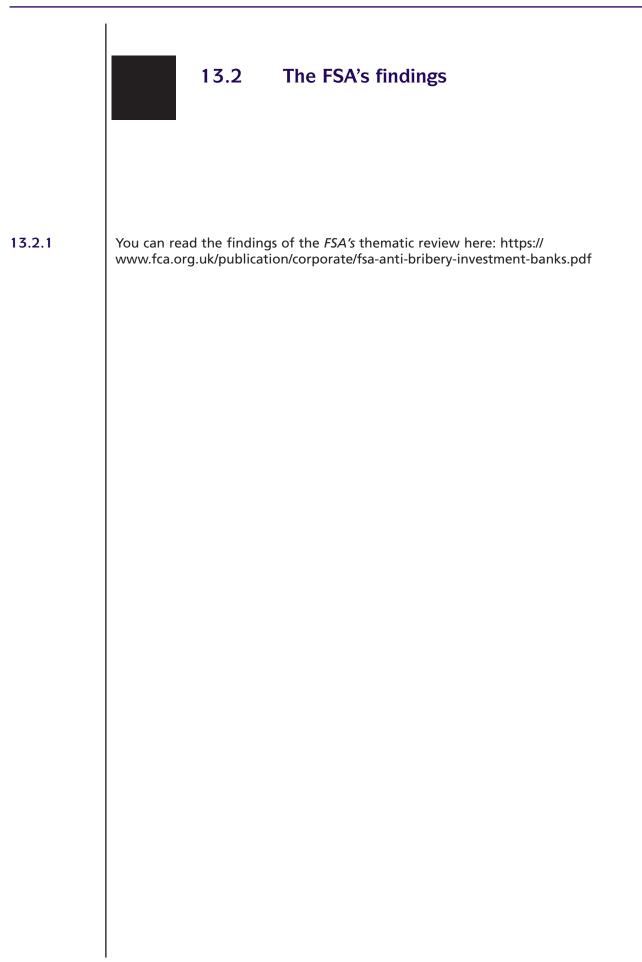
Financial Crime Thematic Reviews

Chapter 13

Anti-bribery and corruption systems and controls in investment banks (2012)

| | 13.1 Introduction |
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| 13.1.1 | Who should read this chapter? This chapter is relevant, and its statements of good and poor practice apply to: •investment banks and firms carrying on investment banking or similar activities in the UK; |
| | •all other firms who are subject to our financial crime rules in ■ SYSC 3.2.6R or ■ 6.1.1R; and •electronic money institutions and payment institutions within our supervisory scope. |
| | ■ FCTR 13.3.5G and ■ FCTR 13.3.6G only apply to firms or institutions who use third parties to win business. |
| 13.1.2 | In March 2012, the FSA published the findings of its review of investment banks' anti-bribery and corruption systems and controls. The FSA visited 15 investment banks and firms carrying on investment banking or similar activities in the UK to assess how they were managing bribery and corruption risk. Although this report focused on investment banking, its findings are relevant to other sectors. |
| 13.1.3 | The FSA found that although some investment banks had completed a great deal of work to implement effective anti-bribery and corruption controls in the months preceding its visit, the majority of them had more work to do and some firms' systems and controls fell short of its regulatory requirements. Weaknesses related in particular to: many firms' limited understanding of the applicable legal and regulatory regimes, incomplete or inadequate bribery and corruption risk assessments; lack of senior management oversight; and failure to monitor the effective implementation of, and compliance with, anti-bribery and corruption policies and procedures. |
| 13.1.4 | The contents of this report are reflected in ■ FCG 6 (Bribery and corruption). |



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| | | olidated examples of good | |
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| 13.3.1 | the report also included case studies | od and poor practice below, Section 6 of es illustrating relationships into which he FSA particular concern. The case studi paragraph above. | |
| 13.3.2 | Governance and management infor | rmation (MI) | |
| | Examples of good practice | Examples of poor practice | |
| | • Clear, documented respons ibility for anti-bribery and corruption apportioned to either a single senior man- ager or a committee with appropriate terms of refer ence and senior manage- ment membership, re- porting ultimately to the Board. | d fective governance frame o work to address bribery and corruption risk. | |
| | Regular and substantive M to the Board and other rel evant senior management forums, including: an over- view of the bribery and co ruption risks faced by the business; systems and con- trols to mitigate those risk information about the ef- fectiveness of those system and controls; and legal and regulatory developments. | el- ibility for anti-bribery and t corruption to a single r- senior manager or an ap- or- propriately formed committee. - ks; - ms nd | k |
| | • Where relevant, MI include information about third pa- ties, including (but not lim- ited to) new third-party ac counts, their risk classifica- tion, higher risk third-party payments for the precedin period, changes to third- party bank account details | bar- n- corruption issues, includin legislative or regulatory d a- ty and higher risk third-part ng relationships or payments | ng le- ks zy |
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| | and unusually high commis- sion paid to third parties. | |
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| | Considering the risk posed by former PEPs and 'do- mestic PEPs' on a case-by- case basis. | |
| | • Actions taken or proposed in response to issues high- lighted by MI are minuted and acted on appropriately. | |
| 5.3.3 | Assessing bribery and corruption risk | |
| | | Examples of poor practice |
| | Examples of good practice Responsibility for carrying out a risk assessment and keeping it up-to-date is cle- arly apportioned to an indi- vidual or a group of indi- viduals with sufficient levels of expertise and seniority. | The risk assessment is a one-off exercise. |
| | • The firm takes adequate steps to identify the bribery and corruption risk. Where internal knowledge and un- derstanding of corruption risk is limited, the firm sup- plements this with external expertise. | • Efforts to understand the risk assessment are piece- meal and lack coor- dination. |
| | Risk assessment is a continu- ous process based on qualit- ative and relevant informa- tion available from internal and external sources. | Risk assessments are incom plete and too generic. |
| | • Firms consider the potential conflicts of interest which might lead business units to downplay the level of bribery and corruption risk to which they are exposed. | Firms do not satisfy them- selves that staff involved in risk assessment are suffi- ciently aware of, or sen- sitised to, bribery and cor- ruption issues. |
| | • The bribery and corruption risk assessment informs the development of monitoring programmes; policies and procedures; training; and operational processes. | |
| | • The risk assessment demon- strates an awareness and un- derstanding of firms' legal and regulatory obligations. | |
| | • The firm assesses where risks are greater and concen- trates its resources ac- cordingly. | |
| | • The firm considers financial crime risk when designing new products and services. | |

