

COUNTER FRAUD POLICY & RESPONSE PLAN

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Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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| 2.0 | Revision of version 1.0 | Local Counter Fraud Specialist | July 2014 |
| 3.0 | Revision of version 2.0 to include details of new LCFS | Local Counter Fraud Specialist | February 2017 |
| 3.1 | Update to reflect establishment of NHS Counter Fraud Authority (NHSCFA), replacing NHS Protect | Local Counter Fraud Specialist | October 2017 |

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

This is an online document. Hard copies and downloaded versions are valid only on the day printed or downloaded. It is the responsibility of staff to verify current status from the Intranet.

Contents

| 1.0 | INTRODUCTION | 4 |
|------|---|------|
| 2.0 | PURPOSE | 4 |
| 3.0 | LEGISLATIVE FRAMEWORK | 5 |
| 4.0 | SCOPE | 6 |
| 5.0 | DEFINITIONS | 6 |
| 6.0 | PUBLIC SERVICE VALUES | 9 |
| 7.0 | RESPONSIBILITIES WITHIN THE ORGANISATION | 100 |
| 8.0 | FRAUD RESPONSE PLAN | 15 |
| 9.0 | CONSULTATION AND COMMUNICTION WITH STAKEHOLDERS | 19 |
| 10.0 | APPROVAL OF POLICY | 19 |
| 11.0 | RESPONSIBILITY FOR DOCUMENT DEVELOPMENT | . 19 |
| 12.0 | MONITORING COMPLIANCE and EFFECTIVENESS | 21 |
| 13.0 | ASSOCIATED DOCUMENTS | . 22 |
| APPE | NDIX A: FRAUD RESPONSE PLAN | . 24 |
| 14 0 | FOLIALITY IMPACT ANALYSIS | 29 |

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

This is an online document. Hard copies and downloaded versions are valid only on the day printed or downloaded. It is the responsibility of staff to verify current status from the Intranet.

PRINT DATE -

1.0 INTRODUCTION

- 1.1 One of the basic principles of public sector organisations is the proper use of public funds. The NHS is a publicly funded service and consequently it is important that every employee of Whittington Health ("the Trust") is aware of the risk of fraud and bribery and is familiar with the procedures for reporting any suspicions or concerns.
- **1.2** The Fraud Policy and Response Plan ("the Policy") sets out the Trust's position on the risk of fraud and bribery and explains the procedures for reporting and investigating allegations of fraud and bribery.
- 1.3 The policy reflects the Trust Board's commitment to embedding an anti-fraud culture throughout the organisation. The Trust Board fully endorses and promotes 'best practice' fraud prevention measures aimed at reducing and keeping to an absolute minimum the risk of financial loss or reputational damage.
- **1.4** The Policy is designed at strengthening the existing fraud and bribery risk management framework which includes the Standing Orders, Standing Financial Instructions, system of internal controls, risk assessment process, and related policies, including the Trust's Disciplinary Policy.
- 1.5 NHS Counter Fraud Authority (NHSCFA) is responsible for all policy and operational matters in relation to prevention, detection and investigation of fraud, bribery and corruption in the NHS.
- 1.6 The Trust endorses the NHS National Counter Fraud Strategy and has complied with the Secretary of State Directions ("the Directions") as contained within the National Standard Commissioning Contract by nominating a Local Counter Fraud Specialist ("LCFS").
- 1.7 The LCFS conducts investigations in accordance with the requirements of the NHS Counter Fraud and Corruption Manual as stipulated by the aforementioned Directions and NHSCFA guidance

2.0 PURPOSE

2.1 The purpose of this policy is to:

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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- Explain the Trust's responsibilities, including those of all persons working for or on behalf of the Trust, in observing and upholding our zero-tolerance position on fraud and bribery.
- Provide information and guidance to promote awareness of fraud and bribery risks.
- Provide a resource to assist with any queries or concerns regarding investigations of suspected fraud or bribery.
- 2.2 This policy is not intended to provide detailed direction on the prevention of fraud or bribery in any particular departments or control systems.

