

## ANTI-FRAUD, BRIBERY AND CORRUPTION POLICY

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Applies to:	All Trust staff, contractors and vendors

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## DOCUMENT CONTROL

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## CONTRIBUTION LIST Key individuals involved in developing the document

<b>Designation or Group</b>
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## 1. INTRODUCTION

**This policy is endorsed by the Board of Directors and Audit Committee who wholly endorse the NHS Counter Fraud Authorities (NHSCFA) strategy towards the elimination of fraud within the National Health Service (NHS).**

**Somerset Partnership NHS Foundation Trust are committed to the prevention, detection and investigation of any such allegations and will seek to apply criminal, disciplinary, regulatory and civil sanctions where allegations are upheld. This will include the recovery of identified losses to ensure that NHS resources are used for their intended purpose, the delivery of patient care.**

**All staff, consultants, contractors, vendors, patients and all internal and external stakeholders are encouraged to report any concerns to the Trust's Local Counter Fraud Manager or the NHS Counter Fraud Authority's reporting line. See Annex A for contact details.**

- 1.1. Somerset Partnership NHS Foundation Trust have an obligation to both address concerns and where possible minimise the risk of the fraud, bribery and corruption. The Trust needs to ensure that it has in place robust and comprehensive procedures to prevent such activity whilst ensuring that those depriving the NHS of resources are held to account.
- 1.2. The policy and its procedures take into account the advice, guidance and instructions issued by the NHS Counter Fraud Authority (NHSCFA).

## 2. PURPOSE AND SCOPE

- 2.1. This document is intended to explain the Trust's approach towards fraud, bribery and corruption, in particular:
  - Its strategic importance and risk to the Trust
  - Its prevention and deterrence
  - The approach to detection and investigation which includes informing and involving staff and other stakeholders
  - the application of sanctions
  - Improving by learning from outcomes
- 2.2. This document is also intended to provide direction and assistance to anyone with concerns or for those who may have identified potential risks in their areas of work that may be susceptible to fraud, bribery or corruption. This document does not detail precise prevention mechanisms however advice can be sought from the Trust's Local Counter Fraud Manager (LCFM).
- 2.3. The policy will apply to all employees, contractors, consultants, patients, vendors and other internal and external stakeholders.

### 3. POLICY STATEMENT

- 3.1. Somerset Partnership NHS Foundation Trust is committed to maintaining honesty and integrity in all of its activities. It is also committed to the prevention of fraud, bribery and corruption and to the rigorous investigation of any such allegations.
- 3.2. Somerset Partnership NHS Foundation Trust wholly endorses the national strategy towards the elimination of any fraud within the National Health Service (NHS) and will seek to apply appropriate criminal, disciplinary, regulatory and civil sanctions. This will include the recovery of any identified losses.
- 3.3. The Trust has carried out risk assessments to evaluate the nature and level of risk relating to fraud, bribery and corruption to ensure that we have proportionate procedures and controls in place. This has taken into account relevant guidance issued by the Ministry of Justice and the NHSCFA.
- 3.4. To assist with these activities the Trust employs a Local Counter Fraud Manager (LCFM) responsible for co-ordinating anti-fraud work.
- 3.5. The Trust has put in place procedures in relation to the declarations of interests, gifts and hospitality and have associated registers. This policy is available on the Trust Intranet and the external website.
- 3.6. Somerset Partnership NHS Foundation Trust encourages anyone that has reasonable suspicions of fraud to report them. All employees, patients and contractors should be confident that they will not suffer in any way as a result of reporting reasonably held suspicions. For these purposes 'reasonably held suspicions' means any suspicions other than those which are raised maliciously and found to be groundless.
- 3.7. Somerset Partnership NHS Foundation Trust has approved a "Whistle blowing Policy" in accordance with the Public Interest Disclosure Act 1998. Under the terms of this Act, a member of staff is protected if they act reasonably and responsibly.
- 3.8. This policy is endorsed by the Board, senior management and the Trust's Audit Committee.

