

CORP06

Surrey Heartlands CCGs

Anti-Fraud Bribery and Corruption Policy

Policy applicable to:

NHS Guildford and Waverley CCG	✓
NHS North West Surrey CCG	✓
NHS Surrey Downs CCG	✓

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Approved by	Governing Bodies
Name of author/ originator	Counter Fraud Specialist
Owner (director)	Karen McDowell, Chief Finance Officer for the Surrey Heartlands CCGs
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Working together as the Surrey Heartlands Clinical Commissioning Groups

Guildford and Waverley CCG | North West Surrey CCG | Surrey Downs CCG

Version control sheet

Version	Date	Author	Status	Comment
1.0	16/11/18	Counterfraud specialist	Draft	Reviewed by Audit Committees
1.0	16/11/18	Counterfraud specialist	Final	Reviewed by Audit Committees
1.0	19/12/18	Counterfraud specialist	Final	Approved by Governing Bodies
1.1	12/02/19	Counterfraud specialist/ Governance Team	Final	Cross-references to Raising Matters of Concern Policy included and formatting
1.2	05/04/19	Governance Team	Final	Equality Analysis completed

Equality statement

The Surrey Heartlands' CCGs aim to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. We take into account the Human Rights Act 1998 and promote equal opportunities for all. This document has been assessed to ensure that no employee receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

Members of staff, volunteers or members of the public may request assistance with this policy if they have particular needs. If the member of staff has language difficulties and difficulty in understanding this policy, the use of an interpreter will be considered.

We embrace the four staff pledges in the NHS Constitution. This policy is consistent with these pledges.

See next page for an Equality Analysis of this policy.

Equality analysis

Equality analysis is a way of considering the effect on different groups protected from discrimination by the Equality Act, such as people of different ages. There are two reasons for this:

- to consider if there are any unintended consequences for some groups
- to consider if the policy will be fully effective for all target groups

Name of Policy: Surrey Heartlands CCGs Anti-Fraud Bribery and Corruption Policy	Policy Ref: CORP06	Is this New? [] Or Existing? [✓] Combined from pre-existing individual CCG policies
Assessment conducted by (name, role): Natasha Moore, Governance Manager		Date of Analysis: 05/04/19
Directorate: Communications and Corporate Affairs	Director's signature:	
Who is intended to <u>follow</u> this policy? Explain the aim of the policy as applied to this group. Scope defined under section 3.5 of this policy.		
Who is intended to <u>benefit from</u> this policy? Explain the aim of the policy as applied to this group. The public who live within the Surrey Heartlands CCGs' area will benefit from all Finance policies through sound management of available resources. The policies aim to provide staff with details on how to provide an organisation that legally complies to the NHS Standards of Business Conduct, eliminates fraud, bribery and corruption to frees up resources to provide quality care for the community. Staff also benefit through clarity of their own responsibilities.		
1. Evidence considered. <i>What data or other information have you used to evaluate if this policy is likely to have a positive or an adverse impact upon protected groups when implemented?</i> N/A		
2. Consultation. <i>Have you consulted people from protected groups? What were their views?</i> N/A		

<p>3. Promoting equality. <i>Does this policy have a positive impact on equality? What evidence is there to support this? Could it do more?</i></p> <p>Finance policies detail procedures to be followed and relate to all members of the CCGs and benefit all in the Community. There is reasonable understanding for relevant equality groups.</p>
<p>4. Identifying the adverse impact of policies</p> <p><i>Identify any issues in the policy where equality characteristics require consideration for either those abiding by the policy or those the policy is aimed to benefit, based upon your research.</i></p>
<p>a) People from different age groups: N/A</p>
<p>b) Disabled people: N/A</p>
<p>c) Women and men: N/A</p>
<p>d) Religious people or those with strongly held philosophical beliefs: N/A</p>
<p>e) Black and minority ethnic (BME) people: N/A</p>
<p>f) Transgender people: N/A</p>
<p>g) Lesbians, gay men and bisexual people: N/A</p>
<p>h) Women who are pregnant or on maternity leave: N/A</p>
<p>i) People who are married or in a civil partnership: N/A</p>
<p>5. Monitoring <i>How will you monitor the impact of the policy on protected groups?</i></p> <p>N/A</p>

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To be read in conjunction with the following CCG policies:

- Standards of Business Conduct and Conflicts of Interest Policy
- Disciplinary Policy
- Raising Matters of Concern (Whistleblowing) Policy
- Grievance Policy
- Standards of Business Conduct and Hospitality
- Parallel Sanctions Joint Working Protocol

This is a Controlled Document. Printed copies of this document may not be up to date. Please check the CCG intranet for the latest version and destroy all previous versions.

1. FOREWARD

- 1.1 Surrey Heartlands CCGs (the CCGs) are committed to reducing fraud, bribery and corruption in the NHS and will seek the appropriate disciplinary, regulatory, civil and criminal sanctions against fraudsters, and where possible will attempt to recover losses. This policy is supported and endorsed by senior management.
- 1.2 To this end, the CCGs employ a specialist Counter Fraud service to undertake a comprehensive programme against Fraud, Bribery and Corruption which is overseen by the CCG's Audit Committee.
- 1.3 All Anti-Fraud, Bribery and Corruption legislation is complied with. It is a criminal offence to receive, promise or offer a bribe, and to request, agree to receive, or accept a bribe. A bribe may take the form of any financial or other advantage to another person in order to induce a person to perform improperly.
- 1.4 Although the Bribery Act and NHS England Guidance permit limited hospitality under specified conditions, all staff are required to seek advice on an individual basis and check appropriate policies before accepting any hospitality offered, ensuring it is recorded within the relevant CCG's Hospitality register so that it has been fully disclosed.
- 1.5 It is also important that all of our contractors, vendors and agents comply with our policies and procedures. When entering into contracts with organisations the CCGs follow the NHS standard terms and conditions of contract for the purchase of goods and supplies. For more information see;

[NHS terms and conditions for procuring goods and services - Publications - GOV.UK](#)
- 1.6 We ask all who have dealings with the CCGs, as employees, agents, trading partners, stakeholders and patients, to help us in our fight against Fraud, Bribery and Corruption and to contact us immediately, if you have any concerns or suspicions we need to know about.
- 1.7 It is also important that all of our contractors and agents comply with our policies and procedures. NHS healthcare services are commissioned under the [NHS Standard Contract](#). The NHS Contract requires all organisations providing NHS services to put in place and maintain appropriate anti-fraud and security management arrangements.
- 1.8 Organisations providing NHS services meeting certain criteria are required to put in place and maintain appropriate anti-fraud and security management arrangements. For more information see [NHSCFA 2018-19 standards for providers](#).
- 1.9 Under the NHS Standard contract, providers of services to the NHS are required to:
 - Appoint their own Accredited Counter Fraud Function.
 - Complete an annual Self Review Tool which measures compliance with the NHSCFA Protect Standards for Providers, and an annual report.
 - Develop a work plan to ensure non-compliant standards are addressed.

- 1.10 We ask all who have dealings with the CCG, as employees, agents, trading partners, stakeholders and patients, to help us in our fight against Fraud, Bribery and Corruption and to contact us immediately, if you have any concerns or suspicions we need to know about.

