
Anti-Fraud Bribery and Corruption Policy

Version:	3.1
Ratified by:	NHS Bury Clinical Commissioning Group Governing Body
Date ratified:	6 th March 2020
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Responsible Committee / individual:	Audit Committee
Date issued:	6 th March 2020
Review date:	March 2022
Target audience:	NHS Bury Clinical Commissioning Group Members and Staff
Impact Assessed:	Yes

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Further information regarding this document

Document name	Anti- Fraud, Bribery and Corruption Policy CCG.GOV.008.1.1
Category of Document in The Policy Schedule	Governance
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This document should be read in conjunction with	NHS Bury CCG Constitution, Conflicts of Interest Policy, Risk management Strategy, Hospitality Policy, Standards of Business Conduct and Procurement Policy, Whistleblowing Policy, Disciplinary Policy
This document has been developed in consultation with	Audit Committee
Published by	NHS Bury Clinical Commissioning Group Townside Primary Care Centre 1 Knowsley Place Bury BL9 0SN Main Telephone Number: 0161 762 1500
Copies of this document are available from	The corporate PA office

Version Control

Version History:

Version Number	Reviewing Committee / Officer	Date
0.1 = draft 1	NHS Bury Clinical Commissioning Group	26 th Sept 2012
1.1 = Policy once ratified	NHS Bury Clinical Commissioning Group	27 th March 2013
2.1 = policy once reviewed	NHS Bury Clinical Commissioning Group	6 th March 2018
3.1 = policy once reviewed	NHS Bury Clinical Commissioning Group	6 th March 2020

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1 Summary

NHS Bury Clinical Commissioning Group (CCG) is committed to reducing the level of fraud, bribery and corruption within the NHS to an absolute minimum and keeping it at that level, freeing up public resources for better patient care. NHS Bury CCG does not tolerate fraud, bribery and corruption and aims to eliminate all such activity as far as possible.

NHS Bury CCG wishes to encourage anyone having reasonable suspicions of fraud, bribery or corruption to report them. It is also NHS Bury CCG's policy that no employee shall suffer in any way as a result of reporting reasonably held suspicions, and NHS Bury CCG will do its utmost to ensure that all members of staff can be confident that they will not suffer as a result of doing so. This protection is given under the Public Interest Disclosure Act, with which NHS Bury CCG is obliged to comply.

This policy has been produced by your Anti- Fraud Specialist (AFS) at MIAA and is intended as both a guide for all employees and stakeholders on the anti- fraud, bribery and corruption activities being undertaken within NHS Bury CCG and wider NHS. The policy also informs all CCG staff and stakeholders on how to report any concerns or suspicions they may have.

NHS Bury CCG's Anti - Fraud service is provided under contract by Mersey Internal Audit Agency. (MIAA), an NHS agency.

All genuine suspicions of fraud, bribery and corruption can be reported to the AFS on 0151 285 4500 or through the NHS Fraud and Corruption Reporting Line on Freephone 0800 028 40 60; the NHS online fraud reporting form www.cfa.nhs.uk/reportfraud ; directly via NHS Bury CCG's Chief Finance Officer; or through NHS Bury CCG's whistleblowing arrangements.

2 Introduction

2.1 General

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

Bury CCG (the 'CCG') is committed to reducing the level of fraud, bribery and corruption within the NHS to an absolute minimum and keeping it at that level, freeing up public resources for better patient care. The CCG does not tolerate fraud, bribery or corruption and aims to eliminate all such activity as far as possible.

The CCG wishes to encourage anyone having reasonable suspicions of fraud, bribery or corruption to report them. For the purposes of this policy "reasonably held

suspicious” shall mean any suspicions other than those which are totally groundless (and/or raised maliciously).

It is the CCG’s policy that no employee will suffer in any way as a result of reporting these suspicions. This protection is given under the provisions of the Public Interest Disclosure Act which the CCG is obliged to comply with.

The CCG will take all necessary steps to counter fraud, bribery and corruption in accordance with this policy, the NHS Anti-Fraud, Bribery and Corruption Manual, the policy statement ‘Applying Appropriate Sanctions Consistently’ published by NHS Counter Fraud Authority (NHS CFA), formerly known as NHS Protect and in line with the NHS CFA’s strategy ‘Tackling crime against the NHS: A strategic approach’ plus any other relevant guidance or advice issued by NHS CFA. The CCG will seek the appropriate disciplinary, regulatory, civil and criminal sanctions [as well as referral to professional bodies, where appropriate] against fraudsters and where possible will attempt to recover losses.

