


# Counter Fraud, Bribery and Corruption Policy

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	<p>commissioning groups into the Integrated Care Board</p> <ul style="list-style-type: none"> <li>• Develop the ways of working and profile of the Integrated Care System to ensure that its operating model is capturing the opportunities presented by closer system working</li> </ul>
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### Change and Approval History:

Version	Revision Description	Reviewer / Approval Group	Date of Review / Approval
1.0	FINAL - Policy approved and adopted by HWE ICB	Eleni Gill, Lead Counter Fraud Manager	1 July 2022
1.1	FINAL - Minor amendments: <ul style="list-style-type: none"> <li>Title of Chief Financial Officer updated</li> <li>EqIA statement updated</li> </ul>	Eleni Gill, Lead Counter Fraud Manager	14 December 2022
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1.3	FINAL - Policy non-material changes (as above) noted by the Audit and Risk Committee, policy review date extended	Eleni Gill, Lead Counter Fraud Manager	19 September 2023
1.4	DRAFT - Policy revision to support regulatory changes and the appointment of a new Counter Fraud provider. Policy shared with Executive Team for feedback.	Natalie Nelson-Newman, Lead Local Counter Fraud Specialist Simone Surgenor – ICB Deputy Chief of Staff – Governance and Policies	November 2024,
1.5	DRAFT – comments from Executive Team addressed: <ul style="list-style-type: none"> <li>Para 2.5 – added ‘if illegal activity is suspected to also notify the Police on 101 if not urgent, or 999 if there is immediate threat’</li> <li>Para 3.9 – sponsorship – relevant policy links added links added</li> <li>Throughout policy – term economic crime consistently replaced with fraud, bribery and corruption</li> </ul>	Natalie Nelson, Lead Local Counter Fraud Specialist. Simone Surgenor – ICB Deputy Chief of Staff – Governance and Policies.	January 2025
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	non-material amendments <ul style="list-style-type: none"> <li>• Addition of list of strategic objectives page 1.</li> <li>• Re-numbered contents page items 8-13</li> <li>• Updated Eqla date section13.1</li> </ul>		
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## 1 INTRODUCTION

### 1.1 Fraud Bribery & Corruption

- 1.2 All fraud, bribery and corruption (economic crime) in the NHS is unacceptable and should not be tolerated. It affects the ability of the NHS to improve health outcomes for people in England, as resources are wrongfully diverted and cannot be used for their intended purpose.
- 1.3 NHS funds and resources should, therefore, be safeguarded against those minded to committing fraud, bribery and corruption. The ICB has a zero-tolerance approach to fraud and bribery and is committed to the counter fraud initiative.

### 1.4 NHS Counter Fraud Authority

NHS Counter Fraud Authority (NHSCFA) is a Special Health Authority charged with identifying, investigating and preventing fraud and other economic crime within the NHS and the wider health group. Focussed entirely on counter fraud work, the NHSCFA is independent from other NHS bodies and directly accountable to the Department of Health and Social Care.

## 2 PURPOSE / POLICY STATEMENT

### 2.1 This policy aims to:

- Explain how the Herts and West Essex Integrated Care Board (HWE ICB) intends to tackle fraud, bribery and corruption following the NHSCFA Strategy guidelines.
- Provides guidance and
- Ensures employees are able to recognise fraud, bribery and corruption and understand the correct reporting requirements.

### 2.2 This policy should be read in conjunction with the organisation's Whistleblowing Policy, and applies to all staff; Board members, volunteers, interns, including Lay members; contractors; consultants; vendors and any other internal or external stakeholders working on behalf of the organisation.

### 2.3 HWE ICB is committed to ensuring its resources are appropriately protected from fraud, bribery and corruption.

### 2.4 Activities to tackle fraud and bribery within HWE ICB will be carried out within key principles for action,

- Planning and Governance;
- Training, awareness and reporting; and
- Proactive detection.