The CCG's Counter Fraud Specialist can be contacted in confidence as follows:
Melanie Alflatt – 07899 981415 – melanie.alflatt@nhs.net

- 1.11 All genuine suspicions of Fraud, Bribery and Corruption can also be reported to the NHS Counter Fraud Authority Reporting Line on free phone **0800 028 4060**, again in strict confidence, or via the online reporting form at www.cfa.nhs.uk/reportfraud

2. POLICY SUMMARY

This document provides the CCGs with a policy and a response plan for dealing with suspected fraud, bribery and corruption to ensure that these matters are dealt with in a consistent and proper manner. This policy addresses the requirements of the Bribery Act.

3. INTRODUCTION

3.1 General

One of the basic principles of public sector organisations is the proper use of public funds. The majority of people who work in the NHS are honest and professional and they find that fraud committed by a minority is wholly unacceptable as it ultimately leads to a reduction in the resources available for patient care.

The CCGs do not tolerate Fraud, Bribery and Corruption within the NHS. The aim is to eliminate all NHS Fraud, Bribery and Corruption as far as possible.

3.2 Generic areas of action

The CCGs are committed to taking all necessary steps to counter Fraud, Bribery and Corruption. To meet their objectives, they have adopted the four key principles which are set out in the NHSCFA strategy:

- **Inform and involve** – it is necessary to inform and involve those who work for or use the health service on the risks of crime and how to tackle it
- **Prevent and deter** – To remove the opportunities for crime within the NHS to occur or to re-occur
 - **Investigate and sanction** – those who commit crime will be detected, investigated, and prosecuted, where appropriate and possible, redress will be sought.
- **Continuously review and hold to account** – The aim is to ensure anti-crime measures are embedded at all levels across the CCGs.

- 3.3 In order to achieve these objectives the CCGs intend to operate procedures which will place emphasis upon the following steps during all transactions and ongoing relationships:
- Ensure **top level commitment** in managing, overseeing and ultimately ensuring that there are no incidents of fraud corruption or bribery throughout the CCGs.
 - **Risk Assessments** shall be carried out in areas vulnerable to bribery & fraud.
 - **Ensure Due Diligence** occurs within all business transactions.
 - Cover all areas of risk with clear, practical and accessible policies and procedures that are applicable to the CCG's employees and its business partners.
 - **Embed** anti-bribery & counter fraud measures into internal controls.
 - **Monitor and Review** progress to obtain assurance that adequate measures are in place against bribery & fraud.
 - **Communicate** the importance of this issue to all members of staff, partnering organisations and contractors.

3.4 Aims and objectives

This policy relates to all forms of Fraud, Bribery and Corruption and is intended to provide direction and help to employees who may identify suspected fraud. It provides a framework for responding to suspicions of fraud, advice and information on various aspects of fraud and implications of an investigation. It is not intended to provide a comprehensive approach to preventing and detecting Fraud, Bribery and Corruption. The overall aims of this policy are to:

- **Improve** the knowledge and understanding of everyone in the CCGs, irrespective of their position, about the risk of Fraud, Bribery and Corruption within the organisation and its unacceptability
- **Assist** in promoting a climate of openness and a culture and environment where staff feel able to raise concerns sensibly and responsibly
 - **Set out** the CCGs responsibilities in terms of the deterrence, prevention, detection and investigation of Fraud, Bribery and Corruption
 - **Ensure** the appropriate sanctions are considered following an investigation, which may include any or all of the following:
 - criminal prosecution
 - civil prosecution
 - Internal disciplinary action.
 - external action (i.e. referral to professional regulatory body)

3.5 Scope

This policy applies to all employees of the CCGs, regardless of position held, as well as consultants, vendors, contractors, and/or any other parties who have a business relationship with the CCGs; it will be brought to the attention of all employees and form part of the induction process for new staff.

4. DEFINITIONS

4.1 NHS Counter Fraud Authority (NHSCFA)

The NHSCFA has direct responsibility under Secretary of State Directions to NHS CCGs and Special Health Authorities 2017 for developing policy and strategy and for all operational work to counter Fraud Bribery and Corruption, other than that which is separately conducted by CCG. It provides advice, guidance and the setting and monitoring of standards. Operationally, it has responsibility for ensuring that all instances of suspected Fraud Bribery and Corruption within the NHS are properly investigated, whether by NHSCFA or the nominated and accredited CFS. All investigations will be conducted in accordance with NHSCFA guidelines.

4.2 Counter Fraud Specialist (CFS)

The CCGs' approach to Fraud Bribery and Corruption reflects the principles outlined in Secretary of State Directions to NHS CCGs and Special Health Authorities 2017:

Both the public and NHS staff play a part in fighting fraud to raise fraud awareness, and enforce the message that fraud within the NHS is unacceptable and will not be tolerated. The people within the NHS who value the services provided, and disapprove of fraud, are the most effective deterrent.

Publicity about counter fraud measures also seeks to deter those who perpetrate or consider perpetrating fraud.

If fraudsters cannot be deterred, they must be prevented from succeeding.

Robust systems and controls are essential, so that fraud, if attempted, will fail.

The CCGs have measures to reduce the likelihood of fraud occurring, including Standing Orders, Standing Financial Instructions, an Assurance Framework, and documented procedures and controls. The CCGs are also subject to external scrutiny by the:

Department of Health and Social Care

External Auditors

Internal Auditors

NHSE, particularly regarding Primary Care Commissioning

Part of the assurance regime upon which these and others rely is annual compliance with the NHSCFA Standards for Providers via a self-assessment process.

4.3 Fraud (Legislation Fraud Act 2006)

Fraud Act 2006. Available at: <http://www.legislation.gov.uk/ukpga/2006/35/contents>
"Fraud by False Representation" defined by Section 2 of the Act as a case where a person makes "any representation as to fact or law express or implied which they know to be untrue or misleading.

"Fraud by failing to disclose information" defined by Section 3 of the Act as a case where a person fails to disclose any information to a third party when they are under a legal duty to disclose such information.

“Fraud by abuse of position” defined by Section 4 of the Act as a case where a person occupies a position where they are expected to safeguard the financial interests of another person, and abuses that position; this includes cases where the abuse consisted of an omission rather than an overt act.

Put simply, fraud is a dishonest act of deception intended for personal gain or to cause a loss to another party.

4.4 Bribery (Legislation Bribery Act 2010)

On 8 April 2010 the Bribery Act 2010 received Royal Assent. This Act came into force on 1 July 2011.

Available at: www.legislation.gov.uk/ukpga/2010/23/data.pdf

The Act defines bribery as giving or receiving a financial or other advantage in connection with the improper performance as a position of CCGs, or a function that is expected to be performed impartially or in good faith.

Bribing anybody is absolutely prohibited. The CCG employees will not pay a bribe to anybody. This means that you will not offer, promise, reward in any way or give a financial or other advantage to any person in order to induce that person to perform his/her function or activities improperly.

It does not matter whether the other person is a UK or foreign public official, political candidate, party official, private individual, private or public sector employee or any other person (including creating the appearance of an effort to improperly influence another person).

Bribery does not have to involve cash or an actual payment exchanging hands and can take many forms such as a gift, lavish treatment during a business trip or tickets to an event.

Some simple examples follow;

Being Bribed – Accepting money or other benefit from a third party in return for considering or taking action in their favour.