### 4. DEFINITIONS

- 4.1. **Fraud** is defined as a dishonest act (or a failure to act) made with the intention of making a financial gain or causing a financial loss (or risk of loss). The dishonest act does not need to be successful for fraud to be committed, as long as the intention exists. Neither does the financial gain have to be personal, but can be for the benefit of another. Where the intent is to cause a loss to the organisation, no gain by the perpetrator needs to be shown. Theft without the distortion of financial statements or other records, will normally be dealt with by the Local Security Management Specialist and reported to the Police. However, where an employee abuses their position to misappropriate cash or other Trust income this may be considered to be fraud and dealt with under this policy.
- 4.2. The **Fraud Act 2006** includes eight separate offences; those most applicable to the NHS and this policy are:

- **Fraud by false representation** is defined by Section 2 of the Act. A person may be guilty of an offence if dishonestly makes a false representation, and intends, by making the representation to make a gain or another, or to cause loss to another or to expose another to a risk of loss. For example, an employee claiming for shifts they have not worked.
- **Fraud by failing to disclose information** is defined by Section 3 of the Act. A person may be guilty of an offence if he/she dishonestly fails to disclose to another person information which he/she is under a legal duty to disclose, and intends, by failing to disclose the information to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, failing to disclose criminal convictions when asked to do so as part of the recruitment process, in order to obtain employment.
- **Fraud by abuse of position** is defined by Section 4 of the Act. A person may be guilty of an offence if he/she occupies a position in which he/she is expected to safeguard, or not to act against, the financial interests of another person, dishonestly abuses that position, and intends, by means of the abuse of that position to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, a manager creating ghost employee's and paying the salaries into his/her own bank account.
- **Possession of articles for use fraud(s)** is defined by Section 6 of the Act. A person may be guilty of an offence if he/she has in his/her possession or under his control any article for use in the course of or in connection with any fraud. For example, using a false passport or other documentation to secure employment.
- **Making or supplying articles for use in fraud(s)** is defined by Section 7 of the Act. A person may be guilty of an offence if he/she makes, adapts, supplies or offers to supply any article knowing that it is designed or adapted for use in the course of or in connection with fraud, or intending it to be used to commit, or assist in the commission of, fraud. For example, producing a prescription in a patients name with the intention of obtaining drugs and retaining them for personal use, or supplying them to another.

4.3. **Bribery and corruption:** The Bribery Act 2010 is the relevant legislation. The maximum penalty for Bribery is ten years imprisonment, with an unlimited fine. The Act creates a number of criminal offences and those most applicable to the NHS and this policy are:

- **Offence of bribing another person** - is defined by section 1 of the Act. It is also an offence for a person to offer, promise, or give a bribe to another person as an inducement for them improperly performing any duty. For example, providing excess hospitality to a potential purchaser or commissioner of the organisation's services.
- **Offence of being bribed** - is defined by section 2 of the Act. It is an offence for a person to request, or agree to receive, or accept a financial or other advantage as an inducement to, or as a reward for, the improper performance of any function or activity. For example, where an

employee who sells confidential information to a third party or provides preferential treatment to suppliers or patients for a fee.

- **Failure of a commercial organisation to prevent bribery** – is defined within section 7 of the Act. If an individual bribes another person to obtain or retain business, or an advantage in the conduct of business for an organisation, then that organisation may also be guilty of an offence. For example, if an NHS Trust fails to put adequate controls in place to prevent bribery.

- 4.4. A "**financial or other advantage**" has a wide meaning and could include holidays or entertainment, contracts, non-monetary gifts and offers of employment etc.
- 4.5. A "**relevant function or activity**" covers "any function of a public nature; any activity connected with a business, trade or profession; any activity performed in the course of a person's employment; or any activity performed by or on behalf of a body of persons whether corporate or unincorporated". The conditions attached are that the person performing the function should be expected to perform it in good faith or with impartiality, or that an element of trust attaches to that person's role.
- 4.6. Activity will be considered to be "**improperly**" performed when there is a breach of good faith, impartiality or a position of trust. The standard in deciding what would be expected is what a reasonable person in the UK might expect of a person in such a position.
- 4.7. The NHS Counter Fraud Authority (**NHSCFA**) leads on work to identify and tackle crime across the health service. The aim is to protect NHS resources from activities that would otherwise undermine their effectiveness and ability to meet the needs of patients and professionals.

