



**Shropshire, Telford
and Wrekin**

Shropshire, Telford, and Wrekin Integrated Care Board Fraud, Bribery and Corruption Policy

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Version 2	December 2023	Review of original policy. Amendments made reflecting change from CCG to ICB and policy amended in line with new ICB Template. Inclusion of reference to the Government Functional Standards. Inclusion of alignment to NHSCFA 2023-26 Strategy. Inclusion of four new appendices.

The formally approved version of this document is that held on the NHS Shropshire, Telford and Wrekin website:

www.shropshiretelfordandwrekin.nhs.uk

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1 Introduction

One of the basic principles of public sector organisations is the proper use of public funds. It is therefore important that all those who work within the Integrated Care Board (ICB) are aware of how fraud can occur, and how it can be addressed if it is identified. Fraud or bribery either within or against the ICB and the wider NHS is unacceptable, and the ICB is committed to reducing the level of fraud and corruption within the NHS to an absolute minimum and keeping it at that level, so freeing up public resources for better patient care.

2 Purpose

This policy relates to all forms of fraud, bribery and corruption and is intended to provide direction and help to all ICB staff and other stakeholders (including patients, visitors, temporary employees, locums, agency staff, contractors, suppliers and visiting clinicians) who may identify fraud or bribery, or suspect that fraud or bribery may have taken place. The overall aims of this policy are to:

- improve the knowledge and understanding of everyone in the ICB about what fraud and bribery is and how it might occur.
- provide guidance to staff about how any concerns can be raised.
- set out the ICB's responsibilities in terms of the prevention, detection and investigation of fraud, bribery and corruption.
- ensure that appropriate sanctions are considered following an investigation, which may include any or all of the following:
 - criminal prosecution.
 - civil action to recover losses due to fraud.
 - internal/external disciplinary action.

This policy applies to all individuals working at all levels including Board members, Directors, employees (whether permanent, fixed-term, or temporary), contractors, trainees, seconded, casual staff and agency staff, interns and students, agents, sponsors, volunteers or any other person associated with the ICB wherever located (collectively referred to as "staff" in this policy). It should be brought to the attention of all employees and form part of the induction process for new staff.

3 Responsibilities

The ICB will take all necessary steps to counter fraud, bribery and corruption in accordance with this policy, the NHS Counter Fraud Manual, and any other relevant guidance or advice issued by NHS CFA.

The ICB has policies and procedures in place to reduce the likelihood of fraud, bribery and corruption occurring. These include a system of internal controls, prime financial policies and documented procedures, which involve physical and supervisory checks, financial reconciliations, segregation and rotation of duties, and clear statements of roles and responsibilities. Where fraud, bribery and corruption has occurred, the ICB will ensure that any necessary changes to systems and procedures take place immediately to prevent similar incidents from happening in the future.

The ICB also has a duty to ensure that it provides a secure environment in which to work, and one where people are confident to raise concerns without worrying that it will reflect badly on them. In particular, the ICB will ensure that appropriate 'whistleblowing' routes are available to staff who wish to share their concerns. This duty also 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, the ICB has a duty to ensure that those concerns are listened to and addressed. Further details can be found in the ICB's Raising Concerns at Work Policy.

Government Functional Standard 013 Counter Fraud ('the Functional Standard')

The NHSCFA has released the Government Functional Standard 013 Counter Fraud ('the Functional Standard') as a suite of requirements to countering fraud across the NHS. The Functional Standard became effective within the NHS from 1 April 2021. To meet ICB objectives and to demonstrate its commitment to taking all necessary steps to counter fraud, bribery and corruption, the Functional Standard has been adopted by ICB.

The purpose of the Functional Standard is to set the expectations for the management of fraud, bribery and corruption risk in government organisations and means that the whole counter fraud community in the public sector is working to a common counter fraud standard.

NHS funded services will be required to provide NHSCFA with details of their performance against the Functional Standard annually.

The term 'NHS funded services' above refers to any organisation with partial or full NHS funding. Currently this includes NHS Trusts, Foundation Trusts, Ambulance Trusts, Special Health Authorities, Integrated Care Board's, certain Independent Healthcare Providers, Health Boards, and NHS England.

Since April 2021 the ICB has been expected to obtain organisational assurance against the Functional Standard. The Functional Standard provides guidance to organisations on the arrangements for undertaking assurance.