Making a Bribe – Offering money or other benefit to a third party with the intention of them considering or taking action to your benefit.

Failing to Prevent Bribery – Failing to prevent third parties and contractors being or making bribes which subsequently impact upon the CCGs.

4.5 Corruption

Is defined as the “offering, giving, soliciting or acceptance of an inducement or reward, which may influence a person to act against the interest of the organisation”.

4.6 The Computer Misuse Act 1990

The Computer Misuse Act 1990. Available at:

<http://www.legislation.gov.uk/ukpga/1990/18/contents>

The Computer Misuse Act 1990 includes such offences as:
Unauthorised access to computer material which includes ID and password misuse, to alter, copy delete or move a program or data or simply to output a program or data, laying a trap to obtain a password.
Unauthorised access to a computer with intent, this includes gaining access to financial or administrative records.
Unauthorised modification of computer material including destroying another's files creation of a virus, introduction of a virus and any deliberate action to cause a system malfunction.

Any examples of the above must be reported by the Head of Information Security to the CFS.

4.7 Theft Act 1968

Theft is defined as dishonestly appropriating property belonging to another with the intention of permanently depriving them of it (i.e. stealing). Fraud is distinct from theft because it involves an element of deception – making a false representation. All instances of theft within the CCGs should be referred to the CCG's LSMS (Local Security Management Specialist).

4.8 General Data Protection Regulations / Data Protection Bill 2018

The General Data Protection Regulation (GDPR) is EU legislation which is underpinned in the UK by the 2018 Data Protection Bill. It applies to all organisations or entities which process the personal information of individuals.

GDPR gives people whose data is stored by organisations the right to know what is done with that information, and rights over what happens to it and where it may be transferred.

GDPR recognises the importance of fraud prevention within two of its recitals:

Recital 47: "The processing of personal data strictly necessary for the purposes of preventing fraud also constitutes a legitimate interest of the data controller concerned..."

Recital 71: "decision-making based on ... profiling should be allowed where expressly authorised by ... law ... including for fraud or tax evasion monitoring and prevention purposes"

There is also an important exemption to the data subjects' right to erasure of their personal data when this is required for the "establishment, exercise or defence of legal claims."

CCGs demonstrate their compliance with the legislation mainly through the processes in the NHS Information Governance Toolkit.

4.9 Employees

For the purposes of this policy, 'employees' include Surrey Heartlands CCGs employees, as well as Governing Body, executive and non-executive members (including co-opted members) and lay and honorary members.

5. CODES OF CONDUCT

The codes of conduct for NHS Governing Bodies and NHS managers set out the key public service values. They state that high standards of corporate and personal conduct, based on the recognition that patients come first, have been a requirement throughout the NHS since its inception.

Staff must be impartial and honest in the conduct of their business and remain above suspicion whilst carrying out their role within the CCGs. A Code of Conduct for NHS Boards was first published, by the NHS Executive, in April 1994 and set out the initial public service values. This has been superseded by the seven fundamental public service values specified in the Nolan report. A further Code of Conduct was issued in October 2002 titled “Code of Conduct for NHS Managers”.

SELFLESSNESS: Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their families or their friends.

INTEGRITY: Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that may influence them in the performance of their official duties.

OBJECTIVITY: In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

ACCOUNTABILITY: Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

OPENNESS: Holders of public office should be as open as possible about all their decisions and the actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

HONESTY: Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

LEADERSHIP: Holders of public office should promote and support these principles by leadership and example.

- Not use their official position for personal gain or to benefit their family or friends; Not to seek advantage or further private business or other interests in the course of their official duties.
- All those who work in the organisation should be aware of, and act in accordance with, these values.

The CCG is committed to an effective Anti-Fraud, Bribery and Corruption Policy designed to:

- reduce fraud to an absolute minimum;
- to put in place arrangements to hold fraud at a minimum level permanently;
- maintain a culture across the organisation in which bribery is unacceptable, and;
- to target more resources at providing better patient care.

The CCGs do not tolerate Fraud Bribery and Corruption. It is committed to creating a culture of honesty and ensuring that Fraud Bribery and Corruption is prevented, detected and dealt with promptly and effectively, whether the perpetrators are inside or outside the CCGs.

Reporting of all frauds and irregularities is essential to ensure:

- Proper investigation by the Counter Fraud Specialist
- Consistent treatment of information regarding Fraud Bribery and Corruption
- The optimum protection of the CCG's interests

The CCG's employees are essential to its opposition to Fraud Bribery and Corruption and the CCGs want all employees to feel confident that they can expose any wrongdoing without risk to themselves. In accordance with the provisions of the Public Interest Disclosure Act 1998, the CCGs have produced a Raising Matters of Concern (Whistleblowing) Policy. This complements the Anti-Fraud, Bribery and Corruption Policy and ensures there is provision for staff to raise concerns through various routes.

Given the mechanisms for raising concerns, they can be addressed without reference to the media. Therefore, the Public Interest Disclosure Act 1998 will not protect an employee who makes a rash disclosure. A rash disclosure includes reporting a matter to the media that could and should have been raised within the CCGs.

6. ROLES & RESPONSIBILITIES

6.1 Role of Surrey Heartlands CCGs

Through our day-to-day work, we are in the best position to recognise any specific risks within our own areas of responsibility. We also have a duty to ensure that those risks – however large or small – are identified and eliminated. Where you believe the opportunity for fraud exists, whether because of poor procedures or oversight, you should report it to your CFS or the NHS Fraud and Corruption Reporting Line.

We will take all necessary steps to counter Fraud, Bribery and Corruption in accordance with this policy, the *NHS Anti-Fraud Manual*, the NHSCFA policy statement 'Applying Appropriate Sanctions Consistently' and any other relevant guidance or advice issued by NHS CFA.

We will adopt the four key principles that are set out in the NHS CFA strategy 2017. A key element in achieving this is the appointment of a CFS.

Inform & Involve

We will use Counter Fraud publicity material to persuade those who work in the CCGs, that Fraud, Bribery and Corruption is serious and takes away resources from important services. Such activity will demonstrate that Fraud, Bribery and Corruption is not acceptable and is being tackled.

Investigate, sanction, and seek redress.

The CFS will be professionally trained and accredited to carry out investigations into suspicions of Fraud, Bribery and Corruption to the highest standards. In liaison with NHSCFA, the CFS will professionally investigate all suspicions of Fraud, Bribery and Corruption to prove or disprove the allegation.

Following the conclusion of an investigation, if there is evidence of fraud, available sanctions will be considered in accordance with the guidance issued by NHSCFA – ‘Applying Appropriate Sanctions Consistently’. This may include criminal prosecution, civil proceedings and disciplinary action, as well as referral to a professional or regulatory body.

Recovery of any losses incurred will also be sought through civil proceedings, if appropriate, under the Proceeds of Crime Act 2002, to ensure losses to the CCGs and the NHS are returned for their proper use.

The Chief Finance Officer is liable to be called to account for specific failures in the CCGs systems of internal controls. However, responsibility for the operation and maintenance of controls falls directly to Line Managers and requires the involvement of all CCG employees. We, therefore, has a duty to ensure employees who are involved in, or who are managing internal control systems, receive adequate training and support in order to carry out their responsibilities. Therefore, the Chief Finance Officer will monitor and ensure compliance with this policy.