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

## 5. DUTIES AND RESPONSIBILITIES

- 5.1. The **Chief Executive** has the overall responsibility for funds entrusted to the organisation as the Accountable Officer. The Chief Executive must ensure adequate policies and procedures are in place to protect the organisation and the public funds entrusted to it from instances of fraud, bribery and corruption. The Chief Executive is responsible for:
  - Ensuring that the Trust complies with the NHS Standard Contract (Service condition 24)
  - Ensuring responsibility for managing fraud is delegated to the Director of Finance
- 5.2. The **Board of Directors** take overall responsibility for the effective design, implementation and operation of the anti-bribery and corruption initiatives. The board should ensure that senior management are aware of and accepts the initiatives, and that they are embedded in the corporate culture.
- 5.3. The **Director of Finance (DoF)** is provided with powers to approve financial transactions initiated by directorates across the organisation. All anti-fraud, bribery and corruption work within the organisation is directed by the DoF.

- The DoF prepares, documents, and maintains detailed financial procedures and systems that incorporate the principles of separation of duties and internal checks to supplement those procedures and systems.
  - The DoF reports annually to the Board and the Council of Governors on the adequacy of internal financial control and risk management as part of the Board's overall responsibility to prepare a statement of internal control for inclusion in the organisation's annual report.
  - The DoF is responsible for operational matters such as authorising the investigation of alleged fraud, interviews under caution and the recovery or write-off of any sums lost to fraud.
  - The DoF will depending on the outcome of initial investigations inform senior management of suspected cases of fraud, bribery and corruption, especially where financial loss has been identified or where an incident may lead to adverse publicity.
- 5.4. **Internal and external auditors** will review controls and systems and ensure compliance with financial instructions. They have a duty to pass on any suspicions of fraud, bribery or corruption to the Local Counter Fraud Manager.
- 5.5. **Organisational Development (OD)** play a vital role which requires close liaison with the LCFM and includes the provision of information to the LCFM to support any investigations. Protocols are in place between the LCFM and OD to ensure mutual support and to ensure that appropriate sanctions are applied. Disciplinary procedures will be initiated by OD, following consultation with the LCFM and in accordance with the Trust's disciplinary policy. This policy is available on the Trust's intranet or external website.
- 5.6. The **Local Counter Fraud Manager (LCFM)** is responsible for tackling fraud, corruption and bribery affecting Somerset Partnership NHS Foundation Trust, in accordance with national standards and will report directly to the DoF. Responsibilities include:
- Adherence to national standards is important to ensure that Somerset Partnership NHS Foundation Trust has appropriate anti-fraud, bribery and corruption measures in place.
  - The LCFM will work with key colleagues and stakeholders to promote anti-fraud work , conduct risk assessments and make recommendations to ensure effective preventative measures are considered. The LCFM will also investigate any allegations where appropriate to do so.
  - The LCFM will ensure that the NHSCFA case management system is used to record all allegations of suspected fraud, bribery and corruption, and to provide information to inform national intelligence.
  - The LCFM will develop and deliver a comprehensive risk based anti-fraud work plan in compliance with relevant standards for providers.
- 5.7. **All managers** are responsible for:
- ensuring this policy is implemented across their area of work
  - ensuring that staff are aware of the policy requirements.



- establishing an anti-fraud culture by ensuring that policies, procedures and processes within their local area are adhered to and kept under constant review.
- Actively promoting the role of the LCFM, carrying out risk assessments and reporting any associated concerns to the LCFM.

It is not the responsibility of managers to carry out an investigation concerning actual or potential fraud.

5.8. **All employees** are required to comply with the policies and procedures of Somerset Partnership NHS Foundation Trust and apply best practice in order to prevent fraud, bribery and corruption.

5.9. **Information management and technology:** the Computer Misuse Act became law in 1990; the Act identifies three specific offences:

- Unauthorised access to computer material.
- Unauthorised access with intent to commit or facilitate commission of further offences.
- Unauthorised acts with intent to impair, or with recklessness as to impairing, operation of computer, etc.

5.10. Unauthorised access to computer material could include using another person's identifier (ID) and password without proper authority in order to use data or a program, or to alter, delete copy or move a program or data. Unauthorised access with intent to commit or facilitate commission of further offences could include gaining unauthorised access to financial or administrative records with intent. Unauthorised acts with intent to impair, or with recklessness as to impairing the operation of computer, could include: destroying another user's files; modifying system files; creation of a virus; changing clinical records; and deliberately generating information to cause a complete system malfunction. The fraudulent use of information technology will be reported by the Head of Information Security (or equivalent) to the LCFM.

