



# Anti-Fraud, Bribery and Corruption Policy and Procedure

## Version Control

Reference Number	Version	Status	Sponsor(s)/Author(s)
AFBC 1	1	Final	P Godbole/J McMullan
<b>Document objectives:</b> Prevent fraud, bribery and corruption within the organisation			
<b>Intended Recipients:</b> All staff, contractors, consultants and third parties acting on behalf of Pioneer Healthcare Limited			
<b>Group/Persons Consulted:</b>			
<b>Training/Resource Implications:</b> Awareness of policy			
<b>Approving Body and Date First Approved</b>		Executive Board – May 2026	
<b>Date of First Issue</b>		May 2026	
<b>Next Review Date</b>		April 2029	

The table below logs the history of the steps in development of the document.

<b>Version</b>	<b>Date</b>	<b>Author</b>	<b>Comment</b>
1.0	May 2026	P Godbole/J McMullan	New Policy

## 1. Introduction

Pioneer Healthcare Limited is committed to conducting its business with honesty, integrity, transparency and accountability. The organisation adopts a zero-tolerance approach to fraud, bribery, corruption, theft, financial irregularity and any form of dishonest conduct.

Pioneer Healthcare Limited recognises that fraud and corruption undermine public confidence, damage organisational reputation, divert valuable healthcare resources and may place patients, staff and services at risk.

This policy sets out the organisation's approach to the prevention, detection, reporting, investigation and management of fraud, bribery, corruption and related misconduct. It reflects the organisation's commitment to maintaining the highest standards of corporate governance, ethical behaviour and legal compliance.

The policy supports compliance with:

- Bribery Act 2010
- Fraud Act 2006
- Theft Act 1968
- Criminal Finances Act 2017
- Companies Act 2006
- Proceeds of Crime Act 2002
- Health and Social Care Act 2008
- NHS Counter Fraud Authority guidance
- Care Quality Commission (CQC) governance expectations

Pioneer Healthcare Limited expects all staff and associated persons to act professionally and lawfully at all times and to report any concerns regarding suspected fraud, bribery, corruption or financial impropriety.

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## 2. Purpose

The purpose of this policy is to:

- Promote a culture of honesty, openness and integrity
- Prevent fraud, bribery and corruption within the organisation
- Protect organisational assets, finances, information and reputation
- Define responsibilities for preventing and reporting fraud and corruption
- Establish clear reporting and investigation arrangements
- Ensure compliance with relevant legislation and governance standards
- Support a culture of speaking up and raising concerns safely
- Minimise financial and reputational risk
- Ensure that allegations are investigated proportionately and fairly

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## 3. Scope

This policy applies to:

- All employees

- Directors
- Agency staff
- Consultants
- Contractors
- Volunteers
- Students
- Temporary workers
- Third-party suppliers
- Partner organisations
- Anyone acting on behalf of Pioneer Healthcare Limited

The policy applies to all organisational activities including:

- Clinical services
- Procurement
- Recruitment
- Financial management
- Contracting
- Commissioning arrangements
- Expenses claims
- Payroll
- Information management
- Procurement and purchasing
- Gifts and hospitality
- Sponsorship arrangements

The policy applies regardless of:

- Seniority
- Employment status
- Location
- Whether conduct occurs during or outside normal working hours where it relates to organisational business

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## 4. Definitions

### 4.1 Fraud

Fraud is defined by the Fraud Act 2006 as:

“Dishonestly making a false representation, failing to disclose information, or abusing a position for personal gain or to cause loss to another.”

Examples include:

- False expense claims
- Payroll fraud
- Falsifying records
- False invoicing
- Procurement fraud
- Misuse of organisational funds
- Timesheet fraud
- False qualifications or references
- Misuse of NHS resources

- Fraudulent sickness absence

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## 4.2 Bribery

Bribery is offering, promising, giving, requesting or accepting an inducement or reward to influence improper conduct.

Examples include:

- Offering gifts in exchange for contracts
- Accepting payments to influence decisions
- Preferential treatment for financial gain
- Kickbacks from suppliers

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## 4.3 Corruption

Corruption is the abuse of entrusted power or position for private gain.