Continuously review and Hold to Account

Fraud is constantly evolving and continuous re-evaluation and improvement is needed to ensure that the CCGs keeps ahead of the problem. Where this does not take place, or where there is a reluctance to do so, then organisations can be held to account for their inaction.

The CCGs also have a duty to ensure that they provide a secure environment in which to work, and one where people are confident about raising concerns without worrying that it will reflect badly on them. This extends to ensuring that staff feel protected when carrying out their official duties and are not placed in a vulnerable position. If staff have concerns about any procedures or processes that they are asked to be involved in, we have a duty to ensure that those concerns are listened to and addressed.

6.2 The Governing Bodies / Audit Committees

The Governing Bodies, particularly via the Audit Committees have a duty to provide adequate governance and oversight to ensure that its funds, people and assets are adequately protected against criminal activity including fraud, bribery and corruption. The Governing Body are also responsible for setting the tone across the organisation, and specifically that fraud, bribery and corruption will not be tolerated.

6.3 The Chief Officer / Joint Accountable Officer

The CCG's Chief Officer, as the three CCGs' Joint Accountable Officer (JAO), has overall responsibility for securing funds, assets and resources entrusted to it and this includes preventing instances of fraud, bribery and corruption which may threaten those resources. The JAO must ensure that adequate policies and procedures are in place to protect the organisation and the public funds it receives.

6.4 The Chief Finance Officer

The Standard NHS Contract, and the NHS Counter Fraud and Corruption Manual, states that the Chief Finance Officer (CFO), in conjunction with the JAO, are ultimately responsible for countering fraud and bribery in the CCGs.

The CFO in conjunction with the JAO maintains financial procedures and systems and applies the principles of separation of duties and internal checks to supplement those procedures and systems.

The CFO is responsible for making sure that adequate provision for counter fraud work is made available in the CCGs.

The CFO is responsible for the appointment of an accredited Counter Fraud Specialist (CFS) to undertake counter fraud work within the CCGs specifically related to the aims and objectives recorded above.

The CFO is responsible for the final decision on suspected fraud cases.

The CFO is the CCG's nominated Lead Director and is charged with the duty of monitoring compliance with The Bribery Act (2010). The CFO will ensure that all staff have the opportunity to receive regular fraud and bribery awareness training.

The Standard NHS Contract, and the NHS Counter Fraud and Corruption Manual requires the CFO to nominate a CFS. The CFS will report regularly to the CFO and the Audit Committees.

6.5 The Counter Fraud Specialist (CFS)

The Directions to NHS Bodies on Counter Fraud Measures 2013 require the CCGs to appoint and nominate a CFS. The CFS's role is to ensure that all cases of actual or suspected Fraud, Bribery and Corruption are notified to the CFO and reported accordingly.

The CFS will regularly report to the Chief Finance Officer on the progress of the investigation and when/if referral to the police is required.

The CFS will:

- ensure that the Chief Finance Officer is informed about all referrals/cases
- be responsible for the day-to-day implementation of the three key principles of counter Fraud, Bribery and Corruption activity as set out in the NHSCFA strategy and, in particular, the investigation of all suspicions of fraud
- investigate all cases of fraud
- in consultation with the Chief Finance Officer, report any case to the police or NHSCFA as agreed and in accordance with NHSCFA guidance
- report any case and the outcome of the investigation through the NHS Protect national case management system (FIRST)
- ensure that other relevant parties are informed where necessary, e.g. Human Resources

(HR) will be informed if an employee is the subject of a referral
ensure that the CCGs' incident reporting systems are followed
ensure that any system weaknesses identified as part of an investigation are followed up
with management and reported to internal audit
ensure that the Chief Finance Officer is informed of regional team investigations, including
progress updates
ensure cases are handled appropriately, taking account of best practice and the
employment relationship

The CFS will not have responsibility for or be in any way engaged in the management of
security for any NHS body.

The CFS is authorised to receive inquiries from staff confidentially and anonymously.
They are also authorised to decide whether the matter raised needs to be
investigated and will report accordingly to the CFO.

The CFS will regularly review the CCG's anti bribery arrangements and report any
issues to the Chief Finance Officer and the IAGC.

The CFS will ensure that CCG-wide fraud and bribery training materials are relevant
and current, and will provide additional targeted face to face training as required in
agreement with the Chief Finance Officer.

6.6 Managers

Managers must be vigilant and ensure that CCG Policies and Procedures to guard
against Fraud, Bribery and Corruption are followed. They should be alert to the
possibility that unusual events or transactions could be symptoms of Fraud, Bribery
and Corruption. If they have any doubts, they must seek advice from their nominated
CFS.

Managers must instil and encourage an Anti-Fraud, Bribery and Corruption culture
within their team and ensure that information on procedures is made available to all
employees. The CFS will proactively assist the encouragement of an anti-fraud
culture by undertaking work that will raise fraud awareness.

All instances of actual or suspected Fraud, Bribery or Corruption which come to the
attention of a manager must be reported immediately. It is appreciated that some
employees will initially raise concerns with their manager. However, in such cases,
managers must not attempt to investigate the allegation themselves; they have the
clear responsibility to refer the concerns to their nominated CFS as soon as possible.

Line managers at all levels have a responsibility to ensure that an adequate system
of internal control exists within their areas of responsibility, that controls operate
effectively and are under constant review. The responsibility for the prevention and
detection of Fraud, Bribery and Corruption therefore primarily rests with managers
but requires the co-operation of all employees.

As part of that responsibility, line managers need to:

inform staff of the CCG's code of business conduct and Fraud, Bribery and Corruption
Policy as part of their induction process, paying particular attention to the need for accurate

completion of personal records and forms
ensure that all employees for whom they are accountable are made aware of the requirements of the policy
enforce disciplinary action for staff who do not comply with CCG Policies and Procedures
assess the types of risk involved in the operations for which they are responsible
ensure that adequate control measures are put in place to minimise the risks. This must include clear roles and responsibilities, supervisory checks, staff rotation (particularly in key posts), separation of duties wherever possible so that control of a key function is not invested in one individual, and regular reviews, reconciliations and test checks to ensure that control measures continue to operate effectively
ensure that any use of computers by employees is linked to the performance of their duties within the CCGs and contact the CFS immediately in all cases where there is suspicion that IT is being used for fraudulent purposes or where breaches of the Computer Misuse Act 1990 occur.
be aware of the CCG's Fraud, Bribery and Corruption Policy and the rules and guidance covering the control of specific items of expenditure and receipts
identify financially sensitive posts
ensure that controls are being complied with
contribute to their director's assessment of the risks and controls within their business area, which feeds into the CCGs and the Department of Health and Social Care's Accounting Officer's overall statements of accountability and internal control.

6.7 All employees

All employees are required to comply with CCGs Policies and Procedures and apply best practice in order to prevent Fraud Bribery and Corruption.

All those who work within the CCGs should be aware of, and act in accordance with the public service values and the [Nolan principles for standards in public life](#) as set out above.

All employees have a duty to ensure that public funds are safeguarded, whether or not they are involved with cash or payment systems, receipts or dealing with contractors or suppliers. Employees also have a duty to protect the CCG's assets, including information, goodwill and property. Through the day-to-day work, employees are in the best position to recognise any specific risks within their own areas of responsibility. They have a duty to ensure that those risks, however large or small, are identified and eliminated. Where employees believe the opportunity for fraud exists, whether because of poor procedures or oversight, they should report it to the CFS, the NHS Fraud and Corruption Reporting Line, or the online NHS Fraud reporting form.