Each CCG is required by the NHS CFA Standards for Commissioners to appoint its own dedicated Anti-Fraud Specialist (AFS) who is accredited by the NHS CFA and accountable to them professionally for the completion of a range of preventative anti-fraud and corruption work, as well as for undertaking any necessary investigations. Locally, the AFS is accountable on a day-to-day basis to the CCG’s Chief Finance Officer and also reports, periodically, to the CCG Audit Committee.

All instances where fraud, bribery and/or corruption is suspected are thoroughly investigated by trained staff. Any investigations will be undertaken in accordance with the NHS Anti-Fraud and Corruption Manual.

[NB. For staff awareness, theft issues are usually dealt with by local security management (LSMS), not the AFS. However, the AFS will be mindful of any potential criminality identified in the course of any investigation and will, with the agreement of the Chief Finance Officer, notify the appropriate investigating authority].

NHS Bury CCG does not tolerate fraud, corruption or bribery within the NHS. The aim is to eliminate NHS fraud, bribery and corruption as far as possible.

2.2 Generic areas of action

NHS Bury CCG is committed to taking all necessary steps to counter fraud, bribery and corruption.

Under the NHS Standard Contract all organisations providing NHS services are required to put in place appropriate anti-fraud management arrangements. The NHS CFA approach to tackling fraud and other economic crime against the NHS (‘Leading the fight against NHS fraud: Organisational strategy 2017-20’) is guided by four principles:

- **Inform and involve:** raise awareness of fraud against the NHS, and work with over 1.3m NHS staff, with stakeholders and the public to highlight those risks and the consequences of fraud against the NHS;
- **Prevent and deter:** provide solutions to identified fraud risks, discourage individuals who may be tempted to commit fraud against the NHS and ensure that opportunities for fraud to occur are minimised;
- **Investigate, sanction and seek redress:** investigate allegations of fraud thoroughly and to the highest professional standards, where appropriate seek the full range of civil, criminal and disciplinary sanctions and seek redress where possible;
- **Continuously review and hold to account:** fraud is constantly evolving and continuous re-evaluation and improvement is needed to ensure that we keep ahead of the problem. Where this does not take place, or where there is a reluctance to do so, then organisations must be held to account for their inaction.

The overall requirement underpinning these principles is effective **strategic governance**, strong leadership and a demonstrable level of commitment to tackling fraud from senior management within organisations.

2.3 Aims and Scope

This policy has been produced by the CCG's AFS and is intended to provide direction and help to all employees [regardless of position], contractors, consultants, vendors and all other internal and external stakeholders who have a professional or business relationship with the CCG, on what fraud and corruption are in the NHS; what everyone's responsibility are to prevent fraud, bribery and corruption; and also how to report concerns and/or suspicions with the intention of reducing fraud to a minimum within the CCG. It will be brought to the attention of all employees by various methods and will form part of the induction process for new staff.

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, corruption or bribery. It provides a framework for responding to suspicions of fraud, bribery and corruption, advice and information on various aspects of fraud, bribery and corruption and implications of an investigation. It is not intended to provide a comprehensive approach to preventing and detecting fraud, bribery and corruption.

3 Definitions

The definitions applicable to this policy are as follows:

3.1 Fraud

The Fraud Act 2006 introduced an entirely new way of investigating and prosecuting fraud. Previously, the word 'fraud' was an umbrella term used to cover a variety of criminal offences falling under various legislative Acts. It is now no longer necessary to prove that a person has been deceived, or that the fraud was successfully carried out.

The focus is now on the dishonest behaviour of the suspect and their intent to make a gain either for themselves or another; to cause a loss to another; or expose another to a risk of a loss.

There are several specific offences under the Fraud Act 2006; however, there are three primary ways in which it can be committed that are likely to be investigated by the AFS:

The offence of fraud can be committed in three ways:

- **Fraud by false representation (s.2)** – lying about something using any means, e.g. falsifying a CV or NHS job application form.
- **Fraud by failing to disclose information (s.3)** – not saying or disclosing something when you have a legal duty to do so, e.g. failing to declare a conviction, disqualification or commercial interest when such information may have an impact on your NHS role, duties or obligation, and where you are required to declare such information as part of a legal commitment to do so.
- **Fraud by abuse of a position (s.4)** – abusing a position where there is an expectation to safeguard the financial interests of another person or organisation, e.g. a carer abusing their access to patients monies, or an employee using commercially confidential NHS information to make a personal gain.

