

Counter Fraud and Corruption Policy & Response Plan

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Related Policies and Strategies	
Constitution and related Standing Orders	
Financial Scheme of Delegation	
Prime Financial Policies	
Travel Policy	
Expenses Policy	
Standards of Business Conduct including Gifts and Hospitality	
Relevant HR policies	

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1.0		S.Pratley - TIAA	Draft	

Agreement by committee / meeting group	Date
Audit Committee	
Staff Partnership, organisational development and inclusion forum	

Checklist for the Review and Approval of Procedural Document

To be completed and attached to any policy document when submitted to the CCG Management Board for consideration and approval.

	Title of document being reviewed:	Yes/No	Comments
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		
	Is it clear that the relevant people/groups have been involved in the development of the document?	Yes	
	Are people involved in the development?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
5.	Evidence Base		
	Are supporting documents referenced?	Yes	
6.	Approval		
	Does the document identify which committee/ group will approve it prior to ratification by CCG Board?	Yes	
7.	Document Control		
	Is there a plan to review or audit compliance with the document?	No	
8.	Review Date		
	Is the review date identified?	Yes	
	Is the frequency of review identified? If so is it acceptable?	Yes	
9.	Overall Responsibility for the Document		
	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes	

Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:	No	
	Race	No	
	Ethnic origins (including gypsies and travellers)	No	
	Nationality	No	
	Gender	No	
	Culture	No	
	Religion or belief	No	
	Sexual orientation including lesbian, gay and bisexual people	No	
	Age	No	
	Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?		
6.	What alternatives are there to achieving the policy/guidance without the impact?		
7.	Can we reduce the impact by taking different action?		

If you have identified a potential discriminatory impact of this procedural document, please refer it to the Head of Corporate Affairs, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact the Head of Corporate Affairs.

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1. INTRODUCTION

- 1.1 Frimley Clinical Commissioning Group (CCG) is committed to eliminating fraud, bribery and/or corruption within the NHS, and freeing up public resources for better patient care. This policy has been produced by the Counter Fraud Service and is intended as a guide for all employees about counter fraud work within the NHS. All genuine suspicions of fraud, bribery or corruption can be reported to the Anti-Crime Specialist directly, or through the NHS Fraud and Corruption Reporting Line (FCRL). Contact details are included in form 1 attached.
- 1.2 One of the basic principles of public sector organisations is the proper use of public funds. The NHS is a public funded organisation and consequently it is important that every employee and associated person acting for, or on behalf of, NHS Frimley Clinical Commissioning Group (CCG) is aware of the risk of fraud, corruption and bribery, the rules relating to fraud, corruption and bribery, the process for reporting their suspicions, and the enforcement of these rules.
- 1.3 This document sets out the CCG's policy and response plan for detected or suspected fraud, corruption or bribery. It has the endorsement of the CCG's Governing Body. The CCG's Governing Body endorses the NHS Counter Fraud Strategy as set out under HSC 1998/231.
- 1.4 **Governing Body Statement** -The CCG is absolutely committed to maintaining an ethical work environment characterised by the honesty and integrity of each CCG employee. It is therefore committed to eliminating any fraud within the CCG, and to the rigorous investigation of any such cases. Where any acts of fraud or corruption are proven, the CCG will ensure that the culprits are appropriately dealt with and will also take all appropriate steps to recover any losses in full.
- 1.5 **The policy** reflects the CCG's Governing Body's wish to embed a culture of best practice in anti-fraud, anti-corruption and anti-bribery measures, and enforcement of the policy will reduce the risk that the CCG or any staff, contractors, or persons working for the CCG will incur any criminal liability or reputational damage.
- 1.6 The CCG already has procedures in place that reduces the likelihood of fraud, corruption and/or bribery occurring. These include the CCG Standing Orders and Constitution, Prime Financial Polices and Financial Scheme of Delegation and other documented policies and procedures, a system of internal control, and a system of risk assessment. The CCG Governing Body seeks to ensure that a risk awareness culture exists in the CCG (which includes fraud, corruption and bribery awareness), and have complied with the Standards for Commissioners in nominating an Anti-Crime Specialist.
- 1.7 The CCG Governing Body wishes to advise that it is the responsibility of all staff to report any reasonable suspicions of fraud or corruption. It is also the Governing Body's policy that an employee should not suffer detriment as a result of reporting reasonably held suspicions.
- 1.8 The **NHS Counter Fraud Authority (NHSCFA)** has responsibility for all policy and operational matters relating to the prevention, detection and investigation of Fraud, Bribery and Corruption in the NHS and any investigations undertaken by the Anti-Crime Specialist will be handled in accordance with NHSCFA guidance. The NHSCFA Organisational Strategy 'Leading the Fight Against Fraud' sets out their approach to fighting fraud and other economic crime affecting the NHS. The strategy can be found [here](#).