The CCGs Standing Orders, Prime Financial Policies and other policies and procedures place an obligation on all employees and Governing Body Members (Lay and Clinical) to act in accordance with best practice in order to prevent Fraud, Bribery and Corruption. Employees should familiarise themselves with the key CCG Policies set out in the introduction to this policy, all of which are available on the Staff Intranet.

Employees are expected to act in accordance with the standards laid down by their

professional institutes, where applicable, and have a personal responsibility to ensure that they are familiar with them. Employees also have a duty to protect the assets of the CCGs, including information, goodwill, reputation and property.

In addition, all employees have a responsibility to comply with all applicable laws and regulations relating to ethical business behaviour, procurement, personal expenses, conflicts of interest, confidentiality and the acceptance of gifts and hospitality. This means, in addition to maintaining the normal standards of personal honesty and integrity, all employees should always:

- Avoid acting in any way that might cause others to allege or suspect them of dishonesty.
- Behave in a way that would not give cause for others to doubt that the CCG's employees deal fairly and impartially with official matters.
 - Be alert to the possibility that others might be attempting to deceive.

All employees have a duty to ensure that public funds are safeguarded, whether or not they are involved with cash or payment systems, receipts or dealing with contractors or suppliers.

If an employee suspects that there has been Fraud Bribery or Corruption, or has seen any suspicious acts or events, they must report the matter to their nominated CFS.

Any employee that suspects fraud, bribery or corruption should report this to the CFS immediately. Concerns can be raised direct to the CFS or by completing the NHS Fraud Reporting Form alternatively, it can be reported to NHS Counter Fraud Authority at <https://cfa.nhs.uk> or by telephoning the Fraud and Corruption Reporting Hotline on 0800 028 40 60

6.8 Internal and External Audit

Internal Auditors will undertake a programme of Audits as Directed by the Audit Committees, to include reviewing controls and systems and ensuring compliance with financial transactions.

The external auditors have a statutory duty to ensure that the CCG has in place adequate arrangements for the prevention and detection of fraud and corruption.

Any incident or suspicion that comes to internal or external audit's attention will be passed immediately to the nominated CFS. The outcome of the investigation may necessitate further work by Internal or External audit to review systems.

6.9 Human Resources

HR will liaise closely with managers and the CFS from the outset if an employee is suspected of being involved in fraud and/or corruption, in accordance with agreed liaison protocols. HR staff are responsible for ensuring the appropriate use of the CCG's disciplinary procedure. The HR department will advise those involved in the investigation on matters of employment law and other procedural matters, such as disciplinary and complaints procedures, as requested. Close liaison between the CFS and HR will be essential to ensure that any parallel sanctions (i.e. criminal, civil

and disciplinary sanctions) are applied effectively and in a coordinated manner and that staff are at all times treated in accordance with CCG values.

HR will take steps at the recruitment stage to establish, as far as possible, the previous record of potential employees, as well as the veracity of required qualifications and memberships of professional bodies, in terms of their propriety and integrity. In this regard, temporary and fixed-term contract employees are treated in the same manner as permanent employees.

The Chief Finance Officer is the nominated Board Level Representative for the Bribery Act.

6.10 Information Management and Technology

The Head of IT (or equivalent) will contact the CFS immediately in all cases where fraudulent use of information technology or breaches of the [Computer Misuse Act 1990](#) is suspected. HR will also be informed if there is a suspicion that an employee is involved.

7. THE RESPONSE PLAN

7.1 Bribery and corruption

The CCGs have conducted risk assessments in line with Ministry of Justice guidelines to assess how bribery and corruption may affect the organisation, and to implement proportionate procedures to mitigate identified risks.

The CCGs have implemented key Policies and Procedures covering declarations of interest, and hospitality and gifts, which all staff are required to adhere to.

Refer to 'Further Reading' within this Policy

7.2 Reporting fraud, bribery or corruption

This section outlines the action to be taken if Fraud, Bribery or Corruption is discovered or suspected.

If an employee has any of the concerns mentioned in this document, they must inform the nominated CFS or CCG's Chief Finance Officer immediately:

CFS: Melanie Alflatt – 07899 981415 – melanie.alflatt@nhs.net

CFO: Karen McDowell – 07814 710426 - karen.mcdowell2@nhs.net

If the Chief Finance Officer or CFS is implicated, they should report it to the NHS CFA via the NHS Fraud and Corruption Reporting Line on 0800 028 4060, or complete the online fraud reporting form at www.cfa.nhs.uk/reportfraud.

Form 1 (see *Appendices*) provides a reminder of the key contacts and a checklist of the actions to follow if Fraud, Bribery and Corruption, or other illegal acts, are discovered or suspected. Managers are encouraged to copy this to staff and to place it on staff notice boards in their department.

Employees can also call the NHS Fraud and Corruption Reporting Line on Freephone 0800 028 4060, or complete the online fraud reporting form at www.cfa.nhs.uk/reportfraud. This provides an easily accessible route for the reporting of genuine suspicions of fraud within or affecting the NHS. It allows NHS staff that are unsure of internal reporting procedures to report their concerns in the strictest confidence. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so.

Anonymous letters, telephone calls, etc. are occasionally received from individuals who wish to raise matters of concern, but not through official channels. While the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern and will always be taken seriously.

The CFS will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised. If the allegations are found to be malicious, they will also be considered for further investigation to establish their source.

Staff should always be encouraged to report reasonably held suspicions directly to the CFS. You can do this by filling in the NHS Fraud, Bribery and Corruption Referral Form (**Form 2**) or by contacting the CFS by telephone or email using the contact details supplied on **Form 1** (see *Appendices*).

The CCGs want all employees to feel confident that they can expose any wrongdoing without any risk to themselves. In accordance with the provisions of the Public Interest Disclosure Act 1998, the CCGs have produced a Raising Matters of Concern (Whistleblowing) Policy. This procedure is intended to complement the CCG's Fraud, Bribery and Corruption Policy and code of business conduct and ensures there is full provision for staff to raise any concerns with others if they do not feel able to raise them with their line manager/management chain.

7.3 Disciplinary action

A CFS investigation may identify conduct or performance that may be of concern to the CCGs or the employees Professional Body, whether related to fraud or otherwise. Relevant CCG Policies and procedures, including Disciplinary procedures, will be followed, where such concerns arise. This may result in further investigations, disciplinary hearings and disciplinary sanctions where appropriate, or notification to the employees Professional body. Any internal processes deemed necessary will be coordinated with external processes, such as criminal proceedings, to take place at an appropriate time. The CCGs "Parallel Criminal and Disciplinary Investigations Policy" contains details of this process.

It should be noted, however, that the duty to follow disciplinary procedures would not override the need for legal action to be taken (e.g. consideration of criminal action). In the event of doubt, legal statute will prevail.

7.4 Police involvement

In accordance with the *NHSCFA guidance*, the Chief Finance Officer, in conjunction

with the CFS, will decide whether or not a case should be referred to the police. Any referral to the police will not prohibit action being taken under the local disciplinary procedures of the CCGs.