3.0 Legislative Framework

- 3.1 The Fraud Act 2006 largely replaced laws relating to obtaining property by deception and obtaining a pecuniary advantage under the Theft Act 1978. The Fraud Act provides that a person found guilty of fraud is liable to a fine or imprisonment for up to 12 months on summary conviction, or a fine or imprisonment for up to 10 years for conviction on indictment.
- 3.2 The Bribery Act 2010 covers the criminal law relating to bribery. The Bribery Act repealed all previous statutory and common law relating to bribery, replacing them with crimes of bribery, being bribed, bribing foreign officials and the failure of commercial organisations to prevent bribery. The penalties for committing any of these offences includes an unlimited fine and a maximum of 10 years' imprisonment.
- **3.3** A whistleblowing concern is where an employee reports a serious risk, malpractice, or wrongdoing that affects others. It could be something which adversely affects patients, the public, other staff or the organisation.
- 3.4 The Public Interest Disclosure Act (PIDA) 1998 provides a clear signal that it is safe and acceptable for all staff to raise any specific concerns that they may have. By providing strong protection for those who raise concerns, the legislation will help ensure that employers address the message and not the messenger. It is a safety net for the Trust, its employees and users of its services. Additionally, since February 2016 NHSCFA (under its previous guides, NHS Protect) has become a 'prescribed person' under the Act and any employee reporting fraud direct to NHSCFA will qualify for the same protection as if they had made a disclosure to their employer. The fundamental principle behind the legislation is to improve governance and accountability within organisations.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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- 3.5 Often it is only through whistleblowing that this information comes to light and can be addressed before real damage is done. Whistleblowing is a valuable activity which can positively influence all of our lives. The Trust Board fully endorses the provisions of PIDA and wishes to encourage anyone having reasonable suspicions of fraud, corruption and/or bribery to report them in accordance with the Trust's Whistleblowing Policy.
- **3.6** Please see the Whistleblowing Policy for additional information.

4.0 SCOPE

4.1 The Policy applies to all individuals working at all levels including the Trust Board, Executive and Non-Executive Members (Including co-opted members), Honorary Members of the Board, Governors, employees (whether permanent, fixed-term, or temporary), contractors, trainees, seconded, home-workers, casual staff and agency staff, interns and students, agents, sponsors, volunteers or any other person associated with the Trust.

5.0 Definitions

5.1 Fraud

Although there is no legal definition of the offence of fraud, it can be understood as acting dishonestly with the intention thereby of obtaining a financial gain from, or causing a financial loss to, another party.

The Fraud Act 2006 describes three main ways in which an offence under the Act may be committed: : fraud by false representation (Section 2); fraud by failure to disclose information (Section 3); and fraud by abuse of position (Section 4).

5.2 Examples of NHS Fraud

There is a wide variation in the types of fraud that can be committed against any NHS Trust. The following list of examples reflects this variation:

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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- Fraudulent job applications (e.g. falsely stated qualifications or immigration status).
- Timesheet fraud (e.g. staff and professionals claiming money for shifts they have not worked).
- False expense claims (e.g. false travel or subsistence claims).
- Working elsewhere whilst off sick (e.g. usually working for another organisation without informing the Trust).
- Procurement Fraud (e.g. bid rigging/splitting; false invoices from bogus suppliers for non-existent services; collusion between suppliers; purchase order and contract variation orders).
- Patient Fraud (e.g. false travel claims; fraudulently claiming exemptions for pharmaceutical charges).
- Unauthorised use of NHS time, facilities or equipment for financial gain e.g. unauthorised performance of private practice in 'NHS time'.

5.3 Bribery

Bribery is the giving or receiving something of value to influence a transaction.

There are four offences of bribery within the Bribery Act 2010:

- Two general offences (Sections 1 & 2) covering the offering, promising or giving of an advantage, and the requesting, agreeing to receive or accepting of an advantage.
- A discrete offence of bribery of a foreign public official (Section 6) to obtain or retain business or an advantage in the conduct of business.
- A new offence (Section 7) of failure by commercial organisations to prevent persons associated with them from committing bribery on their behalf.

Under the Section 7 offence, an organisation has a full legal defence if it can show that, while bribery did take place, the organisation had "adequate procedures" in place for preventing bribery from occurring.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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5.4 Examples of Bribery

There is a broad range of scenarios and circumstances where bribery could occur. A non-exhaustive list of examples of where bribery could take place is as follows:

Offering a bribe

 You offer a potential client tickets to a major sporting event but only if they agree to do business with the Trust.