The Functional Standard sets out a number of specific component requirements namely:

Component 1: Accountable individual

Have an accountable individual at board level who is responsible for counter fraud, bribery and corruption. For the ICB this will be the CFO.

Component 2: Counter fraud bribery and corruption strategy

The ICB's approach will align to the NHSCFA 2023-26 strategy which is found here: [NHSCFA Strategy 2023-2026](#)

Component 3: Fraud bribery and corruption risk assessment

Have a fraud, bribery and corruption risk assessment.

Component 4: Policy and response plan

Have a policy and response plan for dealing with potential instances of fraud, bribery and corruption. This is set out as at Appendix 1 of this policy.

Component 5: Annual action plan

The ICB maintains an annual work plan that is informed by national and local fraud, bribery and corruption risk assessments identifying activities to improve capability and resilience. This includes (but is not limited to) defined objectives, milestones for the delivery of each activity and measurable areas for improvement in line with strategic aims and objectives. The plan is agreed, and progress monitored by the Audit Committee.

Component 6: Outcome-based metrics

The ICB has outcome-based metrics summarising what outcomes it is seeking to achieve that year.

Component 7: Reporting routes for staff, contractors and members of the public

The ICB will have well established and documented reporting routes for staff, contractors and members of the public to report suspicions of fraud, bribery and corruption and a mechanism for recording these referrals and allegations.

Component 8: Report identified loss

The ICB will report identified loss from fraud, bribery, corruption and error and associated recoveries, in line with the agreed government definitions.

Component 9: Access to trained investigators

The ICB will have agreed access to trained investigators that meet the agreed public sector skill standard.

Component 10: Undertake detection activity

The ICB will undertake activity to try and detect fraud in high-risk areas where little or nothing is known of fraud, bribery and corruption levels, including loss measurement activity where suitable.

Component 11: Access to and completion of training

The ICB will ensure that all staff have access to and undertake fraud awareness, bribery and corruption training as appropriate to their role.

Component 12: Policies and registers for gifts and hospitality and Conflicts of Interest

The ICB will have policies and registers for gifts and hospitality and conflicts of interest.

All staff have a duty to protect the assets of the ICB and also to cooperate with any investigation. The Board recommends anyone having suspicions of fraud, bribery or corruption to report those suspicions. All reasonably held suspicions will be taken seriously.

3.1 NHS Counter Fraud Authority

The NHS Counter Fraud Authority (NHS CFA) sets the strategic direction of counter fraud work within the NHS, and issues guidance to individual health bodies on the prevention, detection and investigation of possible fraud, bribery and corruption. In particular, every health body is required to have an accredited Local Counter Fraud Specialist (LCFS) in place to investigate all allegations of fraud either within or against the health body concerned.

The NHSCFA's 2023-2026 strategy document sets out the national approach to fighting fraud and other economic crime affecting the NHS. The ICB adopts the same principles of the CFA's strategy and a copy can be found at the following link: [NHSCFA Strategy 2023-2026](#)

3.2 The Chief Executive

The Chief Executive has the overall responsibility for funds entrusted to it. This includes instances of fraud, bribery and corruption. The Chief Executive must ensure adequate policies; procedures and processes are in place to protect the organisation and the public funds it receives.

3.3 Chief Financial Officer

The Chief Financial Officer (CFO), in conjunction with the ICB's Chief Executive, has overall responsibility for ensuring that the ICB has appropriate measures and controls in place to establish proper stewardship of ICB funds. This includes ensuring that the ICB takes all necessary steps to counter fraud, bribery and corruption either within or against the ICB.

In particular, the CFO will:

- discuss any issues of possible fraud, bribery or corruption that come to the CFOs attention with the Local Counter Fraud Specialist (LCFS), and agree how any such issue will be taken forward. If an investigation is deemed to be appropriate, the CFO will delegate responsibility for leading the investigation to the LCFS, whilst retaining overall responsibility for the general direction of the investigation.
- inform the Chief Executive and Audit Committee members where a potential or identified loss may be significant or where the incident may lead to adverse publicity.

3.4 Local Counter Fraud Specialist

The LCFS is responsible for the day-to-day implementation of counter fraud and counter-bribery activity within the ICB, and, in particular, for ensuring that all cases of actual or suspected fraud and corruption are investigated in accordance with relevant legislation, national NHS policy and guidance issued by NHS CFA.