| Exa | amples of good practice | Examples | of poor practice |
|------|---|----------|---|
| • | The firm clearly sets out the behaviour expected of those acting on its behalf. | • | The firm has no method in place to monitor and as- sess staff compliance with anti-bribery and corruption policies and procedures. |
| • | Firms have conducted a gap analysis of existing bribery and corruption procedures against applicable legisla- tion, regulations and guid- ance and made necessary enhancements. | • | Staff responsible for the implementation and mon- itoring of anti-bribery and corruption policies and pro- cedures have inadequate expertise on bribery and corruption. |
| • | The firm has a defined pro- cess in place for dealing with breaches of policy. | | |
| • | The team responsible for en- suring the firm's compliance with its anti-bribery and cor- ruption obligations engages with the business units about the development and implementation of anti- bribery and corruption sys- tems and controls. | | |
| • | anti-bribery and corruption policies and procedures will vary depending on a firm's exposure to bribery and cor- ruption risk. But in most cases, firms should have pol- icies and procedures which cover expected standards of behaviour; escalation pro- cesses; conflicts of interest; expenses, gifts and hospital- ity; the use of third parties to win business; whistleblowing; monitoring and review mechanisms; and disciplinary sanctions for breaches. These policies need not be in a single 'ABC policy' document and may be contained in separ- ate policies. | | |
| • | There should be an effect- ive mechanism for re- porting issues to the team or committee responsible for ensuring compliance with the firm's anti-bribery and corruption obligations. | | |
| Thir | d-party relationships and due dilig | ence | |
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Where third parties are A firm using intermediarused to generate business, ies fails to satisfy itself these relationships are subthat those businesses have ject to thorough due diliadequate controls to degence and management tect and prevent staff usoversight. ing bribery or corruption to generate business. Third-party relationships The firm fails to establish are reviewed regularly and and record an adequate in sufficient detail to concommercial rationale for firm that they are still using the services of third necessary and appropriate parties. to continue. There are higher, or extra, The firm is unable to prolevels of due diligence and duce a list of approved approval for high risk third parties, associated third-party relationships. due diligence and details of payments made to them. There is appropriate There is no checking of scrutiny of, and approval compliance's operational for, relationships with third role in approving new parties that introduce busithird-party relationships ness to the firm. and accounts. The firm's compliance func- • A firm assumes that long-. tion has oversight of all standing third-party relathird-party relationships tionships present no and monitors this list to bribery or corruption risk. identify risk indicators, eq a third party's political or public service connections. Evidence that a risk-based A firm relies exclusively on informal means, such as approach has been adstaff's personal knowopted to identify higher risk relationships in order ledge, to assess the bribery and corruption risk to apply enhanced due associated with third diligence. parties. Enhanced due diligence No prescribed take-on proprocedures include a recess for new third-party review of the third party's lationships. own anti-bribery and corruption controls. Consideration, where ap-A firm does not keep full . propriate, of compliance inrecords of due diligence volvement in interviewing on third parties and canconsultants and the provinot evidence that it has considered the bribery and sion of anti-bribery and corcorruption risk associated ruption training to conwith a third-party relasultants. tionship. Inclusion of anti-bribery The firm cannot provide and corruption-specific evidence of appropriate clauses and appropriate checks to identify whether protections in contracts introducers and consultwith third parties. ants are PEPs. Failure to demonstrate that due diligence in-