### 2.5 Employees must report any suspicions of fraud, bribery and corruption as soon as they become aware of them to ensure they are investigated appropriately and to maximise the chances of financial recovery, via:

- The organisations Lead Local Counter Fraud Specialist (LCFS)
- The organisations Chief Financial Officer (CFO)

- the Crimestoppers powered NHS Fraud and Corruption Reporting Line: 0800 028 40 60
  - filling in an online form at [cfa.nhs.uk/report fraud](https://cfa.nhs.uk/report-fraud) or
  - if illegal activity is suspect to notify the police on 101 if not urgent, or 999 where there is immediate there is an threat.
- 2.6 The majority of allegations of fraud and bribery will be investigated by the HWE ICB Accredited Counter Fraud Specialists.
- 2.7 Depending on the particular details of the allegation, if necessary, some cases may also be investigated by NHSCFA.
- 2.8 Under no circumstances should any staff member commence an investigation into suspected or alleged fraud and bribery ; a summary of what staff should do with any concerns is included as Appendix A and Appendix B. Where there is a concern of deliberate wrongdoing or potential fraud or bribery, or they are unsure, staff are encouraged to seek the advice of the LCFS at the earliest possible stage.
- 2.9 All staff should cooperate with the LCFS, as well as NHSCFA and other bodies, to facilitate work to tackle fraud, bribery and corruption involving the NHS by:
- Providing information and intelligence.
- Facilitating investigations; complying with NHSCFA strategy and guidance and,
  - Not revealing information about open investigations to unauthorised persons (including journalists).
  - Taking all appropriate steps to prevent, detect and investigate fraud, bribery and corruption will be taken, including:
  - Appointing qualified/professional personnel to operate in accordance with relevant legislation and relevant standards; and,
  - Ensuring that appropriate measures are included in all financial governance and system controls to tackle fraud, bribery and corruption.
- 2.10 All appropriate sanctions will be sought against those found to have committed fraud, bribery and corruption including criminal, civil and disciplinary sanctions. Where applicable, these may include but not be limited to:
- Criminal prosecution
  - Recovery by means of contractual arrangements
  - Recovery via agreement or via a civil court
  - Internal disciplinary sanctions
  - Referral to a professional body such as General Medical Council, Nursing Midwifery Council or Care Quality Commission.

### 3 DEFINITIONS

#### 3.1 Fraud

The Fraud Act 2006 created a criminal offence of fraud and defines three main ways of committing it:

<b>Fraud by false representation</b>
<b>A person is in breach of this section if he/she:</b> <ul style="list-style-type: none"><li>• Dishonestly makes a false representation, and</li><li>• Intends, by making the representation to make a gain for themselves or another, or to cause loss to another or to expose another to a risk of loss.</li></ul> <b>A representation is false if:</b> <ul style="list-style-type: none"><li>• It is untrue or misleading, and</li><li>• The person making it knows that it is, or might be, untrue or misleading.</li></ul>
<b>Fraud by failing to disclose information</b>
<b>A person is in breach of this section if he/she:</b> <ul style="list-style-type: none"><li>• Dishonestly fails to disclose to another person information which they are under a legal duty to disclose, and</li><li>• Intends, by failing to disclose the information to make a gain for themselves or another, or to cause loss to another or to expose another to a risk of loss.</li></ul>
<b>Fraud by abuse of position</b>
<b>A person is in breach of this section if he/she:</b> <ul style="list-style-type: none"><li>• Occupies a position in which he/she is expected to safeguard, or not to act against, the financial interests of another person;</li><li>• Dishonestly abuses that position, and</li><li>• Intends, by means of the abuse of that position to make a gain for themselves or another, or to cause loss to another or to expose another to a risk of loss.</li><li>• A person may be regarded as having abused their position even though their conduct consisted of an omission rather than an act.</li></ul>

The Act states that the terms “Gain” and “Loss” should be read in accordance with the following:

- As extending only to a gain or loss in money or other property; and
- As including any such gain or loss whether temporary or permanent.

**“Property”** means any property whether real or personal (including things in action and other intangible property).



**“Gain”** includes a gain by keeping what one has, as well as a gain by getting what one does not have.

**“Loss”** includes a loss by not getting what one might get, as well as a loss by parting with what one has.

Fraud carries a maximum sentence of 10 years imprisonment.

### 3.2 Bribery and Corruption

Bribery is generally defined as giving or offering someone a financial or other advantage to encourage that person to perform their functions or activities improperly or to reward that person for having already done so; or requesting, agreeing to receive, or accepting the advantage offered.