In particular, the LCFS will:

- ensure that the Chief Financial Officer is informed about all referrals/cases
- in consultation with the Chief Financial Officer, report any cases to the police or NHS CFA if appropriate.
- investigate all cases of fraud where the LCFS is empowered to lead an investigation.
- record progress on each case and the outcome of each investigation through NHS CFA's national case management system (CLUE).
- report regularly to the Chief Financial Officer on the progress of investigations.
- 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 any system weaknesses identified as part of an investigation are followed up with management and reported to Internal and External Audit as appropriate.
- ensure that the Chief Financial Officer is informed of any NHS CFA National Investigation Service-led investigations linked to the ICB, including progress updates.
- Provide progress reports at intervals to the Audit Committee on recent counter-fraud work done by the LCFS.
- Provide an annual report to the ICB on counter fraud work carried out by the LCFS in the previous year.

3.5 Counter Fraud Champion

The 'Government Functional Standard GovS 013: Counter Fraud' requires every NHS body to have a Counter Fraud Champion in place. The Counter Fraud Champion will support and promote the fight against fraud at a strategic level and with other colleagues within the ICB.

This will include:

- Raising awareness of fraud at a strategic level and supporting the work that the LCFS already does.
- Promoting and raising awareness of fraud, bribery and corruption within the ICB and ensuring that everyone knows how to recognise and report fraud.
- Ensuring that fraud risks are recorded and managed in line with the organisation's risk management policy.
- Escalating any fraud concerns to the Chief Financial Officer and / or Audit Committee Chair as necessary.

3.6 Line Managers

Line managers at all levels have a responsibility to ensure that an adequate system of internal control exists within their areas of responsibility and that controls operate effectively. 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 should:

- inform staff of the ICB counter 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.
- 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 should 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.
- be aware of the ICBs counter fraud, bribery and corruption policy and the rules and guidance covering the control of specific items of expenditure and receipts.

Managers should also be alert to the possibility that unusual events or transactions could be indicators of possible fraud or corruption. If they

have any doubts, they must seek advice from the ICB's LCFS or the CFO at the earliest opportunity.

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, but refer the concerns to the LCFS as soon as possible.

3.7 All Staff

The ICB's financial procedures place an obligation on all staff to act in accordance with best practice. Employees also have a duty to protect the assets of the ICB, including its information, goodwill and property. In addition, all staff have a responsibility to comply with all applicable laws and regulations relating to ethical business behaviour, procurement, personal expenses, confidentiality and the acceptance of gifts and hospitality. This means, in addition to maintaining the normal standards of personal honesty and integrity, all staff 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 ICB staff dealt fairly and impartially with official matters.
- be alert to the possibility that others might be attempting to deceive.

They should also ensure they are aware of the ICB's Management of Conflicts of Interest Policy; and in particular the obligation to declare any possible conflicts of interest that they have in relation to their position with the ICB.

All staff have a duty to share any concerns they have, where they feel that fraud or bribery may have been committed. Staff also have a responsibility to co-operate with any on-going investigations as required.

In addition, if staff become aware of anything (e.g. matters linked to the actions of peers or colleagues) that may suggest that fraud or bribery might be occurring, they can seek advice in confidence from either the ICB's Local Counter Fraud Specialist, or the ICB's Chief Financial Officer. They should also refer to the ICB's Raising Concerns at Work Policy for further details of the protection afforded to anyone who raises genuinely-held concerns.

3.8 Humans Resources

HR staff should:

- Advise the Local Counter Fraud Specialist of any issues that they become aware of that may involve possible or actual fraud, bribery or corruption.
- Liaise with the Counter Fraud Specialist to ensure that any internal disciplinary action and / or a referral to a relevant professional / regulatory body is co-ordinated with any on-going criminal investigations into possible fraud or bribery

3.9 Audit Committee

The Audit Committee is responsible for reviewing and approving the annual counter fraud work plan, and monitoring progress against the plan. It will also receive progress updates at regular intervals from the LCFS, and monitor the implementation of any action plans arising from NHSCFA quality assessment reviews. It will also receive and review the annual report on counter fraud work provided by the LCFS.

3.10 Information Management and Technology

The Head of Information Security (or equivalent) will contact the LCFS immediately where there is suspicion that the ICB's ICT is being used for fraudulent purposes. The Head of Information Security will liaise closely with the LCFS to ensure that a subject's access (both physical and electronic) to the ICB's ICT resources is suspended or removed when an investigation identifies that it is appropriate to do so.