2. AIMS AND SCOPE

- 2.1 This policy relates to all forms of fraud 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 and corruption. The overall aims of this policy are to:

- Improve the knowledge and understanding of everyone in the CCG, irrespective of their position, about the risk of fraud 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 CCG's responsibilities in terms of the deterrence, prevention, detection and investigation of fraud 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/external disciplinary action.
 - Referral to regulatory body (where applicable).

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

3. QUALITY STANDARDS FOR COUNTER FRAUD

3.1 The CCG is committed to taking all necessary steps to counter fraud, bribery, and corruption. As of April 2021, the [Government Functional Standard 013: Counter Fraud](#) (Functional Standard) replaces the previous NHS specific Standards for Fraud, Bribery and Corruption (Standards). To meet its objectives, the CCG will adopt the Government Functional Standard which sets out the expectations for the management of fraud, bribery and corruption risk. The 12 components of the standard are as follows:

- Component 1A – Accountable individual – Executive Board
- Component 1B – Accountable individual – Non-Executive, Fraud Champion, Lay Member
- Component 2 – Counter Fraud, Bribery and Corruption Strategy
- Component 3 – Fraud, Bribery and Corruption Risk Assessment
- Component 4 – Policy and Response Plan
- Component 5 – Annual action plan
- Component 6 – Outcome based metrics
- Component 7 – Reporting routes for staff, contractors and members of the public
- Component 8 – Report identified loss
- Component 9 – Access to trained investigators
- Component 10 – Undertake detection activity
- Component 11 – Access to, and completion of, training
- Component 12 – Policies and registers for gifts and hospitality and COI

3.2 The CCG will take all necessary steps to counter fraud, bribery and corruption, in accordance with the guidance provided by the CCG's Anti-Crime Specialist (ACS) and advice issued by the NHS Counter Fraud Authority (NHSCFA).

4. **FRAUD**

4.1 The Fraud Act 2006 provides for a general offence of Fraud. The act sets out the various ways an individual may commit an offence contrary to this Act. The offence of fraud can be committed in three ways:

- Section 2 - Fraud by False Representation;
- Section 3 - Fraud by Failing to Disclose;
- Section 4 - Fraud by Abuse of Position.

4.2 **Section 1 – Fraud**

Section 1 creates the general offence of fraud and introduces the three possible ways of committing it.

4.3 **Section 2 - Fraud by False Representation**

A person is in breach of this section if he/she

(a) dishonestly makes a false representation and

(b) intends, by making that representation -

(i) to make a gain for himself or another or

(ii) to cause loss to another or to expose another to a risk of loss.

A representation is false if it is untrue or misleading, and the person making it knows that it is, or might be, untrue or misleading.

4.4 **Section 3 - Fraud by Failing to Disclose**

A person is in breach of this section if he/she-

(a) dishonestly fails to disclose to another person information which he is under a legal duty to disclose,

and

(b) intends, by failing to disclose the information-

(i) to make a gain for himself or another, or

(ii) to cause loss to another or to expose another to a risk of loss.

4.5 **Section 4: Fraud by Abuse of Position**

A person is in breach of this section if he/she-

(a) occupies a position in which he/she is expected to safeguard, or not to act against, the financial interests of another person,

(b) dishonestly abuses that position, and

(c) intends, by means of the abuse of that position-

(i) to make a gain for himself or another or

- (ii) to cause loss to another or to expose another to a risk of loss.

A person may be regarded as having abused his position even though his conduct consists of an omission rather than an act.

- 4.6 It should be noted that all offences under the Fraud Act 2006 occur where the actor omission is committed dishonestly and with intent to cause gain or loss. The gain or loss does not have to succeed, so long as the intent is there.

