

# Counter Fraud, Bribery and Corruption Policy

This document sets out the Trust's policy for countering fraud, bribery, or corruption and the associated reporting methods.

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## Contents

SUMMARY & AIM .....	4
TARGET AUDIENCE: .....	4
TRAINING .....	4
1.0 Quick look summary.....	5
1.1 Version control and summary of changes .....	5
1.2 Key individuals involved in developing and consulting on the document .....	6
1.3 Governance .....	6
1.4 Equality Statement .....	6
1.5 Due Regard .....	7
1.6 Definitions that apply to this policy.....	7
2.0 Purpose and Introduction/Why we need this policy.....	8
3.0 Policy Requirements.....	9
4.0 Duties within the Organisation.....	9
Chief Executive .....	9
Director of Finance and Performance .....	9
Human Resources Staff .....	10
Counter Fraud Specialist (CFS) .....	10
Counter Fraud Champion (CFC).....	10
Managers.....	10
Employees .....	11
5.0 Policy detail .....	11
Component 1: Accountable individual .....	12
Component 2: Counter fraud bribery and corruption strategy.....	12
Component 3: Fraud bribery and corruption risk assessment.....	12
Component 4: Policy and response plan.....	12
Component 5: Annual action plan.....	12
Component 6: Outcome-based metrics .....	12
Component 7: Reporting routes for staff, contractors and members of the public.....	12
Component 8: Report identified loss .....	12
Component 9: Access to trained investigators.....	13
Component 10: Undertake detection activity.....	13
Component 11: Access to and completion of training.....	13
Component 12: Policies and registers for gifts and hospitality and Conflicts of Interest.....	13
5.3 Fraud Response Plan .....	13
6.0 Monitoring Compliance and Effectiveness .....	14

6.0 References and Bibliography .....	15
7.0 Fraud, Bribery and Corruption consideration.....	15
Appendix 1 Fraud response plan.....	16
Notifying Suspected Fraud .....	16
The Investigation Process .....	16
The CFS will:.....	18
NHSCFA will: .....	19
Appendix 2 Do's and Don'ts .....	20
Appendix 3 Counter fraud contacts.....	21
Appendix 4 Prevalent frauds in the NHS .....	22
Appendix 5 Training Needs Analysis.....	23
Appendix 6 The NHS Constitution .....	24
Appendix 7 Due Regard Screening Template .....	25
Appendix 8 Data Privacy Impact Assessment Screening.....	26

## **Policy On A Page**

### **SUMMARY & AIM**

The aim of this policy is to set out how Leicestershire Partnership NHS Trust will counter fraud, bribery and corruption, and to help individuals to report any suspicions of fraud, bribery or corruption that they have.

### **TARGET AUDIENCE:**

All LPT staff (including substantive, bank and agency staff, as well as contractors) and stakeholders.

### **TRAINING**

Counter fraud training is available through ULearn. The Trust's Counter Fraud Specialist also proactively provides a range of training materials and opportunities, that are often role-specific and directed at areas of greatest risk.

## 1.0 Quick look summary

- The Trust is required to comply with the Counter Fraud Functional Standard, as set out by the NHS Counter Fraud Authority.
- To do this the Trust has nominated a Counter Fraud Specialist who carries out a range of duties to raise awareness, fraud-proof policies and processes, prevent and detect fraud, bribery and corruption, and investigate any suspicions that are raised.
- All staff have a responsibility to be fraud-aware and report any concerns that they have. Specific staff have additional duties, in particular the Director of Finance and Performance (who is the executive lead responsible for overseeing and directing counter fraud activity), and the Director of Governance and Risk (who is also the Trust's Counter Fraud Champion).
- Appendix 3 provides contact information through which any concerns or suspicions can be raised.

## 1.1 Version control and summary of changes

Version number	Date	Comments (description change and amendments)
V9	13/12/2024	Name change to Counter Fraud, Bribery and Corruption Policy. Updated job titles for contacts. Removed fraud reporting form as not used. Brought other matters up to date and made changes noted by Director of Finance and Performance, Director of Governance and Risk, and Audit and Risk Committee.
V8	05/10/2021	Policy review by CFS and revised to reflect the NHSCFA Government Functional Standard 013 Counter Fraud ('the Functional Standard') which have replaced to old standards used by NHSCFA. These became effective from 1 April 2021.
V7	23/01/2018	Remove mention of NHS Counter Fraud Authority and replace with NHS Counter Fraud Authority. Amend web address for standards, amend DOF title
V6	20/11/2017	Extension of expiry date to allow for reflection of new national counter fraud organisational arrangements.
V5	02/12/2016	Removed specific NHS Counter Fraud Authority staff from contact details due to transformation of NHS Counter Fraud Authority. Changed 360 Assurance 'Counter Fraud Service' to 'Anti-Crime Service'.