Receiving a bribe

- A supplier gives your nephew a job but makes it clear that in return they
 expect you to use your influence in the Trust to ensure that we continue to
 do business with them.
- Someone responsible for awarding an employment contract is offered gifts and/or hospitality by one of the candidates or someone linked to them to ensure they get the job.
- Someone responsible for booking bank or agency staff is offered lavish gifts and/or hospitality by an agency to ensure their agency staff are booked by the Trust.
- Someone responsible for choosing suppliers (medical or non-medical) or awarding business contracts is offered gifts and/or hospitality by an existing/new supplier, contractor or business to ensure they are selected as a supplier.
- Someone associated with the purchasing of drugs and/or the selection of approved drugs to the Trust Formulary is offered gifts, hospitality and/or paid expenses by a medical representative or pharmaceutical company to ensure their drugs are purchased and/or added to the Trust Formulary for prescribing by the Trust.
- Someone associated with the prescribing of drugs is offered gifts and/or hospitality by a medical representative or pharmaceutical company or to ensure they prescribe their drugs.
- Someone associated with the provision of training is offered gifts and/or hospitality by an external training company to ensure they are selected to provide training at the Trust.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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6.0 Public Service Values

6.1 Staff must be impartial and honest in the conduct of their business and remain above suspicion whilst carrying out their role within the Trust. The Code of Conduct for NHS Boards published by the NHS Executive in April 1994 sets out the public service values.

Staff and those working for the Trust are expected to:

- Ensure that the interests 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.

These values are set out within the Code of Conduct as follows:

Accountability

Everything done by those who work in the organisation 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 organisation's activities should be sufficiently public and transparent to promote confidence between the organisation and its patients, staff and the public.

All those who work in the organisation should be aware of, and act in accordance with, these values.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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7.0 Responsibilities within the Organisation

7.1 Trust's Corporate Secretary

- Advising staff / Office Holders on the contents of this policy.
- Providing guidance for staff / Office Holders on refusal or acceptance for gifts or hospitality.
- Receive declarations for inclusion in the Gifts and Hospitality Register.
- Maintaining a central register of gifts and hospitality.
- Ensure that this policy is compliant with pertinent legislation and guidance.

7.2 Chief Executive

The Chief Executive, as the accountable officer, has the overall responsibility for funds entrusted to the Trust and must ensure adequate policies and procedures are in place to protect the Trust and funds from fraud, bribery and corruption.

7.3 Chief Finance Officer

The Chief Finance Officer ("CFO") has overall responsibility for ensuring compliance with the National Standard Commissioning Contract Directions on fraud, corruption and bribery.

Under the Directions issued under the National Standard Commissioning Contract the CFO has a legal responsibility to make sure fraud and corruption is prevented, detected and investigated. Combating fraud 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 Directions, the CFO has nominated an LCFS to tackle fraud, corruption and bribery within the Trust.

Where a referral concerning fraud or corruption has been made to the CFO, the CFO will notify the LCFS at the first opportunity and delegate to him/her responsibility for leading any investigation whilst retaining overall responsibility him/herself.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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The CFO shall inform and consult the Chief Executive in cases where the loss may be above the delegated limit or where the incident may lead to adverse publicity.

7.4 Local Counter Fraud Specialist

The LCFS is responsible for managing and delivery of all counter fraud work within the Trust in accordance with an agreed annual work plan. Under the National Standard Commissioning Contract Directions and the Trust's Standing Orders and Standing Financial Instructions, the LCFS is responsible for investigating allegations of fraud and corruption at the Trust. Presently, the Trust has contracted with BDO to provide a counter fraud service. Our nominated LCFS is James Shortall of BDO LLP.

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

- Strategic Governance This section sets out the standards in relation to the organisation's strategic governance arrangements. The aim is to ensure that anti-crime measures are embedded at all levels across the organisation.
- Inform and Involve This section sets out the requirements in relation to raising awareness of crime risks against the NHS and working with NHS staff, stakeholders and the public to highlight the risks and consequences of crime.
- Prevent and Deter This section sets out the requirements in relation to discouraging individuals who may be tempted to commit crimes against the NHS and ensuring that opportunities for crime to occur are minimised.
- Hold to Account This section sets out the requirements in relation to detecting and investigating crime, prosecuting those who have committed crimes and seeking redress.

The LCFS reports to the CFO, but any Staff at the Trust can speak to and ask for advice from the LCFS. The LCFS is authorised to receive reports of suspected fraud from anyone, whether an employee of the Trust, independent

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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contractors, patients or other third party. All Staff have a responsibility to the Trust to raise their genuine concerns.

