



Local Anti-fraud, Bribery and Corruption Policy

NHS Fylde and Wyre Clinical Commissioning Group

The Local Anti-fraud, Bribery and Corruption Policy

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1 Introduction

1.1 General

One of the fundamental principles adopted by all public sector organisations is the proper use of public funds. The vast majority of people who work in the NHS are honest and professional and they find that fraud committed by a small minority is wholly unacceptable as it ultimately leads to a reduction in the resources available for patient and public care.

NHS Fylde and Wyre Clinical Commissioning Group (hereafter referred to as the CCG or organisation) is required to have a nationally approved Constitution as stipulated by the NHS Act (2006). This outlines the recognised legal framework by which the CCG is held accountable. The CCG Governing Body is established to ensure that the organisation inspires confidence and trust amongst all staff, partners, funders, suppliers and members of the public and demonstrates the highest level of integrity.

As a publically funded body that commissions public services the CCG recognises that it has a statutory duty to act with that integrity, and with honesty and to follow the Seven Principles of Public Life as set out by the Committee on Standards in Public Life (the 'Nolan Principles'). The 'Seven Principles of Public Life' are:

1. Selflessness:
2. Integrity:
3. Objectivity:
4. Accountability:
5. Openness:
6. Honesty; and
7. Leadership

The definitions of 'The Seven Principles of Public Life' are included in Appendix 1 of this Policy. This information and further guidance can be obtained from the Public Standards Website which can be accessed using the link provided: <http://www.public-standards.gov.uk>

All employees, members, Governing Body, committee and sub-committee members should act in accordance and comply with the Standards for members of the NHS boards and Clinical Commissioning Group governing bodies in England set out by the Professional Standards Authority which can be accessed using the link below: <http://www.professionalstandards.org.uk/docs/default-source/publications/standards/standards-for-members-of-nhs-boards-and-ccgs-2013.pdf?sfvrsn=2>

In order to embed and to protect these aims, objectives and principles within the CCG and in conducting its business, the CCG utilises the support and advice of NHS Protect. NHS Protect is a business unit of the NHS Business Services Authority. It has responsibility for all policy and operational matters relating to the prevention, detection and investigation of fraud, corruption and bribery. All instances where fraud is suspected are properly investigated until their conclusion by staff trained by NHS Protect. Any investigations will be handled in accordance with the *NHS Counter-Fraud and Corruption Manual*.

NHS Fylde and Wyre CCG is committed to reducing fraud, bribery and corruption in the NHS and will seek the appropriate disciplinary, regulatory, civil and criminal sanctions against fraudsters and where possible will attempt to recover losses.

This policy has been produced in conjunction with the Local Anti-Fraud Specialist (AFS), and is intended as a guide for all employees and members on anti-fraud work within the NHS. All genuine suspicions of fraud, bribery and corruption can be reported to the AFS or through the NHS Fraud and Corruption Reporting Line (FCRL) on Freephone 0800 028 40 60 or www.reportnhsfraud.nhs.uk.

This policy is also reflective of the latest guidance and direction regarding Conflicts of Interests and Whistleblowing requirements. Conflicts of Interests within the developing NHS environment are a potential significant risk to organisations and could lead to fraudulent or corrupt actions. The understanding of all the potential implications across all the CCG's policies will be vital to be communicated to all staff and members. This policy is supported and endorsed by senior management and the CCG's membership.

1.2 Aims and objectives

This policy relates to all forms of fraud, bribery and corruption and is intended to provide direction and help to employees and members who may identify suspected inappropriate acts. It provides a robust framework for responding to suspicions of fraud, advice and information on various aspects of fraud and the implications of an investigation. It is not intended to provide a comprehensive approach to preventing and detecting fraud, corruption and bribery.