The Bribery Act 2010 reformed the criminal law of bribery, making it easier to tackle this offence proactively in both the public and private sectors. It introduced a corporate offence (S7 below) which means that commercial organisations, including NHS bodies, will be exposed to criminal liability, punishable by an unlimited fine, for failing to prevent bribery.

	Section	Offence	Detail
Individuals	Section 1	Bribing another person	Offering, promising or giving a bribe in the UK or abroad, in the public or private sector.
	Section 2	Receiving a bribe	Requesting, agreeing to receive or accepting of a bribe in the UK or abroad, in the public or private sector.
	Section 6	Bribery of foreign public officials	Bribery of a foreign public official in order to obtain or retain business.
Organisations	Section 7	Failure to prevent bribery	Failure by an organisation to prevent a bribe being paid by those who perform services for, or on behalf of the organisation (“associated persons”).

Bribery carries a maximum sentence of 10 years imprisonment and a fine.

HWE will undertake risk assessments in line with the Ministry of Justice guidance to assess how bribery and corruption may affect the organisation. This will be undertaken every three years, however this is not definitive, and circumstances may call for a risk assessment to be undertaken outside of this pattern, for example due to changes in legislation or a reported incident of bribery within the ICB. The risk assessment will be undertaken by a nominated officer such as the LCFS, who will report directly to the

Chief Financial Officer and will refer to the Home Office's bribery and corruption assessment template.

In addition, proportionate procedures have been put in place to mitigate the identified risks of bribery, including:

- all staff must disclose their business interests, prior to commencement of employment with the ICB;
- all staff must disclose any new business interests immediately;
- all staff must declare hospitality received by or offered to them as HWE employees;
- all hospitality provided by HWE staff to third parties must be declared; and
- staff must not solicit personal gifts and must declare all gifts received (more than £50 in value).

Guidance regarding the above requirements can also be found in the Standards of Business Conduct and Conflicts of Interest Policy. All staff must be aware of and comply with the Standing Financial Instructions (SFIs) and the [Conflicts of Interest Policy] and their related requirement to declare relevant information.

### **3.3 Theft**

Theft is defined within the Theft Act 1968 as 'dishonestly appropriating property belonging to another with the intention of permanently depriving the other of it.'

The Theft Act 1968 also includes robbery, burglary, and abstracting electricity amongst other offences.

Should theft or similar offences be suspected by any person the organisation's Local Security Management Specialist ("LSMS") should be informed to review security measures who may recommend referral it to the Police if appropriate.

### **3.4 Whistleblowing**

This is when an employee blows the whistle by informing their employer, a regulator, customers, the police or the media about a dangerous or illegal activity that they are aware of through their work e.g. concerns about health and safety risks, potential environmental problems, fraud, bribery, corruption, deficiencies in the care of vulnerable people, cover-ups and many other problems. (See also HWE Whistleblowing Policy)

All employees should be aware of NHS Improvement and NHS England's: Freedom to speak up: raising concern's (whistleblowing) policy for the NHS, April 2016. These form the minimum standards for raising of concerns in the NHS for the benefit of all patients in England.

### 3.5 Public service values

A Code of Conduct for NHS Boards was first published by the NHS Executive in April 1994 and set out the initial public service values:

**Accountability:** Everything done by those who work in the ICB must be able to stand the tests of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.

**Probity:** Absolute honesty and integrity should be exercised in dealing with NHS patients, assets, employees, suppliers and customers.

**Openness:** The ICB's actions should be sufficiently public and transparent to promote confidence between the ICB and its patients, our employees and the public. In addition, the seven fundamental public service values specified in the Nolan report should be exercised by all those who work for or are in contract with the ICB. A further Code of Conduct was issued in October 2002 titled "Code of Conduct for NHS Managers

**Selflessness:** Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their families or their friends.

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

**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.

**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.

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

**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.

**Leadership:** Holders of public office should promote and support these principles by leadership and example. All those who work in the organisation should be aware of, and act in accordance with, these values.

### 3.6 Facilitation payments

Facilitation payments are typically small, unofficial payments made to secure or expedite a routine government action by a government official, including any employee of the NHS. Facilitation payments are prohibited under the Bribery Act 2010 like any

other form of bribe. They shall not be given or received by the ICB, or by the ICB's employees in the UK or any other country.