The LCFS employs a risk-based methodology to enable the Trust to target resources at high risk areas and throughout the year undertakes proactive reviews in these areas which can detect fraud. Such reviews together with Investigations, ensures the LCFS identify and counters vulnerabilities within the Trust's systems by implementing effective prevention, detection and corrective controls to reduce the likelihood of fraud.

7.5 Director of Human Resources

The Director of Human Resources (HR) is responsible for 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 Director of HR and the LCFS.

7.6 Audit and Risk Committee

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

7.7 Staff

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

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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

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

Any gifts or hospitality made to or received from a 'third party' in the course of Trust duties, and which exceeds the threshold stipulated in the Trust's Hospitality Policy must be formally declared and registered in accordance with this policy.

A 'third party' means any individual or organisation who members of staff may come into contact with during the course of their work with the Trust and includes actual and potential clients, suppliers, distributors, business contacts, agents, advisors, government and public bodies, including their advisors, representatives and officials, politicians, and political parties.

Staff must declare any possible conflicts of interest which they may have in contracts entered into by the Trust, or which relates to aspects of their work for the Trust (such as business interests or other employment) and these must be noted in a register maintained for that purpose.

All Non-Executives are required to declare and register potential conflicts between their duties and personal or professional lives.

Please refer to the Trust's 'Standards of Business Conduct Policy' for more guidance on the standards of business conduct expected of all Staff.

If Staff suspect that there has been fraud, corruption or bribery, they must report the matter to the nominated LCFS. See section below.

7.8 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 and/or bribery that comes to Internal or External Audit's attention will be passed immediately to the LCFS.

7.9 Local Security Management Specialist

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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Any incident or suspicion of fraud, corruption and/or bribery that is reported to the Local Security Management Specialist (LSMS) will be passed immediately to the LCFS.

The LSMS works within the Trust to minimise safety and security risks (in relation to Trust property and Staff) and investigate any allegations of theft and abuse of Trust property and assets.

7.10 All Managers

- Ensuring that their staff are aware of, and adhere to, this policy.
- Have a responsibility to ensure that staff are aware of fraud, bribery and corruption and understand the importance of protecting the Trust from it.
- Make declarations of receipt of gifts or hospitality where required.
- Provide advice and guidance to staff on the receipt of gifts / hospitality in the first instance, and consult the Trust's Corporate Secretary where additional guidance is required.

7.11 All Staff

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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- Ensuring they are aware of, and follow this policy.
- Make declarations of receipt of gifts or hospitality where required in consultation with their line manager.
- Refuse gifts, inducements or hospitality other than items of modest value.
- Staff with authority to commit expenditure must declare any relevant and material interests.
- Do not use your official position for private gain.
- Respect confidentiality of business information.
- Act in accordance with the seven Nolan principles on standards in public life: selflessness, integrity, objectivity, accountability, openness, honesty and leadership.
- Use the agreed procedures to raise any issues which concern you with your line manager or the Trust's Corporate Secretary.

7.12 Office Holders

- The Board has also determined that Office Holders (e.g. members of Committees/Sub-Committees) must comply with this policy.
- Make declarations of receipt of gifts or hospitality where required in consultation with their line manager.

8.0 FRAUD RESPONSE PLAN

8.1 The Response Plan

The Trust is committed to tackling fraud and bribery. When fraud or bribery is identified there is a need for clear, prompt and appropriate action. The Trust's fraud and bribery response plan increases the likelihood that any incidence will be managed effectively. Appendix A contains further an overview of the fraud response process.

The LCFS will conduct all investigations in accordance with national guidance and in particular in full compliance with the National Fraud and Corruption

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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Manual issued by NHS Protect. This will cover all aspects of conducting a professional investigation, including gathering evidence and interviewing.

It should be added that under no circumstances should a member of staff speak or email, or write to representatives of the press, TV, radio or to another third party about a suspected act of fraud or bribery without the express authority of the Chief Executive except within the provisions stated in the Trust's Whistleblowing Policy. Care needs to be taken to ensure that nothing is done that could give rise to an action for slander or libel.

In some cases, e.g. 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.

8.2 Referring a Suspicion of Fraud

Anyone, whether Staff or a member of the public, can refer such allegations to the LCFS. Upon receipt of a referral, the LCFS must comply with national regulations including the National Standard Commissioning Contract Directions.

If any Staff have good reason to suspect a colleague, patient or other person of fraud, corruption and/or bribery, involving the Trust, they should report their genuine concerns to the LCFS or CFO immediately.