The overall aims of this policy are to:

- improve the awareness, knowledge and understanding of everyone in NHS Fylde and Wyre CCG irrespective of their position, about the risk of fraud, corruption and bribery within the organisation and its unacceptability,
- assist in promoting a climate of openness and a culture and environment where staff feel able to raise concerns and escalate issues sensibly and responsibly,
- set out NHS Fylde and Wyre CCG's responsibilities to reducing fraud, bribery and corruption in the NHS, to release public resources for better patient care,
- 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
 - recovery of any financial/monetary losses as a result of fraud or bribery

1.3 Scope

This policy applies to CCG members, Governing Body, committee and sub-committee members and all employees of NHS Fylde and Wyre CCG, regardless of position held, as well as consultants, vendors, contractors, and/or any other parties who have a business relationship with NHS Fylde and Wyre CCG.

This policy and other closely aligned policies covering Conflicts of Interests and Whistleblowing in particular will continue to be brought to the attention of all employees through robust communication and engagement channels and will form

part of the induction process for all new staff and members. Staff briefings by the AFS and their attendance at the CCG's Audit Committee remains a vital component in this approach and the CCG remains committed to that aim. Anti-Fraud, bribery and corruption related issues will remain an integral component of the CCG's Audit Committee work plan.

2 Definitions

2.1 NHS Protect

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 that any investigations will be handled in accordance with NHS Protect guidance, *NHS Protect strategy "tackling crime against the NHS: A strategic approach."*

NHS Protect's aim is to protect NHS staff and resources from activities that would otherwise undermine their effectiveness and their ability to meet the needs of patients and professionals. Ultimately, this helps to ensure the proper use of valuable NHS resources and a safer, more secure environment in which to deliver and receive care. NHS Protect' strategy covers three main objectives:

- To educate and inform those who work for or use the NHS about crime in the health service and how to tackle it;
- To prevent and deter crime in the NHS by removing opportunities for it to occur or re-occur; and,
- To hold to account those who have committed crime against the NHS by detecting and prosecuting offenders seeking redress where viable.

2.2 Fraud

The Fraud Act 2006 represented an entirely new way of investigating and prosecuting fraud. It is no longer necessary to prove that a person has been deceived, or for a fraud to be successful. The focus is now on the dishonest behaviour of the suspect and their intent to make a gain or cause a loss.

The new offence of fraud can be committed in three ways:

- 1) Fraud by false representation (s.2) – lying about something using any means, e.g. by words or actions (lying on a CV or NHS job application form)
- 2) Fraud by failing to disclose (s.3) – not saying something when you have a legal duty to do so, i.e. failing to declare a conviction, disqualification or commercial interest when such information may have an impact on your NHS role, duties or obligations and where you are required to declare these as part of your employment conditions.
- 3) Fraud by abuse of a position of the CCG (s.4) – abusing a position where there is an expectation to safeguard the financial interests of another person or organisation.

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.

Points 2 and 3 above are of particular relevance in the developing NHS environment. A significant issue and risk facing CCG's is that of Conflicts of Interests. The relevance of the CCG's policy for handling and managing Conflicts of Interests must be seen in conjunction and be aligned to this particular policy. The declarations

required of staff and members and the transparent reporting of those must also be clearly recognised.

2.3 Bribery and Corruption

The Bribery Act 2010 came into effect on 1st July 2011. Bribery and corruption involves offering, promising or giving a payment or benefit-in-kind in order to influence others to use their position in an improper way to gain some form of personal, financial or commercial advantage for oneself or another. The person(s) requesting, receiving or benefitting from the bribe is/are also committing an offence.

Bribery and corruption prosecutions can be brought using specific legislation:

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

The Bribery Act updated UK law by making it a criminal offence to:

- offer, promise, or give a bribe; and/or,
- request, agree to receive, or accept a bribe.

Corruption is generally considered to be a generic “umbrella” term covering such various activities as bribery, corrupt preferential treatment, kickbacks, cronyism, graft or embezzlement. Bribery is now a specific offence in law.

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 (i.e. a bribe) 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 health body to purchase that company’s particular clinical supplies.

A bribe does not have to be in cash; it may be the awarding of a contract, the provision of gifts, hospitality, sponsorship, the promise of work or some other benefit. The persons making and receiving the bribe may be acting on behalf of others – the bribe itself can occur either before or after the corrupt act.