formation in another lan-

| | | | guage has been under- stood by the firm. |
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| Paymer | nt controls | | |
| Examp | les of good practice | Examples | of poor practice |
| • | Ensuring adequate due dili- gence on and approval of third-party relationships be- fore payments are made to the third party. | • | Failing to check whether third parties to whom pay- ments are due have been subject to appropriate due diligence and approval. |
| • | Risk-based approval proced- ures for payments and a clear understanding of the reason for all payments. | • | Failing to produce regular third-party payment sched- ules for review. |
| • | Checking third-party pay- ments individually prior to approval, to ensure consist- ency with the business case for that account. | • | Failing to check thor- oughly the nature, reason- ableness and appropri- ateness of gifts and hos- pitality. |
| • | Regular and thorough mon- itoring of third-party pay- ments to check, for ex- ample, whether a payment is unusual in the context of previous similar payments. | • | No absolute limits on dif- ferent types of expendit- ure, combined with inad- equate scrutiny during the approvals process. |
| • | A healthily sceptical ap- proach to approving third- party payments. | | |
| • | Adequate due diligence on new suppliers being added to the Accounts Payable system. | | |
| • | Clear limits on staff expend- iture, which are fully docu- mented, communicated to staff and enforced. | | |
| • | Limiting third-party pay- ments from Accounts Pay- able to reimbursements of genuine business-related costs or reasonable hos- pitality. | | |
| • | Ensuring the reasons for third-party payments via Accounts Payable are cle- arly documented and ap- propriately approved. | | |
| • | The facility to produce ac- curate MI to assist effective payment monitoring. | | |
| | | | |
| | nd hospitality (G&H) | | |
| Examp | les of good practice | Examples | of poor practice |
| | | | |

| • | Policies and procedures cle- | • | Senior management do |
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| | arly define the approval process and the limits ap- plicable to G&H. | | not set a good example to staff on G&H policies. |
| • | Processes for filtering G&H by employee, client and type of hospitality for analysis. | • | Acceptable limits and the approval process are not defined. |
| • | Processes to identify un- usual or unauthorised G&H and deviations from ap- proval limits for G&H. | • | The G&H policy is not kep up-to-date. |
| • | Staff are trained on G&H policies to an extent appro- priate to their role, in terms of both content and frequency, and regularly re- minded to disclose G&H in line with policy. | • | G&H and levels of staff compliance with related policies are not monitored |
| • | Cash or cash-equivalent gifts are prohibited. | • | No steps are taken to minimise the risk of gifts going unrecorded. |
| • | Political and charitable do- nations are approved at an appropriate level, with in- put from the appropriate control function, and sub- ject to appropriate due diligence. | • | Failure to record a clear r tionale for approving gift that fall outside set thresholds. |
| | | • | Failure to check whether charities being donated t are linked to relevant pol ical or administrative de- cision-makers. |
| Staff re | cruitment and vetting | | |
| Examp | ples of good practice | Example | s of poor practice |
| • | Vetting staff on a risk- based approach, taking into account financial crime risk. | • | Failing to carry out ongo- ing checks to identify changes that could affect an individual's integrity and suitability. |
| | | | |
| • | Enhanced vetting – includ- ing checks of credit re- cords, criminal records, fin- ancial sanctions lists, com- mercially-available intelli- gence databases – for staff in roles with higher bribery and corruption risk. | • | No risk-based processes for identifying staff who are PEPs or otherwise con- nected to relevant politica or administrative decision makers. |

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| | complying with agreed vet- ting standards. | staff, failing to demon- strate a clear understand- ing of the checks these agencies carry out on pro- spective staff. Temporary or contract staff receiving less rigorous vetting than permanently employed colleagues carry- ing out similar roles. |
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| 13.3.9 | Training and awareness | |
| | Examples of good practice | Examples of poor practice |
| | • Providing good quality, standard training on anti- bribery and corruption for all staff. | • Failing to provide training on ABC that is targeted at staff with greater exposure to bribery and corruption risks. |
| | • Ensuring training covers rel- evant and practical examples. | Failing to monitor and measure the quality and ef- fectiveness of training. |
| | Keeping training material and staff knowledge up-to- date. | |
| | Awareness-raising initiat- ives, such as special cam- paigns and events to sup- port routine training, are organised. | |
| 13.3.10 | Remuneration structures | |
| | Examples of good practice | Examples of poor practice |
| | • Remuneration takes ac- count of good compliance behaviour, not simply the amount of business generated. | Failing to reflect poor staff compliance with anti- bribery and corruption pol- icy and procedures in staff appraisals and remu- neration. |
| | • Identifying higher-risk func- tions from a bribery and corruption perspective and reviewing remuneration structures to ensure they do not encourage unac- ceptable risk taking. | |
| 13.3.11 | Incident reporting and management | |
| | Examples of good practice | Examples of poor practice |
| | | |

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| • | Clear procedures for whistleblowing and the re- porting of suspicions, which are communicated to staff. | • | Failing to maintain proper records of incidents and complaints. |
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| • | Details about whistleblow- ing hotlines are visible and accessible to staff. | | |
| • | Where whistleblowing hot- lines are not provided, firms should consider meas- ures to allow staff to raise concerns in confidence or, where possible, anonym- ously, with adequate levels of protection and commun- icate this clearly to staff. | | |
| • | Firms use information gathered from whistleblowing and in- ternal complaints to assess the effectiveness of their anti-bribery and corruption policies and procedures. | | |
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