The LCFS will then decide on the next course of action and advise the member of staff accordingly.

Suspicions of fraud should be reported to any of the following:

- 1. The Chief Finance Officer
- 2. Local Counter Fraud Specialist
- 3. NHS Fraud and Corruption Reporting Line on **0800 028 4060**
- 4. Report fraud on-line at www.reportnhsfraud.nhs.uk
- 5. Public Concern at Work on **020 7404 6609.** This is an independent charity who can offer advice on how to proceed.

All referrals will be taken seriously and treated with due sensitivity.

If HR or any other Staff in the Trust receives any allegations of fraud, corruption and/or bribery, they should refer them to the LCFS before taking any further action.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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Time may be of the utmost importance to prevent further loss to the Trust. Staff should be encouraged to report their first suspicions and not undertake lengthy consideration of alternative explanations. They should be reassured that all initial investigation into their suspicions will be of the highest professional standard. Where during an initial investigation, no evidence of fraud is found, the LCFS will ensure there is sensitive consideration given to the innocent suspect, and the individual who first reported the allegation.

All reported allegations of fraud will be referred to the CFO, including those immediately dismissed as minor or otherwise not investigated. The LCFS will initiate and maintain a Diary of Events (or such record as required by the NHS Counter Fraud and Corruption manual) to record the progress of the investigation.

8.3 Responding to an Allegation

- 8.3.1 Where a referral concerning fraud or corruption has been made to the CFO, the CFO shall inform the LCFS at the first opportunity. There is a protocol for the referral, acknowledgement, investigation and reporting of all allegations.
- 8.3.2 On receipt of a referral/allegation of suspected fraud, the LCFS will assess the allegation to determine a course of action. This may involve making preliminary enquiries such as obtaining information from Trust systems.
- 8.3.3 After such preliminary enquiries, where appropriate, the LCFS will seek agreement from the CFO to carry out an investigation.
- 8.3.4 If a criminal event is believed to have occurred but fraud, corruption or bribery is not suspected, the CFO must immediately inform the police and the LSMS if theft or arson is involved, and where appropriate the Board and External auditors, in accordance with the Trust's Standing Financial Instructions.
- 8.3.5 The LCFS is responsible for investigating all instances of fraud committed against the Trust.
- 8.3.6 The LCFS will regularly report to the CFO on all fraud and/or bribery cases they investigate, at particular stages of individual investigations. In addition the LCFS will provide the Audit and Risk Committee with regular updates as to the progress of investigations.
- 8.3.7 Depending upon the nature of the investigation, the LCFS will normally work closely with management and other agencies such as the Police

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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- to ensure that all matters are properly investigated and reported upon. The circumstances of each case will dictate who will be involved and when.
- 8.3.8 The detailed arrangements for the investigation of any suspected fraud or corruption are contained in the NHS Counter Fraud and Corruption Manual. The LCFS will record the progress of the investigation in accordance with the legal codes of practice (Police and Criminal Evidence Act 1984, Regulation of Investigatory Powers Act 2000, Criminal Procedures and Investigation Act 1996) and other legislative requirements (e.g. Data Protection Act 1998).
- 8.3.9 On the conclusion of the investigation the LCFS will report their findings and recommendations to the CFO. The CFO is the sole person who can determine whether or not any formal action is justified and what form such action takes. However, guidance can be sought from the Chief Executive and the LCFS.
- 8.3.10 If the CFO decides that formal action is to be taken against the subject(s) of an investigation, the LCFS will comply with the Counter Fraud and Security Management Service (NHS Protect) 'Applying Appropriate Sanctions Consistently' Policy. This will involve using an appropriate combination of the sanctions described below:
 - Disciplinary action: internal and/or Professional Regulatory Body (warning, dismissal).
 - Civil remedy: recovery of money, interest and costs.
 - Criminal prosecution: may result in imprisonment, community penalty, fine, confiscation or compensation.
- 8.3.11 The use of parallel sanctions or the 'triple track' approach helps to maximise the recovery of NHS funds and assets whilst minimising duplication of work.
- 8.3.12 The Trust's Disciplinary Policy will be used where the outcome of the investigation indicates improper behaviour on the part of Staff.
- 8.3.13 The LCFS shall liaise with the Director of HR regarding providing evidence for disciplinary hearings.
- 8.3.14 Where the Trust has suffered a financial loss from a fraud, the Trust will take action to pursue recovery in all applicable cases, subject to authorisation from the CFO.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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- 8.3.15 The LCFS will seek authorisation from the CFO if a matter is to be reported to the Police. The LCFS will liaise with Police by providing a prosecution file and participating in interviews and searches. The LCFS shall attend court to give evidence and liaise with the Crown Prosecution Service (CPS) as required.
- 8.3.16 The LCFS acts on behalf of the Trust in the event of any formal action and must ensure there is coordination between the various parties involved such as where external legal advisers are used.
- 8.3.17 8.3.16 When a fraud, corruption or bribery has occurred at the Trust, the LCFS will strengthen the control environment in which the event occurred by identifying system weaknesses and making recommendations to the Trust to address these weaknesses to reduce the risk of such an event occurring again.
- 8.3.18 The LCFS is required to advise NHS Protect of every investigation and refer appropriate matters to NHS Protect.
- 8.3.19 The CFO is responsible for the smooth running of this protocol and where clarification is required his, or her, decision will be final.
- 8.3.20 For all alleged cases reported to the LCFS, the LCFS will liaise with the appropriate lead HR manager and subject's line manager, where necessary and appropriate. Communication during an investigation will be limited to relevant witnesses to protect the confidentiality of the investigation.