Staff are strongly reminded of their responsibility to ensure that they are transparent in respect of recording any gifts, hospitality or any form of sponsorship. They should refer to the CCG’s policies covering;

- Acceptance of Gifts and Hospitality
- Declaration and Conflicts of Interests
- Sponsorship and Procurement

The above range of policies have been updated by the CCG and remain under continual review given their importance. Registers and Declarations of Interests are routinely reported by the CCG and are made publically available as required.

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

In addition, the Act introduces a new ‘corporate offence’ of the failure of commercial organisations to prevent bribery. NHS bodies such as this CCG are deemed to be ‘relevant commercial organisations’ to which the Act applies. As a result the CCG

may be held liable (and punished with a potentially unlimited fine) when someone “associated” with it bribes another in order to get, keep or retain business for the organisation. However, the organisation will have a defence, and avoid prosecution, if it can show it had adequate procedures in place designed to prevent bribery.

Finally, under the Bribery Act, a senior officer of the organisation (e.g. a Senior Manager, Member, an Executive or Non-Executive/Lay Member) would also be liable for prosecution if they consented to or connived in a bribery offence carried out by another. Furthermore, the organisation could also be subject to an unlimited fine because of the senior officer’s consent or connivance.

As the Bribery Act is applicable to all NHS organisations, it also applies to (and can be triggered by) everyone “associated” with the CCG who performs services for the CCG, or on its behalf, or who provides it with goods and services. This includes those who work for and with the CCG, such as employees, agents, subsidiaries, contractors and suppliers (regardless of whether they are incorporated or not).

This 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, which are proportionate to the risks, are in place to prevent it and these will be regularly reviewed. The CCG, in conjunction with NHS Protect, seek to obtain the strongest penalties – including criminal prosecution, disciplinary and/or civil sanctions – against anyone associated with this organisation who is found to be involved in any bribery or corruption activities.

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

These messages will continue to be communicated and reinforced by the CCG with the support of NHS Protect. All engagement and training opportunities will continue to be supported.

2.4 Employees

For the purposes of this policy, ‘employees’ includes NHS Fylde and Wyre CCG staff, as well as Governing Body and Lay Members (including co-opted members) and honorary members.

3 Roles and responsibilities

This section states the roles and responsibilities of employees and other relevant parties in escalating and reporting fraud or other irregularities.

Through the CCG’s day-to-day work, staff are in the best position to recognise any specific risks within their own areas of responsibility. All individuals have a duty to ensure that those risks and concerns – however large or small – are identified, mitigated and eliminated. Where staff believe the opportunity for fraud exists, whether because of poor procedures or lack of oversight, that member of staff should report it through the agreed escalation procedure, including to the AFS or the NHS Fraud and Corruption Reporting Line.

NHS Fylde and Wyre CCG will take all necessary steps to counter fraud, bribery and corruption in accordance with this policy, the *NHS Counter-Fraud and Corruption Manual*, the policy statement ‘Applying Appropriate Sanctions Consistently’ published

by NHS Protect and any other relevant guidance or advice issued by the NHS Protect.

3.1 The Audit Committee

The Committee has a duty to provide robust governance and oversight of the organisation to ensure that its resources, including funds, people and assets are adequately protected against criminal activity, including fraud, bribery and corruption. The Committee are also responsible for ensuring that all concerned across the CCG are aware that fraud, bribery and corruption will not be tolerated by the CCG. It will also lead on the provision of communication and training in this respect.

3.2 Accountable Officer

The CCG's Accountable Officer has the overall responsibility for funds, assets and resources entrusted to the CCG. This includes instances of fraud, bribery and corruption. The Accountable Officer must ensure adequate policies and procedures are in place to protect the organisation and the public funds it receives. This must form part of the Accountable Officers reviews and Annual Governance Statement reports.

3.3 Chief Finance Officer

The Chief Finance Officer (CFO) has powers to approve financial transactions initiated by directorates across the organisation.