Version number	Date	Comments (description change and amendments)
		Changed appendices to correspond with latest LPT policy guidance.
V4	01/10/15	Policy title changed from Counter Fraud Policy to Fraud, Bribery and Corruption Policy. Amended definitions of fraud, bribery and corruption. LCFS name and contact details changed. Trust Headquarters address changed. Removed sub- section 5.1 and amended section 5.0 to clarify the Trust's position in terms of compliance with the NHS Standard Contract and NHS Counter Fraud Authority's 'Standards for Providers: fraud, bribery and corruption'.
V3	03/10/14	'360 Assurance' references removed; amendment made to Director of Finance details and postcode for Trust Headquarters; minor amendments made to replace 'fraud' with 'fraud, bribery and corruption'; change of Section 4.4 to 4.5 and including new Section 4.4 detailing pursuit of sanctions against offenders; amendment to Section 5.1 to reference the policy changes concerning anti-fraud, bribery and corruption arrangements, as per the NHS Standard Contract and NHS Standards for Providers.
V2	03/10/13	'emias' references replaced with '360 Assurance'; Director of Finance name removed and replaced with job title only.
V1	05/11/12	Policy transferred to new LPT format

For Further Information Contact:

## 1.2 Key individuals involved in developing and consulting on the document

- Matthew Curtis, Counter Fraud Specialist

## 1.3 Governance

Level 1 Committee to ratify policy – Audit and Risk Committee

## 1.4 Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all. This document has been assessed to ensure that no one receives less

favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

If you would like a copy of this document in any other format, please contact [lpt.corporateaffairs@nhs.net](mailto:lpt.corporateaffairs@nhs.net)

### 1.5 Due Regard

LPT will ensure that due regard for equality is taken and as such will undertake an analysis of equality (assessment of impact) on existing and new policies in line with the Equality Act 2010. This process will help to ensure that:

- Strategies, policies and procedures and services are free from discrimination.
- LPT complies with current equality legislation.
- Due regard is given to equality in decision making and subsequent processes.
- Opportunities for promoting equality are identified.

Please refer to due regard assessment (Appendix 4) of this policy

### 1.6 Definitions that apply to this policy.

**Counter Fraud Specialist:** Your Counter Fraud Specialist (CFS) is responsible for conducting all anti-fraud work locally and ensuring that the organisation has appropriate anti-fraud, bribery and corruption arrangements in place.

**Fraud, Bribery and Corruption:** The following definitions apply for the purposes of this policy and the corresponding Fraud Response Plan attached at Appendix 1.

#### Fraud

The *Fraud Act 2006* came into force on the 15 January 2007 and introduced the general offence of fraud. It is no longer necessary to prove that a person has been deceived. The focus is now on **dishonest behaviour** and any **intent** to make **gain or cause loss** to another party. Put simply, fraud is a dishonest act intended for gain or to cause loss to another.

There are three main ways in which the offence of fraud can be committed:

- Fraud by False Representation (lying about something using any means, for instance words or actions).
- Fraud by Failure to Disclose (not saying something when you have the legal duty to do so).

Fraud by Abuse of Position (abusing a position where there is an expectation to safeguard the financial interests of another person or organisation).

It should be noted that all offences under the *Fraud Act 2006* occur where the act or omission is committed dishonestly and with intent to cause gain or loss. The gain or loss does not have to succeed so long as the intent is there.

## Bribery

*The Bribery Act 2010* came into force on 1 July 2011 and created three general offences of bribery:

- Offering, promising or giving a bribe to induce someone to behave improperly, or to reward someone for having already done so.
- Requesting, agreeing or accepting a bribe either in exchange for acting improperly or where the request or acceptance is itself improper.
- Bribery of a foreign public official.

A new corporate offence was also introduced:

- Failure by a company to prevent
  - a bribe being paid, or
  - a business advantage.

Bribing anyone is absolutely prohibited. Employees will not pay a bribe to anybody. This means you will not offer or promise reward in any way, or give financial or other advantage to any person, in order to induce that person to perform activities improperly. It does not matter whether the other person is a UK or foreign official, political candidate, party official, private individual, public sector employee or any other person.

Bribery does not have to involve cash or an actual payment exchanging. It can take many forms such as a gift, lavish treatment during a business trip or tickets to an event.

## Corruption

Bribery is a form of corruption but corruption also includes many other dishonest practices such as fraud, nepotism, collusion and abuse of power/position. Corruption does not always result in a loss and the corrupt person may not always benefit directly from their deeds, however they may be unreasonably using their position to give some advantage to another.

**Due Regard:** Having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics.
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people. Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

## **2.0 Purpose and Introduction/Why we need this policy**

The aim of this policy is to set out how Leicestershire Partnership NHS Trust (the Trust) will counter fraud, bribery and corruption, and to help individuals to report any suspicions of fraud, bribery or corruption that they have.



The Trust is required to comply with the Counter Fraud Functional Standard, which includes setting out its strategy for countering fraud, bribery and corruption, and having in place a policy that enshrines this.

LPT adheres strictly to one of the basic principles of public sector organisations which is the proper use of public funds. It is therefore, important that all those who work for LPT are aware of the risk of, and means of enforcing against, fraud, bribery and corruption.

Our policies, procedures and staff training reflect our commitment to acting ethically in all our business relationships, and to implementing effective systems and controls to protect public funds and mitigate the risk of fraud.

It is in the interests of all Trust staff to uphold these principles. We are accountable to the public for the provision of services in an open and honest manner and any failure to do so brings the service into disrepute and threatens the respect afforded to the whole organisation.

This policy provides information about the responsibilities all staff have to be fraud aware and to report concerns, as well as setting out the specific roles held by some individuals, how fraud, bribery and corruption should be reported, and how the Trust will respond to any suspicions that are raised.

### **3.0 Policy Requirements**

This policy sets out how the Trust will respond to the threat of fraud, bribery and corruption, as well as setting out the responsibilities for all staff.