8.4 Subsequent Action

- 8.4.1 Following the conclusion of each case a written report will be drafted and presented to the CFO. Consideration will be given to the circumstances in which the fraud occurred, and the need for changes to controls or audit activity to prevent such a fraud occurring again.
- 8.4.2 The Trust may also publicise the outcome of any successful prosecution to support its aim of deterring fraud and creating an antifraud culture.

9.0 Consultation and Communication with Stakeholders

This policy has been written in consultation with key local stakeholders including the CFO.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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10.0 Approval of Policy

This policy is sponsored by the CFO and approved by the Trust Management Group.

11.0 Responsibility for Document Development

The nominated author for this policy is the LCFS.

The lead Director for this policy is the CFO.

The committee charged with monitoring the development of this document is the Audit and Risk Committee.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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12.0 MONITORING COMPLIANCE and EFFECTIVENESS: -

| What key area(s) need(s) monitoring on this document? (Consider the purpose of the document; processes, procedures, timelines, patient outcomes etc) | Who will lead on this aspect of monitoring? Name the lead and what is the role of the multidisciplinary team or others if any. | What tools / methods will be used to monitor report and review the identified areas? (Consider audit, observation, minutes, complaints, incidents, claims, reports and Documentation etc.) | monitor each area? | Responsible Committee for scrutiny and arrangements for feedback. |
|---|---|---|--------------------|---|
| Element/s to be monitored | Lead | Tool | Frequency | Reporting and feedback arrangements |
| Reports of suspected fraud/bribery to LCFS. Specifically: Frequency & Type. | LCFS | LCFS Annual Report Audit & Risk Committee scrutiny. | Annually | Audit & Risk Committee |

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

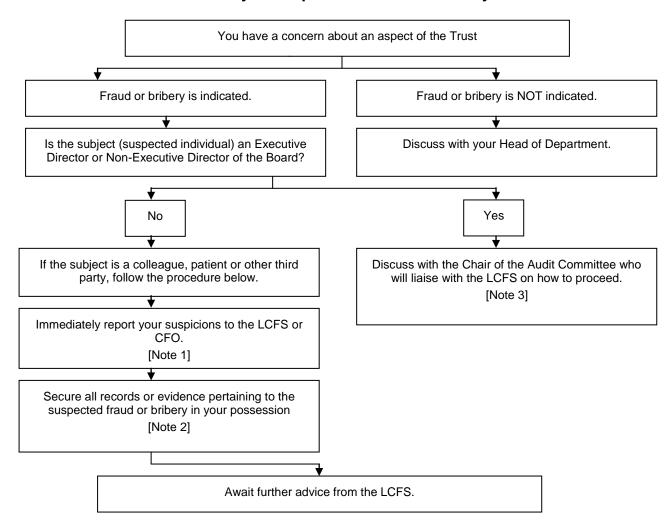
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13.0 ASSOCIATED DOCUMENTS:

| Title | Intranet hyperlink |
|----------------------------------|--------------------|
| Standing Orders | |
| Standing Financial Instructions | |
| Disciplinary Policy | |
| Whistleblowing Policy | |
| Gifts and Hospitality Policy | |
| Conflict of Interest Policy | |
| Standards of Business Conduct | |
| | |

What to do if you suspect fraud and/or bribery



Note 1

Time may be of the utmost importance to prevent further loss to the Trust. Staff should report their first suspicions and not undertake lengthy consideration of alternative explanations – be assured that any subsequent investigation will be of the highest professional standard.