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

The Accountable Officer, with the support of the CFO, will report annually to the Governing Body on the adequacy of internal financial controls and risk management as part of the Board's overall responsibility and prepare an Annual Governance Statement for inclusion in the CCG's annual report.

The CFO will, depending on the outcome of initial investigations, inform appropriate senior management and members of suspected cases of fraud, bribery and corruption, especially in cases where the loss may be above an agreed limit or where the incident may lead to adverse publicity.

The CFO may provide any necessary support to the Anti-Fraud Specialist required to pursue an investigation.

The CFO may be responsible, in consultation with the Anti-Fraud Specialist, for informing third parties such as external audit or the police at the earliest opportunity, as circumstances dictate.

The CFO may inform and consult the Accountable Officer in cases where the loss may be excessive, or may inform the Director of Internal Audit if an investigation identifies significant control failings in key business areas.

The CFO may consult and take advice from Human Resources (HR) if a member of staff is to be interviewed, suspended or disciplined.

3.4 Internal and External Audit

The role of Internal and External Audit includes reviewing controls and systems and ensuring compliance with financial instructions, duties and responsibilities. Internal and External Audit have a duty to pass on any suspicions of fraud, bribery or corruption to the Local Anti-Fraud Specialist (AFS).

3.5 Human Resources

The HR support service will liaise closely with appropriate senior CCG staff and the AFS from the outset if an employee is suspected of being involved in fraud, bribery or corruption, in accordance with agreed liaison protocols. HR will offer support and advice to the CCG in ensuring the appropriate use of NHS Fylde and Wyre CCG's staffing and related policies, including the disciplinary procedure. HR 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. NHS Protect uses policies such as "Applying Appropriate Sanctions Consistently" (April 2013) & "Parallel Criminal and Disciplinary Investigations" (April 2013).

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.

3.6 Local Anti-Fraud Specialist

The AFS's role is to ensure that all cases of actual or suspected fraud, bribery and corruption are notified to the Chief Finance Officer and reported accordingly.

The AFS will regularly report to the Chief Finance Officer on the progress of the investigation and when/if referral to the police is required. The AFS will also routinely attend the CCG's Audit Committee meetings and provide any appropriate reports and updates.

The AFS will:

- ensure that the Chief Finance Officer is informed about all referrals/cases,
- be responsible for the day-to-day implementation of anti-fraud and bribery and corruption activity and, in particular, the investigation of all suspicions of fraud,
- investigate all cases of fraud, bribery and corruption in accordance with NHS Protect Anti-Fraud and Corruption Manual, Investigation Toolkit, NHS Protect standards and relevant criminal law. #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. HR will be informed if an employee is the subject of a referral,
- conduct risk assessments in relation to their work to prevent fraud and bribery and corruption,
- ensure that the organisation'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

- At all times adhere to NHS Protect standards to ensure that the organisation has appropriate anti-fraud and bribery and corruption arrangements in place and that the AFS will look to achieve the highest standards possible, as per Counter-Fraud Professional Accreditation Board (CFPAB)'s Principles of Professional Conduct.

In addition, the AFS will be responsible for the day-to-day implementation of the generic areas of anti-fraud, bribery and corruption strategy, as agreed in the fraud risk-assessed annual work plan. The Annual Work Plan is agreed and monitored through the CCG's Audit Committee..

3.7 Managers

Managers at all levels must remain vigilant and ensure that procedures to guard against fraud, bribery and corruption are followed. 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 and have the facility to escalate any issues, concerns or risks appropriately.

Managers must instil and encourage an anti-fraud, bribery and corruption culture within their team and ensure that information on this policy and its related procedures is made available to all employees. The AFS will proactively assist the encouragement of an anti-fraud culture by undertaking work that will raise fraud awareness. Regular engagement, communications and training will be co-ordinated between the AFS and the CCG.

All instances of actual or suspected fraud, bribery or corruption which come to the attention of a manager must be reported immediately. It is appreciated that some employees will initially raise concerns with their manager. However, in such cases, managers must not attempt to investigate the allegation themselves; they have the clear responsibility to refer the concerns to the AFS as soon as possible. A clear escalation and reporting approach is set out with this policy for such circumstances. A desktop guide is attached at Appendix 2.