It is essential that all staff ensure that they have an understanding of what fraud, bribery and corruption are, and how to report any concerns or suspicions that they have. This policy provides contact information that can be used to report any concerns.

The Trust and its Counter Fraud Specialist provide a range of training opportunities such as eLearning, face to face (or online) presentations, fraud risk workshops, and online resources. Staff and managers should utilise these resources and opportunities to ensure that they are aware of key issues and reporting processes.

### **4.0 Duties within the Organisation**

#### **Chief Executive**

As Leicestershire Partnership NHS Trust's Accountable Officer, the Chief Executive has overall responsibility for funds entrusted to the Trust. The Chief Executive must ensure that adequate policies and procedures are in place to protect the organisation and the funds it receives from fraud, bribery and corruption.

#### **Director of Finance and Performance**

The Director of Finance and Performance accepts overall responsibility for all matters relating to fraud, bribery and corruption within the Trust.

#### **The Audit and Risk Committee (ARC)**

ARC is responsible for seeking assurance and providing challenge regarding the activities that are undertaken to protect the Trust from fraud, bribery and corruption. It has a duty to

review the Trust's compliance with the Counter Fraud Functional Standard and to ensure that action is taken to mitigate key fraud risks.

### **Human Resources Staff**

Human Resources staff provide advice, guidance and support to Trust managers and officers investigating disciplinary matters. All disciplinary matters which involve suspected fraud, bribery or corruption offences will also be subject to parallel criminal investigation by the organisation's CFS. A liaison protocol is in place which details arrangements for the conduct of parallel disciplinary and criminal investigations. Close liaison between the CFS and HR is essential to ensure that any parallel sanctions (for instance criminal, civil and disciplinary sanctions) are applied effectively and in a coordinated manner.

### **Counter Fraud Specialist (CFS)**

The CFS is responsible for conducting all anti-fraud work locally and ensuring that the organisation has appropriate anti-fraud, bribery and corruption arrangements in place.

The local counter fraud service will:

- Ensure that the Director of Finance and Performance is informed about referrals/cases.
- Be responsible for the day to day local implementation of the Functional Standard and NHSCFA strategy.
- Investigate cases of fraud.
- In consultation with the Director of Finance and Performance, report any cases to the police or NHSCFA in accordance with NHSCFA guidance.
- Adhere to the fraud response plan.

### **Counter Fraud Champion (CFC)**

The role of a Counter Fraud Champion is to support and challenge the organisation in relation to its commitment to fraud work. The CFC will help promote a zero-tolerance approach to fraud within our own organisation. The role and duties of the CFC include:

- Promoting awareness of fraud, bribery and corruption within the Trust.
- Understanding the threat posed by fraud, bribery and corruption.
- Supporting the CFS in their work.

### **Managers**

Managers are responsible for implementing and maintaining the policy in their area of management, including ensuring that procedures are in place, individuals are adequately trained and controls are being complied with. The following examples (this list is not exhaustive) provide some areas of responsibility that managers have in the prevention of fraud, bribery and corruption:

- Understanding financial decision making such as authorisation limits for purchases, ordering of stock or goods and the authorising of expenses and time sheets.
- Understanding responsibilities in relation to fraud awareness.
- Understanding the need to inform HR of any transactional changes to be made to electronic staff records. Managers are responsible for submitting these for any changes required; these include base changes, manager changes, incremental stage, change of working hours and many more. Incorrect or delayed submission of

transactional changes could lead to financial implications for staff such as overpayments.

- Timesheet and expense claim checking to ensure that the details are accurate before submission to payroll.

## **Employees**

All employees are expected to ensure that they are familiar with, and act in accordance with, this policy and attend all fraud training as required. All Trust staff (temporary and permanent) receive fraud awareness training at mandatory Induction Events, or through targeted staff group fraud awareness presentations and counter fraud e-Learning modules. However, should staff require assistance or advice, please contact the CFS using the contact details provided in Appendix 3. Staff groups who would like to receive a fraud awareness presentation can also arrange this by contacting the CFS, as above.

All employees are required to comply with the Trust's policies and procedures and apply best practice in order to prevent fraud, bribery and corruption.

All those who work within the Trust, or are otherwise engaged with the the Trust, should be aware of and act in accordance with the public service values and the Nolan Principles for Standards in Public Life.

All employees have a duty to ensure that public funds are safeguarded and where they have a suspicion that fraud exists they should report it using the contact details in Appendix 3.

## **5.0 Policy detail**

### **5.1 Counter Fraud Strategy**

The Trust's strategic approach is that we have a zero tolerance to fraud, bribery and corruption within the organisation. The aim is to eliminate fraud, bribery and corruption as far as possible as they ultimately lead to a reduction in the resources available for patient care. The Trust is required to always act honestly and with integrity to safeguard public resources it is responsible for. Leicestershire Partnership NHS Trust will not tolerate any acts of fraud, bribery or corruption perpetrated against it or involving its employees and will actively pursue all available criminal and civil actions, including the recovery of loss suffered as a result.

The Trust Board is committed to the elimination of fraud, bribery and corruption by ensuring that there is a strong anti- fraud, bribery and corruption culture, proactive prevention, detection and deterrence through widespread awareness, and by rigorously investigating any such cases, and where proven, to ensure wrong doers are appropriately dealt with, including taking steps to recover assets lost as a result of fraud, bribery and corruption.