### **3.7 Gifts and Hospitality**

Courtesy gifts and hospitality must not be given or received in return for services provided or to obtain or retain business, but shall be handled openly and unconditionally as a gesture of esteem and goodwill only. Gifts and hospitality shall always be of symbolic value, appropriate and proportionate in the circumstances, and consistent with local customs and practices. They shall not be made in cash. All gifts, payments or any other contribution whether in cash or in kind, shall be documented, regularly reviewed, and properly accounted for on the books of the ICB. Please refer to the ICB's ~~Code of Conduct~~ Standards of Business Conduct and Conflicts of Interest Policy for more guidance.

### **3.8 Political and Charitable Contributions**

The ICB does not make any contributions to politicians, political parties or election campaigns.

Charitable donations should not be provided to any organisation upon suggestion of any person of the public or private sector in order to induce that person to perform improperly the function or activities which he or she is expected to perform in good faith, impartially or in a position of ICB or to reward that person for the improper performance of such function or activities.

Any donations and contributions must be ethical and transparent. The recipient's identity and planned use of the donation must be clear, and the reason and purpose for the donation must be justifiable and documented. All charitable donations will be publicly disclosed.

Donations to individuals and for-profit organisations and donations paid to private accounts are incompatible with the ICB's ethical standards and are prohibited.

### **3.9 Sponsoring**

Sponsoring means any contribution in money or in kind by the ICB towards an event organised by a third party in return for the opportunity to raise the ICB's profile. All sponsoring contributions must be transparent, pursuant to a written agreement, for legitimate business purposes, and proportionate to the consideration offered by the event host. They may not be made towards events organised by individuals or organisations that have goals incompatible with the ICB's ethical standards or that would damage the ICB's reputation. All sponsorships will be publicly disclosed.

Where commercial sponsorship is used to fund ICB training events, training materials and general meetings, the sponsorship must be transparent, pursuant to a written agreement, for legitimate business purposes, and proportionate to the occasion. Where meetings are sponsored by external sources, the sponsorship must be disclosed in the papers relating to the meeting and in any published minutes/proceedings.

Where sponsorship links to the development of guidelines and advice, this should be carried out in consultation with HWE ICBs Governance Team and in conjunction with the appropriate ICB working group independent of the sponsors. While it is recognised that consultation with the industry may be necessary when developing a guideline, the overall decision on what is included should lie with the ICB's Chief of Staff having considered findings from the working group. Further detail can be found in this ICBs Standards of Business Conduct and Conflicts of Interest Policy.

## **4 SCOPE**

### **4.1 Parties within the Scope of this Document**

- 4.2 This policy applies to all employees HWE ICB and/or any other parties who undertake business on behalf of or representing HWE ICB. This includes (but is not restricted to) Board members, Executive Senior Managers, as well as consultants, vendors, contractors and secondees.

## **5 ROLES AND RESPONSIBILITIES**

### **5.1 All ICB Employees**

- 5.2 All employees should carry out their duties with due regard for HWE ICB policies and procedures, be aware of fraud, bribery, and corruption risks and understand the importance of protecting the organisation against them.
- 5.3 All employees must report any suspicions of fraud, bribery or corruption. A summary of what all employees should do with any concerns and how to report them is included as Appendix A and Appendix B.
- 5.4 All employees should not be afraid to report genuine suspicions of fraud, bribery or corruption. The Public Interest Disclosure Act 1998 protects those who have reasonable concerns and will not suffer discrimination or victimisation for following the correct procedures.
- 5.5 Any fraud, bribery or corruption concerns received through the Whistleblowing policies should be referred to the LCFS as soon as possible and whistle-blowers encouraged to report any future fraudulent concerns directly to the LCFS in the first instance.
- 5.6 Employees should not confirm or deny the existence of an ongoing fraud, bribery or corruption investigation to any unauthorised individual (including journalists) without seeking prior approval from the LCFS or relevant NHSCFA investigator, as appropriate.
- 5.7 For details regarding responsibilities regarding the declaration of gifts and hospitality, refer to the Standards of Business Conduct policy for the organisation. For expectations regarding the Values, Aims, Principles, Behaviours and Accountability, refer to the Corporate Governance Framework.
- 5.8 All staff are required to undertake counter fraud and bribery e-learning ~~annually~~ training, found through the ESR mandatory training portal.

