



Local Anti-Fraud, Bribery & Corruption Policy

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The CCG is committed to an environment that promotes equality, embraces diversity and respects human rights both within our workforce and in service delivery. This document should be implemented with due regard to this commitment.

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Approved documents are valid for use after their approval date and remain in force beyond any expiry of their review date until a new version is available.

Version Control Sheet

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1 Statement of Intent

Bolton 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. The CCG does not tolerate fraud, bribery and 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. It is also the CCG's policy that no employee shall suffer in any way as a result of reporting reasonably held suspicions, and the 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 the CCG is obliged to comply. For the purposes of this policy "reasonably held suspicions" shall mean any suspicions other than those which are totally groundless (and/or raised maliciously).

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 the CCG and NHS; as well as informing all CCG staff and stakeholders on how to report any concerns or suspicions they may have.

The 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, Cath Robson on 0161 206 8162 or 07825 853630 [Address: MIAA, Summerfield House, Eccles New Road, Salford, M5 5AP]; through the NHS Fraud and Corruption Reporting Line (FCRL) on Freephone 0800 028 40 60; the NHS online fraud reporting form www.reportnhsfraud.nhs.uk; directly via the CCG's Chief Finance Officer; or through the CCG's whistleblowing arrangements.

This policy should be read in conjunction with the following CCG policies:

- Code of Conduct Policy.
- Conflicts of Interest Policy.
- Gifts, Hospitality and Commercial Sponsorship Policy.
- Whistleblowing Policy.
- Acceptable Use Policy.

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.

NHS Protect, formerly known as the NHS Counter Fraud & Security Management Service (NHS CFSMS), is a business unit of the NHS Business Services Authority.

It has responsibility on a wide range of work to protect NHS staff and resources from crime. It has national responsibility for tackling:

- fraud
- violence
- bribery
- corruption
- criminal damage
- theft
- other unlawful action such as market-fixing

These are all activities that would otherwise undermine the effectiveness of the health service and its ability to meet the needs of patients and professionals.

Each CCG is required to appoint its own dedicated Anti-Fraud Specialist (AFS) who is accredited by NHS Protect 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 Chief Finance Officer and also reports, periodically, to the CCG Audit Committee.

All instances where fraud, bribery and corruption are suspected are thoroughly investigated by staff trained by NHS Protect, and such investigations are handled in accordance with the NHS Counter Fraud and Corruption Manual.

Bolton 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 Strategic Approach

Bolton CCG is committed to taking all necessary steps to counter fraud, bribery and corruption and has adopted the national strategic approach, originally developed by NHS Protect, in relation to:

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

2.3 Aims and Scope

This policy relates to all forms of fraud, bribery and corruption and is intended to provide direction and help to employees and all stakeholders 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. The overall aims of this policy are to:

- Improve the knowledge and understanding of everyone in Bolton CCG, irrespective of their position, about the risk of fraud, bribery and corruption within and against the organisation and wider NHS, and its unacceptability.
- Assist in promoting an open and honest culture in an environment where staff and stakeholders feel confident and safe to be able to raise concerns sensibly, responsibly and yet discreetly in the knowledge that their concerns will be fully investigated.
- Set out Bolton CCG's responsibilities in terms of anti-fraud, bribery and corruption activities.
- Ensure the appropriate sanctions are considered following an investigation, which may include any or all of the following:
 - Criminal prosecution.
 - Civil prosecution.
 - Internal/external disciplinary action.

This policy applies to all employees and members of Bolton CCG as specified within its Constitution, regardless of position held; as well as consultants, vendors, contractors, and/or any other parties who have a business relationship with the CCG. It will be brought to the attention of all employees by various methods and will form part of the induction process for new staff.