### **5.2 Counter Fraud Functional Standard**

The NHSCFA has published NHS requirements linked to Government Functional Standard 013: Counter Fraud ('the Functional Standard') to support the NHS in countering fraud. The purpose of the Functional Standard is to set the expectations for the management of fraud, bribery and corruption risk in government organisations and means that the whole counter fraud community in the public sector is working to a common counter fraud standard.

NHS funded services will be required to provide NHSCFA with details of their performance against the Functional Standard annually. The term 'NHS funded services' above refers to any organisation with partial or full NHS funding. Currently this includes NHS Trusts,

Foundation Trusts, Ambulance Trusts, Special Health Authorities, Integrated Care Boards, certain Independent Healthcare Providers, Health Boards and NHS England.

Since April 2021, the Trust has been expected to obtain organisational assurance against the Functional Standard. The Functional Standard provides guidance to organisations on the arrangements for undertaking assurance.

The Trust has appointed a CFS to undertake work as set out by the NHSCFA under the Functional Standard. The Trust is committed to taking all steps necessary to counter fraud, bribery and corruption. To meet its objectives, the Trust has adopted the specific component principles of the Functional Standard.

The Functional Standard sets out a number of specific component requirements, namely:

#### Component 1: Accountable individual

Have an accountable individual at board level who is responsible for counter fraud, bribery and corruption. For Leicestershire Partnership NHS Trust this will be the Director of Finance and Performance.

#### Component 2: Counter fraud bribery and corruption strategy

Have a counter fraud, bribery and corruption strategy underpinned by policy.

#### Component 3: Fraud bribery and corruption risk assessment

Have a fraud, bribery and corruption risk assessment.

#### Component 4: Policy and response plan

Have a policy and response plan for dealing with potential instances of fraud, bribery and corruption. This is set out as at Appendix 1 of this policy.

#### Component 5: Annual action plan

The Trust maintains an annual work plan that is informed by national and local fraud, bribery and corruption risk assessments identifying activities to improve capability and resilience. This includes (but is not limited to) defined objectives, milestones for the delivery of each activity and measurable areas for improvement in line with strategic aims and objectives. The plan is agreed, and progress monitored by the Audit and Risk Committee.

#### Component 6: Outcome-based metrics

The Trust has outcome-based metrics summarising what outcomes it is seeking to achieve that year.

#### Component 7: Reporting routes for staff, contractors and members of the public

The Trust will have well-established and documented reporting routes for staff, contractors and members of the public to report suspicions of fraud, bribery and corruption and a mechanism for recording these referrals and allegations.

#### Component 8: Report identified loss

The Trust will report identified loss from fraud, bribery, corruption and error and associated recoveries, in line with the agreed government definitions.

#### Component 9: Access to trained investigators

The Trust will have agreed access to trained investigators that meet the agreed public sector skill standard.

#### Component 10: Undertake detection activity

The Trust will undertake activity to try and detect fraud in high-risk areas where little or nothing is known of fraud, bribery and corruption levels, including loss measurement activity where suitable.

#### Component 11: Access to and completion of training

The Trust will ensure that all staff have access to and undertake fraud awareness, bribery and corruption training as appropriate to their role.

#### Component 12: Policies and registers for gifts and hospitality and Conflicts of Interest

The Trust will have policies and registers for gifts and hospitality and conflicts of interest.

All staff have a duty to protect the assets of the Trust and also to cooperate with any investigation. The Trust Board recommends anyone having suspicions of fraud, bribery or corruption to report those suspicions. All reasonably held suspicions will be taken seriously.

For concerns which relate to fraud, bribery or corruption these should be reported through the provisions within this policy, rather than through the *Freedom to Speak Up Policy: Speak up, Listen up, Follow up*.

### **5.3 Fraud Response Plan**

The Trust's Fraud Response Plan is attached at Appendix 1.

Furthermore, in accordance with the Functional Standard guidance, the Trust has undertaken a risk assessment to determine the extent to which fraud, bribery and corruption may affect the organisation. Proportionate procedures in place to mitigate the identified risk include the following requirements (the list is not exhaustive):

- The Standard Financial Instructions (SFIs for short), which outline the decisions which Leicestershire Partnership NHS Trust's Trust Board retains for itself and which it will delegate.
- The Scheme of Delegation (SoD for short) outlines the minimum level allowed to make certain decisions. These include High Value, Mid Value and Low Value.
- Management controls such as for the approval of overtime and expenses.
- Acting with propriety in the use of Leicestershire Partnership NHS Trust's resources, including making accurate and honest expense claims and claims for sickness absence.
- Conducting oneself with integrity, accountability, openness and honesty.
- All staff must disclose their business interests, prior to commencement of employment with Leicestershire Partnership NHS Trust.
- All staff must declare hospitality (other than modest hospitality) received by or offered to them as Leicestershire Partnership NHS Trust employees.
- All hospitality (other than extremely minor hospitality) provided by Leicestershire Partnership NHS Trust staff to third parties must be declared.

- Staff must not solicit personal gifts and must declare all gifts received (in excess of a minimum value set).

#### **5.4 Proactive Prevention and Detection**

The Trust will ensure that its systems, policies and processes are sufficiently robust so that the risk of fraud, corruption and bribery is reduced to a minimum. Checks will be conducted in areas identified to be most at risk to fraud, corruption or bribery in order to proactively detect instances that might otherwise be unreported.

The CFS will review new and existing key policies and procedures to ensure that appropriate counter fraud measures are included. This includes (but is not limited to) policies and procedures in human resources, procurement, standing orders, standing financial instructions and other finance and operational policies.

