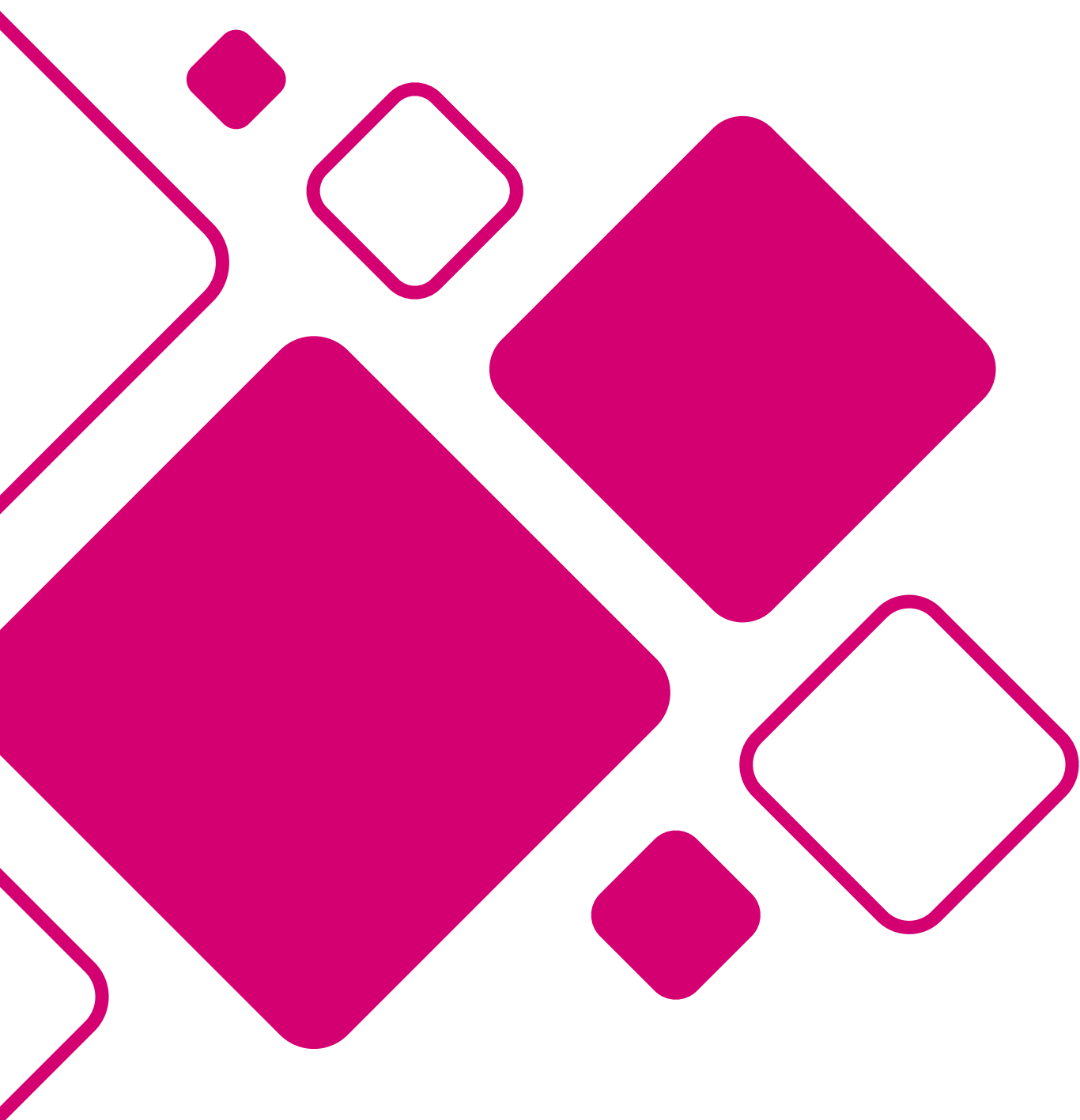


NursingDirect

POLICY NUMBER: **42**

POLICY TITLE: **ANTI-FRAUD, ANTI-THEFT & ANTI-CORRUPTION**

WHO MUST ABIDE BY THIS POLICY? **ALL TEMPORARY WORKERS**



ANTI-FRAUD, ANTI-THEFT & ANTI-CORRUPTION

INTRODUCTION

Nursing Direct as with other diverse organisations the nature of our services puts us at risk of loss due to fraud, theft and corruption both from within the Company and externally.

