtain an advantage. It is a defence for the organisation to prove that it had in place adequate policies and procedures designed to prevent persons from undertaking such conduct.

The UHB has put in place measures to discharge its Section 7 liability. The main UHB policy in relation to this is the [248 - Standards of Behaviour Policy](#) which sets out the UHB's policy in relation to declaration of interests and receipt of gifts, hospitality, honoraria and/or sponsorship.

Theft Act 1968

The legal definition of theft is: "A person is guilty of theft if he dishonestly appropriates property belonging to another person with the intention of permanently depriving the other of it."

Any suspicions of theft should be recorded on Datix for review by the UHB Security and Case Manager.

The Criminal Procedure Investigation Act (CPIA) 1996

This Act of Parliament lays down the procedures which must be followed by the UHB Disclosure Officer, during a criminal investigation to ensure that investigations are conducted properly and ensuring that the correct level of disclosure, to ensure that verdicts which are reached in court are safe and robust.

The Police and Criminal Evidence Act – 1984, Codes of Practice

This Act lays down the statutory codes of practice governing key areas of investigatory procedure and to which criminal investigators lawfully must adhere to, in the UK.

Welsh Government Directions to NHS Bodies on Counter Fraud Measures

The Directions provide the requirements which are to be put in place by Health Boards in Wales, to ensure that successful Counter Fraud Measures are introduced and maintained.

Government Functional Standard GovS013

The GovSO13 was published by the Cabinet Office in June 2020 and exists to create a coherent, effective, and mutually understood way of doing business within government organisations and across organisational boundaries, and to provide a stable basis for assurance, risk management, and capability improvement. Compliance against these standards is overseen by the Counter Fraud Authority and details of these requirements can be found via the following link, <https://cfa.nhs.uk/government-functional-standard> and a summary of each of the twelve components can be found below:

The purpose of the Functional Standard is to set the expectations for the management of fraud, bribery and corruption risk in government organisations and means that the whole counter fraud community in the public sector is working to a common counter fraud standard. NHS funded services will be required to provide NHSCFA with details of their performance against the Functional Standard annually.

The Functional Standard provides guidance to organisations on the arrangements for undertaking assurance and sets out a number of specific component requirements namely:

Component 1: Accountable individual

Have an accountable individual at board level who is responsible for counter fraud, bribery, and corruption.

Component 2: Counter fraud bribery and corruption strategy

Have a counter fraud, bribery, and corruption strategy.

Component 3: Fraud bribery and corruption risk assessment

Have a fraud, bribery, and corruption risk assessment process.

Component 4: Policy and response plan

Have a policy and response plan for dealing with potential instances of fraud, bribery, and corruption.

Component 5: Annual action plan

Have an annual action plan that summarises key actions to improve capability, activity, and resilience in that year.

Component 6: Outcome-based metrics

Have outcome-based metrics summarising what outcomes they are seeking to achieve that year.

Component 7: Reporting routes for staff, contractors, and members of the public

Have well established and documented reporting routes for staff, contractors, and members of the public to report suspicions of fraud, bribery and corruption and a mechanism for recording these referrals and allegations.

Component 8: Report identified loss.

Report identified loss from fraud, bribery, corruption and error and associated recoveries to the NHSCFA in line with the agreed government definitions.

Component 9: Access to trained investigators

Have agreed access to trained investigators that meet the agreed public sector skill standard.

Component 10: Undertake detection activity.

Undertake activity to try and detect fraud in high-risk areas where little or nothing is known of fraud, bribery, and corruption levels, including loss measurement activity where suitable.

Component 11: Access to and completion of training

Ensure all staff have access to and undertake fraud awareness, bribery, and corruption training as appropriate to their role.

Component 12: Policies and registers for gifts and hospitality and Conflicts of Interest

Have policies and registers for gifts and hospitality and conflicts of interest.

Appendix B – Examples of NHS Fraud, Bribery & Corruption Offences

Fraud

Examples of these crimes may include but are not limited to:

- Submitting false or forged timesheets
- Working elsewhere in NHS contracted hours.
- Falsifying travel and/or expense claims
- People working for other agencies whilst off sick from the NHS.
- Patient falsification of prescription claims forms.
- Outside agencies duplicating invoices for payment by the NHS
- Contractors claiming payment for merchandise they have not delivered.
- The unauthorised selling of NHS property or assets

Warning Signs to consider which may indicate Fraud can include the following:

- Altered documents (correcting fluid, different pen, or handwriting)
- Duplicate claim forms
- Claim form details not readily checkable.
- Changes in normal patterns, of e.g. cash takings or travel claim details.
- Erratic text or difficult to read narrative or with details missing.
- Delay in completion or submission of claim forms
- Lack of vouchers or receipts in support of expense claims, etc.
- Staff seemingly living beyond their means.
- Staff under constant financial or other stress
- Staff choosing not to take annual leave (and so preventing others becoming involved in their work), especially if solely responsible for a 'risk' area.
- Complaints from public or staff
- Always working late
- Refusal of promotion
- Insistence on dealing with a particular individual.

