

CHEC

ANTI-CORRUPTION AND BRIBERY POLICY



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1. Introduction and Purpose

- 1.1. This Anti-Bribery Policy outlines the responsibilities of CHEC and its employees, contractors, and associates to ensure compliance with the UK Bribery Act 2010. The purpose of this policy is to establish controls to prevent, detect, and address bribery and corruption, ensuring that all business activities are conducted in an ethical and lawful manner
- 1.2. CHEC take a zero-tolerance approach to bribery and corruption and are committed to acting professionally, fairly and with integrity in all our business dealings and relationships.
- 1.3. Any employee who breaches this policy will face disciplinary action, which could result in dismissal for gross misconduct. Any non-employee who breaches this policy may have their contract terminated with immediate effect and or other proportionate measures taken.
- 1.4. This policy does not form part of any employee's contract of employment, and we may amend it at any time. It will be reviewed regularly.

2. Scope

- 2.1. This policy applies to all persons working for and on behalf of CHEC or any subsidiary company in any capacity, including employees at all levels and locations, directors, officers, agency workers, seconded workers, volunteers, trainees, apprentices, interns, agents, contractors, external consultants, third-party representatives, and business partners.

3. Roles and Responsibility

Chief Executive Officer	The Chief Executive Officer has overall responsibility for strategic direction and operational management, including ensuring that CHEC process documents comply with all legal, statutory and good practice guidance requirements.
Chief Financial Officer	The Chief Financial Officer will: <ul style="list-style-type: none"> - Ensure this policy is communicated, embedded and upheld - Investigate any instances where bribery is suspected or raised - Take all precautions and embed controls to ensure the risk of bribery is mitigated against
All Employees	All employees must adhere to this policy and report any suspicion or knowledge of bribery to their line manager or the Risk and Compliance Manager immediately. Employees must not engage in any form of bribery or corruption



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Third Parties	Third parties acting on behalf of CHEC are expected to adhere to the principles set out in this policy. They must not engage in any form of bribery or corruption.
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4. Definition of Bribery

4.1. Bribery refers to an inducement whether financial or otherwise or reward for action, which is illegal, unethical, a breach of trust or improper in any way. Bribes can take the form of money, gifts, loans, fees, hospitality, services, discounts, the award of a contract or any other advantage or benefit. Bribery includes offering, promising, giving, accepting, or seeking a bribe.

4.2. All forms of bribery are strictly prohibited. If you are unsure about whether a particular act constitutes bribery, raise it with your manager or the Chief Financial Officer

4.3. Specifically, you must not:

4.3.1. give or offer any payment, gift, hospitality or other benefit in the expectation that a business advantage will be received in return, or to reward any business received.

4.3.2. accept any offer from a third party that you know, or suspect is made with the expectation that we will provide a business advantage for them or anyone else;

4.3.3. give or offer any payment (sometimes called a facilitation payment) to a government official in any country to facilitate or speed up a routine or necessary procedure.

4.4. You must not threaten or retaliate against another person who has refused to offer or accept a bribe or who has raised concerns about possible bribery or corruption.

4.5. Legal Framework

4.5.1. The UK Bribery Act 2010 makes it a criminal offence to:

- Offer, promise, or give a bribe.
- Request, agree to receive, or accept a bribe.
- Bribe a foreign public official.
- Fail to prevent bribery within a commercial organization.

5. Political and Charitable Contribution

5.1. We do not make any contributions to politicians, political parties or election campaigns.

5.2. As a responsible member of society, CHEC may make charitable donations. However, these payments shall not be provided to any organisation upon suggestion of any person of the public or private sector in order to induce that person to perform improperly the function or activities which he or she is expected to perform or to reward that person for the improper performance of such function or activities.

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- 5.3. Any donations and contributions must be ethical and transparent. The recipient's identity and planned use of the donation must be clear, and the reason and purpose for the donation must be justifiable and documented.
- 5.4. Donations to individuals and for-profit organisations which are paid to private accounts are incompatible with CHEC's ethical standards and are prohibited.

6. Gifts and Hospitality

- 6.1. This policy does not prohibit the giving or accepting of reasonable and appropriate hospitality for legitimate purposes such as building relationships, maintaining our image or reputation, or marketing our services.
- 6.2. A gift or hospitality will not be appropriate if it is unduly lavish or extravagant or could be seen as an inducement or reward for any preferential treatment (for example, during contractual negotiations or a tender process).
- 6.3. Gifts must be of an appropriate type and value depending on the circumstances and taking account of the reason for the gift. Gifts must not include cash or cash equivalent (such as vouchers), or be given in secret. Gifts must be given in CHEC's name or other company name as appropriate, not your name.
- 6.4. Promotional gifts of low value such as branded stationery may be given to or accepted from existing customers, suppliers and business partners.