We are committed to making sure that the opportunity for fraud, theft and corruption is reduced to the lowest possible risk. Where allegations are made, we will deal with it in a firm and controlled manner.

An important part of this approach is introducing an Anti-Fraud, Anti-Theft and Anti-Corruption Policy which we will use to advise and guide staff on our approach to these serious issues.

We expect all staff, agency workers, associates, contractors and clients to be fair and honest and to give us any help, information and support we need to deal with fraud, theft and corruption.

The policy set out in this document covers the following areas:

- Our written rules
- How we expect our staff, agency workers, associates, contractors and clients to behave
- Preventing fraud, theft and corruption
- Detecting and investigating fraud, theft and corruption
- Training

Our Written Rules

We have a number of procedures and rules to ensure that our financial, working and organisational procedures are properly controlled. These are an important part of our internal control process and it is important that all staff know about them.

The most important of these that relate to this policy are as follows:

- Protection of Vulnerable Adults & Children
- Customer Service Policy
- Confidentiality Policy
- Whistle Blowing Policy
- Gifts, Gratuities and Requests to Staff Policy
- Right of Search Policy
- Data Protection Policy
- Commitment to Ethical Business Behaviour
- Disclosure Policy

Individual departments have also introduced their own measures, which are designed to control their activities. Examples include working manuals and detailed operating procedures.

Responsible Directors and Managers must make sure that all staff have access to these rules and regulations and that staff receive suitable training.

Staff must make sure that they read and understand the rules and regulations that apply to them, and act in line with them.

If anyone breaks these rules and regulations we may take formal action against them. Depending on the circumstances, this may include ending their employment or association with the A24 Group.

Expected Behaviour

We expect all staff, agency workers, associates, suppliers, service providers and clients to be honest and fair in their dealings with us. We expect our staff to lead by example in these matters.

Our Staff Handbook policies set out an approach to work, which is both fair and honest. Staff must act in line with these policies at all times.

Dishonest and illegal activity will not be tolerated.

Our staff have an important part to play in dealing with fraud, theft and corruption and we encourage our staff to inform us if they suspect a case of fraud, theft or corruption.

We will deal with all information received as fairly and confidentially as possible. If requested we will endeavour not to reveal the names of the people who gave us the information. Our Fraud, Theft and Corruption Response Plan attached.

(Appendix 1) and our Disclosure Policy (Appendix 3) gives more advice on this issue for staff.

Our Directors will deal firmly and quickly with anyone who is responsible for fraud, theft or corruption. The Managing Director in consultation with the Group Internal Audit Manager may refer matters to the police if any criminal activity is suspected.

We will ensure that any investigative process is not misused and, therefore, any abuse, such as raising unfounded malicious allegations, will be dealt with as a disciplinary matter.

Preventing Fraud, Theft and Corruption

We believe that if we are to beat fraud, theft and corruption we must prevent it from happening in the first place. It is essential that we have clear rules and procedures within which staff can work, most of which are listed in Section 2 of this document.

We will regularly review and update our written rules to address changes in the business environment.

Directors must make sure that suitable levels of internal checks are included in working procedures, particularly financial procedures. It is important that duties are organised so that no one person can carry out a complete transaction without some form of checking process being built into the system.

As part of our corporate governance exercise we routinely document business risks and assess and document our internal financial controls. The specifics of our financial controls are detailed in our Financial Procedures Manual.

We must follow our procedures when employing new staff which include the requirement to obtain references for anyone that we are considering employing.