Everything reported to the LCFS or the CFO is treated in the strictest confidence and Staff can request to remain anonymous.

Well-intentioned Staff making a referral will be protected from any unacceptable behaviour from the subject of the referral or anyone else.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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Contact details:

Local Counter Fraud Specialist

James Shortall

(T) 02380 881 767

(M) 07815 000 289

Chief Finance Officer

Stephen Bloomer

(T) 020 7288 3190

Stephen.bloomer@nhs.net

Note 2
Records or evidence includes (but not limited to): electronic documents, paper documents, statements, copies of healthcare records, interview tapes, photographs, etc

Once you have compiled all evidence in your possession it is prudent to catalogue it. A timeline is used to collate information gathered from multiple sources, ordered by the time sequence of events. The information recorded should include:

• date/time
• description of the event
• additional information about the event
• source of the information
• Contributory factors

Note 3
The Chair of the Audit Committee is a Non-Executive Director. Their contact details can be obtained through the Head of Governance / Company Secretary.

What not to do if you suspect fraud and/or bribery

- Do not confront the 'subject'
- Do not assume only one person involved
- Do not talk about your suspicions, concerns or queries

Email:james.shortall@nhs.net

 Do not contact any external organisation other than the organisations listed below at "Additional Advice" (only the CFO or the LCFS are permitted to make such contact with other organisations).

The reason for the above is two-fold:

- to ensure evidence is secured against loss, destruction and contamination
- to ensure that nothing is done that could give rise to an action for slander or libel

MOST IMPORTANTLY: Do not worry about being mistaken and doing nothing!

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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Additional advice

NHS Fraud Reporting Hotline

If you are unable to talk to CFO or the LCFS within the Trust, you can contact the NHS Fraud and Corruption Reporting Line by telephoning: **0800 028 40 60**

Your call will be treated in confidence and you can remain anonymous.

Alternatively you can report online at the following link:

https://www.reportnhsfraud.nhs.uk/

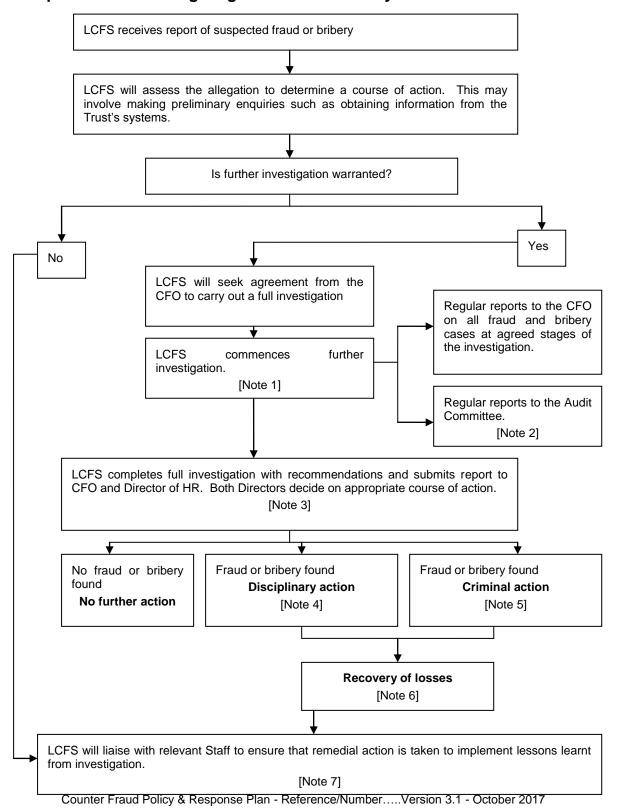
Independent Advice

Public Concern at Work is an independent charity and legal advice centre which provides free confidential advice to people concerned about wrongdoing in the workplace but who are unsure whether or how to raise the matter. Further information can be found at http://www.pcaw.co.uk or telephone 020 7404 6609.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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The process for investigating fraud and/or bribery at the Trust:



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Note 1

Depending upon the nature of the investigation, the LCFS will normally work closely with management and other agencies such as the Police, to ensure that all matters are properly investigated and reported upon. Basically, the circumstances of each case will dictate who will be involved and when.