3.11 Trade Unions and Staff Support

Staff who are trade union members are advised to contact their trade union/professional association at the earliest opportunity in any counter fraud enquiries. Accredited trade union representatives are available to support and represent individuals that are members of a union and have paid the appropriate subscription.

4 Response plan

The organisation's full Fraud Response Plan is attached at Appendix 1.

Where there are any suspicions or concerns regarding possible fraud or corruption, the matter will be investigated by the LCFS and / or NHSCFA, depending on the nature of the possible offences that may have been committed.

Appropriate criminal, civil and / or disciplinary sanctions would be sought as outlined in 4.2 below.

Each matter will be considered individually on its own facts and merits. However, applying a consistent and thorough approach in all cases will ensure that:

- Investigations are undertaken in the most effective manner, including the gathering and assessment of all relevant material which may form evidence of fraud, bribery, corruption or related misconduct.
- The most appropriate sanction or combination of sanctions is sought where fraud, bribery, corruption or related misconduct is identified.

4.1 Sanctions and redress

The ICB is committed to the appropriate application of all relevant sanctions where fraud has been identified. Which sanctions are appropriate will depend on the outcome of each particular investigation, but may include:

- Criminal prosecution (potentially resulting in a fine, imprisonment, a community penalty, confiscation and/or compensation order) or out-of-court disposal. Any prosecution would be undertaken in partnership with the Crown Prosecution Service, and also the police and/or NHSCFA as appropriate.
- Civil action, including action to preserve assets and recover money or assets that have been obtained by fraud or bribery. Such action would also include the recovery of interest and costs.
- Disciplinary action by the ICB, under the terms of the ICB's Disciplinary Policy.
- Referral to a relevant professional / regulatory body if appropriate, where there is evidence of fraud or bribery having occurred.

4.2 Recovery of losses

In addition to any criminal and disciplinary sanctions applied, the ICB is committed to fully recovering any losses identified as a result of fraud or related offences (following an assessment of the likelihood and financial viability of recovery). Further details of how such losses will be recovered are set out in the ICB's Losses and Special Payments Policy which can be found on our website.

4.3 Reporting Routes

Any concerns or suspicions about possible fraud, bribery or corruption should be shared in confidence via one of the routes detailed in Appendix 4:

5 Related Documents

The following policy areas may contain information that relates to this policy and, although the list is not exhaustive, these can be found on the ICB staff intranet:

- Disciplinary
- Secondary employment/working whilst sick
- Freedom to Speak Up (FTSU)
- Conflicts of Interests
- Standards of Business Conduct.

6 Dissemination

These guidelines will be disseminated by the following methods:

- ICB website
- Staff newsletter
- ICB Membership
- CSU
- Shared drive
- Directors – to disseminate within their areas
- Awareness raising by the LCFS & CFC

6.1 Review

This policy will be reviewed every three years and updated as required, (unless a need arises for an earlier review).

7 Glossary

Term / Abbreviation	Explanation / Definition
Fraud	<p>Fraud involves a deliberate act of deception, carried out in order to obtain money or some other benefit which the person or organisation involved is not properly entitled to. Consequently, fraud is always intentional and dishonest. Examples might include (but certainly are not limited to):</p> <ul style="list-style-type: none"> - the submission of false qualification details or faked references in order to secure a job with the ICB; - the submission of falsified pay or expense claims; - the submission of an invoice for goods or services not supplied to the ICB. <p>Where the ICB commissions and funds patient care that is delivered by other parties, the deliberate falsification by another party of e.g. claims for payment for care or treatment not provided</p>

	<p>might also be potentially fraudulent.</p> <p>The Fraud Act 2006 creates a general offence of fraud, and sets out three ways it might be committed – by making a false representation; by failing to disclose information when legally obliged to; or by abusing a position of trust or responsibility for dishonest gain.</p>
<p>Bribery</p>	<p>Bribery can be defined as offering, giving, seeking or receiving a financial or other inducement or reward which is intended to influence someone in a position of trust or responsibility to do something they would not otherwise have done. A ‘bribe’ can therefore take a variety of forms, including seeking, offering or receiving cash, goods or services, and could potentially extend to excessive ‘corporate hospitality’. Examples of bribery could include:</p> <ul style="list-style-type: none"> - a supplier of goods, services or temporary staff to the ICB, who offers theatre tickets to a member of ICB staff in order to secure further business from the ICB. - a job applicant who offers the interviewer a sum of money in order to be offered the job. <p>The Bribery Act 2010 makes clear that it is not necessary to actually give or receive a bribe to commit an offence – offering or seeking a bribe is also an offence.</p> <p>No member of staff should request, seek to receive or accept any such gift or other financial inducement from any other person or body. Similarly, no member of staff is permitted to offer, give or promise any form of financial or other inducement to anyone where such an offer is intended to secure some form of benefit for the ICB.</p> <p>Further guidance in regard to accepting, declining and recording gifts or hospitality from third parties can also be found in the ICB’s Conflicts of Interest - NHS Shropshire, Telford and Wrekin (shropshiretelfordandwrekin.nhs.uk).</p>