Bribery and Corruption

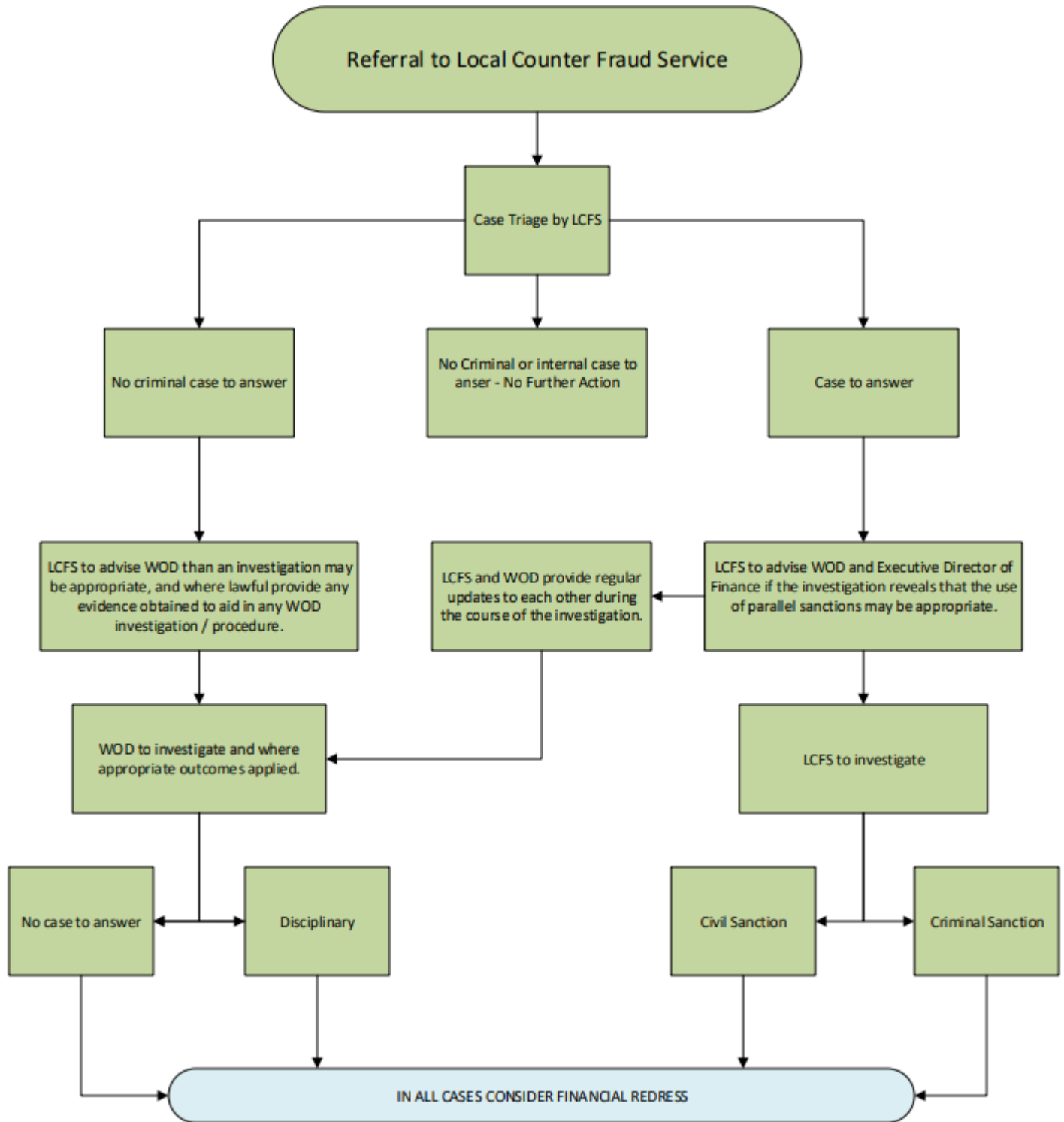
Warning signs which may suggest Bribery or Corruption can include the following:

- Abnormal cash payments
- Pressure exerted for payments to be made urgently or ahead of schedule.
- Payments being made through a third-party country - for example, goods or services supplied to country 'A' but payment is being made, usually to a shell company in country 'B.'
- An abnormally high commission percentage being paid to a particular agency. This may be split into two accounts for the same agent, often in different jurisdictions.
- Private meetings with public contractors or companies hoping to tender for contracts.
- Lavish gifts being received.
- An individual who never takes time off even if ill, or holidays, or insists on dealing with specific contractors himself or herself.