5 BRIBERY and CORRUPTION

- 5.1 **The Bribery Act 2010** defines bribery as the offering or acceptance of inducements, gifts, favours, payment, or benefit-in-kind which may influence the action of any person. Corruption does not always result in a loss. The corrupt person may not benefit directly from their deeds; however, they may be unreasonably using their position to give some advantage to another. The Act is available at: www.legislation.gov.uk/ukpga/2010/23/data.pdf and the following sections explain the elements that apply in an offence of Bribery.

5.2 The Provider

The provider is guilty of the basic offence of bribery when he makes an offer or promise of a bribe or gives a bribe with the required intent detailed below.

5.3 The Bribe

A bribe is defined as a 'financial or other advantage'. The emphasis is less on the value or nature of the advantage and more on its purpose because coupled to the actions above there must also be present an intention on the part of the offender.

5.4 The Intention

The intention on the part of the provider must be to induce another to perform a function or activity improperly or the advantage is intended to reward another for performing a function or activity improperly. It may be that acceptance of the advantage is itself improper.

It can be seen that the actions and intentions are linked.

It should also be noted that the person being offered the advantage need not be the one who is to perform the improper action or to whom the reward is directed, and it is irrelevant if bribe is provided by a third person.

5.5 The Receiver

In respect of the recipient of an advantage the offence is complete when they **request, agree to receive or accept a financial or other advantage** with a similar intention that a function or activity will be performed improperly or as a reward for improper performance. Again, it may be that the request, agreement or acceptance would itself be improper.

On the part of the recipient there is one other way in which the offence is complete.

Where, in anticipation of, or in consequence of, the recipient requesting an advantage, a function or activity is performed improperly, the offence is again complete. The function may be performed improperly by the recipient or another person at the request of the recipient or with their assent or acquiescence.

5.6 **The Function or Activity**

The Act defines relevant functions or activities as any function of a public nature, or any activity connected with business, or performed by or on behalf of a body corporate or unincorporated or performed in the course of a person's employment.

Persons performing these functions and activities are expected to perform them in good faith and/or impartially and/or are performing them in a position of trust.

5.7 **The Improper Performance**

A function or activity will be performed improperly if it is performed in breach of a 'relevant expectation'. This will include a failure to perform a function or activity if that itself would constitute a breach of a relevant expectation.

The Act deliberately leaves what is expected open to general interpretation and relies on the reasonable person in the UK to decide. Ultimately this will be the jury. This is known as the 'expectation test'.

5.8 **The Corporate Offence**

The Act creates a new corporate offence based on negligence. The offence is complete when a person associated with a relevant commercial organisation bribes another person, intending to obtain or retain business for that organisation or to obtain or retain a business advantage in the conduct of business for that organisation.

It is not necessary for the person associated with the organisation to be prosecuted for bribery only that he is or would be guilty.

5.9 **The Corporate Defence**

The Act provides a defence to the corporate offence, this being that the relevant commercial organisation had in place adequate procedures designed to prevent persons associated with the organisation from undertaking such conduct.

This is commonly known as 'adequate procedures to prevent bribery'.

6. **THEFT**

6.1 *"A person is guilty of theft if he/she dishonestly appropriates property belonging to another person with the intention of permanently depriving the other of it".*

6.2 Fraud or theft also covers the dishonest misuse of the resources of the CCG, or any resources which the CCG may manage on behalf of others.

6.3 Concerns about theft must be reported to the CCG's Local Security Management Specialist.

7. **PUBLIC SERVICE VALUES**

7.1 Staff must be impartial and honest in the conduct of their business and remain above suspicion whilst carrying out their role within the CCG. The CCG has a Standards of Business Conduct Policy which includes reference to the seven fundamental public service values as specified in the Nolan Report; Code of Conduct for NHS Managers and the Professional Standards Authority standards for members of NHS Boards including CCG Governing Bodies.

- **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.

7.2 Furthermore, staff, and those working for the CCG, are expected to:

- Ensure that the interest of patients remains paramount at all times;
- Be impartial and honest in the conduct of their official business;
- Use the public funds entrusted to them to the best advantage of the service, always ensuring value for money;
- Not abuse 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.

8. **RESPONSIBILITIES WITHIN THE ORGANISATION**

8.1 Director of Finance

The Director of Finance and has overall responsibility for ensuring compliance with the Standards for Commissioners on fraud, corruption and bribery.