Line managers at all levels have a responsibility to ensure that an adequate system of internal control exists within their areas of responsibility and that controls operate effectively. The responsibility for the prevention and detection of fraud, bribery and corruption therefore primarily rests with managers, but requires the co-operation of all employees.

As part of that responsibility, line managers need to:

- inform staff of NHS Fylde and Wyre CCG's code of business conduct and Anti-Fraud, Bribery and Corruption Policy as part of their induction process, paying particular attention to the need for accurate completion of personal records and forms,
- ensure that all employees for whom they are accountable are made aware of the requirements of the policy and its procedures
- be responsible for the enforcement of disciplinary action for staff who do not comply with policies and procedures,
- report any instances of actual or suspected fraud, bribery or corruption brought to their attention to the AFS immediately.
It is important that managers do not investigate any suspected financial crimes themselves.
- conduct risk assessments and to mitigate identified risks, within the operations for which they are responsible,

- ensure that adequate control measures are put in place to minimise the risks. This must include clear roles and responsibilities, supervisory checks, staff rotation (particularly in key posts), separation of duties wherever possible so that control of a key function is not invested in one individual, and regular reviews, reconciliations and test checks to ensure that control measures continue to operate effectively,
- ensure that any use of computers by employees is linked to the performance of their duties within NHS Fylde and Wyre CCG and the CCG's IT and Information Governance Policies and Procedures are fully complied with,
- be aware of NHS Fylde and Wyre CCG's Anti-Fraud, Bribery and Corruption Policy and the rules and guidance covering the control of specific items of expenditure and receipts, particularly where post holders are dealing with financially sensitive issues,
- contribute to their Director's assessment of the risks and controls within their business area, which supports NHS Fylde and Wyre CCG's overall statements of governance, accountability and internal control.

3.9 All employees and members

NHS Fylde and Wyre CCG's Standing Orders, Standing Financial Instructions, policies and procedures place an obligation on all employees, members and Lay Members to act in accordance with best practice.

Individuals are also 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.

Additionally individuals have a duty to protect the assets and resources of the CCG, including information, goodwill and property.

Furthermore, as referred to in the opening principles relating to this policy, all individuals have a responsibility to comply with all applicable laws and regulations relating to ethical and standards of business behaviour, procurement, personal expenses, conflicts of interest, confidentiality and the acceptance of gifts and hospitality. This means, in addition to maintaining the normal standards of personal honesty and integrity, all employees should always:

- avoid acting in any way that might cause others to allege or suspect them of dishonesty,
- behave in a way that would not give cause for others to doubt that NHS Fylde and Wyre CCG's employees deal fairly and impartially with official matters,
- be alert to the possibility that others might be attempting to deceive.

All employees and individuals have a duty of care 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 or individual suspects that there has been fraud, bribery or corruption, or has seen any suspicious acts or events, they must report the matter to the nominated AFS through the facilities made available for these purposes.

3.10 Information Management and Technology (IM&T)

The Head of IM&T / CFO will contact the AFS immediately in all cases where there is suspicion that IT is being used for fraudulent purposes (*Computer Misuse Act 1990*).

The relevance of the Computer Misuse Act 1990 is that it criminalises unauthorised access to computer systems and deters criminals from using a computer in commission of a criminal, such as fraud.

The subject of any investigation may have their access suspended to the CCG's IT resources and in some cases access may be removed where an investigation identified that it is appropriate to do so.

The Head of Information/ CFO will assist the AFS in securing and facilitating appropriate access to any IT-related data controlled by the organisation (including subject-related data) as part of any anti-fraud or corruption investigation.

4 The Response Plan

4.1 Bribery and corruption

NHS Fylde and Wyre CCG has conducted risk assessments in line with NHS Standards Contract guidance and NHS Protect Standards for Commissioners, to assess how fraud, bribery and corruption may affect the CCG. As a result, proportionate procedures have been put in place to mitigate identified risks.