The Trust will carry out comprehensive local risk assessments to identify fraud, bribery and corruption risks. Risk analysis is undertaken and is recorded and managed in line with the Trust's risk management policy and included on the appropriate risk registers. Measures to mitigate identified risks are included in the Trust's annual work plan to counter fraud, bribery and corruption, progress is monitored at a senior level within the organisation and results are fed back to the Audit and Risk Committee.

Additional preventative activities may also be conducted. These activities will be targeted at those areas of the organisation considered to be at a higher risk of fraud, bribery or corruption. The purpose of these activities is to identify gaps in the organisation's governance framework which could allow fraud to be perpetrated. These activities will be conducted in line with guidance issued by the NHSCFA where appropriate.

#### **5.5 Effective Sanctions and redress**

Where fraud, bribery or corruption offences are committed, criminal sanctions (including prosecution) will be considered and pursued where appropriate. Employees of the Trust found to have committed such offences will also be dealt with in accordance with internal disciplinary procedures and referred to professional bodies where appropriate.

The Trust will consider initiating civil recovery action if this is cost-effective and desirable for deterrence purposes.

#### **5.6 Reporting suspicions**

All concerns or suspicions relating to fraud, bribery or corruption must be reported to the Trust's Counter Fraud Specialist, Director of Finance and Performance, Counter Fraud Champion, or NHS Counter Fraud Authority. Contact details can be found in Appendix 3.

### **6.0 Monitoring Compliance and Effectiveness**

The policy will be reviewed annually and updated as necessary.

The CFS will report regularly to the Director of Finance and Performance. The CFS will provide regular reports to the Audit and Risk Committee and provide an annual report containing details of reported and investigated cases of fraud. The NHSCFA monitors the work of the CFS.

The organisation is required to complete a Counter Fraud Functional Standard Return and submit these annually to the NHSCFA. The organisation must mark themselves against each standard as either Compliant (Green), Partially Compliant (Amber) or Non-Compliant (Red). A work plan is required to address all non-compliant standards which will be monitored by the Audit and Risk Committee.

An assessment process may be conducted by the NHSCFA. This is a means of evaluating the effectiveness of the organisation in dealing with the fraud, bribery and corruption risks it faces through one of four types of assessment: full, focussed, thematic or triggered.

The CFS raises fraud awareness by a number of means such as issuing fraud awareness articles via the Trust's communications team, giving presentations to staff teams and providing a staff portal containing video training, information and guidance. Information will be provided to ARC to show the effectiveness of counter fraud activity.

## 6.0 References and Bibliography

This policy was drafted with reference to the following:

- [Criminal Procedure and Investigations Act 1996](#);
- [NHS Counter Fraud Authority Guidance](#);
- [NHS Counter Fraud Authority Strategy 2023 -26](#)
- [Government Functional Standard 013 NHS requirements](#);
- [The Bribery Act 2010](#);
- [The Fraud Act 2006](#);
- [The Police and Criminal Evidence Act 1984](#);
- [The Proceeds of Crime Act 2002](#); and
- [The Public Interest Disclosure Act 1998](#).

## 7.0 Fraud, Bribery and Corruption consideration

The Trust has a zero-tolerance approach to fraud, bribery and corruption in all areas of our work and it is important that this is reflected through all policies and procedures to mitigate these risks.

Fraud relates to a dishonest representation, failure to disclose information or abuse of position in order to make a gain or cause a loss. Bribery involves the giving or receiving of gifts or money in return for improper performance. Corruption relates to dishonest or fraudulent conduct by those in power.

Any procedure incurring costs or fees or involving the procurement or provision of goods or service, may be susceptible to fraud, bribery, or corruption so provision should be made within the policy to safeguard against these.

If there is a potential that the policy being written, amended or updated controls a procedure for which there is a potential of fraud, bribery, or corruption to occur you should contact the Trusts Local Counter Fraud Specialist (LCFS) for assistance.

# Appendix 1 Fraud response plan

## Introduction

This fraud response plan provides a checklist of actions and a guide to follow in the event that fraud is suspected. Its purpose is to define authority levels, responsibilities for action and reporting lines in the event of suspected fraud, theft or other irregularity, it covers:

- Notification of suspected fraud;
- The investigation process;
- Sanctions and redress;
- Recovery action;
- Roles and responsibilities; and
- Monitoring and review.

## Notifying Suspected Fraud

It is important that all staff are able to report their concerns without fear of reprisal or victimisation and are aware of the means to do so. The *Public Interest Disclosure Act (1998)* commonly referred to as the “whistle-blowers act”, provides appropriate protection for those who voice genuine and legitimate concerns through the proper channels.

If an employee has any concerns or suspicions of fraud they must report this using the contact details in Appendix 3.

## The Investigation Process

The CFS will make sufficient enquiries to establish whether or not there is any foundation to the suspicion that has been raised.

Leicestershire Partnership NHS Trust wants all employees to feel confident that they can expose any wrongdoing without any risk to themselves. In accordance with the provisions of the ‘whistle-blowers act’, the organisation has implemented a *Freedom to Speak Up Policy: Speak up, Listen up, Follow up* and Freedom to Speak Up Guardian who can provide an independent and impartial source of advice to staff at any stage of raising a concern.