APPENDIX 1: Fraud Response Plan

1.0 Introduction

This fraud response plan provides a checklist of actions and a guide to follow in the event that fraud is suspected. Its purpose is to define authority levels, responsibilities for action and reporting lines in the event of suspected fraud, theft or other irregularity, it covers:

- Notification of suspected fraud;
- The investigation process;
- Sanctions and redress;
- Recovery action;
- Roles and responsibilities; and
- Monitoring and review.

2.0 Notifying Suspected Fraud

2.1 It is important that all staff are able to report their concerns without fear of reprisal or victimisation and are aware of the means to do so. The *Public Interest Disclosure Act (1998)* commonly referred to as the “whistle-blowers act”, provides appropriate protection for those who voice genuine and legitimate concerns through the proper channels.

2.2 If an employee has any concerns or suspicions of fraud they must inform the nominated local Counter Fraud Specialist (LCFS). Alternatively you can contact the organisation’s Chief Finance Officer.

2.3 If the Chief Finance Officer (CFO), LCFS or Chief Executive Officer (CEO) are implicated, then concerns should be reported to the NHS Counter Fraud Authority through their online reporting form or through their 24-hour reporting line on 0800 028 40 60.

2.4 **Appendix 4** of the Fraud, Bribery and Corruption Policy, provides a reminder and checklist of the key actions if fraud, corruption or bribery are suspected. Staff are encouraged to familiarise themselves with this document.

3.0 The Investigation Process

3.1 The LCFS will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised.

3.2 The ICB wants all employees to feel confident that they can expose any wrongdoing without any risk to themselves. In accordance with the provisions of the 'whistle-blowers act', the organisation have implemented a Freedom To Speak Up Policy and appointed a Freedom to Speak Up Guardian who can provide an independent and impartial source of advice to staff at any stage of raising a concern.

3.3 An LCFS investigation may identify conduct or performance that may be of concern to the organisation or to the employees Professional Body, whether related to fraud or otherwise. Where appropriate, relevant organisational policies and procedures, including disciplinary procedures, will be followed where such concerns arise. This may result in disciplinary action and/or notification to the relevant professional body where appropriate.

3.4 In accordance with the NHS Counter Fraud Authority requirements the CFO, in conjunction with the LCFS, 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 any local disciplinary procedures of the ICB unless expressly stipulated by the police.

3.5 The LCFS, in consultation with the CFO, will investigate allegations in accordance with procedures and documents referenced in the NHSCFA standards.

3.6 The ICB will follow their disciplinary procedure if there is evidence that an employee has committed any act of fraud, bribery or corruption. The LCFS must be aware that staff under investigation which could lead to disciplinary action, have the right to procedural fairness and the CFS must seek advice from the organisation's HR department during the investigation process where appropriate.

3.7 The CFS will take control of any physical evidence and record this in accordance with the procedures outlined in the NHSCFA Anti-Fraud Manual. For reasons of confidentiality access to this manual is restricted.

3.8 Interviews under caution will only be carried out by the LCFS or, if appropriate, the police in accordance with the Police and Criminal Evidence Act (1984). The CFS will also take written statements where necessary.

3.9 If fraud, bribery or corruption is found to have occurred, the LCFS will prepare a report for the Director of Finance, setting out the following:

- The circumstances;
- The investigation process;
- The estimated or actual loss;
- The steps taken to prevent recurrence;
- The steps taken to recover loss; and
- System control weaknesses that require correction.

3.10 Any recommendations as a result of an investigation will be reported in progress reports to the Audit Committee to consider any necessary improvements to controls.

4.0 Sanctions and Redress

4.1 The seeking of financial redress or recovery of losses will always be considered in cases of fraud, bribery and corruption that are investigated by either the LCFS or NHSCFA where a loss is identified.