The detailed arrangements for the investigations of any suspected fraud or corruption are contained in the NHS Fraud and Corruption Manual and within Trust's policies e.g. Disciplinary Policy, Standing Orders and Standing Financial Instructions. The LCFS will record the progress of the investigation and conduct the investigation in accordance with the legal codes of practices (Police and Criminal Evidence Act 1994, Regulation of Investigatory Powers Act 2000, Criminal Procedures and Investigation Act 1996. and other legislative requirements (e.g. Data Protection Act 1998).

Note 2

The LCFS shall maintain a record to contain:

- Details of all reported suspicions.
- Details of subsequent actions taken and conclusions reached.

This record will be reviewed by the Audit Committee at least once a year and any significant matters will be reported to the Trust Board.

The record will be a confidential document and accessible only by authorised officers. The record is subject to the Data Protection Act 1998 particularly in relation to the retention and destruction of personal data.

Note 3

The CFO is the sole person who can determine whether or not any formal action is justified and what form such action takes; however, guidance can be sought from the LCFS.

If the CFO decides that formal action is to be taken against the subject(s) of an investigation, the LCFS will comply with the NHS Protect Applying Appropriate Sanctions Consistently Policy. This will involve using an appropriate combination of the sanctions described below:

- Disciplinary action Trust and/or Professional Regulatory Body (warning, dismissal etc)
- Civil remedy recover money, interest and costs
- Criminal prosecution which may result in imprisonment, community penalty, a fine, confiscation or compensation

The use of parallel sanctions or 'triple-track' approach helps to maximise the recovery of NHS funds and assets while minimizing duplication of work.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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| Note 4 | The Trust's Disciplinary Procedures will be used where the outcome of the investigation indicates improper behaviour on the part of Staff. The LCFS shall liaise with the Director of HR in providing evidence for Disciplinary Hearings. |
|--------|--|
| | Where the Trust has suffered a financial loss from a fraud, the Trust will take action to pursue recovery in all applicable cases, subject to authorisation from the CFO. |
| Note 5 | The LCFS will seek authorisation from the CFO if a matter is to be reported to the Police. The LCFS shall liaise with the police by providing a MG (Prosecution) File and participate in interviews, searches etc. The LCFS shall attend court to give evidence and liaise with the Crown Prosecution Service as required. |
| | The LCFS acts on behalf of the Trust in the event of any formal action and must ensure there is co-ordination between the various parties involved such as where external legal advisors are used. |
| Note 6 | Where the Trust has suffered a financial loss from a fraud, the Trust will take action to pursue recovery in all applicable cases, subject to authorisation from the CFO. |
| Note 7 | When a fraud, corruption or bribery has occurred at the Trust, the LCFS will strengthen the control environment in which the event occurred by identifying and addressing any system weaknesses to reduce the risk of any such an event happening again. |

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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14.0 EQUALITY IMPACT ANALYSIS:

Whittington Health - Equality Impact Analysis Form

| 1. | Name of Policy or Service |
|----|---|
| | Counter Fraud and Corruption Policy |
| | |
| 2. | Assessment Officer |
| | James Shortall |
| | |
| 3. | Officer responsible for policy implementation |
| | James Shortall |
| | |
| | |

4. Completion Date of Equality Analysis 18 August 2014

5. Description and aims of policy/service

The purpose of this policy is to:

- Set out the Trust's responsibilities and of those working for us, in observing and upholding our position on fraud, corruption and bribery.
- Provide information and guidance to those working for us on how to recognise and deal with fraud, corruption and bribery issues.
- Give a framework for a response and advice and information on various aspects and implications of an investigation.

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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6. Initial Screening

An initial analysis has been carried out to explore whether the policy is likely to have a detrimental impact in terms of people included in one or more of the following equality categories:

- Race
- Disability
- Gender
- Age
- Sexual orientation
- Religion and belief
- Gender Reassignment
- Marriage and civil partnership

9. Publication of document: Intranet

Pregnancy and maternity

| 7. | Outcome of initial screening |
|----|--|
| | No major change |
| | |
| | |
| 8. | Monitoring and review/evaluation |
| 8. | Monitoring and review/evaluation Annually |

Counter Fraud Policy & Response Plan - Reference/Number.....Version 3.1 - October 2017

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