- Making unexpected or illogical decisions accepting projects or contracts
- The unusually smooth process of cases where an individual does not have the expected level of knowledge or expertise.
- Abuse of the decision process or delegated powers in specific cases
- Agreeing contracts not favourable to the organisation either because of the terms or the time period
- Unexplained preference for certain contractors during tendering period
- Avoidance of independent checks on the tendering or contracting processes
- Raising barriers around specific roles or departments which are key in the tendering or contracting processes.
- Bypassing normal tendering or contracting procedures
- Invoices being agreed more than the contract without reasonable cause.
- Missing documents or records regarding meetings or decisions
- Company procedures or guidelines not being followed.
- The payment of or making funds available for high value expenses or school fees (or similar) on behalf of others.

(This is not an exhaustive list. For other types of fraud, corruption or bribery offences please contact the LCFS for advice).

Appendix C – Parallel Investigations Flowchart



Appendix D – Acting on Suspicions – Do’s and Don’ts

Do you have concerns about fraud taking place in the NHS? If so,	
<p>DO Note your concerns as soon as possible. Record details such as the nature of your concerns, names, dates, times, locations, details of conversations and potential witnesses. Time, date and sign your notes. Report your suspicions. Please report your concerns. You can do this by reporting direct to your LCFS, online via the Counter Fraud Authority or by calling Crimestoppers. Reports can be made anonymously or in person. Provide as much information as possible. All reports are assessed for content and accuracy. It is important that you provide as much information as possible (date, time, location, witnesses, evidence etc.) as this will give the LCFS the best start in looking into the matter and may provide valuable intelligence to help improve overall understanding of NHS fraud. Know that confidentiality will be respected. There are several ways to report suspected fraud, bribery or corruption against the NHS including reporting anonymously, if you chose to report in this way. You may also report as a Whistle-blower.</p>	<p>DO NOT Confront The Suspect or Convey Concerns to Anyone Other Than Those Authorised. Never attempt to question a suspect yourself; this could alert a fraudster or accuse an innocent person. Do not discuss your suspicions or concerns with other people. If you are unsure about what to do if you suspect a fraud, discuss your suspicions with your LCFS. Try to Investigate the matter yourself. Never attempt to gather evidence yourself unless it is about to be destroyed; gathering evidence must consider legal procedures for it to be useful. Your LCFS can investigate in accordance with legislation. 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.</p>
<p>If you suspect that fraud against the NHS has taken place, you must report it immediately. You can do so in a number of ways: Contact your Local Counter Fraud Specialist (LCFS) / Counter Fraud Team, namely: Benjamin Rees – Head of Local Counter Fraud Services. Email: Benjamin.Rees2@wales.nhs.uk Telephone: 01267 283025 Or Terry Slater – Local Counter Fraud Specialist. Email: Terry.Slater@wales.nhs.uk</p>	

Telephone: 01267283025 / 07980919347

Further team details / updated information can be found on the UHB Counter Fraud intranet site, which can be found by clicking [here](#). You can also email the UHB counter fraud team on HDUHB.CounterFraudTeam.HDD@wales.nhs.uk

Alternatively, you can report fraud against the NHS in England and Wales by using our online reporting form, which can be accessed via [Report NHS Fraud | Home | NHSCFA](#) or calling our freephone line 0800 028 4060 (available 24/7).

Both of these options allow you to make an anonymous report should you wish.

Equality Impact Assessment (EqIA) Screening Template

When to complete an EqIA Screening

An EqIA Screening Template must be completed when reviewing, changing and developing procedures/ proposals/ projects/ policies. This is a first step and is used to consider whether there are any negative impacts that may arise.

Purpose of an EqIA Screening Template

The purpose of this short exercise is to ensure that you have shown appropriate due regard when considering the impact for people with protected characteristics in your decision making. The screening process is designed to help you consider the circumstances and to inform evidence-based decisions.

If the proposal is of a significant nature and it is apparent from the outset that a full EqIA will be required, then it is not necessary to complete this Screening Template, you can proceed to complete the full [EqIA](#).