In compliance with the Standards, the Director of Finance is responsible for ensuring that fraud, bribery and corruption is prevented, detected and investigated. Combating fraud, bribery and corruption requires an understanding of how and why it happens, the ways in which it can be minimised and how to professionally investigate it. In line with the Standards for Commissioners the Director of Finance has nominated an Anti-Crime Specialist to tackle fraud, corruption and bribery within the CCG.

Where a referral concerning fraud or corruption has been made to the Director of Finance, the

Director of Finance shall inform the Anti-Crime Specialist at the first opportunity and delegate to him/her responsibility for leading any investigation whilst retaining overall responsibility.

8.2 **Anti-Crime Specialist**

The Anti-Crime Specialist is responsible for managing and delivery of all counter fraud work within the CCG in accordance with an agreed annual workplan. The Anti-Crime Specialist is responsible for investigating allegations of fraud, bribery and corruption in compliance with the Standards for Commissioners and NHSCFA's Anti-Fraud Manual.

The Anti-Crime Specialist is an experienced and accredited (professionally qualified) counter fraud specialist. In essence the role of the Anti-Crime Specialist is to respond to, and proactively tackle, risks and occurrences of fraud and corruption at the CCG by providing a robust and effective prevention, detection and investigation function. The Anti-Crime Specialist is responsible for ensuring that the CCG achieves the four specific objectives of the National Counter Fraud strategy covering:

- Strategic Governance;
- Inform and Involve;
- Prevent and Deter;
- Hold to Account.

The Anti-Crime Specialist reports to the Director of Finance, but staff within the CCG will be actively encouraged to speak to, and ask for advice from, the Anti-Crime Specialist. The Anti-Crime Specialist is authorised to receive reports of suspected fraud from anyone, whether an employee of the CCG, independent contractors, patients or other third party. All staff have a responsibility to the CCG to raise their genuine concerns.

- 8.3 The Director of Finance will be assisted by Human Resources specialist (CSCSU) in advising those involved in the investigation in matters of employment law and in other procedural matters, such as disciplinary and complaints procedures, as requested. The consideration of 'triple tracking' options, namely criminal, civil and disciplinary sanctions (including Professional Regulatory Body sponsored disciplinary sanctions) shall be taken in conjunction with the Human Resources specialist and the Anti-Crime Specialist.

8.4 **Fraud Champion**

A Fraud Champion should be committed to introducing and promoting a zero-tolerance approach to fraud within their organisation. The Fraud Champion's role forms part of an NHS organisation's counter fraud provision. Having a Fraud Champion is an essential part of the Government Functional Standard.

Fraud Champions will support and promote the fight against fraud at a strategic level and with other colleagues within the CCG. Fraud Champions will also support Anti-Crime Specialists in the work that they already do.

The role of a fraud champion is to:

- Promote and raise awareness of fraud, bribery and corruption within the organisation.
- Understand the threat posed by fraud, bribery and corruption by monitoring the intelligence provided as part of NHSCFA's strategic intelligence assessment.
- Understand the level and quality of counter fraud provision received by the organisation by using the benchmarking information provided by NHSCFA, and raise any successes, concerns or opportunities for improvement with the Director of Finance and/or Audit Committee Chair.
- Support counter fraud colleagues in ensuring that all information relating to fraud is recorded and reported (if this is not undertaken then it could impact on your organisation as well as the sector as potential fraud alerts will not be shared).
- Contribute to the sharing of information and best practice on counter fraud via NHSCFA's extranet.
- Raise awareness of fraud at a strategic level and support the work that Anti-Crime Specialists already do.
- Facilitate and support fraud awareness and fraud prevention work within the organisation and ensure that everyone knows how to recognise and report fraud
- Ensure that fraud risks are recorded and managed in line with the organisation's risk management policy
- Escalate any fraud concerns to the Director of Finance and/or Audit Committee Chair

8.5 Audit Committee

The purpose of the Audit Committee is to provide an independent check on the financial management of the CCG. The Audit Committee meets, receives and considers reports by the internal and external auditors on all aspects of financial processes and procedure. Both the Anti-Crime Specialist and the Director of Finance attend the Audit Committee and the Anti-Crime Specialist presents progress reports on the counter fraud work undertaken at the CCG. The Audit Committee can question and ask for further explanation in relation to any aspect of counter fraud work.