It should be noted that all offences under the Fraud Act 2006 occur where the act or omission is committed dishonestly and with intent to cause gain or loss, or expose to a risk of loss. The gain or loss does not have to succeed, so long as the intent is there. Successful prosecutions under the Fraud Act 2006 may result in an unlimited fine and/or a potential custodial sentence of up to 10 years.

3.2 Bribery and Corruption

Bribery and corruption prosecutions can be brought using specific pieces of legislation:

- Prevention of Corruption Acts 1906 and 1916, for offences committed prior to 1st July 2011, and,
- Bribery Act 2010, for offences committed on or after 1st July 2011.

The Bribery Act 2010 reforms the criminal law of bribery, making it a criminal offence to:

- **give promise or offer a bribe (s.1), and/or**
- **request, agree to receive or accept a bribe (s.2)**

Corruption is generally considered to be an ‘umbrella’ term covering such various activities as bribery, fraud, money laundering, corrupt preferential treatment, kickbacks, cronyism and embezzlement. Under the Bribery Act 2010, however, bribery is now a series of specific criminal offences.

Generally, bribery is defined as: an inducement or reward offered, promised or provided to someone to perform their functions or activities improperly in order to gain a personal, commercial, regulatory and/or contractual advantage.

Examples of bribery in an NHS context could be a contractor attempting to influence a procurement decision-maker by giving them an extra benefit or gift as part of a tender exercise; or, a medical or pharmaceutical company providing holidays or other excessive hospitality to a clinician in order to influence them to persuade their organisation to purchase that company's particular clinical supplies.

A bribe does not have to be in cash; it may involve the awarding of a contract, the provision of gifts, hospitality, sponsorship, the promise of work, a job offer, or some other benefit or favour. The persons making and receiving the bribe may be acting on behalf of others – under the Bribery Act 2010, all parties involved may be prosecuted for a bribery offence.

All staff are reminded to ensure that they are transparent in respect of recording any gifts, hospitality or sponsorship and they should refer to the separate CCG's policy, the 'Conflict of Interest Policy and Hospitality Policy' covering:

- Acceptance of Gifts and Hospitality
- Declaration of Interests
- Sponsorship.

The Bribery Act 2010 is also extra-territorial in nature. This means that anyone involved in bribery activity overseas may be liable to prosecution in the UK if the bribe is in respect of any UK activity, contract or organisation. To this end, the Bribery Act 2010 also includes an offence of bribing a foreign public official [s.6].

In addition, the Bribery Act 2010 introduces a new 'corporate offence' [s.7] of the failure of commercial organisations to prevent bribery. The Department of Health Legal Service has stated that NHS bodies are deemed to be 'relevant commercial organisations' to which the Act applies. As a result, an NHS body may be held liable (and punished with a potentially unlimited fine) when someone "associated" with it bribes another in order to get, keep or retain business for the organisation. However, the organisation will have a defence, and avoid prosecution, if it can show it had "adequate procedures" in place designed to prevent bribery.

Finally, under s.14 of the Bribery Act 2010, a senior officer of the organisation (e.g. Chief Officer, Chair) would also be liable for prosecution if they consented to or connived in a bribery offence carried out by another. Under such circumstances, as an example, the Chief Officer may be prosecuted for a parallel offence to that brought against the primary perpetrator. Furthermore, the organisation could also be subject to an unlimited fine because of the Chief Officer's consent or connivance.

To reiterate, the Bribery Act 2010 is applicable to NHS organisations including NHS Bury CCG and, consequently, it also applies to (and can be triggered by) everyone “associated” with NHS Bury CCG who performs services for it, or on its behalf, or who provides NHS Bury CCG with goods. This includes those who work for and with NHS Bury CCG, such as employees, agents, subsidiaries, contractors and suppliers (regardless of whether they are incorporated or not). The term “associated person” has an intentionally wide interpretation under the Bribery Act 2010.

NHS Bury CCG adopts a zero tolerance attitude towards bribery and does not, and will not, pay or accept bribes or offers of inducement to or from anyone, for any purpose.