3 Definitions

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 (Section 2)** – lying about something using any means, e.g. by words or actions on a timesheet or job application form/CV.
- **Fraud by Failing to Disclose Information (Section 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.
- **Fraud by Abuse of Position (Section 4)** – where there is an expectation on the individual 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 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 the Bribery Act 2010 and defines offences as: **an inducement or reward offered, promised or provided to someone to perform a relevant function or activity improperly in order to gain a persona; commercial, regulatory and/or contractual advantage, on behalf of oneself or another.** Therefore making it a criminal offence to:

- **Give promise or offer a bribe (Section 1), and/or**
- **Request, agree to receive or accept a bribe (Section 2)**

Corruption is dishonest or fraudulent conduct by those in power, typically involving some sort of briber, preferential treatment or embezzlement.

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 and/or services.

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.

The Bribery Act 2010 includes an offence of **Bribing a Foreign Public Official (Section 6)** meaning that anyone involved in bribery activities overseas may be liable to prosecution in the UK if the bribe is in respect of any UK activity, contract or organisation.

The Bribery Act 2010 introduces a new **Corporate Offence of Failing to Prevent Bribery (Section 7)**. 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 from occurring.

In addition, the Bribery Act 2010 also includes an offence of **A Senior officer of the Organisation (e.g. Chief Finance Officer, Chair) would also be Liable for Prosecution if they Consented to or Connived in a Bribery Offence carried out by Another (Section 14)** meaning that they may be prosecuted for a parallel offence to that brought against the primary perpetrator and the organisation could also be subject to an unlimited fine.

Bolton 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. The CCG is fully committed to the objective of preventing bribery and will ensure that adequate procedures, proportionate to the risks, are in place and will be regularly reviewed.

It should be noted that successful prosecutions under the Bribery Act 2010 may 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 Bolton 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 the 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 the CCG and its staff and the public.

All staff, and those who work on behalf of the 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 NHS Standards of Business Conduct [HSG (93)5].

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 fraud, bribery and corruption 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 lack of oversight, you should report it to the AFS; or via one of the reporting channels referred to in Section 1 of this policy.

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

Bolton CCG will take all necessary steps to counter fraud, bribery and corruption in accordance with this policy, the NHS Anti-Fraud Manual, the NHS Protect policy statement 'Applying Appropriate Sanctions Consistently' published by NHS Protect, and any other relevant legislation, guidance, and advice issued by NHS Protect.

The CCG actively implements their corporate responsibilities and key principles for action as set out in the four sections below. A key element in achieving this is the appointment of an AFS.

Strategic Governance

The CCG will ensure that Strategic Governance arrangements are in place to ensure anti-crime measures are embedded at all levels across the organisation.

Inform and Involve

The CCG will raise awareness of crime risks against the NHS, work with NHS staff, stakeholders and the public to highlight the risks and consequences of crime against the NHS.

Prevent and Deter

The CCG will discourage individuals who may be tempted to commit crimes against the NHS and ensure that opportunities for crime to occur are mitigated.

Hold to Account

The CCG will detect and investigate crime, prosecute those who have committed crimes and seek redress.

Recovery of any losses incurred will also be sought through civil proceedings if appropriate, to ensure losses to the CCG and the NHS are returned for their proper use.

5.1 Role of NHS Bolton Clinical Commissioning Group (CCG)

Bolton 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, the CCG has a duty to ensure that those concerns are listened to and addressed.

The CCG's Chief Officer is liable to be called to account for specific failures in Bolton 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. The 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.

5.2 Employees

The CCG's prime financial policies (including Standing Orders and Scheme of Delegation), 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 the 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 Bolton CCG employees deal fairly and impartially with official matters.
- be alert to the possibility that others might be attempting to deceive the CCG/NHS.

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 (or might be) fraud, bribery or corruption, or has seen any suspicious acts or events, they must report the matter to the nominated AFS or via one of the reporting channels specified within Section 1 of 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 AFS will proactively assist in embedding this culture by undertaking work that raises awareness of the risks of fraud, bribery and corruption.