NHS Fylde and Wyre CCG's Policies and Procedures in relation to declarations of and conflicts of interest, together with the provisions of the hospitality/gifts and sponsorship/procurement may be found on the CCG website. It is a requirement of the CCG to publish the relevant registers retained in this respect.

4.2. Reporting fraud, bribery or corruption

This section outlines the important action to be taken if fraud, bribery or corruption is discovered or suspected. This section must also be read in conjunction with the requirements set out in the two related Conflicts of Interest and Whistleblowing policies.

If an employee has any of the concerns mentioned or referenced in this document, they must inform the nominated AFS as indicated, or NHS Fylde and Wyre CCG's Chief Finance Officer immediately, unless the Chief Finance Officer or AFS is implicated. If that is the case, they should report it to the CCG's Chair, Accountable Officer or Audit Committee Chair (the Conflicts of Interest Guardian) who will decide on the action to be taken.

An employee can also contact any Executive or Lay Member of NHS Fylde and Wyre CCG to discuss their concerns if they feel unable, for any reason, to report the matter to the AFS or Chief Finance Officer.

Suspected fraud, bribery and corruption can also be reported to NHS Protect 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, as an alternative to internal reporting procedures and if staff wish to remain anonymous.

Anonymous letters, telephone calls, etc. are occasionally received from individuals who wish to raise matters of concern, but not through official channels. While the

suspicions may be erroneous or unsubstantiated, they may also reflect a genuine cause for concern or a potential risk and will always be taken seriously.

The AFS will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised. If the allegations are found to be malicious, they will also be considered for further investigation to establish their source.

Staff should always be encouraged to report reasonably held suspicions directly to the AFS or CFO or through the channels indicated in this section. This can be done by contacting the AFS by telephone or email using the contact details supplied in **Appendix 2**.

NHS Fylde and Wyre CCG is committed to ensuring that all employees and individuals feel confident and assured that they can expose any wrongdoing, risks or issues without any implications to themselves. In accordance with the provisions of the Public Interest Disclosure Act 1998, NHS Fylde and Wyre CCG has in place a whistleblowing policy. This policy is intended to complement NHS Fylde and Wyre CCG's Anti-Fraud, Bribery and Corruption policy and Code of Business Conduct and ensures there is full provision for staff to raise any concerns with others if they do not feel able to raise them with their line manager/management chain. This policy has been updated to reflect latest guidance at the time of writing and will continue to be reviewed to ensure its relevance and currency.

The diagram and desktop guide provided at Appendix 2 provides staff and members with a 'route map' to facilitate the raising and reporting of any issues, concerns and risks.

4.3 Disciplinary action

The disciplinary procedures of NHS Fylde and Wyre CCG must be followed if an employee is suspected of being involved in a fraudulent or otherwise illegal act.

It should be noted, however, that the duty to follow disciplinary procedures will not override the need for legal action to be taken (e.g. consideration of criminal action). In the event of doubt, legal statute will prevail.

4.4 Sanctions and redress

The NHS Protect approach to pursuing sanctions in cases of fraud, bribery and corruption is that the full range of possible sanctions – including criminal, civil, disciplinary and regulatory – should be considered at the earliest opportunity and any or all of these may be pursued where and when appropriate. The consistent use of an appropriate combination of investigative processes in each case demonstrates this CCG's commitment to take fraud, bribery and corruption seriously and ultimately contributes to the deterrence and prevention of such actions.

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

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

- Civil Redress – the CCG will seek financial redress, whenever possible, to recover losses (of money or assets), including interest and costs, to fraud, bribery and corruption. Redress can be sought in various ways. These include confiscation or compensation orders or use of the Proceeds of Crime legislation in the criminal courts, as well as civil legal sanctions such as order for repayment or an attachment to earnings repayments. As a CCG, we the organisation actively publicise the fact that redress will be sought where applicable to recover monies lost to fraud and corruption, thus creating a further deterrent effect.
- Criminal Prosecution – The AFS will work in partnership with NHS Protect, the police and/or the Crown Prosecution Service, where appropriate, to bring a case to court against an alleged offender. Outcomes can range from a criminal conviction to fines and imprisonment.
- Disciplinary Sanctions – Disciplinary procedures will also be initiated where an employee is suspected of being involved in a fraudulent or illegal act.
- Professional Body Disciplinary Sanctions – Where appropriate and if warranted, the CCG reserves the right to also report staff to their professional body as a result of a successful investigation and/or prosecution.