## 6. THE RESPONSE PLAN

### Strategy and Risk

- 6.1. Somerset Partnership NHS Foundation Trust has conducted risk assessments in line with Ministry of Justice guidance to assess how bribery and corruption may affect the organisation. Where the LCFM has identified associated risks, the organisation will ensure that proportionate procedures are in place to mitigate risks.
- 6.2. The Trust maintains a comprehensive set of policies in support of the prevention, detection, investigation and the application of sanctions within the Trust.
- 6.3. The Trust also maintains a 'Managing Conflicts' Policy which outlines the procedures in relation to the declaration of interests, gifts and hospitality and sponsorship.

6.4. The LCFM has in place a work plan to ensure compliance against national Standards. This plan is agreed and monitored by the Audit Committee. The plan addresses the following areas:

- **Strategic Governance** – Work relating 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** – Work in relation to raising awareness of fraud, bribery and corruption risks against the NHS and working with NHS staff, stakeholders and the public to highlight the risks and consequences of such crime against the NHS.
- **Prevent and Deter** – Work to discourage individuals who may be tempted to commit crimes against the NHS and ensuring opportunities for crime to occur are minimised.
- **Hold to Account** - Work to detect and investigate crime, prosecuting those who have committed crimes and seeking redress.

### **Prevention**

- 6.5. If Trust employees, contractors or temporary staff have any potential or actual conflicts of interest this should be declared in line with the Trust’s ‘Managing Conflicts’ policy. To protect against accusations of compromise staff must declare gifts, hospitality, patents, political interests, entertainment, shareholdings, secondary employment, private practice, loyalty interests and sponsorship in line with this policy.
- 6.6. Any Bribery concerns should be reported immediately to the Trust Local Counter Fraud Manager, Director of Finance or the NHS CFA’s reporting hotline. (See Annex A).
- 6.7. Managers will also ensure that employees adhere to guidance provided in intelligence alerts, bulletins and local warnings issued by the NHSCFA or the Local Counter Fraud Manager. Managers and staff will proactively identify and report any system weaknesses that could facilitate fraud, bribery or corruption to the LCFM.
- 6.8. All employees have a responsibility to protect NHS resources. Employees who are involved in, or manage, internal control systems should ensure that they receive adequate training and support in order to carry out their responsibilities. Advice can be sought from the Local Counter Fraud Manager.

### **Informing and Involving**

- 6.9. Any employee of the Trust discovering or suspecting fraud, bribery or corruption should report the matter immediately to the Local Counter Manager, Director of Finance or the NHS CFA’s Fraud and Corruption Reporting Line or other reporting methods explained in **Annex A**.
- 6.10. Under no circumstances should a member of staff speak or write (including email) to representatives of the press, TV, radio, or to another third party, about suspected fraud, bribery or corruption. The established lines of reporting concerns to either the DoF, LCFM or via the Fraud and Corruption

Reporting Line should be used and staff can be assured that all allegations will be investigated.

- 6.11. The contact details for the Local Counter Fraud Manager can be found in **Annex A**. All information received is treated in the strictest confidence.
- 6.12. If an employee is concerned the Local Counter Fraud Manager or the Director of Finance and Business Development may be implicated in suspected fraud, bribery or corruption, the matter should be reported to the Chief Executive or the Fraud and Corruption Reporting Line.
- 6.13. Suspicions of fraud, bribery and corruption can be reported using the **NHS Fraud and Corruption Reporting Line on Freephone 0800 028 40 60 or by filling in an online form at [www.reportnhsfraud.nhs.uk](http://www.reportnhsfraud.nhs.uk)**, as an alternative to internal reporting procedures .
- 6.14. A guide has been included in the appendix of this policy (Annex A), to provide a reminder of the key contacts and a checklist of the actions to follow if fraud, bribery and/or corruption, is discovered or suspected. Managers are encouraged to copy this to staff and to place it on staff notice boards.
- 6.15. All reports of fraud, bribery and corruption, however they are reported, will be taken seriously and thoroughly investigated in accordance with guidance and relevant legislation.
- 6.16. Managers should be alert to possibility that unusual events or transactions could be indicators of fraud and seek advice from the Local Counter Fraud Manager.
- 6.17. It is important that managers do not investigate themselves.
- 6.18. Managers will promptly provide support and information to the LCFM. In particular, managers and their staff will co-operate with, and participate in, activities at the request of the NHSCFA and the LCFM, which will include the implementation of national anti-fraud, bribery and corruption preventative measures.