A CFS investigation may identify conduct or performance that may be of concern to the organisation or to the employees Professional Body, whether related to fraud or otherwise. Where appropriate, relevant organisational policies and procedures, including disciplinary procedures, will be followed where such concerns arise. This may result in disciplinary action and/or notification to the relevant professional body where appropriate.

In accordance with the NHS Counter Fraud Authority requirements the Director of Finance, in conjunction with the CFS, will decide whether or not a case should be referred to the police. Any referral to the police will not prohibit action being taken under any local disciplinary procedures of Leicestershire Partnership NHS Trust unless expressly stipulated by the police.

The CFS, in consultation with Leicestershire Partnership NHS Trust’s Director of Finance and Performance, will investigate allegations in accordance with procedures and documents referenced in the NHSCFA standards.



Leicestershire Partnership NHS Trust will follow their disciplinary procedure if there is evidence that an employee has committed any act of fraud, bribery or corruption. The CFS must be aware that staff under investigation which could lead to disciplinary action, have the right to procedural fairness and the CFS must seek advice from the organisation's HR department during the investigation process where appropriate.

The CFS will take control of any physical evidence and record this in accordance with the procedures outlined in the NHSCFA Anti-Fraud Manual. For reasons of confidentiality access to this manual is restricted.

Interviews under caution will only be carried out by the CFS or, if appropriate, the police in accordance with the Police and Criminal Evidence Act (1984). The CFS will also take written statements where necessary.

If fraud, bribery or corruption is found to have occurred, the CFS will prepare a report for the Director of Finance and Performance, setting out the following:

- The circumstances;
- The investigation process;
- The estimated or actual loss;
- The steps taken to prevent recurrence;
- The steps taken to recover loss; and
- System control weaknesses that require correction.

Any recommendations as a result of an investigation will be reported in progress reports to the Audit and Risk Committee to consider any necessary improvements to controls.

## **Sanctions and Redress**

The seeking of financial redress or recovery of losses will always be considered in cases of fraud, bribery and corruption that are investigated by either the CFS or NHSCFA where a loss is identified.

Recovery of losses may involve action under the Proceeds of Crime Act (2002) but each decision will be taken in light of the particular circumstances of each case.

Redress allows for resources that are lost to fraud, bribery or corruption to be returned to the NHS for use as intended and for the provision of patient care and services.

The NHSCFA Anti-Fraud Manual provides in depth detail of how sanctions can be applied and redress sought. Local action can also be taken to recover money using the administrative procedures of the organisation or civil law.

In cases of serious fraud, bribery and corruption, parallel sanctions can be applied, for example:

- Disciplinary action;
- Use of civil law to recover lost funds; and
- Use of criminal law to apply an appropriate criminal penalty, possible referral of information and evidence to a professional body if appropriate.

The NHSCFA can also apply to the courts to make a restraining order or confiscation order under the Proceeds of Crime Act (2002). This means that a person's money can be taken away from them if it is believed that the person benefited from the crime. This can also include

restraining assets during an investigation.

The range of available sanctions which may be pursued by the relevant decision makers includes:

- **No further action.** In some cases it may be that the organisation, under guidance from the CFS and with the approval of the Director of Finance, decides that no further action is taken.
- **Criminal Investigation.** Following an investigation it may be necessary to bring the matter to the attention of the criminal courts such as Magistrates or Crown Court.
- **Civil Recovery.** The civil recovery route is available to the organisation if this is cost effective and desirable. This could involve a number of options such as applying through the small claims court. Each case will be discussed with the Director of Finance to determine the most appropriate action.
- **Disciplinary Action.** The appropriate person, in conjunction with the HR department, will be responsible for initiating any disciplinary action.
- **Confiscation under the Proceeds of Crime Act.** Depending upon the extent of the loss and the proceedings in the case, it may be suitable for the recovery of losses to be considered under the Proceeds of Crime Act.
- **Recovery from On-Going Salary Payment.** Arrangements can be made to recover losses via payroll if the subject is still employed by the organisation.
- **Professional Body Disciplinary.** During an investigation, if clear evidence exists of a healthcare professional's involvement in fraud, bribery or corruption, the appropriate regulatory body will be informed so they can consider whether fitness to practice procedures should be invoked. Regulatory bodies have statutory powers to place conditions on, suspend or remove the registration of, professionals whose fitness to practice has been impaired.

#### **The CFS will:**

- Ensure that the Director of Finance and Performance is informed about all referrals and cases;
- Be responsible for the day-to-day implementation of the key standards of counter fraud, bribery and corruption activity as set out by the Functional Standard;
- Investigate cases of fraud;
- In consultation with the Director of Finance and Performance, report any case to the police or NHSCFA as agreed and in accordance with the NHS Government Functional Standard;
- Report any case and the outcome of the investigation through the NHSCFA national case management system;
- Ensure that other relevant parties are informed where necessary, for instance HR;
- Ensure that the appropriate organisation incident and losses reporting systems are followed;
- Ensure that any system weaknesses identified as part of any investigation are followed up with management and reported to internal audit; and
- Ensure that cases are managed appropriately, taking into account appropriate legislation and regulation and the needs of procedural fairness in the employment relationship.

**NHSCFA will:**

- Provide leadership and expertise in counter fraud as a valued NHS partner;
- Collaborate nationally and locally with the NHS to understand threats, vulnerabilities and enablers;
- Deliver intelligence-led counter fraud services to find, respond to and to prevent fraud;
- Reduce the impact of fraud; and
- Work in partnership to deliver financial savings that can be reinvested in patient care.