7.5 Managing the investigation

The CFS, in consultation with The CCG's Chief Finance Officer, will investigate allegations in accordance with procedures documented in the *NHS Anti-Fraud Manual* issued by NHSCFA.

The CFS must be aware that staff under an investigation which could lead to disciplinary action have the right to be represented at all stages. In certain circumstances, evidence may best be protected by the CFS recommending to the CCG that the staff member is suspended from duty. The CCGs will make a decision based on HR advice on the disciplinary options, which include suspension.

The CCGs will follow their disciplinary procedure if there is evidence that an employee has committed an act of fraud or corruption.

7.6 Gathering evidence

The CFS will take control of any physical evidence, and record this in accordance with the procedures outlined in the *NHS Anti-Fraud Manual*. If evidence consists of several items, such as many documents, CFS's should record each one with a separate reference number corresponding to the written record.

Interviews under caution or to gather evidence will only be carried out by the CFS, if appropriate, or the investigating police officer in accordance with the Police and Criminal Evidence Act 1984 (PACE). The CFS will take written statements where necessary.

All employees have a right to be represented at internal disciplinary interviews by a trade union representative or accompanied by a friend, colleague or any other person of their choice, not acting in a legal capacity in connection with the case.

The application of the Counter Fraud, Bribery and Corruption Policy will at all times be in tandem with all other appropriate CCG policies, e.g. Standing Financial Instructions (SFI's).

7.7 Reporting the results of the investigation

The investigation process requires the CFS to review the systems in operation to determine whether there are any inherent weaknesses. Any such weaknesses identified should be corrected immediately.

If Fraud Bribery or Corruption is found to have occurred, the CFS will prepare a report for the Chief Finance Officer and the next CCG Audit Committee meeting, the report will also be available to the CCG's Governing Body, setting out the following details:

- the circumstances
- the investigation process
 - the estimated loss
- the steps taken to prevent a recurrence

- the steps taken to recover the loss.

8. SANCTIONS AND REDRESS

8.1 Seeking Sanctions

The CCGs are committed to reducing the effect of fraud on its finances as far as is possible.

The CCGs have therefore adopted the NHSCFA approach to pursuing sanctions in cases of fraud, bribery and corruption is that the full range of possible sanctions – including criminal, civil, disciplinary and regulatory – should be considered at the earliest opportunity and any or all of these may be pursued where and when appropriate. The consistent use of an appropriate combination of investigative processes in each case demonstrates The CCGs are committed to take fraud, bribery and corruption seriously and ultimately contribute to the deterrence and prevention of such actions.

The CCGs endorse the NHSCFA approach and adopts the principles contained within their policy entitled, 'Parallel Criminal and Disciplinary Investigations'; as well as complying with the provisions of the NHSCFA Anti-Fraud Manual with regard to applying sanctions where fraud, bribery or corruption is proven. The CCGs maintain an internal joint-working and data sharing protocol between the CFS and the HR department which also covers their respective investigative duties.

There is executive support on applying sanctions in cases of fraud, bribery and corruption. The CCGs seek to publicise its sanctions, where appropriate, in order to maximise their deterrent value.

This section outlines the sanctions that can be applied against individuals who commit fraud, bribery and corruption against the CCGs and should be read in conjunction with the CCG Disciplinary Policy. Where staff are believed to be involved in any fraud, the CFS will inform the CFO and follow the CFS/HR Protocol. Further details can be found in the CCG Disciplinary Policy, and can be found under Policies on the CCGs Internet. The types of sanction which the CCGs may apply when an offence has occurred are as follows:

1) No further action.

In some cases (taking into consideration all the facts of a case), it may be that the CCG, under guidance from the CFS and with the approval of the Chief Finance Officer, decides that no further recovery action is taken.

2) Criminal investigation.

The CFS will work in partnership with NHSCFA the police and/or the Crown Prosecution Service, to bring a case to court against an alleged offender. Outcomes can range from a criminal conviction to fines and imprisonment.

Criminal investigations are primarily used for dealing with any criminal activity. The main purpose is to determine if activity was undertaken with criminal intent.

Application can also be made to the criminal court for recovery via compensation order of action under POCA.

3) Disciplinary action.

Disciplinary procedures will be initiated where an employee is suspected of being involved in a fraudulent or illegal. The appropriate senior manager, in conjunction with the HR department, will be responsible for initiating any necessary disciplinary action.

The CFS remit should cover criminal investigations only, and NHSCFA does not endorse the use of CFS provision for carrying out disciplinary investigations at a health body.

Where both criminal and disciplinary investigations are conducted regarding the same incident, close and supportive liaison between the two is needed. The CCGs have developed a Joint CFS and HR Protocol for Parallel and Criminal Sanctions where such instances occur.

4) Professional body disciplinary.

During an investigation, if clear evidence exists of a healthcare professional's involvement in fraud or corruption, the appropriate regulatory body will be informed so they can consider whether Fitness to Practice procedures should be invoked. The regulatory body have statutory powers to place conditions on, suspend or remove the registration of professionals whose fitness to practice has been impaired.

It is important that sanctions are applied in a consistent manner according to the seriousness of the crime involved. NHSCFA has produced a policy statement on [Applying Appropriate Sanctions Consistently](#).

In cases of serious fraud and corruption the CCGs will seek to apply all appropriate sanctions (parallel sanctions) For example: disciplinary action relating to the status of the employee in the NHS; criminal law to apply an appropriate criminal penalty upon the individual(s), and a possible referral of information and evidence to external bodies – for example, professional bodies – if appropriate.

It is important that sanctions are applied in a consistent manner according to the seriousness of the crime involved. A policy statement on applying appropriate sanctions consistently has been produced by NHSCFA. This is available at:

http://www.nhsbsa.nhs.uk/Documents/CounterFraud/Applying_appropriate_sanctions_consistently_-_Policy_statement_April_2013.pdf

8.2 Seeking Redress

The CCGs are committed to seeking the recovery of all funds that have been diverted by any criminal action. One of the key aims of the CCGs Counter Fraud Strategy is to maximise resources for the provision of high-quality patient care and services, thus where there is evidence that fraud has occurred it will seek to recover this as soon as practicable after the loss has been identified.

The seeking of financial redress or recovery of losses should be considered in all

cases of fraud, bribery or corruption that are investigated by either the CFS or NHS CFA where a loss is identified. Redress allows resources that are lost to fraud, bribery and corruption to be returned to the NHS for use as intended, for the provision of high-quality patient care and services. This will limit the financial impact, help to deter others from committing fraud and minimise any reputational damage to the CCGs.

Action to recover losses should be commenced as soon as practicable after the loss has been identified, and in accordance with the Counter Fraud Strategy the CCGs shall seek recovery of any monies that have been lost due to fraud and corruption. It is also important that sanctions are applied in a consistent manner. At all times the CCGs procedure for debt recovery shall be applied and modified where necessary

Recovery can take place in a number of ways, the following procedure will be adopted to recover monies that have been lost due to fraud and corruption;

1) Voluntary Repayment

An attempt will be made to obtain a voluntary repayment from the member of staff responsible for the loss.

2) Civil Recovery

If the member of staff declines then appropriate legal action will be considered, normally through the civil courts.