7. Record-Keeping

- 7.1. You must declare and keep a written record of all hospitality, or gifts given or received. You must also submit all expenses claims relating to hospitality, gifts or payments to third parties in accordance with our expenses policy and record the reason for expenditure.
- 7.2. All accounts, invoices, and other records relating to dealings with third parties including suppliers and customers should be prepared with strict accuracy and completeness. Accounts must not be kept "off-book" to facilitate or conceal improper payments.
- 7.3. All gifts and hospitality must also be recorded centrally in the Gifts and Hospitality Register, which is maintained by the Risk and Compliance Manager.

8. How to Raise a Concern

- 8.1. Employees and third parties are encouraged to report any concerns or suspicions of bribery.



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- 8.2. If you are offered a bribe, or are asked to make one, or if you suspect that any bribery, corruption or other breach of this policy has occurred or may occur, you must notify your manager or Chief Financial Officer immediately or report it in accordance with our Whistleblowing Policy as soon as possible.
- 8.3. All reports will remain confidential unless disclosure of information is required during any investigation or further action is required. In this instance, any reporter will be informed prior to disclosure and their consent to disclose the information obtained.

9. Implementation

- 9.1. This policy will be available to all Staff for use in relation to the specific function of the policy.
- 9.2. All directors and managers are responsible for ensuring that relevant staff within their own directorates and departments have read and understood this document and are competent to carry out their duties in accordance with the procedures described.

10. Training Implications

- 10.1. The training required to comply with this policy is on a communication basis, ensuring staff are made aware at all time of relevant processes and contacts.

11. Monitoring, Review and Archiving

10.1. Monitoring

The Governing Body will agree a method for monitoring the dissemination and implementation of this policy. Monitoring information will be recorded in the policy database.

10.2. Review

The Governing Body will ensure that this policy document is reviewed in accordance with the timescale specified at the time of approval. No policy or procedure will remain operational for a period exceeding three years without a review taking place.

Staff who become aware of any change which may affect a policy should advise their line manager as soon as possible. The Governing Body will then consider the need to review the policy or procedure outside of the agreed timescale for revision. (This paragraph to be included in all policies).

For ease of reference for reviewers or approval bodies, changes should be noted in the 'document history' table on the front page of this document. (This paragraph to be included in all policies)

NB: If the review consists of a change to an appendix or procedure document, approval may be given by the sponsor director and a revised document may be issued. Review to the main body of the policy must always follow the original approval process. (This paragraph to be included in all policies)

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10.3. Archiving

The Governing Body will ensure that archived copies of superseded policy documents are retained in accordance with Records Management: Code of Practice for Health and Social Care 2016.

Document Owner and Approval

The Chief Financial Officer is the owner of this document and is responsible for ensuring that this policy is reviewed by the due date.

A current version of this document is available to members of staff on the CHEC intranet.

Change history record

Issue	Description of Change	Approval	Date of Issue
1.0	Initial issue		18/01/2023
2.0	Review		18/01/2024
3.0	Review	CFO	06/09/2024

EQUALITY IMPACT ASSESSMENT FORM

PART A - INITIAL SCREENING FORM

Section One	
Name of proposal, policy, service review or report (<i>referred throughout as proposal</i>)	Anti-Corruption and Bribery Policy
Directorate / Service carrying out the assessment	Risk and Compliance
Name and role of person undertaking this EIA	Charlie Stewart, Risk and Compliance Manager
Give an overview of the aims, objectives, and purpose of the proposal: To help support CHEC's disabled colleagues.	

Section Two		
Equality Groups:	Could the proposal have a positive impact	Could the proposal have a negative impact
People of different ages.	Yes	
People with disability (incl. sensory, mobility, mental health, learning disability,	Yes	

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neurodiversity, long term ill health) and carers of disabled people.		
People of different Race (including culture, nationality/national origin, ethnic origin/race, skin colour).	Yes	
People of different religions & beliefs.	Yes	
People of different sexual orientation (inclusive of LGB groups) and marriage/civil partnership.	Yes	
People experiencing multiple needs such mental health problems and or anxiety.	Yes	
Refugees and asylum seekers.	Yes	
Human Rights breaches.		No

Section Three

Is this proposal a major change in terms of scale or significance for CHEC? Is there a clear indication that, although the proposal is minor it is likely to have a major affect for people due to their protected characteristic?

Yes		No	x
High risk:		Low risk:	x

Section Four

It this proposal is low risk please give evidence or justification for how you reached this decision:

This Policy is to ensure compliance with Corporate Risk relating to Anti-Bribery and Corruption requirements and therefore supports all people. This proposal takes into account employees from different backgrounds, religions and ethnicity. The proposal is designed to ensure consistency throughout the organisation in terms of health and safety for our staff and for patients and clients that we see

Sign off that this proposal is low risk and does not require a full Equality Impact Assessment:

EAI Reviewer Signed:

Date: 06/09/2024



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