NHS Bury CCG is fully committed to the objective of preventing bribery and will ensure that adequate procedures, which are proportionate to our risks, are in place to prevent bribery and which will be regularly reviewed. We will, in conjunction with NHSCFA, seek to obtain the strongest penalties – including criminal prosecution, disciplinary and/or civil sanctions – against anyone associated with NHS Bury CCG who is found to be involved in any bribery or corruption activities.

As with the Fraud Act 2006, a conviction under the Bribery Act 2010 may ultimately result in an unlimited fine and/or a custodial sentence of up to 10 years imprisonment.

3.3 Employees

For the purposes of this policy, ‘employees’ includes NHS Bury CCG staff, as well as governing body members (including co-opted and lay members).

4 Codes of Conduct

The Codes of Conduct for NHS boards 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. These values are summarised as:

Accountability - Everything done by those who work in NHS Bury CCG must be able to stand the tests of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.

Probity - Absolute honesty and integrity should be exercised in dealing with NHS patients, assets, staff, suppliers and customers.

Openness - The health body’s activities should be sufficiently public and transparent to promote confidence between NHS Bury CCG and its staff and the public.

All staff, and those who work on behalf of NHS Bury CCG, should be aware of and act in accordance with these values. In addition they are also expected to:

- act impartially in all their work.

- refuse gifts, hospitality, benefits or sponsorship of any kind that might reasonably be seen to compromise their judgement or integrity; and, to avoid seeking to exert influence to obtain preferential consideration.
- declare and register gifts, hospitality, benefits or sponsorship of any kind, in accordance with limits agreed locally; whether refused or accepted.
- declare and record financial, non-financial or personal interest (e.g. company shares, research grant) in any organisation with which they have to deal, and be prepared to withdraw from those dealings if required, thereby ensuring that their professional judgement is not influenced by such considerations. make it a matter of policy that offers of sponsorship that could possibly breach the code be reported to the Board.
- not misuse their official position or information acquired in the course of their official duties to further their private interests or those of others.
- ensure professional registration (if applicable) and/or status are not used in the promotion of commercial products or services.
- beware of bias generated through sponsorship, where this might impinge on professional judgement or impartiality.
- neither agree to practice under any conditions which compromise professional independence or judgement, nor impose such conditions on other professionals.

All staff are also reminded that every NHS employee, regardless of position or status, must comply with the Conflicts of Interest in the NHS - Guidance for staff and organisations which may be accessed at: <https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf>

Relevant personnel are also reminded that their professional bodies will also have codes of conduct or standards of behaviour which they will be expected to adhere to.

5 Roles and Responsibilities

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, bribery or corruption exists, whether because of poor procedures or oversight, you should report it to the AFS; Chief Finance Officer; via NHS Bury CCG whistleblowing arrangements, or the NHS Fraud and Corruption Reporting Line and/or online Fraud Reporting Form.

This section states the roles and responsibilities of employees, stakeholders and other relevant parties in reporting fraud or corruption.

5.1 Role of NHS Bury CCG

NHS Bury CCG 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. 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, NHS Bury CCG has a duty to ensure that those concerns are listened to and addressed.

NHS Bury CCG's Chief Officer is liable to be called to account for specific failures in NHS Bury CCG's system of internal controls. However, responsibility for the operation and maintenance of controls falls directly to line managers and requires the involvement of all of CCG employees including those who provide support services on behalf of the organisation. NHS Bury CCG 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 Officer and Chief Finance Officer will monitor and ensure compliance with this policy.

The CCG's Governing Body (via its Audit Committee) has a duty to provide adequate governance and oversight of the CCG to ensure that its funds, people and assets are adequately protected against criminal activity, including fraud, bribery and corruption.

5.2 Employees

NHS Bury CCG's prime financial policies, and other policies and procedures place an obligation on all employees including governing body members and lay advisers to act in accordance with best practice.

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 NHS Bury CCG, including information, goodwill and property.

In addition, all employees have a responsibility to comply with all applicable laws, regulations and NHS policies 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 NHS Bury CCG 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, corruption or bribery, or has seen any suspicious acts or events, they must report the matter to the nominated AFS or other officially recognised NHS fraud reporting channel, as specified within this Policy.

5.3 Managers

Managers must be vigilant and ensure that procedures to guard against fraud, bribery and corruption are applied and monitored. 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 the nominated AFS.

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 desktop guide (Appendix A) 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.