8.6 Staff

All Staff must ensure that they have read, understand and comply with this policy. The prevention, detection and reporting of fraud, bribery and corruption are the responsibility of all those working for, or under the control of, the CCG. All Staff are individually responsible for:

- Securing the property of the CCG;
- Avoiding loss;
- Conforming to the rules and regulations contained in the CCG's policies and procedures.

All staff are required to follow any Code of Conduct related to their personal professional qualifications.

If staff suspect there has been an offence of fraud, corruption or bribery, they must report the matter to the nominated Anti-Crime Specialist, or the Director of Finance. **See Form 1 below.**

All staff are required to avoid any activity that might lead to, or suggest, a breach of this policy. Any staff found in breach of this policy may be liable to disciplinary action including summary dismissal.

8.7 Internal and External Audit

Any incident or suspicion of fraud, corruption and/or bribery that comes to Internal or External Audit's attention will be passed immediately to the Anti-Crime Specialist.

The External and Internal Auditors perform thorough checks on systems which may detect any anomalies.

9. THE RESPONSE PLAN

9.1 Reporting fraud or corruption

9.2 This section outlines the action to be taken if fraud, bribery, or corruption is discovered or suspected.

9.3 If an employee has any of the concerns mentioned in this document, they must inform the nominated Anti-Crime Specialist or the CCG's Director of Finance immediately, unless the Director of Finance or Anti-Crime Specialist is implicated. If that is the case, they should report it to the respective CCG Chair and Chief Officer, who will decide on the action to be taken.

9.4 **Form 1** provides a reminder of the key contacts and a checklist of the actions to follow if fraud, bribery or 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.

9.5 Employees can also call the NHSCFA's Fraud and Corruption Reporting Line on freephone 0800 028 40 60 or online 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 who 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.

9.6 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.

9.7 In some cases, for example, if a major diversion of funds is suspected, speed of response will be crucial to avoid financial loss in following the processes laid out within this policy.

10. DISCIPLINARY ACTION

10.1 The disciplinary procedures of the CCG must be followed if an employee is suspected of being involved in a fraudulent or otherwise illegal act.

10.2 It should be noted, however, that the duty to follow disciplinary procedures will 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.

11. POLICE INVOLVEMENT

11.1 In accordance with NHSCFAs Anti-Fraud Manual, the Director of Finance in conjunction with the Anti-Crime Specialist, 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 CCG.

12. SANCTIONS AND REDRESS

12.1 This section outlines the sanctions that can be applied and the redress that can be sought against individuals who commit fraud, bribery and corruption against the CCG, and should be read in conjunction with the CCG's disciplinary policy.

12.2 The types of sanction which the CCG may apply when an offence has occurred are as follows:

- Civil – to recover money and/or assets which have been fraudulently obtained, including interest and costs.
- Criminal – working in partnership with the NHS Counter Fraud Authority, Crown Prosecution Service, and police where appropriate to bring a case to court against an offender. Outcomes, if found guilty can include fines, a community order or imprisonment and of course a criminal record.
- Disciplinary – CCG procedures will be initiated when an employee is suspected of being involved in fraudulent or illegal activity. Further information can be found in the CCG's disciplinary policy.
- Professional body disciplinary – an employee may be reported to their professional body as a result of an investigation or prosecution.

12.3 The CCG will seek financial redress wherever possible to recover losses to fraud, bribery or corruption. Redress can take the form of confiscation under the Proceeds of Crime Act 2002, compensation orders, a civil order for repayment, or a local agreement between the CCG and offender to repay the monies lost.

12.4 Multiple sanctions can, in some circumstances, be undertaken at the same time. Further information in relation to this can be found in the CCG's Parallel Sanctions policy.

13. APPROVAL OF POLICY

13.1 This policy is sponsored by the Director of Finance and approved by the CCG Governing Body.

14. RESPONSIBILITY FOR DOCUMENT DEVELOPMENT

14.1 The nominated author for this policy is the Anti-Crime Specialist. The lead Director for this policy is the Director of Finance. The committee charged with monitoring the development of this document is the Audit Committee.

15. EQUALITY IMPACT ASSESSMENT

15.1 Under the Race Relation (Amendment) Act 2000 the CCG are required to undertake equality impact assessments on all policies/guidelines and practices. This obligation has been expanded to include equality and human rights with regard to disability, age, gender and religion.