We are committed to working and co-operating with other organisations to prevent organised fraud, theft and corruption. Wherever possible, we will be prepared to help and exchange information with other organisations to deal with these issues. This kind of activity needs to be tightly controlled particularly in relation to data protection issues and the commitments of our Confidentiality Policy.

Our staff have been provided with a confidential facility to give us information that may prevent fraud, theft or corruption. Our Disclosure Policy is attached as Appendix 3.

We will ensure that full details of reporting facilities are widely published to staff and that all information we receive in this way is investigated and dealt with appropriately.

Detecting and Investigating Fraud, Theft and Corruption

You should read this section in conjunction with our Fraud, Theft and Corruption Response Plan (Appendix 1) and our Procedure for Referral to the Police.

Nursing Direct Disclosure Policy (Appendix 3) is intended to encourage and enable staff to raise serious concerns on a range of matters including possible fraud, theft or corruption. Staff reporting concerns in this way are afforded certain rights through legislation (Public Interest Disclosure Act 1998 - UK).

The Group Internal Audit Manager will work with the Directors to decide on the type and course of the investigation. This will include referring cases to the police where necessary. We will prosecute offenders and we will carry out our disciplinary procedures where appropriate. We will ensure that any internal proceedings do not prejudice any criminal case.

Procedure for Referring Matters to the Police

This procedure does not supersede other internal disciplinary codes implemented by Nursing Direct and any offenders will be subject to general disciplinary procedures as well as referral to the police.

The Company has procedures in place to:

- Deter fraud, theft and corruption in the first instance;
- Detect it quickly;
- Investigate it efficiently; and
- Refer matters to the police where appropriate.

In most cases the Managing Director in consultation with the Group Internal Audit Manager, or other designated officer, will be involved in deciding if reporting the matter to the police is appropriate.

In deciding whether an incident should be reported the following factors will be taken into account:

- The extent of the fraud, theft or corruption in financial terms;
- The sufficiency and adequacy of the evidence;
- Whether the public interest will be served.

Training

We understand that the key to introducing a successful Anti-Fraud, Anti-Theft and Anti-Corruption Policy and making sure it continues to apply will depend upon programmed training and the way all of our staff respond.

We will provide training for our staff who are involved in, or managing, internal control systems to make sure that their responsibilities and duties are regularly reviewed and reinforced.

We will also provide guidance as necessary to any staff that are required to assist in an investigation. Smaller investigations may be handled internally but larger, more complex matters will be referred to the Group Internal Audit Department who will manage the investigation on our behalf and regularly report their findings.

Conclusion

We are committed to tackling fraud, theft and corruption whenever it happens. Our response will be effective and organised and will rely on the policies included in this document.

We will continue to review our rules and procedures and will make sure that this policy document is regularly reviewed to make sure that it stays effective.

Dissemination and Update of this Policy

This policy was last reviewed on 3rd August 2012. It will be reviewed annually as a matter of course and by exception should the need arise. This document will be referred to in Nursing Direct standard conditions of engagement and a full copy will be made available on request.

APPENDIX 1 - FRAUD, THEFT AND CORRUPTION RESPONSE PLAN

Introduction

Nursing Direct is committed to the highest possible standards of openness, probity and accountability in all its affairs. It is determined to maintain a culture of honesty and opposition to fraud, theft and corruption.

In line with that commitment, Nursing Direct Anti-Fraud, Anti-Theft & Anti-Corruption Policy outlines the policies we are committed to in relation to preventing, reporting and managing fraud, theft and corruption.

The definitions of fraud, theft and corruption are all as within this Plan.

The Fraud, Theft and Corruption Response Plan reinforces the Company's robust approach by setting out the ways in which staff can voice their concerns about suspected fraud, theft or corruption.

What Do We Want to Know About?

This Plan is intended to be implemented where suspicions of fraud, theft or corruption have been raised.