Examples include:

- Conflict of interest
- Unfair procurement practices
- Undisclosed financial relationships
- Manipulation of recruitment processes

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## 4.4 Theft

Dishonestly appropriating property belonging to another person or organisation.

Examples include:

- Theft of medicines
- Theft of equipment
- Theft of cash
- Theft of confidential information

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## 5. Policy Statement

Pioneer Healthcare Limited:

- Will not tolerate fraud, bribery or corruption in any form
- Will investigate all concerns proportionately and appropriately
- Will support staff who raise genuine concerns
- Will take disciplinary, contractual or legal action where wrongdoing is identified
- Will report criminal matters to relevant authorities where appropriate
- Will maintain systems designed to reduce fraud risk
- Will promote a culture of openness, accountability and ethical conduct

All staff have a duty to:

- Act honestly and with integrity
- Protect organisational resources
- Report concerns promptly
- Cooperate with investigations
- Avoid conflicts of interest
- Comply with organisational policies and controls

Failure to comply with this policy may result in:

- Disciplinary action
- Dismissal
- Referral to professional regulators
- Civil recovery action
- Criminal prosecution
- Termination of contracts

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## 6. Responsibilities

### 6.1 Executive Board

The Executive Board is responsible for:

- Ensuring effective governance arrangements
- Promoting an anti-fraud culture
- Ensuring adequate internal controls exist
- Monitoring fraud risks
- Supporting investigations where necessary

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### 6.2 Chief Executive Officer

The CEO has overall accountability for:

- Organisational compliance
- Fraud prevention arrangements
- Ensuring concerns are appropriately managed
- Ensuring appropriate resources for governance oversight

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### 6.3 Medical Director / Governance Lead

Responsible for:

- Oversight of governance arrangements
  - Supporting investigations
  - Monitoring policy compliance
  - Reporting significant concerns to the Executive Board
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## 6.4 Managers

Managers are responsible for:

- Maintaining effective internal controls
- Ensuring staff understand this policy
- Identifying risks within their areas
- Escalating concerns promptly
- Supporting investigations appropriately
- Ensuring recruitment and financial controls are followed

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## 6.5 All Staff

All staff are responsible for:

- Acting honestly and ethically
- Following policies and procedures
- Reporting suspected wrongdoing
- Declaring conflicts of interest
- Protecting organisational resources
- Cooperating with investigations

Failure to report known concerns may itself constitute misconduct.

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## 7. Fraud Prevention

Pioneer Healthcare Limited will implement reasonable and proportionate controls to reduce fraud risk including:

- Segregation of duties
- Financial controls
- Authorisation procedures
- Recruitment checks
- Right to work verification
- Qualification checks
- DBS checks where applicable
- Procurement controls
- Audit processes
- Expense verification
- Secure record keeping
- Information governance controls
- Training and awareness

The organisation will regularly review systems and controls to identify vulnerabilities and strengthen governance arrangements.

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## 8. Bribery Prevention

Pioneer Healthcare Limited prohibits:

- Offering bribes
- Accepting bribes
- Facilitation payments
- Improper gifts or inducements
- Undeclared conflicts of interest

Staff must not:

- Seek personal advantage through their role
- Influence decisions improperly
- Accept inappropriate hospitality
- Use organisational position for private benefit

Any gifts, hospitality or sponsorship must comply with organisational procedures and be transparent, proportionate and appropriately declared.

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## 9. Conflicts of Interest

All staff must declare actual, potential or perceived conflicts of interest.

This includes:

- Financial interests
- Secondary employment
- Relationships with suppliers
- Family interests
- Directorships
- Shareholdings
- Consultancy arrangements

Declarations should be made:

- On appointment
- Annually
- Whenever circumstances change

Undeclared conflicts may constitute misconduct.

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## 10. Reporting Concerns

Any person who suspects fraud, bribery, corruption or other financial wrongdoing must report concerns promptly.

Concerns may be reported to:

- Line manager
- Senior manager
- Governance Lead
- Medical Director
- Managing Director
- Freedom to Speak Up Guardian (if applicable)
- External authorities where appropriate

Reports may be made verbally or in writing.