### **Investigation**

- 6.19. The DoF will inform the Local Counter Fraud Manager of any incident where fraud, bribery or corruption is suspected within the organisation.
- 6.20. Depending on the outcome of initial investigations, the DoF will inform and consult the Chief Executive, appropriate senior management and External Audit in cases where there may be a material loss due to fraud, bribery or corruption, or where the incident may lead to adverse publicity.
- 6.21. The LCFM will complete witness statements and follow national guidelines approved by the Crown Prosecution Service. The LCFM will ensure that interviews under caution are conducted in line with the National Occupational Standards (CJ201.2) and the Police and Criminal Evidence Act 1984.
- 6.22. The LCFM will use the national case management system to support and progress the investigation in line with NHS CFA's guidance.
- 6.23. The LCFM will follow guidance and instructions set out in the NHS anti-fraud manual. The LCFM will ensure that relevant legislation, such as the Police and Criminal Evidence Act 1984 and the Criminal Procedure and Investigations Act 1996, is adhered to.

## **Sanction, redress and holding to account**

- 6.24. Where an objective investigation has found that fraud, bribery and corruption is present the organisation will seek to apply appropriate sanctions. This may include:
- **Criminal Prosecution** - The LCFM will work in partnership with NHS CFA, the Police and/or the Crown Prosecution Service to bring a case to court against the alleged offender.
  - **Disciplinary** – Disciplinary procedures will be initiated where an employee is suspected of being involved in a fraudulent/illegal act. Fraud is defined in the Somerset Partnership NHS Foundation Trust as gross misconduct. The disciplinary policy can be found on the Somerset Partnership NHS Foundation Trust intranet or external website.
  - **Civil proceedings** – Civil sanctions will be applied against those who commit fraud, bribery and corruption to recover money and/or assets which have been fraudulently obtained, including interest and costs.
  - **Professional body disciplinary** – If the organisation is aware during the course of an investigation that a Healthcare Professional is involved in fraud, bribery or corruption, there is a risk to patient safety or there is a significant risk to public funds a referral to the appropriate regulatory body will be made to consider whether fitness to practice procedures should be evoked.
- 6.25. In the case of parallel criminal and disciplinary processes, these should be conducted separately, but there needs to be close liaison between the **Local Counter Fraud Manager** and the **HR function** since one process may impact on the other. This may include the sharing of information where lawful and at the appropriate time. A joint working protocol has been established and agreed between the Local Counter Fraud Manager and Human Resources. The protocol indicates the responsibilities of specific individuals; the frequency of liaison meetings; and specific interaction points during parallel investigations. Support and oversight is provided by the DoF and senior management as required to ensure this is implemented effectively.
- 6.26. A decision on whether to refer the matter to the Police (or another agency), seek Police assistance or to commence criminal proceedings will be made only with the agreement of the DoF.
- 6.27. Criminal and disciplinary processes have different purposes, different standards of proof, and are governed by different rules. As such, it would not be appropriate for one investigation to cover both criminal and disciplinary matters. However, a disciplinary enquiry can proceed in parallel with a criminal investigation as long as there is close co-operation between Human Resources staff; the organisation's investigating officer and the LCFM.
- 6.28. A criminal investigation seeks to establish the facts in relation to a suspected criminal offence. Investigators are bound by rules of evidence, including the Criminal Procedure and Investigations Act 1996 (CPIA) and the Police and Criminal Evidence Act 1984 (PACE) and Codes of Practice. **Guilt in a criminal prosecution must be proved 'beyond reasonable doubt'**. The

purpose of a disciplinary investigation is to establish the facts of the case, i.e. to ascertain whether there is a reasonable belief '**on the balance of probability**' that the alleged misconduct has occurred; whether the employee has any explanation for the alleged misconduct; and whether there are any special circumstances to be taken into account. Disciplinary investigations and ensuing proceedings must adhere to the Advisory, Conciliation and Arbitration Services (ACAS) Code of Practice on Disciplinary and Grievance Procedures, as well as any local HR policies. It is not unusual for the criminal and disciplinary processes to overlap. For example, an employee who is being investigated for suspected fraud may also be the subject of disciplinary proceedings by their employer arising out of the same set of circumstances.