4.2 Recovery of losses may involve action under the Proceeds of Crime Act (2002) but each decision will be taken in light of the particular circumstances of each case.

4.3 Redress allows for resources that are lost to fraud, bribery or corruption to be returned to the NHS for use as intended and for the provision of patient care and services.

4.4 The NHSCFA Anti-Fraud Manual provides in depth detail of how sanctions can be applied and redress sought. Local action can also be taken to recover money using the administrative procedures of the organisation or civil law.

4.5 In cases of serious fraud, bribery and corruption, parallel sanctions can be applied, for example:

- Disciplinary action;
- Use of civil law to recover lost funds; and
- Use of criminal law to apply an appropriate criminal penalty, possible referral of information and evidence to a professional body if appropriate.

4.6 The NHSCFA can also apply to the courts to make a restraining order or confiscation order under the Proceeds of Crime Act (2002). This means that a person's money can be taken away from them if it is believed that the person

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benefited from the crime. This can also include restraining assets during an investigation.

4.7 The range of available sanctions which may be pursued by the relevant decision makers includes:

- **No further action.** In some cases it may be that the organisation, under guidance from the CFS and with the approval of the CFO, decides that no further action is taken.
- **Criminal Investigation.** Following an investigation it may be necessary to bring the matter to the attention of the criminal courts such as Magistrates or Crown Court.
- **Civil Recovery.** The civil recovery route is available to the organisation if this is cost effective and desirable. This could involve a number of options such as applying through the small claims court. Each case will be discussed with the Director of Finance to determine the most appropriate action.
- **Disciplinary Action.** The appropriate person, in conjunction with the HR department, will be responsible for initiating any disciplinary action.
- **Confiscation under the Proceeds of Crime Act.** Depending upon the extent of the loss and the proceedings in the case, it may be suitable for the recovery of losses to be considered under the Proceeds of Crime Act.
- **Recovery from On-Going Salary Payment.** Arrangements can be made to recover losses via payroll if the subject is still employed by the organisation.
- **Professional Body Disciplinary.** During an investigation, if clear evidence exists of a healthcare professional's involvement in fraud, bribery or corruption, the appropriate regulatory body will be informed so they can consider whether fitness to practice procedures should be invoked. Regulatory bodies have statutory powers to place conditions on, suspend or remove the registration of, professionals whose fitness to practice has been impaired.

5.0 Roles and Responsibilities

5.1 The codes of conduct for NHS Boards and NHS Managers set out the key public service values which the ICB adhere to. 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. All staff should be aware of and act in accordance with, these values. The values can be summarised as:

- Accountability;
- Probity; and
- Openness.

5.2 The ICB will take all necessary steps to counter fraud, bribery and corruption in accordance with its Fraud, Bribery and Corruption Policy and the Government Functional Standard 013: Counter Fraud (the Functional Standard).

5.3 The ICB will appoint a CFS to undertake work as set out by the NHSCFA under the Functional Standard. The ICB is committed to taking all steps necessary to counter fraud, bribery and corruption. To meet its objectives, the ICB has adopted the specific component principles of the Functional Standard.

5.4 All employees are required to comply with the ICB policies and procedures in order to prevent fraud, bribery and corruption.

5.5 All those who work within the ICB or are otherwise engaged with the ICB should be aware of and act in accordance with the public service values and the Nolan Principles for Standards in Public Life.

5.6 Employees are expected to act in accordance with the standards laid down by their professional institutes where applicable.

5.7 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.

5.8 The LCFS will:

- Ensure that the CFO is informed about all referrals and cases;
- Be responsible for the day to day implementation of the key standards of counter fraud, bribery and corruption activity as set out by the Functional Standard;
- Investigate cases of fraud;
- In consultation with the CFO, report any case to the police or NHSCFA as agreed and in accordance with the NHS Government Functional Standard;
- Report any case and the outcome of the investigation through the NHSCFA national case management system;
- Ensure that other relevant parties are informed where necessary, for instance HR;

- Ensure that the appropriate organisation incident and losses reporting systems are followed;
- Ensure that any system weaknesses identified as part of any investigation are followed up with management and reported to internal audit; and
- Ensure that cases are managed appropriately, taking into account appropriate legislation and regulation and the needs of procedural fairness in the employment relationship.