If no negative impacts are identified following completion of the EqIA screening then it is not necessary to undertake a full EqIA however, the decision and justification must be clearly recorded in this document.

On completion of the Screening Template:

- Ensure that all the white boxes within the screening are completed.
- Ensure that the Procedure/ Project/ Proposal/ Policy owner has signed and dated the Screening Template.
- Send a copy of the completed template along with the related policy or project proposal to Inclusion.hdd@wales.nhs.uk for the Diversity & Inclusion Team to review.
- Each Screening Template will be reviewed by the Diversity & Inclusion Team and feedback will be provided to the Procedure/ Project/ Proposal/ Policy owner. This may include recommendations for further action to inform robust decision-making.

Support

For further support please visit the [EqIA Sharepoint](#) or contact:

Email: Inclusion.hdd@wales.nhs.uk

Tel: 01554 899055

Director and Directorate	Huw Thomas – Director of Finance
Service Area	Finance

Title of Procedure, Project, Proposal, Policy being screened:	815 - Counter Fraud, Bribery and Corruption Policy
--	--

Description of the Procedure/ Project/ Proposal/ Policy being screened (including key aims and objectives)

This policy document aims to:

- Improve the knowledge and understanding of everyone in the UHB, irrespective of their position and role, about the risk of fraud, bribery, and corruption within the UHB and its unacceptability.
- Assist in promoting an open, honest, and well-intended atmosphere within the UHB with a culture and environment where staff feel able to raise concerns sensibly and responsibly.
- Set out the duty of each member of staff in terms of their responsibility to prevent fraud, bribery, and corruption and how to report it, to allow rigorous investigation of any suspicions of economic crime against the UHB.
- Ensure the appropriate sanctions are considered following an investigation, which may include any or all of the following: criminal prosecution, civil proceedings or internal and/or external disciplinary action.

Evidence considered (including staff and population data, relevant research, expert and community knowledge etc.)

The Health Board has a range of staff across all protected groups at all levels across the three counties.

The protected characteristics of individuals do not factor into any of the procedures associated with the policy, other than where assistance may be needed to help individuals understand the policy, processes and the consequences of their actions.

The policy was assessed as having a low relevance to the equality duties. It is a prescriptive process of how to address incidences of fraud, bribery and corruption that may arise across the Health Board. It will however be important to ensure that any staff against whom the policy is invoked clearly understand what this entails. It is the responsibility of managers who implement the policy to ensure that it is implemented fairly. Staff are required to undertake training in the policy and this could be conducted face to face or electronically and could be arranged to suit individual needs e.g. to work round caring responsibilities, shift work, literacy levels etc.

This policy has been assessed as having a neutral impact in relation to protected groups.

A search of similar policies elsewhere indicated similar result. [counter fraud bribery and corruption policy nhs equality impact assessment - Search](#)

A review of the Health Board's Counter Fraud, Bribery and Corruption Policy (815) has been undertaken and amendments have been made, these include amendments to the structure, contents and the inclusion of new legislation under the Economic Crime and Corporate Transparency Act 2023.

All staff must adhere to the guidance set out within this document, like they would with regard to any criminal legislation covering everyday life.

This policy does not apply to service users, however the issue of law would.

Assess which protected characteristics will potentially be affected by the proposal in the table below (please ✓ the relevant box to confirm positive, negative or no impact).

If at any point a negative impact has been identified (actual or potential), you do not need to proceed with the completion of this form, as a full EqlA must be undertaken: [Equality Impact Assessments \(EqlAs\) \(sharepoint.com\)](#)

Age				
Is it likely to affect older and younger people in different ways or affect one age group and not another?				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between people's age. Individuals are treated equal and fairly regardless of their protected characteristic.				
Disability				
Is it likely to affect those with a physical disability, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes?				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between people's disability. Individuals are treated equal and fairly regardless of their protected characteristic.				
Gender Reassignment				
Is it likely to affect those who either:				
<ul style="list-style-type: none"> • Have undergone, intend to undergo or are currently undergoing gender reassignment. • Do not intend to undergo medical treatment but wish to live in a different gender from their gender at birth 				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between people's gender. Individuals are treated equal and fairly regardless of their protected characteristic.				
Marriage / Civil Partnership				