## **5.9 HWE ICB Board**

- 5.10 The Board is absolutely committed to maintaining an honest, open and well-intentioned culture within the organisation. It is, therefore, also absolutely committed to the elimination of fraud, bribery or any other illegal act which occurs either within or against the organisation.
- 5.11 Whilst every effort will be made to prevent fraud and bribery from occurring, where this is not possible, the Board is committed to the rigorous investigation of any such cases. Consequently, all cases of suspected fraud, bribery and dishonesty will be considered for investigation. Where appropriate, criminal prosecution and civil court action may be taken to recover money, costs and interest. Employees of the HWE ICB or of third parties acting on behalf of the HWE ICB may also be subject to disciplinary action and or referral to a professional regulator.
- 5.12 The Board wishes to encourage anyone having reasonable suspicions of fraud and/or bribery to report them. Therefore, it is also the Board's policy, which will be rigorously enforced, that no individual will suffer in any way as a result of reporting a reasonably held suspicion, provided that they have acted in 'good faith' when doing so. For these purposes "reasonably held suspicions" shall mean any suspicions other than those, which are raised maliciously and found to be groundless. is committed to ensuring employees are treated in line with the Public Interest Disclosure Act 1998. The HWE ICB maintains a Raising Concerns (Whistleblowing HWE ICB) policy which should be consulted by employees who are concerned about making a report.
- 5.13 It should be added that under no circumstances should a member of staff speak or write to representatives of the press, TV, radio, or to any other third party about a suspected fraud and/or bribery without the written authority of the Accountable Officer. Care needs to be taken to ensure that nothing is done that could give rise to an action for slander or libel.

## **5.14 Audit Committee**

- 5.15 The HWE ICB Audit Committee will:

- Require assurance that there are adequate arrangements in place for tackling fraud, bribery and corruption.
- Approve the counter fraud, bribery and corruption work plan;
- Review the outcomes of counter fraud, bribery and corruption work; and,
- Review the adequacy and effectiveness of policies and procedures, seeking reports and assurances from Officers as appropriate.

## **5.16 Chief Executive**

- 5.17 The Chief Executive has overall responsibility for the funds entrusted to the HWE ICB.
- 5.18 As the Accounting Officer, the respective Chief Executive will ensure adequate policies and procedures are in place to protect the HWE ICB from fraud, bribery and corruption.

#### **5.19 Chief Financial Officer**

- 5.20 The Chief Financial Officer, as a member of the Board, is responsible for overseeing and providing strategic management and support for all work to tackle fraud, bribery and corruption within HWE ICB.
- 5.21 This ensures there is effective leadership and a high level of commitment to the tackling of fraud, bribery and corruption within HWE ICB. Identifying a member of the board to oversee this work also helps HWE ICB to focus on its key strategic priorities in the area of fraud, bribery and corruption.
- 5.22 All counter fraud, bribery and corruption services (including for hosted bodies) are provided under arrangements proposed by the Chief Financial Officer and approved by the Audit and Assurance Committees, on behalf of the Boards.
- 5.23 The Chief Financial Officer, in conjunction with the LCFS and the NHSCFA, will decide whether a case should be referred to the police. Human Resources and line managers will be involved as necessary. Any referral to the police will not prohibit action being taken under the ICB disciplinary procedures. Under no circumstances should a ICB employee contact the Police directly regarding concerning a fraudulent allegation as this could hinder an investigation.

#### **5.24 NHS Counter Fraud Authority**

- 5.25 In accordance with its case acceptance criteria NHSCFA will investigate cases of fraud and/or bribery that are not investigated by the HWE ICB Counter Fraud Team.
- 5.26 HWE ICB will provide access to and support for NHSCFA improvement activity and will fully engage with planning action as a result of that activity.