5 Review

5.1 Monitoring and auditing of policy effectiveness

Monitoring is essential to ensuring that controls remain current, are appropriate and robust to prevent or reduce bribery, fraud and corruption. Arrangements will include reviewing system controls on an ongoing basis and identifying weaknesses in processes. The CCG continues to work closely with its Auditors to ensure this position is maintained.

Where deficiencies are identified as a result of the latter work and review, the CCG will explain how appropriate recommendations and action plans are developed and how any recommendations made should be implemented.

5.2 Dissemination of the policy

The Anti-Fraud, Bribery and Corruption Policy will be made available to all staff, via a variety of forms of communications, including on the CCG's intranet. Regular staff awareness and responsibility updates will be given through the CCG's Communications channels including team briefs, Practice and CCG bulletins. The AFS will also provide staff briefings and any relevant training on an ongoing basis.

It is vital that all staff, individuals and members understand and adhere to this policy.

5.3 Review of the policy

The CCG's Anti-Fraud, Bribery and Corruption Policy will be reviewed at least annually. This may occur more frequently should other related policy changes impact. The AFS will review the policy on behalf of the CCG before ratification. The policy will be considered through the CCG's Audit Committee and approved by the Governing Body.

APPENDIX 1

The 'Seven Principles of Public Life'

The 'Seven Principles of Public Life' (also known as the 'Nolan Principles') were defined by the Committee for Standards in Public Life and are:

1. Selflessness

Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.

2. Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

3. Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

4. Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

5. Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands it.

6. Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

7. Leadership

Holders of public office should promote and support these principles by leadership and example.

Further information can be obtained via *The Committee on Standards in Public Life* website which can be accessed using the following link:

<http://www.public-standards.gov.uk/>

APPENDIX 2

Anti-fraud, bribery and corruption: do's and don'ts
A desktop guide and escalation procedure for NHS Fylde and Wyre CCG staff

FRAUD is the dishonest intent to obtain a financial gain from, or cause a financial loss to, a person or party through false representation, failing to disclose information or abuse of position. **CORRUPTION** is the deliberate use of bribery or payment of benefit-in-kind to influence an individual to use their position in an unreasonable way to help gain advantage for another. **BRIBERY** is to give promise to offer a bribe, and to request, agree to receive or accept a bribe.

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 evidence**

Retain any evidence that may be destroyed, or make a note and advise your Anti-Fraud Specialist (AFS).

- **report your suspicion**

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 accuse an innocent person.

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

Never attempt to gather evidence yourself unless it is about to be destroyed; gathering evidence must take into account legal procedures in order for it to be useful. Your 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 will not suffer discrimination or victimisation by following the correct procedures.

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

- directly contacting the **Local Anti-Fraud Specialist**, or
- telephoning the **freephone** NHS Fraud and Corruption Reporting Line, or
- online **www.reportnhsfraud.nhs.uk** or,
- contacting the **Chief Finance Officer**.
- The CCG's Chair, Accountable Officer or Audit Committee Chair

Do you have concerns about a fraud taking place in the NHS?

If so, any information can be passed to the
NHS Fraud and Corruption Reporting Line: 0800 028 40 60
 All calls will be treated in confidence and investigated
 by professionally trained staff

Your nominated Local Anti-Fraud Specialist is **Darrell Davies**, who can be contacted by telephoning **0151 285 4520**, or emailing **darrell.davies@miaa.nhs.uk**

If you would like further information about NHS Protect then please visit **www.nhsbsa.nhs.uk/fraud**

Protecting your NHS