All instances of actual or suspected fraud, bribery and corruption which come to the attention of a manager must be reported immediately to the AFS or via one of the reporting channels specified within Section 1 of this Policy.

Line managers at all levels have a responsibility to ensure that an adequate system of internal control exists and operates effectively within their areas of responsibility to help prevent fraud, bribery and corruption from occurring and to mitigate its impact if it does occur.

As part of that responsibility, line managers need to:

- inform staff of the 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.

- assess the types of possible fraud, bribery and corruption risks which may impact on 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), s and segregation 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 access to or use of computers by employees is linked to the performance of their duties within the CCG.
- contribute to any assessment of the risks and controls within their business area, which feeds into the CCG risk management arrangements.

5.4 Anti Fraud Specialist (AFS)

CCGs are required to nominate and appoint an AFS. The AFS is operationally accountable to the CCG's Chief Finance Officer, and reports on the progress of all anti-fraud, bribery and corruption activity to the 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 Anti-Fraud 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 Protect as agreed and in accordance with the NHS Anti-Fraud Manual.
- report any case and the outcome of the investigation through the NHS Protect national case management system (FIRST).
- 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.
- 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 NHS Protect investigations, including progress updates.

5.5 NHS Protect and their Area Anti-Fraud Specialist (AAFS)

NHS Protect has responsibility for all policy and operational matters relating to the prevention, detection and investigation of fraud, bribery and corruption in the NHS and any investigations will be handled in accordance with NHS guidance and strategy as set out in the document, "*Tackling crime against the NHS: A strategic approach*".

AAFS's are the frontline face of NHS Protect for all health bodies within their region. The AAFS is responsible for the management and vetting of all local investigation case papers and evidence and witness statements submitted for the consideration of prosecutions.

The AAFS's ensure that local investigations are conducted within operational and legislative guidelines to the highest standards for all allegations of fraud, bribery and corruption in the NHS. They provide help, support, advice and guidance to Chief Finance Officers, AFS's, Audit Committees and other key stakeholders in their region.

The AAFS allocates, supervises and monitors fraud referrals to the AFS and provides support as to the direction of ensuing investigations as required and oversees the AFS's performance.

The AAFS ensures that all information and intelligence gained from local investigative work is reported and escalated as appropriate at both local and national level so that fraud trends can be mapped and used to fraud-proof future policies and procedures.

5.6 Chief Finance Officer (CFO)

The CFO has powers to approve financial transactions initiated by departments across the organisation.

The CFO prepares documents and maintains detailed financial procedures and systems and that they apply the principles of segregation of duties and internal checks to supplement those procedures and systems.

The CFO will report annually to the Board on the adequacy of internal financial controls and risk management as part of the Board's overall responsibility to prepare a statement of internal control for inclusion in the NHS body's annual report.

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

The CFO will, depending on the outcome of investigations (whether on an interim/on-going 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 CFO, for informing third parties such as external audit or the police at the earliest opportunity, as circumstances dictate.

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

The CFO will inform the Head of Internal Audit at the first opportunity. If an investigation is deemed to be appropriate, the CFO will delegate to the CCG's AFS, who has responsibility for leading the investigation, whilst retaining overall responsibility.

The CFO 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 CFO 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, bribery or corruption 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 Human Resources

The CCG's Human Resources (HR) 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. The CCG's HR service is responsible for ensuring the appropriate use of the CCG's disciplinary procedure. The 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

The CCG's provider of Information Management and Technology will contact the AFS immediately in all cases where there is suspicion that the CCG's Information and Communications Technology (ICT) is being used for fraudulent purposes or where breaches of the Computer Misuse Act 1990 occur. Under such circumstances, close liaison will take place with the AFS to ensure that a subjects access (both physical and electronic) to the CCG's ICT resources is suspended or removed when an investigation identifies that it is appropriate to do so.