## **7. PROCESS FOR IMPLEMENTATION, MONITORING AND EFFECTIVENESS**

- 7.1. The Audit Committee, through the LCFM will monitor the effectiveness of this policy to ensure that it remains appropriate and continues to provide clear direction and help to those officers and directors of Somerset Partnership NHS Foundation Trust who become aware of fraud, bribery or corruption against the NHS, reporting any concerns directly to the Trust Board.
- 7.2. This policy will be reviewed annually by the Local Counter Fraud Manager in conjunction the Director of Finance and senior management and in accordance with relevant guidance, best practice and legislation. This review will consist of an annual assessment of the Trust's compliance against the Standards for Providers, indicating where we fall short of the standards and will include an action plan and revised work plan to address these areas. This review will be presented to the Audit Committee.
- 7.3. The LCFM will conduct an annual counter fraud survey in order to measure staff awareness and understanding of the policy requirements. The findings will be reported to the Audit Committee.

## **8. TRAINING REQUIREMENTS**

- 8.1. The Counter Fraud Manager can provide training and support for teams to ensure staff are made aware of the policy requirements and have an understanding of the risks associated with their specific area of work. Please contact the Local Counter Fraud Manager to arrange training or for any further advice.
- 8.2. All employees should be reminded of the existence and scope of this policy at least annually via the Trust's internal communications.

## **9. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS**

### **9.1. Internal Documents**

Board Anti-Bribery Statement

Disciplinary Policy

Disciplinary Policy for Medical and Dental Staff

Code of Business Conduct (soon to be the 'Managing Conflicts within the NHS Policy')

Whistle-blowing Policy

Standing Financial Instructions

Standing Orders

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures'). Trust Guidance is accessible to staff on the Trust Intranet.

## 9.2. References

Fraud Act (2006)

The Bribery Act (2010)

NHS Standard Contract

NHS Protect - *Parallel criminal and disciplinary investigations policy statement.*

NHS Protect - *Parallel criminal and disciplinary investigations guidance for Local Counter Fraud Specialists.*

NHS Protect – *Tackling crime against the NHS: A strategic approach.*

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

## 10. APPENDICES

10.1. For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

Appendix A      NHS Fraud, bribery and corruption: do's and don'ts

# Tackling Fraud, Bribery and Corruption

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

- Contacting the Counter Fraud Manager, or
- Director of Finance, or
- The NHS Counter Fraud Authority

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

**Bribery and Corruption** is the deliberate use of payment or benefit in kind to influence an individual to use their position in an unreasonable way to gain financial advantage.

## DO

- **Note your concerns**

Record details such as the nature of your concerns, names, dates, times, details of conversations and possible witnesses. Time, date and sign your notes.

- **Retain evidence**

Retain any evidence that may be destroyed, or make a note and advise your Counter Fraud Manager **Report your suspicions**

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

## DO NOT

- **Confront the suspect or convey concerns to anyone other than those authorised, as listed below**

Never attempt to question a suspect yourself; this could alert a fraudster or lead to an innocent person being unjustly accused.

- **Try to investigate, or contact the police directly**

Never attempt to gather evidence yourself unless it is about to be destroyed; gathering evidence must be done in line with legal requirements in order for it to be useful. Your LCFM 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!**

## Do you have concerns about a fraud in the NHS?

The NHS Counter Fraud Authority

**0800 028 4060**

Calls will be treated in confidence and investigated by professionally trained staff. Or report

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

Your Counter Fraud Manager is AIMEE NEWTON

who can be contacted by telephoning **01935 384106 / 07867 526312** or emailing

**[Aimee.newton@nhs.net](mailto:Aimee.newton@nhs.net)**

or

**[Aimee.newton@sompar.nhs.uk](mailto:Aimee.newton@sompar.nhs.uk)**

