

# Fraud and Corruption Management Policy

## Section 1 - Background and Purpose

(1) This Policy provides a visible commitment to the management of fraud and corruption risks and activities within or involving the University or members of the University community.

### General

(2) Any member of the University community, visitor or member of the public that wishes to report a fraudulent incident or corrupt behaviour or suspects that fraud or corruption has been committed against the University or by any member of the University community should report the incident immediately to the Risk Management, Internal Audit Office or in the case of a protected disclosure, to the [Independent Broad-based Anti-Corruption Commission](#) (IBAC).

## Section 2 - Scope

(3) Applies to:

- a. All campuses
- b. All staff

## Section 3 - Policy Statement

(4) La Trobe University is committed to ensuring it operates within a sound ethical culture and seeks to proactively manage fraud and corruption risks and deal with such unlawful activities.

(5) University staff, students and the wider community are encouraged to report fraud or other corrupt conduct.

## Section 4 - Procedure

### Fraud and Corruption Management Framework

(6) The Fraud and Corruption Management Framework comprises:

- a. A risk management approach, including:
  - i. Awareness and training on the nature of fraud and corruption risk and its management,
  - ii. A process for identifying and evaluating fraud and corruption risk,
  - iii. A process for treating priority fraud and corruption risk,
  - iv. Mechanisms for monitoring fraud and corruption risk and reporting on their status;
- b. Processes for the prevention, detection and control of fraudulent or corrupt behaviour and activities; and
- c. Mechanisms for ensuring that management, staff and contracted third parties are aware of their responsibilities

for the prevention and management of fraud and corruption.

## **Senior Management Responsibilities**

(7) It is the responsibility of all management to promote the efficient and ethical use of the University's resources. This includes ensuring that in areas of their responsibility:

- a. fraud and corruption risks are identified, evaluated and are prioritised appropriately for treatment;
- b. appropriate mechanisms are established and maintained in order to detect and control incidents of suspected fraud and corruption;
- c. suspected fraudulent or corrupt behaviour or incidents are reported and investigated in a timely manner; and
- d. their staff have appropriate training in the management of fraud and corruption risk.

## **Corporate Governance, Audit and Risk Committee (CGARC) Responsibilities**

(8) The CGARC is responsible for:

(9) ensuring that the University has appropriate mechanisms for managing fraud and corruption risks; and

(10) ensuring that suspected fraudulent or corrupt behaviour, and other related incidents are vigorously investigated and corrective actions undertaken.

## **Risk Management Division Responsibilities**

(11) Risk Management has particular responsibility for the:

- a. overall implementation of the fraud and corruption risk management strategy;
- b. oversight of fraud and corruption control plans where present;
- c. improving awareness of fraud risk;
- d. for the examination of suspected fraud and corruption, both through the review activities of Internal Audit and through specific forensic investigation;
- e. reporting to management and the CGARC on the status of the fraud and corruption management and the results of reviews and investigations undertaken.

## **Reporting Fraud - Protected Disclosure**

(12) Any member of the University community, visitor to the University or member of the general public that wishes to make a complaint or report an incident involving the University or an officer of the University may do so as a protected disclosure under the [Protected Disclosure Act 2012](#).

(13) If you wish to make a protected disclosure please refer to La Trobe University [Protected Disclosure Policy](#). Protected Disclosures are made directly to [Independent Broad-based Anti-Corruption Commission](#) (IBAC) and do not go through University notification processes.

## **Making a Report to the University (Non Protected Disclosure)**

(14) Where an allegation does not meet the IBAC determination, or a person wishes to make a non-protected disclosure directly to the University, reports of fraud or corrupt behaviour by members of the University may also be made to the University's Risk Management or Internal Audit Office.

(15) Any person who wishes to report an incident or suspect a fraud may have been committed may complete the [Fraud Allegation Form \(Word\)](#) and forward it to the Risk Management Division or to Internal Audit Office. Reports can be made anonymously. Persons should ensure that as much information regarding the incident is provided to enable

full investigation of the report.

## Section 5 - Definitions

(16) For the purpose of this Policy and Procedure:

- a. corruption: dishonest activity contrary to the interests of the entity in that a person abuses their position of trust in order to achieve some personal gain or advantage for themselves or other persons or entities.
- b. fraud: dishonest activity causing actual or potential financial loss to any person or entity including theft of moneys or other property by employees or persons external to the entity and whether or not deception is used at the time, immediately before or immediately following the activity. This also includes the deliberate falsification, concealment, destruction or use of falsified documentation used or intended for use for a normal business purpose or the improper use of information or position
- c. protected disclosure: a disclosure of information which is protected by the [Protected Disclosure Act, 2012](#). Any person making a disclosure of improper conduct by public officers and public bodies (including universities) is protected from any reprisal for disclosing the improper conduct.

## Section 6 - Stakeholders

Responsibility for implementation – Internal Audit Manager; and Director, Risk Management.

Responsibility for monitoring implementation and compliance – Director, Risk Management; and Corporate Governance, Audit and Risk Committee.

## Status and Details

|                                   |                                       |
|-----------------------------------|---------------------------------------|
| <b>Status</b>                     | Historic                              |
| <b>Effective Date</b>             | 1st November 2016                     |
| <b>Review Date</b>                | 15th February 2017                    |
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| <b>Responsible Policy Officer</b> | Mark Smith<br>Chief Operating Officer |
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