The AFS will proactively assist the encouragement of an anti-fraud, bribery and corruption culture by undertaking and cooperate with work that will raise fraud awareness.

All instances of actual or suspected fraud, bribery and 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 the AFS and CFO 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 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 cooperation of all employees.

As part of that responsibility, line managers need to:

- inform staff of NHS Bury CCG's code of business conduct and Anti-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 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 NHS Bury CCG.
- be aware of NHS Bury CCG's Anti-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 NHS Bury CCG risk management arrangements.

5.4 Anti – Fraud Specialist (AFS)

CCGs are required by the NHS CFA Standards for Commissioners to nominate and appoint an AFS. The AFS is operationally accountable to NHS Bury CCG's Chief Finance Officer, and reports on the progress of all anti-fraud and corruption activity to NHS Bury CCG's Audit Committee.

The AFS will regularly report to the Chief Finance Officer on the progress of anti- fraud work, including investigations, and when/if referral to the police is required.

The AFS will also:

- ensure that the Chief Finance Officer is informed about all referrals/cases and approves any necessary investigation activity.
- in particular, conduct investigations of all alleged fraud, bribery and corruption in accordance with the NHS Counter Fraud and Corruption Manual and relevant criminal law.
- be responsible for the day-to-day implementation of the key principles of anti- fraud, bribery and corruption activity and, in particular, the investigation of all suspicions of fraud, bribery and corruption.
- in consultation with the Chief Finance Officer, report any case to the police or NHS CFA as agreed and in accordance with the NHS Counter Fraud and Corruption Manual.
- report any case and the outcome of the investigation through the NHS CFA national case management system.
- ensure that other relevant parties are informed where necessary, e.g. the Human Resources (HR) service will be informed if an employee is the subject of a referral.
- ensure that CCG's incident and losses 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.
- adhere to the Counter Fraud Professional Accreditation Board (CFPAB) Principles of Professional Conduct as set out in the NHS Counter Fraud and Corruption Manual.
- not have responsibility for or be in any way engaged in the management of security for any NHS body.
- ensure that the Chief Finance Officer is informed of any known NHSCFA

investigations, including progress updates.

5.5 NHS Counter Fraud Authority (NHSCFA)

NHS CFA deliver anti-crime work that cannot be carried out by NHS health bodies regionally or in isolation. They use intelligence to identify serious and complex economic crime, reduce the impact of crime and drive improvements in anti-crime work. Local NHS organisations are primarily accountable for dealing with crime risks in the NHS. NHS CFA provides information and guidance to local AFSs to improve anti-fraud, bribery and corruption work across the NHS.

NHSCFA's main objectives are:

- to deliver the Department of Health (DH) strategy, vision and strategic plan, and be the principal lead for counter fraud activity in the NHS in England;
- Be the single expert intelligence led organisation providing a centralised investigation capacity for complex economic crime matters in the NHS
- Lead and influence the improvement of standards in counter fraud work across the NHS
- to take the lead and encourage fraud reporting across the NHS and wider health group,

5.6 Chief Finance Officer

The Chief Finance Officer, in conjunction with the Chief Officer, monitors and ensures compliance with NHS Bury CCG's requirements regarding fraud, bribery and corruption.

The Chief Finance Officer will, depending on the outcome of investigations (whether on an interim/ongoing or concluding basis) and/or the potential significance of suspicions that have been raised, inform appropriate senior management accordingly.

The AFS shall be responsible, in discussion with the Chief Finance Officer, for informing third parties such as external audit or the police at the earliest opportunity, as circumstances dictate.

The Chief Finance Officer will inform and consult the Chief Officer in cases where the loss may be above the agreed delegated limit or where the incident may lead to adverse publicity.

The Chief Finance Officer will delegate any fraud investigations to NHS Bury CCG's AFS who has responsibility for leading the investigation, whilst the CFO retains overall responsibility for the work. The Chief Finance Officer will inform the head of internal audit of any fraud investigations.

The Chief Finance Officer or the AFS will consult and take advice from the Head of HR

if a member of staff is to be interviewed or disciplined. The Chief Finance Officer or AFS will not conduct a disciplinary investigation, but the employee may be the subject of a separate investigation by the HR service.

5.7 Internal and External Audit

The role of internal and external audit includes reviewing controls and systems and ensuring compliance with financial instructions.

Any incident or suspicion of fraud, corruption or bribery that comes to internal or external audit's attention will be passed immediately to the nominated AFS. The outcome of the investigation may necessitate further work by internal or external audit to review systems.