Fraud is Defined As:

Deception by persons internal or external to the Company, which is carried out to conceal the misappropriation of assets or otherwise for gain.

Theft is Defined As:

The dishonest taking of property belonging to another with the intention of depriving the owner permanently of its possession.

Corruption is Defined As:

The offering, giving, soliciting or acceptance of an inducement, gratuities, bequests, gifts or reward, which may or may not inappropriately influence the action of any person.

Concerns or allegations which fall within the scope of other existing procedures (e.g. discrimination issues) will normally be referred for consideration under those procedures.

If you are in any doubt about the seriousness of your concern, advice and guidance can be obtained from the relevant Director on Nursing Direct Management Team or alternatively the Group Internal Audit Manager.

The Group Internal Audit department is a unit which operates independently of all other companies in the Group. Their work includes establishing procedures with the following aims:

- To develop an anti-fraud culture;
- To deter, prevent, detect and investigate fraud, theft and corruption;
- To recommend appropriate action against those who commit or seek to commit fraud, theft or are corrupt;
- To obtain compensation in respect of any losses to the Company.

Safeguards

Nursing Direct Disclosure Policy contains undertakings and explanations of safeguards for people raising concerns in good faith. These will be applied consistently in the case of all serious allegations, including concerns raised in connection with fraud, theft and corruption. The main safeguards and undertakings are outlined below:

Harassment or Victimisation –

The Company recognises that the decision to report a concern can be a difficult one to make, not least because of the fear of reprisal from those responsible for the malpractice. We will not tolerate harassment or victimisation and will take action to protect those who raise a concern in good faith. This does not mean that if a complainant is already the subject of disciplinary or redundancy procedures, that those procedures will be halted as a result of their disclosure.

Confidentiality –

The Company will endeavour to protect an individual's identity when he or she raises a concern and does not want their name to be disclosed. It must be appreciated however, that the investigation process may reveal the source of the information and a statement by the individual may be required as part of the evidence.

Anonymous Allegations –

This policy encourages individuals to put their names to allegations. Concerns expressed anonymously are much less powerful, but they will be considered at the discretion of the Company. In exercising this discretion, the factors to be taken into account would include:

- The seriousness of the issues raised;
- The credibility of the concern;
- The likelihood of confirming the allegations from attributable sources.

Untrue Allegations –

If an allegation is made in good faith, but is not confirmed by the investigation, no action will be taken against the originator. If, however, individuals make malicious or vexatious allegations, disciplinary action will be considered against the individual making the allegation.

What should a member of staff do if they suspect fraud, theft or corruption?

Staff are often the first to realise that something is seriously wrong. However, they may not express their concerns because they feel that speaking up would be disloyal to their colleagues. They may also fear harassment or victimisation, it may be easier to ignore the concern rather than report what may just be a suspicion of malpractice. Nursing Direct Disclosure Policy is intended to encourage and enable staff to raise serious concerns rather than overlooking a problem. A copy of the Disclosure Policy is attached as Appendix 3.

In essence, staff should approach the relevant Director on Nursing Direct Management Team, who will inform the Managing Director and, if appropriate, the Group Internal Audit Manager. The nature of the complaint will determine our course of action.

What should any third party do if they suspect fraud, theft or corruption?

Nursing Direct encourage third parties who suspect fraud, theft or corruption to contact either the Managing Director or the Group Internal Audit Manager in the first instance. The allegations will then be dealt with in the same way as allegations raised by a member of staff as outlined below.

How will Nursing Direct deal with allegations?

For issues raised, the action taken will depend upon the nature of the concern. The matters raised may:

- Be investigated internally by Nursing Direct staff or Group Internal Audit; and/or be referred to the police.
- Within 10 working days of a concern being received, the Managing Director or designated officer will write to the complainant:
- Acknowledging that the concern has been received;
- Indicating how the matter will be dealt with;

- Giving an estimate of how long it will take to provide a final response;
- Telling them whether any initial enquiries have been made; and
- Telling them whether any further investigations will take place, and if not, why not.