## Appendix 2 Do's and Don'ts

### Do...

- Make an immediate note of your concerns – note all relevant details such as what was said in telephone or other conversations, the date, time and the names of any parties involved. If appropriate, these may be discussed or passed onto your line manager for further action or decisions.
- Report your suspicions immediately and directly – contact details are provided in Appendix 3.
- Deal with the matter promptly, if you feel your concerns are warranted – any delay may cause the organisation to suffer further financial loss

### Don't...

- Do nothing.
- Be afraid of raising your concerns – you will not suffer any recrimination from the organisation as a result of voicing a reasonably held suspicion. The organisation will treat any matter you raise sensitively and confidentially.
- Approach or accuse any individuals directly.
- Try to investigate the matter yourself – there are special rules surrounding the gathering of evidence for use in criminal cases. Any attempt to gather evidence by people who are unfamiliar with these rules may destroy the case. The organisation appointed CFS is trained in handling investigations in accordance with the NHSCFA Anti-Fraud Manual.
- Convey your suspicions to anyone other than the CFS, Director of Finance or NHSCFA.

## Appendix 3 Counter fraud contacts

Fraud can be reported to:

### **Counter Fraud Specialist – Matthew Curtis**

07920 138 329

[matthew.curtis1@nhs.net](mailto:matthew.curtis1@nhs.net)

### **Director of Finance and Performance – Sharon Murphy**

[sharon.murphy22@nhs.net](mailto:sharon.murphy22@nhs.net)

### **Director of Governance & Risk and Counter Fraud Champion – Kate Dyer**

[kate.dyer7@nhs.net](mailto:kate.dyer7@nhs.net)

### **NHS Counter Fraud Authority**

Fraud and corruption reporting line: 0800 028 40 60

Online reporting tool at <https://cfa.nhs.uk/reportfraud>

## Appendix 4 Prevalent frauds in the NHS

**Common examples of fraud, bribery and corruption offences occurring within the provision of healthcare services to the NHS**

**(This is not an exhaustive list; for other types of fraud, bribery or corruption offences please contact the CFS for advice).**

**Employment:** Presenting forged certificates of qualification to obtain employment; claiming for overtime or shifts not worked; taking sick leave and undertaking unauthorised work for another organisation whilst in receipt of sick pay; claiming expenses (such as travel) when it has not been incurred; falsification of references for a job application; claiming time for college/training but not actually attending; knowingly failing to report and retaining salary or other payments not entitled to; non declaration of criminal convictions.

**Patients Monies:** Falsifying patients' monies records to obtain cash and property.

**Pharmaceuticals:** Presentation of forged prescriptions; falsely presenting oneself as another to receive prescription items; receiving free prescriptions through fraudulently claiming entitlement to exemptions from a charge; Pharmacists substituting an expensive drug with a cheaper alternative and making claims for the more expensive one; writing prescriptions for own use.

**Procurement:** Price fixing or price hiking by suppliers; invoicing for products not supplied; over invoicing; supplying unsolicited goods or products.

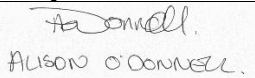
**Equipment:** Obtaining or misuse of equipment or goods for private purposes, including theft or misuse of data, whether held electrically or in paper based form.

**Bribery:** Financial or other reward to staff responsible for procurement if they purchase from a particular supplier. Patients making informal payments to healthcare practitioners in order to receive treatment more quickly.

**Health Tourism:** A foreign national travelling to the UK with the intention of receiving free healthcare treatment to which they know they are not entitled.

## Appendix 5 Training Needs Analysis

Training required to meet the policy requirements must be approved prior to policy approval. Learning and Development manage the approval of training. Send this form to [lpt.tel@nhs.net](mailto:lpt.tel@nhs.net) for review.

<b>Training topic/title:</b>	Counter fraud training		
Type of training: (see Mandatory and Role Essential Training policy for descriptions)	<input type="checkbox"/> Not required <input type="checkbox"/> Mandatory (must be on mandatory training register) <input type="checkbox"/> Role Essential (must be on the role essential training register) <b>Yes Desirable or Developmental</b>		
Directorate to which the training is applicable:	Yes Directorate of Mental Health Yes Community Health Services Yes Enabling Services Yes Estates and Facilities Yes Families, Young People, Children, Learning Disability and Autism Yes Hosted Services		
Staff groups who require the training: (consider bank /agency/volunteers/medical)	All staff		
Governance group who has approved this training:	ARC	Date approved:	13/12/2024
Named lead or team who is responsible for this training:	Matthew Curtis, Counter Fraud Specialist (see appendix 3 for contact details)		
Delivery mode of training: elearning/virtual/classroom/informal/adhoc	eLearning, team/service presentations, online videos, other training methods to suit individual or team.		
Has a training plan been agreed?	Yes		
Where will completion of this training be recorded?	YES uLearn YES Other (CFS records)		
How is this training going to be quality assured and completions monitored?	eLearning via ULearn Other training via CFS surveying attendees to test quality and outcomes		
<b>Signed by Learning and Development Approval name and date</b>	 ALISON O'DONNELL.		Date:

## **Appendix 6 The NHS Constitution**

- The NHS will provide a universal service for all based on clinical need, not ability to pay.
- The NHS will provide a comprehensive range of services.