5.10 Chief Officer

The Chief Officer as the organisation's accountable officer has the overall responsibility for funds entrusted to it. This includes instances of fraud, bribery and corruption. The Chief Officer must ensure adequate policies and procedures are in place to protect the organisation and the public funds it receives.

6 The Response Plan

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 AFS at MIAA.

The CCG's nominated AFS is:

Name: Cath Robson
Telephone: 0161 206 8162 / 07825 853630
Email: catherine.robson@miaa.nhs.uk
catherine.robson1@nhs.net

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. They will then inform the NHS Protect AAFS.

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 (Mon-Fri 8am-6pm)** or **report their concerns via the NHS Online Fraud Reporting Form** www.reportnhsfraud.nhs.uk

These NHS reporting options provide easily accessible routes 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. While the suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern and will always be taken seriously and investigated.

The 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, the CCG has produced a Whistleblowing Policy. This procedure is intended to complement Bolton CCG's Anti-Fraud, Bribery and Corruption policy as well as other relevant policies. Corporate policies can be found on the CCG's intranet.

7 Appendices

Appendix A – is a desktop guide that provides a key contact details 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.

Appendix B – is a copy of the NHS Fraud and Corruption Referral Form.

8 Consultation

Key individuals/groups involved in the development of the document to ensure it is fit for purpose once approved.

Name	Designation

9 Review

9.1 Monitoring and auditing of policy effectiveness

Monitoring is essential to ensuring that controls are appropriate and robust enough to prevent or reduce fraud. System controls are reviewed on an on-going basis and identify any weaknesses in processes.

Where deficiencies in control are identified as a result of monitoring these are reported to the CCG in progress reports and followed up by the AFS.

9.2 Dissemination of the policy

This policy will be disseminated to all staff via the intranet and can be found on the finance section of the intranet, it is important that staff understand and are aware of the policy. Should any member of staff have any questions in regards to the policy the AFS can be contacted for clarification via the contact details in Section 6.1 of this policy.

9.3 Review of the Policy

In accordance with CCG policy this document will be reviewed annually or more frequent should there be significant changes in legalisation or national guidance from NHS Protect.

10 References

NHS Anti-Fraud Manual

A DESKTOP GUIDE TO REPORTING NHS FRAUD, BRIBERY AND CORRUPTION

FRAUD: is a criminal offence and is the dishonest intent to obtain a financial gain from, or cause a financial loss to, a person or party through false representation, failing to disclose information, or abuse of position.

BRIBERY/CORRUPTION: 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.

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 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 should not suffer discrimination or victimisation by following the correct procedures [please refer to the CCG's whistleblowing arrangements for more details].

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

- directly contacting the **Anti-Fraud Specialist** at MIAA, or
- telephoning the **freephone NHS Fraud and Corruption Reporting Line**, or
- online via the **fraud reporting form** www.reportnhsfraud.nhs.uk, or
- contacting the **Chief Finance Officer**, or
- via the **CCG's whistleblowing arrangements**.

Report NHS Fraud, Bribery & Corruption – contact details:

Your CCG AFS, Cath Robson at MIAA: **0161 206 8162 / 07825 853630**

NHS Fraud and Corruption Reporting Line: **0800 028 40 60**

NHS Online Reporting Form: www.reportnhsfraud.nhs.uk [All calls will be treated in confidence and investigated by professionally trained personnel by professionally trained staff]

Unsure whether to or how to report concerns? You can access **FREE** advice from:

The NHS and Social Care Whistleblowing Helpline 08000 724 725

Your **Anti-Fraud Specialist, Cath Robson** can be contacted by telephoning **0161 206 8162 / 07825 853630** (catherine.robson@miaa.nhs.uk / catherine.robson1@nhs.net)

If you would like further information about NHS Protect or the work of the AFS, please visit www.nhsbsa.nhs.uk/fraud

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 the Anti-Fraud Specialist, Cath Robson, MIAA, Summerfield House, Eccles New Road, Salford, M5