The investigation will be planned giving due consideration to the following:

- Resources required to investigate the allegation;
- Legal status of the allegation (i.e. theft or breach of procedure);
- Internal disciplinary procedures;
- Level of evidence required;
- Protection of data and documents required;
- Minimising the effect on staff and third parties;
- Recovery of any lost funds and minimising the potential for further loss;
- Review of any improvements required to prevent re-occurrence.

The above will be agreed between the Managing Director (or her designated officer) and the manager of the investigating team.

We appreciate that individuals who report the alleged fraud, theft or corruption need to be assured that the matter has been properly addressed. Thus, where appropriate and subject to legal constraints, they will receive information about the outcome of any investigation.

Should the allegation of fraud, theft or corruption impact directly upon a third party Nursing Direct Managing Director or her designated officer will directly contact the nominated or most senior member of staff at that company mindful of our duties under Data Protection requirements and our Confidentiality Policy.

APPENDIX 2 - NURSING DIRECT COMMITMENT TO ETHICAL BUSINESS BEHAVIOUR

We are committed to ethical business practices. To emphasise this to our staff we have the following key policies in place.

Ethical Policy

The conduct of Nursing Direct consultancy activities must at all times meet the requirements of individual clients whilst not compromising the ethical and professional reputation of the Company.

- Staff, Agency Workers and Associates are required to observe Nursing Direct Ethical Policy as a condition of their contract of employment. Staff are advised that they must therefore familiarise themselves with and adhere to the following:
- No member of staff or Associate may include in a report, letter or any other communications, any statement that he/she knows to be untrue.
- No member of staff or Associate should exclude from any report, letter or any other communication that is being made public by the Client any information that would materially alter the conclusions that could be drawn from the document.
- No member of staff or Associate should endorse information supplied by a Client or any other organisation without taking reasonable steps to satisfy himself/herself of its validity.
- Should any member of staff or Associate become aware of any allegedly illegal act he or she must:
- Approach the appropriate Director on Nursing Direct Management Team (unless he/she is the subject of the complaint in which case the Managing Director should be informed. Should the Managing Director be the subject of the complaint then the matter should be referred directly to the Group Internal Audit Manager).
- Concerns are best raised in writing and should include the background and history of the issue, giving as much detail as possible, including the reason why the individual is concerned. Although staff are not expected to prove the truth of an allegation, they will need to demonstrate that there are sufficient grounds for concern.

The above requirements are seen as an extension to, rather than a replacement of, individual responsibilities.

Policy on the Acceptance of Gifts, Bequests, Gratuities and Entertainment

If is prohibited to accept any bequests, gratuities and gifts in any form from our clients, their relatives, friends or representatives. It is prohibited to try and persuade our clients, their relatives, friends or representatives, directly, expressly or tacitly into making a bequest in their will in the staff member's favour.

For more information on this please see our full policy "Accepting gifts, bequests and gratuities"

It is prohibited to accept social invitations, gifts or gratuities from individuals doing business with or seeking to do business with the Company when such invitations, gifts or gratuities can be construed as an intent to influence a member of staff's decision, and the cost of the entertainment or gift would appear to be excessive.

While it may be difficult to judge the value of gifts, gratuities or invitations offered, it is important to also consider the appearance of impropriety. Staff should refrain from accepting such gifts, bequests, gratuities or invitations. The appropriate Director on The Galago Group Management Team should be consulted if you are unsure concerning the appropriateness of accepting gifts, bequests, gratuities or social invitations.

APPENDIX 3 - DISCLOSURE POLICY

Staff are often the first to realise that there may be something seriously wrong. However, they may not express their concerns because they feel that speaking up will be disloyal to their colleagues. They may also fear harassment or victimisation. In these circumstances, it may be easier to ignore the concern rather than report what may just be a suspicion of malpractice.

The Company is committed to the highest possible standards of openness, probity and accountability. In line with that commitment we expect staff and others with serious concerns to come forward and voice those concerns. This policy document makes it clear that staff can do so without fear of reprisals.