#### **5.27 Internal and External Audit**

- 5.28 Internal audit play a key role in reviewing controls, identifying system weaknesses and test compliance of HWE ICB standing financial instructions.
- 5.29 External audit have a specific role to conduct an independent examination and express an opinion, on the HWE ICB Partnership financial statements.
- 5.30 The audit functions are separate and distinct from work to tackle crime, but it is important that there are effective links between those responsible for the audit function and those responsible for tackling fraud, bribery and corruption.
- 5.31 Internal and external audit should meet regularly with those responsible for work to tackle fraud, bribery and corruption, to discuss and monitor liaison requirements with reference to the purpose of each function, ensuring they remain effective and fit for purpose.
- 5.32 Further information on the responsibilities of the audit committee can be found in the NHS Audit Committee Handbook 2018 which can be accessed online via <https://www.hfma.org.uk/publications?Type=Guide>.

### **5.33 Human Resources**

- 5.34 HWE ICB managers are responsible for taking forward disciplinary proceedings against employees who have committed an offence; Human Resources provide advice regarding this process following the HWE ICB Disciplinary Policy. It is not unusual for criminal and disciplinary processes to overlap. In the case of parallel criminal and disciplinary processes, these should be conducted separately and by different officers, but there needs to be close liaison between those investigating fraud, bribery and corruption and those progressing disciplinary proceedings since one process may impact on the other. This may include the sharing of information where lawful and at the appropriate time.
- 5.35 Human Resources will, where appropriate, provide information to assist those responsible for dealing with fraud, bribery and corruption with any proactive reviews undertaken in relation to detection or prevention activities. In addition, Human Resources will inform those responsible for investigating fraud, bribery and corruption of any possible system weaknesses that could allow fraud, bribery or corruption to occur. This includes weaknesses discovered as any part of a Human Resources investigation that did not warrant the commencement of a criminal investigation.
- 5.36 Those responsible with dealing with fraud, bribery and corruption should meet regularly with Human Resources to discuss liaison requirements and monitor joint working arrangements, ensuring they remain effective and fit for purpose.

### **5.37 Nominated and Accredited Lead Counter Fraud Specialists (LCFS)**

- 5.38 Nominated and accredited LCFSs work within NHS commissioning and provider organisations to tackle fraud, bribery and corruption in line with the NHSCFA Counter Fraud Strategy.
- 5.39 Nominated and accredited LCFSs will work with colleagues to promote their work, respond to identified system weaknesses and investigate allegations of fraud, and where appropriate bribery and corruption.
- 5.40 HWE ICB employees will work cooperatively with the HWE ICB counter fraud team and NHSCFA to ensure that proactive and reactive work undertaken is effectively delivered.
- 5.41 Investigative work will usually be carried out by the HWE ICB Counter Fraud Team (in certain circumstances NHSCFA may investigate). This team comprises of nominated and accredited Counter Fraud Specialists.

### **5.42 Managers**

- 5.43 All managers are responsible for ensuring that policies, procedures and processes within their work areas are adhered to and kept under review. This includes but not limited to authorising annual leave and sickness as appropriate following guidelines.
- 5.44 Managers should ensure that all employees in their teams are aware of fraud, bribery and corruption risks and understand the importance of protecting HWE ICB against them. Managers may also be responsible for the enforcement of disciplinary action for employees who do not comply with policies and procedures and commit fraud, bribery and corruption.
- 5.45 If a manager suspects, or is made aware, that someone in their team or a third party may be committing fraud, bribery or corruption, they must immediately report their suspicions to the HWE ICB LCFS.



- 5.46 Managers should in no circumstances investigate suspicions or an allegation themselves. A summary of what employees (including Managers) should do with any concerns is included as Appendix A and B. Routine verification of information or outliers according to normal processes is reasonable. However, where there is a concern that deliberate wrongdoing or potential fraud and/or bribery may have taken place, or they are unsure, employees (including Managers) are encouraged to seek the advice of the relevant HWE ICB LCFS at the earliest possible stage.
- 5.47 Managers must ensure all staff complete the counter fraud and bribery training as part of HWE ICB Training requirements.
- 5.48 **Commissioning Support Unit**
- 5.49 The Commissioning Support Unit (CSU) will assist the CFO, HR and the LCFS, where an employee is suspected of being involved in fraud and bribery, by allowing them access to staff and any relevant documentation they may hold.
- 5.50 **Information Management and Technology**
- 5.51 Information Management and Technology (IM&T) will report all cases to the LCFS in line with the Computer Misuse Act 1990, where there is suspicion, that IT is being used for fraudulent purposes. This includes inappropriate Internet or E-mail use.