The civil recovery route is also available to the CCGs if this is cost-effective and desirable for deterrence purposes. This could involve a number of options such as applying through the Small Claims Court and / or recovery through debt collection agencies. Each case will be discussed with the Chief Finance Officer to determine the most appropriate action.

3) Deductions from Salary

Arrangements may be made to recover losses via payroll if the subject is still employed by the CCGs. In all cases, current legislation must be complied with. It is important that sanctions are applied in a consistent manner according to the seriousness of the crime involved. A policy statement on [applying appropriate sanctions consistently](#) has been produced by NHSCFA.

4) Proceeds of Crime Act

The NHS CFS can also apply to the courts to make a restraining order or confiscation order under the Proceeds of Crime Act 2002 (POCA). This means that a person's money is taken away from them if it is believed that the person benefited from the crime. It could also include restraining assets such as property owned by the member of staff during the course of the investigation

For employees in the NHS Pension scheme, any benefits or other amounts payable can be reduced. The Pensions Act 1995 specifically states: If a loss of public funds occurs because of a member's criminal, negligent or fraudulent act or omission, the Secretary of State, may reduce any benefits or other amounts payable to, or in respect of, the member by any amount equal to the loss

8.3 Timescales

Action to recover losses will be commenced as soon as practicable after the loss has been identified. Given the various options open to the CCGs, it may be necessary for various departments to liaise about the most appropriate option.

8.4 Recording

In order to provide assurance that policies were adhered to, the Chief Finance Officer will maintain a record highlighting when recovery action was required and issued and when the action taken. This will be reviewed and updated on a regular basis.

9. REVIEW

9.1 Monitoring Compliance

As part of any investigation the CFS will report any breaches of the Anti-Fraud, Bribery and Corruption Policy to:

the Chief Finance Officer as the Lead Director on a bi-monthly basis;
the Audit Committee on a quarterly basis.

Remedial recommendations on areas of vulnerability or where compliance can be improved will be included in the investigation report provided to the Chief Finance Officer at the conclusion of an investigation. This report will be disseminated to the relevant area and an action plan developed for implementation. Follow up of any action plan will be agreed to ensure that improvement occurs.

The CFS will report on training provided to staff in Progress Reports to the IAGC.

An annual review of performance will be undertaken via the NHS Counter Fraud Authority "Self Review Tool" and a staff awareness survey. Both will be reported back to the Audit Committee.

9.2 Standards / Key Performance Indicators

The CCGs are required to complete the NHSCFA Self Review Tool and Annual Report by the 31st March each year and submit these annually to NHSCFA. The CCGs must mark themselves against each standard in the Standards for Providers as either Compliant (green), Partially Compliant (Amber) or Non-Compliant (Red). A work-plan is required to address all non-compliant standards which will be monitored by the Audit Committee.

An assessment process may be conducted by NHSCFA Quality and Compliance team in partnership with the CCGs. This is a means of evaluating the CCG's effectiveness in dealing with the fraud, bribery and corruption risks it faces through one of four types of assessment: Full, Focused, Thematic or Triggered.

9.3 Monitoring and auditing of policy effectiveness.

Monitoring of policy effectiveness is essential to ensure that controls are appropriate and robust enough to prevent or reduce fraud. On-going review of system controls

and identification of weaknesses in processes, resulting in action plans or recommendations that are implemented, will all be taken into consideration when this policy is reviewed to ensure the policy remains up to date.

Compliance with the effectiveness of this policy will also be monitored by the Audit Committee via interim reports from the Counter Fraud Specialist throughout the year.

9.4 Dissemination of the Policy.

This policy applies to all CCG staff, Directors, Lay Members and Contractors. The policy will be referenced at all staff inductions, anti-fraud presentations and at Team Meetings and is available to all staff via the CCG's Intranet.

9.5 Review of the Policy.

The Policy will be reviewed bi-annually by the CFS in conjunction with the CCGs. unless a review is necessary due to legislative change.

9.6 Awareness, Training and Implementation

The CFS raises fraud awareness by arranging road shows, giving presentations to staff teams, keeping the fraud awareness page on the Intranet updated and participating in the Induction Programme. This policy will be brought to the attention of all employees by the CFS through the induction process for new staff and will be included in the induction of new Non-Executive Directors. The Anti-Fraud Bribery and Corruption Policy is available on the CCGs Intranet to all staff

9.7 Stakeholder, carer and user involvement

The stakeholders involved with the development of this policy have been:

- Human Resources
- Chief Finance Officer
- Counter Fraud Specialist
 - Audit Committee
- CCGs' Governance Team

10. GUIDANCE TO STAFF

Where a member of staff suspects that fraud, bribery or corruption has occurred, or is about to take place, it is important that they contact the CFS, Chief Finance Officer or NHS CFA immediately.

However minor you may believe a matter may be all staff should contact the CFS initially to discuss any concerns; this will enable a fair, consistent, and professional approach. The Police should not be contacted by those raising concerns, any such contact with the Police will be made by the CCGs in agreement with the CFS.

Individuals (be they employees, agency staff, locums, contractors or suppliers) must not communicate with any member of the press, media or another third party about a suspected fraud as this may seriously damage the investigation and any subsequent actions to be taken. Anyone who wishes to raise such issues should discuss the matter with either the Chief Finance Officer or the Chief Executive.

Some examples of types of fraud in the NHS are:

- False overtime and or travel claims
- Working for another organisation whilst on sick leave
 - Failure to work contracted hours
- Providing false information with regard to qualifications and employment history
 - Prescription Fraud
- Abuse of or failure to pay for the cost of NHS mobile and fixed-point telephones
 - Internet misuse
 - Procurement fraud
- Manipulation of CCG records for financial gain
 - Ghost employees
- Excessive packages from company representatives
- The inappropriate use of waivers when awarding contracts

This list is not exhaustive and other areas of suspicion may arise not mentioned here.

If you have a concern about a suspected fraud in the NHS do not be afraid to speak up and report these concerns to the CFS using the form located at the end of this policy. If you are unsure about how you should proceed please refer to Appendix I which provides a useful guide to the “Dos and Don’ts” associated to reporting incidents.

Staff that are subject to any investigation as a result of suspected fraudulent activity can seek the advice of their Union Representative, or take appropriate legal advice.

Suspicious of Fraud can be reported in a number of ways:

- Counter Fraud Specialist – Sarah Pratley 07769 640781 – spratley@nhs.net
- Chief Finance Officer – Karen McDowell – 07814 710426 - karen.mcdowell2@nhs.net
- Or via the NHS Fraud and Corruption Reporting Line on 0800 028 4060, or complete the online fraud reporting form at www.cfa.nhs.uk/reportfraud.

10.1 Remember

You can remain anonymous Fraud and Corruption can make victims of us all. Everyone can help tackle fraud in the NHS. Report your suspicions, the information you provide is confidential.

The CCGs Raising Matters of Concern (Whistleblowing) Policy defines how anyone raising or considering raising concerns has the right to be treated with consideration, dignity and respect and that any victimisation for raising concerns will not be tolerated.

Speaking up about any concern you have at work is really important. In fact, it’s vital because it will help the CCGs to keep improving services for all patients and the working environment.

In accordance with our duty of candour, our senior leaders and entire board are committed to an open and honest culture. We will look into what you say and you will always have access to the support you need.