This Disclosure Policy is intended to encourage and enable staff to raise serious concerns within the Company rather than over-looking the problem.

Aims and Scope of the Policy

This policy aims to:

- Provide avenues for staff to raise concerns and receive feedback on any action taken;
- Reassure staff that they will be protected from reprisals or victimisation for giving information in good faith.
- There are existing procedures in place to enable staff to lodge a grievance relating to their own employment. This Disclosure Policy is intended to cover concerns that fall outside of other procedures. Those concerns may be about something that:
 - Is unlawful; or
 - Is against the Company's stated policies;
 - Or falls below established standards or practices;
 - Or amounts to improper conduct.

Safeguards

Harassment or Victimisation –

The Company recognises that the decision to report a concern can be a difficult one to make, not least because of the fear of reprisal from those responsible for the malpractice. We will not tolerate harassment or victimisation and will take action to protect those who raise a concern in good faith. This does not mean that if a complainant is already the subject of disciplinary or redundancy procedures, that those procedures will be halted as a result of their disclosure.

Confidentiality –

The Company will endeavour to protect an individual's identity when he or she raises a concern and does not want their name to be disclosed. It must be appreciated however, that the investigation process may reveal the source of the information and a statement by the individual may be required as part of the evidence.

Anonymous Allegations –

This policy encourages individuals to put their names to allegations. Concerns expressed anonymously are much less powerful, but they will be considered at the discretion of the Company. In exercising this discretion, the factors to be taken into account would include:

- The seriousness of the issues raised;
- The credibility of the concern;
- The likelihood of confirming the allegations from attributable sources.

Untrue Allegations –

If an allegation is made in good faith, but is not confirmed by the investigation, no action will be taken against the originator. If, however, individuals make malicious or vexatious allegations, disciplinary action will be considered against the individual making the allegation.

Raising a Concern

For less serious issues staff should normally raise concerns with their Staff Manager. In general however the Disclosure Procedure is expected to be used for potentially more serious and sensitive issues and the first step will be to approach the appropriate Director on Nursing Direct Management Team (unless she or senior management is the subject of the complaint in which case the Managing Director should be informed). Should the subject of the complaint be the Managing Director then the Group Internal Audit Manager should be contacted. The Group Internal Audit department is a unit which operates independently of all other companies in the Group. In all cases an initial investigation will determine whether a full investigation is required.

Concerns are best raised in writing and should include the background and history of the issue, giving as much detail as possible including the reason why the individual is concerned. The earlier the concern is raised, the easier it usually is to take action. Although staff are not expected to prove the truth of an allegation, they will need to demonstrate that there are sufficient grounds for concern.

How the Complaint will be Dealt With

For issues raised, the action taken will depend upon the nature of the concern. The matters raised may:

- Be investigated internally by Nursing Direct staff or Group Internal Audit; and/or
- Be referred to the police.

Within 10 working days of a concern being received, the Managing Director or designated officer will write to the complainant:

- Acknowledging that the concern has been received;
- Indicating how the matter will be dealt with;
- Giving an estimate of how long it will take to provide a final response;
- Telling them whether any initial enquiries have been made;
- Telling them whether any further investigations will take place, and if not, why not.

The investigation will be planned giving due consideration to the following:

- Resources required to investigate the allegation;
- Legal status of the allegation (i.e. theft or breach of procedure);
- Internal disciplinary procedures;
- Level of evidence required;
- Protection of data and documents required;
- Minimising the effect on staff and third parties;
- Recovery of any lost funds and minimising the potential for further loss;
- Review of any improvements required to prevent re-occurrence.

The above will be agreed between the Managing Director (or her designated officer) and the manager of the investigating team.

The amount of contact between the body investigating the issues raised and the complainant will depend on the nature of the matters raised, the potential difficulties involved and the clarity of the information provided. If necessary, further information will be sought from the complainant