5.9 NHSCFA will:

- Provide leadership and expertise in counter fraud as a valued NHS partner;
- Collaborate nationally and locally with the NHS to understand threats, vulnerabilities and enablers;
- Deliver intelligence-led counter fraud services to find, respond to and to prevent fraud;
- Reduce the impact of fraud; and
- Work in partnership to deliver financial savings that can be reinvested in patient care.

6.0 Monitoring and Review

6.1 The LCFS will report regularly to the CFO. The LCFS will provide regular reports to the Audit Committee and provide an annual report containing details of reported and investigated cases of fraud. The NHSCFA monitors the work of the CFS.

6.2 The organisation is required to complete the Government Counter Fraud Functional Standard Return and submit these annually to the NHSCFA. The organisation must mark themselves against each standard 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.

6.3 An assessment process may be conducted by the NHSCFA. This is a means of evaluating the effectiveness of the organisation in dealing with the fraud, bribery and corruption risks it faces through one of four types of assessment: full, focussed, thematic or triggered.

6.4 The LCFS raises fraud awareness by a number of means such as arranging road shows, giving presentations to staff teams and new starters on induction.

APPENDIX 2: Prevalent Frauds in the NHS

Common examples of fraud, bribery and corruption offences occurring within the provision of healthcare services to the NHS

(This is not an exhaustive list; for other types of fraud, bribery or corruption offences please contact the LCFS for advice).

Employment: Presenting forged certificates of qualification to obtain employment; claiming for overtime or shifts not worked; taking sick leave and undertaking unauthorised work for another organisation whilst in receipt of sick pay; claiming expenses (such as travel) when it has not been incurred; falsification of references for a job application; claiming time for college/training but not actually attending; knowingly failing to report and retaining salary or other payments not entitled to; non declaration of criminal convictions.

Patients Monies: Falsifying patients' monies records to obtain cash and property.

Pharmaceuticals: Presentation of forged prescriptions; falsely presenting oneself as another to receive prescription items; receiving free prescriptions through fraudulently claiming entitlement to exemptions from a charge; Pharmacists substituting an expensive drug with a cheaper alternative and making claims for the more expensive one; writing prescriptions for own use.

Procurement: Price fixing or price hiking by suppliers; invoicing for products not supplied; over invoicing; supplying unsolicited goods or products.

Equipment: Obtaining or misuse of equipment or goods for private purposes, including theft or misuse of data, whether held electrically or in paper based form.

Bribery: Financial or other reward to staff responsible for procurement if they purchase from a particular supplier. Patients making informal payments to healthcare practitioners in order to receive treatment more quickly.

Health Tourism: A foreign national travelling to the UK with the intention of receiving free healthcare treatment to which they know they are not entitled.

APPENDIX 3: Do's and Don'ts

✓ Do...

- Make an immediate note of your concerns – note all relevant details such as what was said in telephone or other conversations, the date, time and the names of any parties involved. If appropriate, these may be discussed or passed onto your line manager for further action or decisions.
- Report your suspicions immediately and directly to the organisations appointed LCFS, or CFO.
- Deal with the matter promptly, if you feel your concerns are warranted – any delay may cause the organisation to suffer further financial loss.

✗ Don't...

- Do nothing.
- Be afraid of raising your concerns – you will not suffer any recrimination from the organisation as a result of voicing a reasonably held suspicion. The organisation will treat any matter you raise sensitively and confidentially.
- Approach or accuse any individuals directly.
- Try to investigate the matter yourself – there are special rules surrounding the gathering of evidence for use in criminal cases. Any attempt to gather evidence by people who are unfamiliar with these rules may destroy the case. The organisation appointed LCFS is trained in handling investigations in accordance with the NHSCFA Anti-Fraud Manual.
- Convey your suspicions to anyone other than the LCFS, CFO or NHSCFA.

APPENDIX 4: Responsibilities

Any concerns or suspicions about possible fraud, bribery or corruption should be shared in confidence via one of the routes below:

Chief Finance Officer

Claire Skidmore

Phone: 07824 417645

Email: Claire.skidmore@nhs.net

ICB's Counter Fraud Champion

Angela Szabo

Director of Finance

Phone: 07551 292259

Email: Angela.szabo2@nhs.net

Nominated Local Counter Fraud Team:

Local Counter Fraud Team – 360 Assurance

Team email: 360assurance.counterfraud@nhs.net

Scan the QR code with your phone and report any suspicions of fraud to us directly:



NHS national fraud reporting line: **0800 028 40 60**

NHS Counter Fraud Authority on-line fraud reporting tool:

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