We positively encourage an open and transparent approach to raising concerns

11. FURTHER READING

Secretary of State Directions to NHS CCGs and Special Health Bodies 2017:

<https://cfa.nhs.uk/resources/downloads/documents/corporate-publications/Directions%20to%20NHS%20bodies%20on%20counter%20fraud.pdf>

NHS Counter Fraud Authority:

<https://cfa.nhs.uk/>

About the NHS Counter Fraud Authority:

<https://cfa.nhs.uk/about-nhscfa/what-we-do>

NHS Counter Fraud Authority Organisational Strategy 2017- 2020:

https://cfa.nhs.uk/resources/downloads/documents/corporate-publications/Leading%20the%20fight%20against%20NHS%20fraud_NHSCFA%20strategy%202017-20.pdf

NHS Counter Fraud Authority Standards for Providers 2017/18

https://cfa.nhs.uk/resources/downloads/standards/Fraud_Standards_for_providers_2017-18.pdf

**Countering Fraud in the NHS – the Professional and Ethical Approach
Department of Health 1999**

[http://www.nhsbsa.nhs.uk/CounterFraud/Documents/counterfraudethical\(1\).pdf](http://www.nhsbsa.nhs.uk/CounterFraud/Documents/counterfraudethical(1).pdf)

NHS England Tackling Fraud, Bribery & Corruption: Policy and Corporate Procedures.

www.england.nhs.uk/wp-content/uploads/2013/11/frd-brib-corr-pol.pdf

NHS Finance Governance Tool for Clinical Commissioning Groups.

www.england.nhs.uk/wp-content/uploads/2012/09/fin-gov-tool.pdf

The Code of Conduct for NHS Manager 2002;

http://www.nhsemployers.org/~media/Employers/Documents/Recruit/Code_of_conduct_for_NHS_managers_2002.pdf

Standards for members of NHS boards and CCG Governing Bodies in England 2012;

<http://www.professionalstandards.org.uk/docs/psa-library/november-2012---standards-for-board-members.pdf?sfvrsn=0>

Acts of Parliament.

Bribery Act 2010. www.gov.uk/government/publications/bribery-act-2010-guidance
www.legislation.gov.uk/ukpga/2010/23/notes/division/5/22

Computer Misuse Act 1990. www.legislation.gov.uk/ukpga/1990/18/contents

Fraud Act 2006. www.cps.gov.uk/legal/d_to_g/fraud_act/
www.legislation.gov.uk/ukpga/2006/35/contents

Police and Criminal Evidence Act 1984
www.legislation.gov.uk/ukpga/1984/60/contents

Proceeds of Crime Act 2002. www.legislation.gov.uk/ukpga/2002/29/contents
[www.gov.uk/government/uploads/system/uploads/attachment_data/file/317904/Fact Sheet - Overview of POCA 2 .pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/317904/Fact_Sheet_-_Overview_of_POCA_2_.pdf)

Public Interest Disclosure Act.
www.gov.uk/government/publications/the-public-interest-disclosure-act

Appendix A - NHS Fraud Reporting Form

Surrey Heartlands CCGs NHS Fraud and Corruption and Bribery Referral Form

All referrals will be treated in confidence and investigated by professionally trained staff

Note: *Anonymous referrals are accepted but may delay any investigation.*

1. Date

2. Anonymous application <Delete as appropriate>

Yes (If 'Yes' go to section 6) or No (If 'No' complete sections 3–5)

3. Your name

4. Your organisation/profession

5. Your contact details

6. Suspicion

7. Please provide details including the name, address and date of birth (if known) of the person to whom the allegation relates.

8. Possible useful contacts

9. Please attach any available additional information.

Submit the completed form (in a sealed envelope marked 'Restricted – Management' and 'Confidential') for the personal attention of Melanie Alflatt, Tiaa, Suite 1, 50 Churchill Square, Kings Hill ME19 4YU

Appendix B - Procedural Document Checklist for Approval

Procedural document checklist for approval			
To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.			
	Title of document being reviewed:	Yes/No/Unsure	Comments/Details
	Policy framework for the development and management of procedural documents		
A	Is there a sponsoring director?	Yes	Chief Finance Officer
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	External Auditors Staff Partnership Forum
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target group clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
6.	Approval		
	Does the document identify which committee/group will approve it?	Yes	Audit Committee to review and recommend approval from the

			Governing Body
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how the document will be disseminated and implemented amongst the target group? Please provide details.	Yes	Published on the website Significant changes to be highlighted in e-brief following approval
8.	Process for Monitoring Compliance		
	Have specific, measurable, achievable, realistic and time-specific standards been detailed to monitor compliance with the document?	Yes	
9.	Review Date		
	Is the review date identified?	Yes	
10.	Overall Responsibility for the Document		
	Is it clear who will be responsible for implementing and reviewing the documentation i.e. role of author/originator?	Yes	

Director Approval

On approval, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

Name		Date	
Signature			

Committee Approval

On approval, Chair to sign and date.

Name		Date	
Signature			

Appendix C Compliance & Audit Table

Criteria	Measurable	Frequency	Reporting to	Action Plan/Monitoring

NHS Fraud, Bribery and Corruption: do's and don'ts
A desktop guide for Surrey Heartlands Clinical Commissioning Groups

FRAUD is the dishonest intent to obtain a financial gain from, or cause a financial loss to, a person or party through false representation, failing to disclose information or abuse of position.

BRIBERY / CORRUPTION is the deliberate use of bribery or payment of benefit-in-kind to influence an individual to use their position in an unreasonable way to help gain advantage for another.

DO

- **Note your concerns**
Record details such as your concerns, names, dates, times, details of conversations and possible witnesses. Time, date and sign your notes.
- **Retain evidence**
Retain any evidence that may be destroyed, or make a note and advise your CFS.
- **Report your suspicion**
Confidentiality will be respected – delays may lead to further financial loss.
Complete a fraud report and submit in a sealed envelope marked 'Restricted – Management' and 'Confidential' for the personal attention of the CFS.

DO NOT

- **Confront the suspect or convey concerns to anyone other than those authorised, as listed below**
Never attempt to question a suspect yourself; this could alert a fraudster or accuse an innocent person.
- **Try to investigate, or contact the police directly**
Never attempt to gather evidence yourself unless it is about to be destroyed; gathering evidence must take into account legal procedures in order for it to be useful. Your CFS can conduct an investigation in accordance with legislation.
- **Be afraid of raising your concerns**
The Public Interest Disclosure Act 1998 protects employees who have reasonable concerns. You will not suffer discrimination or victimisation by following the correct procedures

If you suspect that fraud against the NHS has taken place, you must report it immediately, by:

- directly contacting the **Counter Fraud Specialist**, or
- telephoning the **freephone NHS Fraud and Corruption Reporting Line**, or
- Contacting the **Chief Finance Officer**.

If you have concerns about a fraud taking place in the NHS, information can be passed to:

NHS Fraud Bribery & Corruption Reporting Line:
0800 028 40 60 (all calls in confidence investigated by professionally trained staff)

Or via the NHS Fraud reporting form at:

www.cfa.nhs.uk/reportfraud

Your Counter Fraud Specialist is Sarah Pratley who can be contacted by emailing spratley@nhs.net or by phone on 07769 640781
If you would like further information about NHSCFA, please visit <https://cfa.nhs.uk/>