Under the Equality Act, the characteristic of Marriage and Civil Partnerships is only protected in the workplace/ employment. Is it likely to affect those who are married or in a Civil Partnership? This means someone who is legally married or in a civil partnership.				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between people's marital status. Individuals are treated equal and fairly regardless of their protected characteristic.				
Pregnancy and Maternity Is it likely to affect those who are pregnant or have recently had a baby? Maternity covers the period of 26 weeks after having a baby, whether or not they are on Maternity Leave.				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between pregnancy and maternity status. Individuals are treated equal and fairly regardless of their protected characteristic.				
Race / Ethnicity Is it likely to affect people of a different race, nationality, colour, culture or ethnic origin including non-English / Welsh speakers, Gypsies/Travellers, asylum seekers and migrant workers?				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between race, ethnicity or nationality. However, the Health Board has an approved translation service that can be utilised as soon as deemed necessary via the Business, Partnership and Inclusion Team SharePoint page or via policies. Individuals are treated equal and fairly regardless of their protected characteristic.				
Religion or Belief Is it likely to affect people who have a religion or belief? The term 'religion' includes a religious or philosophical belief.				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between individual's religions or beliefs. Individuals are treated equal and fairly regardless of their protected characteristic.				
Sex Is it likely to affect people who are mostly male or female. Where it applies to both equally does it affect one differently to the other?				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between a person's sex. Individuals are treated equal and fairly regardless of their protected characteristic.				
Sexual Orientation Whether a person's sexual attraction is towards their own sex, the opposite sex or either.				
Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact <input checked="" type="checkbox"/>
Justification of impact identified: The Policy does not differentiate between a person's sexual orientation. Individuals are treated equal and fairly regardless of their protected characteristic.				
Armed Forces Community				

Consider whether this impacts on members of the Armed Forces and their families, whose health needs may be impacted long after they have left the Armed Forces and returned to civilian life. Also consider their unique experiences when accessing and using day-to-day public and private services compared to the general population. It could be through 'unfamiliarity with civilian life, or frequent moves around the country and the subsequent difficulties in maintaining support networks, for example, members of the Armed Forces can find accessing such goods and services challenging.'

For a comprehensive guide to the Armed Forces Covenant Duty and supporting resource please see:

[Armed-Forces-Covenant-duty-statutory-guidance](#)

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
-----------------	--------------------------	-----------------	--------------------------	-----------	-------------------------------------

Justification of impact identified:
The Policy does not differentiate between a person's previous occupation or association with the armed forces community.

Socio Economic Duty

Consider those on low income, economically inactive, unemployed or unable to work due to ill-health. Also consider people living in areas known to exhibit poor economic and/or health indicators and individuals who are unable to access services and facilities. Food / fuel poverty and personal or household debt should also be considered.

For a comprehensive guide to the Socio-Economic Duty in Wales and supporting resources please see:

[more-equal-wales-socio-economic-duty](#)

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
-----------------	--------------------------	-----------------	--------------------------	-----------	-------------------------------------

Justification of impact identified:
The Policy does not differentiate between different level of individual's socio-economic deprivation.

Welsh Language

Is it likely to impact on opportunities for people to use the Welsh language? The Welsh language should be treated no less favourably than the English language.

Positive Impact	<input type="checkbox"/>	Negative Impact	<input type="checkbox"/>	No Impact	<input checked="" type="checkbox"/>
-----------------	--------------------------	-----------------	--------------------------	-----------	-------------------------------------

Justification of impact identified:
If requested, this Policy can be translated and provided in Welsh If face-to-face meetings are requested through the medium of Welsh, and staff are not Welsh speakers the Health Board's approved translation service would be utilised. The Health Board has an approved translation service that can be utilised as soon as deemed necessary via the Business, Partnership and Inclusion Team SharePoint page or via policies.

If a negative impact has been identified, you are not required to complete this form as a full EqIA must be undertaken. A full EqIA template and guidance can be found on the following link: [Equality Impact Assessments \(EqIAs\) \(sharepoint.com\)](#)

Screening Completed by:	Name	Benjamin Rees
	Title	Head of Local Counter Fraud Services
	Contact details	Benjamin.Rees2@wales.nhs.uk
	Date	08/07/2025
Screening Authorised by:	Name	Rhian Davies

(Directorate level owner of the procedures/ proposals/ projects/ policy)	Title	Assistant Director of Finance
	Contact details	Rhian.Davies10@wales.nhs.uk
	Date	08/07/2025
Guidance has been provided by Diversity & Inclusion Team:	Name	Alan Winter
	Title	Senior Diversity & Inclusion Officer
	Contact details	Alan.winter@wales.nhs.uk
	Date	9/7/2025
Diversity and Inclusion Team additional Comments:		

Please note: The D&I team will save a copy of the completed form for reference. If any changes are made after the date of review, it is the directorate's responsibility to update the EqIA and inform the D&I team.