## **6 POLICY DETAIL**

### **6.1 Approach to Tackling fraud, bribery and corruption (economic crime)**

#### **6.2 Strategic Governance**

HWE ICB will ensure there is support for work to tackle fraud, bribery and corruption at all levels with the organisation. The Chief Financial Officer will have overall responsibility for overseeing and providing strategic management and support for the work, ensuring it is embedded across HWE ICB. All counter fraud work will be aligned to the NHSCFA strategy.

- 6.3 Furthermore, HWE ICB will undertake the full range of work against fraud, bribery and corruption.

- 6.4 A local risk assessment based on the NHSCFA Risk Descriptors and other influencing factors will form the basis of an annual Counter Fraud Plan setting out the work scheduled for the year and authorised by the Audit and Risk Committee.

#### **6.5 Key Principles for Action**

- 6.6 In order to tackle fraud, bribery and corruption, HWE ICB will take a multi-faceted approach that is both proactive and reactive. This approach is set out in the following three key principles for action:

#### **6.7 Inform and Involve**

HWE ICB will ensure all its employees understand what fraud, bribery and corruption is, and their role in ensuring they follow the correct reporting procedures. This can take

place through communications and promotions, such as awareness campaigns, newsletters and presentations.

#### **6.8 Prevent and Deter**

HWE ICB will remove opportunities for fraud, bribery and corruption to occur and discourage those individuals who may be tempted to commit these crimes. Successes will be publicised so that the risk and consequences of detection are clear to potential offenders. Those individuals who are not deterred should be prevented from committing crime by ensuring robust systems are in place.

#### **6.9 Hold to account**

HWE ICB will ensure those who have committed fraud, bribery and corruption against it are held to account for their actions. HWE ICB will ensure professionally trained specialists are in place to detect and investigate these offences and will seek to apply the full range of sanctions to those found to have committed fraud, bribery or corruption, including criminal, civil and disciplinary sanctions (Disciplinary sanctions carried out by HR supported by the LCFS as appropriate.).

6.10 HWE ICB will also seek to recover all funds lost to fraud, bribery and corruption.

#### **6.11 Cabinet Office Functional Standard and Measuring Success**

The Cabinet Office has developed Functional Standard GovS 013: Counter Fraud. The purpose of this government functional standard is to set the expectations for the management of fraud, bribery and corruption risk in government organisations. HWE ICB will implement these requirements in order to ensure its resources are protected from fraud, bribery and corruption. The NHSCFA Organisational strategy can be found here:

[https://cfa.nhs.uk/resources/downloads/documents/corporate-publications/NHSCFA\\_Strategy\\_2020-23.pdf](https://cfa.nhs.uk/resources/downloads/documents/corporate-publications/NHSCFA_Strategy_2020-23.pdf) and counter fraud requirements [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1014385/6.7628\\_CO\\_Govt-Functional-Std\\_GovS013-Counter-Fraud\\_v4.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1014385/6.7628_CO_Govt-Functional-Std_GovS013-Counter-Fraud_v4.pdf))

6.12 Having appropriate measures in place helps to protect NHS resources against crime and ensures HWE ICB meets these standards.

6.13 HWE ICB will co-operate with the reporting and assurance programme associated with GovS 013 and will aim to continually enhance compliance with the Functional Standards.

## **7 MONITORING COMPLIANCE**

- 7.1 Monitoring is essential to ensuring that controls are appropriate and robust enough to prevent or reduce fraud, bribery and corruption. The monitoring of effectiveness and compliance with this policy will be led by the LCFS and external auditors. The ICB Chief Financial Officer will be the ICB point of contact.

Monitoring will include but is not limited to:

- Planned and unplanned audits of financial accounts.
- Planned and unplanned reviews of financial governance arrangements.
- Investigation reports and associated action plans/ learning stemming from investigation.
- Record of all reported suspicions and subsequent actions/ conclusions reached maintained by the Chief Financial Officer.
- Training records and feedback from corporate induction and mandatory refresher training sessions

As a result of reactive and proactive work completed throughout the financial year, closure reports are prepared and issued by the LCFS. System and procedural weaknesses are identified in each report and suggested recommendations for improvement are highlighted. The ICB, together with the LCFS will track the recommendations to ensure that they have been implemented.