16. CONSULTATION APPROVAL AND RATIFICATION PROCESS

16.1 Consultation process

The following are identified:

- Director of Finance
- Associate Director Strategic Programme, Planning and DPO
- Audit Committee

16.2 Policy Approval and Ratification Process

The policy will be approved by the Audit Committee.

The policy will be ratified by the CCG Governing Body.

16.3 Dissemination and Implementation

The policy will be communicated to all Staff and Managers via the CCG's members' website and intranet.

17. **PROCESS FOR MONITORING COMPLIANCE and EFFECTIVENESS**

17.1 Standards/Key Performance Indicators

The following monitoring processes are in place for this policy:

Standard	Monitoring Process
Monitoring arrangements for compliance and effectiveness.	A report will be provided to the approving committee.
Responsibility for conducting the monitoring/audit.	The Anti-Crime Specialist will monitor the effectiveness of this policy.
Frequency of the monitoring/audit.	Annual.
Process for reviewing results and ensuring improvements in performance occur.	The Audit Committee will review the results of this audit/report. The discussion and action any action points will be recorded in the minutes and followed up by the Audit Committee.

18. **REFERENCES**

- Human Rights Act 1998. London: Stationery Office. Available at www.opsi.gov.uk/acts
- NHS Litigation Authority. (2007). An Organisation-wide Policy for the Development and Management of Procedural Documents, [Online], Available:
- Race Relations (Amendment) Act 2000. London: Stationery Office. Available at www.opsi.gov.uk/acts

- The Sex Discrimination (Gender Reassignment) Regulations 1999. London: Stationery Office. Available at www.opsi.gov.uk/acts
- The Sex Discrimination Act 1975 (Amendment) Regulations 2003. London: Stationery Office. Available at www.opsi.gov.uk/acts
- NHSCFAs Anti-Fraud Manual – NHSCFA, London.
- Applying Appropriate Sanctions Consistently. NHSCFA, London. Available at www.nhsbsa.nhs.uk/CounterFraud/Documents/Countering_Fraud_In_NHS_Applying_App_Sanctions.pdf
- Fraud Act 2006. Available at: <http://www.legislation.gov.uk/ukpga/2006/35/contents>
- The Bribery Act 2010. Available at: www.legislation.gov.uk/ukpga/2010/23/data.pdf

19. ASSOCIATED DOCUMENTATION (hyperlinks to be inserted)

- **CCG Disciplinary Policy**. Available at: <http://consulthr.cscsu.nhs.uk>
- **CCG Whistleblowing Policy**. Available at: <http://consulthr.cscsu.nhs.uk>
- **CCG Parallel Sanctions Policy**. Available at:
- **CCG Standards of Business Conduct including Gifts and Hospitality**. Available at
- **CCG Constitution and Standing Orders** Available at
- **CCG Prime Financial Policies and Financial Scheme of Delegation**. Available at

FORM 1

NHS Fraud and Corruption: Do's and Don'ts

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 is the offering, promising, giving, accepting or soliciting of an advantage as an inducement for an action which is illegal, unethical or a breach of trust.

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, 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 ACS.
- **Report your suspicions** – Confidential reports can be made to the CCG's Anti-Crime Specialist, Director of Finance, or the Fraud & Corruption Reporting Line.
- **Act quickly** - delays can lead to financial loss.

DON'T:

- **Confront the suspect or report your concerns to anyone other than those listed** – Never attempt to question a suspect yourself, this could alert them to your concerns.
- **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 ACS 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.
- **DO NOTHING!**

If you suspect that fraud is taking, or has taken, place, you must report it immediately by contacting one of the following:

- Anti-Crime Specialist – Sarah Pratley – 07769 640781, or spratley@nhs.net
- Executive Director of Finance – Robert Morgan – 07788 482043, or robert.morgan2@nhs.net
- Fraud & Corruption Reporting Line on 0800 028 4060
- Report online at www.cfa.nhs.uk/reportfraud

If you would like further information about the NHS Counter Fraud Service, please visit <https://www.cfa.nhs.uk/>

Appendix A Investigation of Fraud or Corruption

The investigation of fraud, bribery, and/or corruption at the CCG can be summarised in the following diagram.