Concerns should include, where possible:

- Nature of concern
- Dates/times
- Individuals involved
- Supporting evidence
- Witnesses

Anonymous concerns will be considered, although investigation may be more difficult.

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## 11. Confidentiality and Protection for Staff

Pioneer Healthcare Limited will support staff who raise genuine concerns in good faith.

The organisation will:

- Treat concerns seriously
- Maintain confidentiality where possible
- Protect staff from victimisation
- Investigate fairly and proportionately

Any retaliation against a person raising concerns may result in disciplinary action.

This policy should be read alongside the organisation's:

- Freedom to Speak Up Policy
- Whistleblowing Policy
- Grievance Policy
- Disciplinary Policy

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## 12. Investigation Process

### 12.1 Initial Assessment

All concerns will undergo an initial assessment to determine:

- Nature of allegation
- Potential risk
- Immediate actions required
- Whether suspension of activity is necessary
- Whether external reporting is required

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### 12.2 Investigation

Investigations will be:

- Fair
- Objective
- Confidential

- Proportionate
- Conducted by appropriately authorised persons

Investigations may include:

- Review of records
- Interviews
- Audit review
- Financial analysis
- Digital review
- Liaison with external agencies

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### 12.3 External Referral

Matters may be referred to:

- Police
- NHS Counter Fraud Authority
- Professional regulators
- Commissioners
- Care Quality Commission
- External auditors

where appropriate.

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### 12.4 Outcomes

Outcomes may include:

- No further action
- Recommendations for improvement
- Training
- Disciplinary action
- Contract termination
- Recovery of losses
- Referral to regulators
- Criminal proceedings

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## 13. Disciplinary Action

Fraud, bribery and corruption are considered serious misconduct and may constitute gross misconduct.

Action may include:

- Formal disciplinary action
- Dismissal
- Reporting to professional bodies
- Civil recovery proceedings
- Criminal prosecution

Contractors and third parties may have contracts terminated.

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#### 14. Training and Awareness

The organisation will ensure staff receive appropriate awareness regarding:

- Fraud risks
- Bribery legislation
- Ethical conduct
- Reporting concerns
- Governance responsibilities
- Conflicts of interest

Training may include:

- Induction
- Mandatory updates
- Governance briefings
- Targeted risk-based training

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#### 15. Monitoring and Compliance

Compliance with this policy may be monitored through:

- Internal audit
- Governance review
- Incident review
- Financial monitoring
- Procurement review
- Expense audits
- Workforce checks
- Risk assessments

Findings may be reported to:

- Executive Board
- Governance meetings
- Audit meetings
- Commissioners where appropriate

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#### 16. Equality and Diversity

Pioneer Healthcare Limited is committed to ensuring this policy is implemented fairly and consistently.

The organisation will ensure that no individual is disadvantaged on the basis of:

- Age
- Disability
- Sex
- Gender reassignment

- Marriage or civil partnership
- Pregnancy or maternity
- Race
- Religion or belief
- Sexual orientation

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## 17. Data Protection and Confidentiality

All information relating to investigations will be managed in accordance with:

- Data Protection Act 2018
- UK GDPR
- Confidentiality requirements
- Information Governance standards

Information will only be shared on a need-to-know basis.

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## 18. Associated Policies

This policy should be read alongside:

- Freedom to Speak Up Policy
- Whistleblowing Policy
- Disciplinary Policy
- Grievance Policy
- Financial Procedures
- Procurement Policy
- Information Governance Policy
- Data Protection Policy
- Gifts and Hospitality Policy
- Recruitment Policy
- Conflict of Interest Policy

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## 19. References

- Bribery Act 2010
- Fraud Act 2006
- Theft Act 1968
- Criminal Finances Act 2017
- Proceeds of Crime Act 2002
- Companies Act 2006
- Health and Social Care Act 2008
- Data Protection Act 2018
- UK GDPR
- NHS Counter Fraud Authority guidance
- Care Quality Commission Regulations
- HM Government Bribery Act Guidance
- NHS England Counter Fraud Standards

## 20. Review

This policy will be reviewed every two years or earlier if:

- Legislation changes
- National guidance changes
- Significant incidents occur
- Organisational changes require review