5.8 People Services (Human Resources)

NHS Bury CCG's Human Resources service will liaise closely with managers and the AFS from the outset if an employee is suspected of being involved in fraud, bribery and/or corruption, in accordance with agreed liaison protocols. NHS Bury CCG's HR service is responsible for ensuring the appropriate use of NHS Bury CCG's disciplinary procedure. NHS Bury CCG's HR service 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 AFS 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.

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.

5.9 Information Management and Technology

NHS NHS Bury CCG's provider of Information Management and Technology will contact the AFS immediately in all cases where there is suspicion that NHS Bury CCG's Information and Communications Technology (ICT) is being used for fraudulent purposes in accordance with the Computer Misuse Act 1990. . Similarly, the Head of Information Security will liaise closely with the AFS to ensure that a subject's access (both physical and electronic) to CCG ICT resources is suspended or removed where an investigation identifies that it is appropriate to do so.

6 Reporting Fraud, Bribery and Corruption

6.1 Reporting Fraud, Bribery and Corruption

This section outlines the action to be taken if fraud, bribery or corruption is discovered or suspected. If an employee or stakeholder has any of the concerns mentioned in this document, they must inform the Anti – Fraud Specialist Paul McGrath at MIAA Tel; 0151 285 4500 or Email; paul.mcgrath@miaa.nhs.uk

If the referrer believes that the Chief Finance Officer or AFS is implicated, they should notify whichever party is not believed to be involved who will then inform the Chief Officer and Audit Committee Chairperson.

The Desktop Guide [Appendix A] provides a reminder of the key contacts and a checklist of the actions to follow if fraud, bribery and corruption, or other related 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.

If any employee or stakeholder feels unable, for any reason, to report the matter as above, they can also call the **NHS Fraud and Corruption Reporting Line on Freephone 08000 28 40 60** or report their concerns via the **NHS Online Fraud Reporting Form** www.cfa.nhs.uk/reportfraud

This provides an easily accessible route for the reporting of genuine suspicions of fraud, bribery and corruption within or affecting the NHS. It allows those people 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.

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 AFS 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 and stakeholders are encouraged to report reasonably held suspicions directly to the AFS. You can do this by filling in the Referral Form [Appendix B] or by using the AFS contact details supplied on the desktop guide.

NHS Bury CCG wants all employees and stakeholders 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, NHS Bury CCG has produced a Whistleblowing Policy. This procedure is intended to complement this policy as well as other relevant CCG policies 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. Corporate policies can be found on NHS Bury CCG's intranet.

6.2 Sanctions and Redress

The CCG's 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 this organisation's commitment to take fraud, bribery and corruption seriously and ultimately contributes to the deterrence and prevention of such actions.

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

The types of sanction which this organisation may apply when a financial offence has occurred include:

- Civil Redress – We will seek financial redress, whenever possible, to recover losses (of money or assets), including interest and costs, to fraud, bribery and corruption. Redress can be sought in various ways. These include confiscation or compensation orders or use of the Proceeds of Crime legislation in the criminal courts, as well as civil legal sanctions such as an order for repayment or an attachment to earnings where appropriate, in addition to any locally agreed voluntary negotiations or repayments. As an organisation, we actively publicise the fact that redress will be sought where applicable to recover monies lost to fraud and corruption, thus creating a further deterrent effect.
- Criminal Prosecution – The AFS will work in partnership with NHS CFA, the police and/or the Crown Prosecution Service, where appropriate, to bring a case to court against an alleged offender. Outcomes can range from a criminal conviction to fines and imprisonment.
- Disciplinary Sanctions – Disciplinary procedures will also be initiated where an employee is suspected of being involved in a fraudulent or illegal act. The disciplinary policy can be located on the CCG's intranet policies page or via the CCG's Corporate Office, Email BUCCG.corporateoffice@nhs.net or via the CCG's HR Lead.

- Professional Body Disciplinary Sanctions – Where appropriate and if warranted, the organisation reserves the right to also report staff to their professional body as a result of a successful investigation and/or prosecution.

7 Appendices

Appendix A (Page 20) Desktop

Appendix B (Page 21) Referral Form

8 Consultation Process

Key individuals/groups involved in the development of the document to ensure it is fit for purpose are the Chief Finance Officer and the Audit Committee.