The ICB is required to complete the self- assessment submission and submit these annually to NHSCFA. HWE must mark themselves against each requirement 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 NHSCFA Quality and Compliance which will evaluate the ICB's effectiveness in dealing with the fraud, bribery and corruption risks it faces through one of four types of assessment: Full, Focused, Thematic or Triggered.

Any recommendations and action plans developed because of the monitoring will be tracked to ensure implementation and the results of the monitoring will be reported back to the Audit and Risk Committee.

## **8 DISSEMINATION AND IMPLEMENTATION**

- 8.1 This document will be placed on the intranet. It will be therefore be available to all staff via the ICB ICB intranet.
- 8.2 Furthermore, the document will be circulated to managers by the LCFS. Managers will be required to cascade the information to members of their teams and will ensure that all staff are briefed on its contents and on what it means for them.

## **9 STAFF TRAINING**

- 9.1 Managers must ensure all staff complete the counter fraud and bribery training as part of HWE ICB Training requirements
- 9.2 We will ensure that reasonable adjustments to accommodate the equality needs of individuals, where relevant to the understanding and application of the policy, are made. This helps to ensure that staff understand the policy.

## 10 ARRANGEMENTS FOR REVIEW

- 10.1 This policy will be reviewed no less frequently than every two years. An earlier review will be carried out in the event of any relevant changes in legislation, national or local policy/guidance, organisational change or other circumstances which mean the policy needs to be reviewed.
- 10.2 If only minor changes are required, the sponsoring Committee has authority to make these changes without referral to the HWE ICB. If more significant or substantial changes are required, the policy will need to be ratified by the relevant committee before final approval by the Integrated Care Board.

## 11 ASSOCIATED POLICIES, GUIDANCE AND DOCUMENTS

### Associated Policies

- Whistleblowing Policy
- Standards of Business Conduct
- Conflicts of Interest
- Disciplinary Policy

### Associated Guidance

- NHSCFA Strategy 2023-26
- The Fraud Act 2006
- The Bribery Act 2010

## 12 REFERENCES

- Provide a list of references of the documents that have informed or contributed to this policy.

## 13 EQUALITY IMPACT ASSESSMENT

### 13.1

This policy provides guidance on, and explanation of, the process to be followed to support HWE ICB to tackle fraud, bribery and corruption. This policy commits to meeting the equality needs of individuals that may be impacted by the process. It also links to other policies and

practices where meeting the equality needs of individuals are already embedded. A full equality impact assessment on this policy is, therefore, not required. Agreed with Paul Curry, Equality and Diversity Lead, 14 June 2024.

## APPENDIX A

### WHAT TO DO IF YOU HAVE ANY SUSPICIONS OF FRAUD OR BRIBERY?

**If you suspect fraud or bribery within the workplace, there are a few simple guidelines that should be followed:**

#### **DO:**

- Make an immediate note of your concerns.
- Where possible note all relevant details, such as what was said in telephone or other conversations, the date, time and the names of any parties involved.
- Convey your suspicions to someone with the appropriate authority and experience, as set out within this Counter Fraud, Bribery and Corruption Policy; and
- Deal with the matter promptly. Any delay may cause the ICB to suffer further financial loss.

#### **DON'T:**

- X** Do nothing.
- X** Be afraid of raising your concerns. You will not suffer any recrimination from the as a result of voicing a reasonably held suspicion, and any matter you raise will be dealt with sensitively and confidentially.
- X** Approach or accuse any individuals directly. If the suspected individual is made aware of the allegation against them, they could destroy or conceal evidence before an official investigation has begun.
- X** 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 compromise the case; and
- X** Convey your suspicions to anyone other than those with the proper authority.

## APPENDIX B

### How to report suspected fraud taking place in the NHS.

- The organisations Local Counter Fraud Specialist (LCFS)  
Natalie Nelson-Newman  
[Natalie.Nelson5@nhs.net](mailto:Natalie.Nelson5@nhs.net) / Natalie.Nelson-Newman@rsmuk.com  
0203 201 8538
- The organisations CFO
- Or the Crimestoppers powered NHS Fraud and Corruption Reporting  
Line: 0800 028 40 60
- Filling in an online form at [cfa.nhs.uk/reportfraud](https://cfa.nhs.uk/reportfraud)