**Shape its services around the needs and preferences of individual patients, their families and their carers** Answer yes

**Respond to different needs of different sectors of the population** no

**Work continuously to improve quality services and to minimise errors** yes

**Support and value its staff** yes

**Work together with others to ensure a seamless service for patients** no

**Help keep people healthy and work to reduce health inequalities** no

**Respect the confidentiality of individual patients and provide open access to information about services, treatment and performance** no



## Appendix 7 Due Regard Screening Template

Section 1			
Name of activity/proposal		Fraud, Bribery and Corruption Policy	
Date Screening commenced		05/12/2024	
Directorate / Service carrying out the assessment		Finance (Counter Fraud)	
Name and role of person undertaking this Due Regard (Equality Analysis)		Matthew Curtis	
Give an overview of the aims, objectives and purpose of the proposal:			
<p><b>AIMS:</b></p> <p>This document sets out the Trust's policy for countering fraud, bribery, or corruption and the associated reporting methods.</p>			
<p><b>OBJECTIVES:</b></p> <p>To provide information to all staff regarding how fraud, bribery and corruption will be fought within the Trust</p>			
Section 2			
Protected Characteristic	If the proposal/s have a positive or negative impact please give brief details		
Age	N/A – the policy affects all staff equally		
Disability	N/A – the policy affects all staff equally		
Gender reassignment	N/A – the policy affects all staff equally		
Marriage & Civil Partnership	N/A – the policy affects all staff equally		
Pregnancy & Maternity	N/A – the policy affects all staff equally		
Race	N/A – the policy affects all staff equally		
Religion and Belief	N/A – the policy affects all staff equally		
Sex	N/A – the policy affects all staff equally		
Sexual Orientation	N/A – the policy affects all staff equally		
Other equality groups?	N/A – the policy affects all staff equally		
Section 3			
Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please <u>tick</u> appropriate box below.			
		<b>No</b>	
High risk: Complete a full EIA starting click <a href="#">here</a> to proceed to Part B		<b>Low risk: Go to Section 4.</b>	
Section 4			
If this proposal is low risk please give evidence or justification for how you reached this decision:			
The policy affects all staff equally regardless of their specific characteristics			
Signed by reviewer/assessor	Matthew Curtis, Counter Fraud Specialist	Date	05/12/2024
<i>Sign off that this proposal is low risk and does not require a full Equality Analysis</i>			
Head of Service Signed		Date	05/12/2024

## Appendix 8 Data Privacy Impact Assessment Screening

<p>Data Privacy impact assessment (DPIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet Individual's expectations of privacy.</p> <p>The following screening questions will help the Trust determine if there are any privacy issues associated with the implementation of the Policy. Answering 'yes' to any of these questions is an indication that a DPIA may be a useful exercise. An explanation for the answers will assist with the determination as to whether a full DPIA is required which will require senior management support, at this stage the Head of Data Privacy must be involved.</p>		
<b>Name of Document:</b>	Counter Fraud, Bribery and Corruption Policy	
<b>Completed by:</b>	360 Assurance Matthew Curtis	
<b>Job title</b>	Counter Fraud Specialist	<b>Date</b> 05/12/2024
<b>Screening Questions</b>	<b>Yes / No</b>	<b>Explanatory Note</b>
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.	Yes	If a fraud investigation is launched then a wide range of information could be sought about individuals. The information may or may not end up being used as part of criminal action. It could simply be held on file in accordance with the NHSCFA policy about retention of data in relation to fraud investigations.
2. Will the process described in the document compel individuals to provide information about them? This is information in excess of what is required to carry out the process described within the document.	Yes	While individuals are not compelled as such, there would be an expectation that personal data held by the Trust would be shared with us upon request, with the fraud investigator ultimately determining whether or not information is required.
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?	Yes	Information will be stored on NHSCFA's case management system, CLUE, which is a requirement of the Counter Fraud Functional Standard that the Trust is contractually obliged to follow. Information may also be shared with organisations such as CPS as part of prosecution efforts.
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?	Yes	The Trust holds information for a wide range of uses and we could potentially require any of it for the purpose of criminal investigation.
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.	Yes	The policy does discuss the fact we do preventative and detection work, however, and this could involve data analysis of bulk data, for example, to

		detect fraud. This would be based on an assessment of fraud risk.
<b>6.</b> Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?	Yes	Could lead to criminal investigation/prosecution/disciplinary action/professional body action.
<b>7.</b> As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.	Yes	As criminal investigators we would seek to access less intrusive information initially, but we could require any information dependent on the nature of the investigation.
<b>8.</b> Will the process require you to contact individuals in ways which they may find intrusive?	Yes	Criminal investigation could lead to us requesting evidence, witness interviews or suspect interviews under caution.
<b>If the answer to any of these questions is 'Yes' please contact the Data Privacy Team via</b> <a href="mailto:Lpt-dataprivacy@leicspart.secure.nhs.uk">Lpt-dataprivacy@leicspart.secure.nhs.uk</a> <b>In this case, ratification of a procedural document will not take place until review by the Head of Data Privacy.</b>		
<b>Data Privacy approval name:</b>	<b>Sarah Ratcliffe</b>	
<b>Date of approval</b>	<b>24/12/2024</b>	

Acknowledgement: This is based on the work of Princess Alexandra Hospital NHS Trust

[Checklist for the review and approval of policies](#)

[Document on how to make a word document accessible](#)



Governance of Trust  
Policies\_.docx



Policy Group.txt