Name	Designation
CCG's Audit Committee Members	Audit Committee

9 Dissemination and Implementation

9.1 Dissemination

NHS Bury CCG will endeavour to ensure that this policy is communicated to all individuals to who this policy applies.

The policy will be communicated to all Staff and Managers via the NHS Bury CCG website.

New employees will be made aware of the policy through the local induction pack and its location on the NHS Bury CCG website.

9.2 Implementation

The CCG's AFS will be responsible for implementing this policy and all CCG managers have a responsibility to ensure that all staff are made aware of the policy and understand it. The AFS will provide training where required.

10 Process for Monitoring Compliance and Effectiveness

Monitoring is essential in ensuring that controls are appropriate and robust enough to prevent or reduce fraud. Through the reviewing of system controls, conducting investigations and identifying weaknesses, the AFS will monitor the policy's effectiveness. Outcomes will be summarised and documented through the CCG's Audit Committee.

11 Standards/Key Performance Indicators

NHS CFA Standards for Commissioners

NHS Standard Contract

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 AFS 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.

12 References

NHS Anti – Fraud Manual (restricted access)

NHS Counter Fraud Authority- Standards for Commissioners

NHS Investigations Toolkit

NHS Bury Whistleblowing Policy

NHS Bury Disciplinary Policy

NHS Bury Conflicts of Interest Policy

NHS Bury Prime Financial documents - Standing Financial Instructions, Standing Orders and the Scheme of Delegation

NHS Business Services Authority. (2004). Codes of Conduct for NHS Boards and NHS Managers http://www.nhsbsa.nhs.uk/Documents/Sect_1_-_D_-_Codes_of_Conduct_Acc.pdf

NHS Counter Fraud Authority (2017) Leading the fight against NHS fraud: Organisational strategy 2017-2020 [online]. Available at: <https://cfa.nhs.uk/about-nhsdfa/corporate-publications>

Appendix A

A DESKTOP GUIDE TO REPORTING NHS FRAUD, BRIBERY AND CORRUPTION

FRAUD: is a criminal offence. It means the dishonest intention 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:** it is a criminal offence to promise, offer, give, request or receive a financial or other advantage such as a gift or a favour intended to induce or reward someone to perform their duties improperly in relation to work or public function. **CORRUPTION:** is an umbrella term for various dishonesty offences, such as money laundering, misconduct in a public office, price-fixing.

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 or secure evidence**

Retain any evidence that may be destroyed, but do not alter or write on it in any way.

- **Report your suspicion promptly**

Confidentiality will be respected – delays may lead to further financial loss.

- **Be discreet**

Don't discuss your concerns with anyone who doesn't need to know

DO NOT

- **Confront the suspect or convey concerns to anyone other than those authorised**

Never attempt to question a suspect yourself; this could alert a fraudster and place you at harm.

- **Try to investigate the concern yourself**

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 AFS will 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 against the NHS has taken place, you must report it immediately, by:

- directly contacting the **Anti-Fraud Specialist**, or
- telephoning the **freephone** NHS Fraud and Corruption Reporting Line, or
- online via the fraud reporting form www.cfa.nhs.uk/reportfraud or
- contacting the **Chief Finance Officer**.

Report NHS Fraud, Bribery & Corruption – contact details:

Your CCG AFS Paul McGrath : **0151 285 4500 (MIAA)**
NHS Fraud and Corruption Reporting Line: **0800 028 40 60**
NHS Online Reporting Form: www.cfa.nhs.uk/reportfraud

Your nominated **Anti-Fraud Specialist** is **Paul McGrath**, who can be contacted by telephoning **0151 285 4500**, or emailing paul.mcgrath@miaa.nhs.uk

If you would like further information about NHS Counter Fraud Authority or the work of the AFS, please visit <https://cfa.nhs.uk>

Protecting your NHS from Fraud, Bribery and Corruption

Appendix B

NHS Fraud, Bribery and Corruption Referral Form

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

Referrals should only be made when you can substantiate your suspicions with one or more reliable pieces of information. Anonymous applications 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 provide/attach any available additional information that may be useful, but please do not send any original evidence through the postal service.

Submit the completed form (in a sealed envelope marked 'Restricted – Management' and 'Confidential') for the attention of NHS Bury CCG Anti-Fraud Team, Mersey Internal Audit Agency, Regatta Place, Brunswick Business Park, Summers Road, Liverpool L1 2AP