

Fraud, Bribery and Corruption Strategy

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1.0	New Policy	New requirement for Government Functional Standards GovS:013 Counter Fraud	Fiona Dwyer, Counter Fraud Specialist	May 2021

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1. Introduction

This strategy document explains how the CCG intends to use its resources and commitment over the next two years (2021-2023) in the fight against NHS fraud against the CCG.

The work will be within the internationally recognised 5 Principles of Fraud and Corruption framework:

- 1. There is always going to be fraud
- 2. Finding fraud is a good thing
- 3. There is no one solution
- 4. Fraud and corruption are ever changing
- 5. Prevention is the most effective way to address fraud and corruption

It is estimated that the NHS is vulnerable to over £1.2 billion worth of fraud each year. When criminals succeed in defrauding the NHS, this results in money being taken from its intended purpose, patient care, and placed into criminals' pockets instead. Fraud is a complex and evolving threat and criminals constantly seek to exploit weaknesses in people and systems and constantly update their methods.

2. Our Vision, Purpose and Strategic Objectives

2.1. **Our Vision** is to work with the accredited Counter Fraud Specialist (CFS) to help lead and proactively support the CCG to understand, find, prevent and respond to fraud risks.

2.2. **Our Purpose** is to:

- Enable the CFS to provide advice and expertise on counter fraud to the CCG
- Work with NHS Counter Fraud Authority, key colleagues, partners and stakeholders locally to understand fraud threats, vulnerabilities and enablers
- Deliver intelligence-led counter fraud services to find, respond to and prevent fraud
- Reduce the impact of fraud on the CCG
- Work with partners to deliver financial savings that can be reinvested in patient care

2.3. Our Strategy Objectives:

To achieve our vision, we have identified four strategic objectives which will translate our ambitions into delivery:

- SUPPORT: We will employ the services of an accredited CFS to support the CCG to find, prevent, and reduce fraud, recovering losses and putting money back into patient care
- REDUCE FRAUD RISK: Ensure the CFS has enough resources to investigate all
 cases of fraud, bribery and corruption committed against the CCG

- **PRO-ACTIVE WORK**: Undertake pro-active work to detect cases of fraud and corruption, particularly where system weaknesses have been identified
- **REPORT TO AUDIT COMMITTEE**: Ensure a written annual report is provided, to the Audit Committee outlining the counter fraud, bribery and corruption work undertaken across the CCG, and the CCG's adherence to the relevant Government Functional Standard GovS:013 Counter Fraud.

Our approach will help to ensure that we are doing the right things. This strategy will remain dynamic and flexible to ensure our objectives adapt and anticipate the changing environment. This includes the emerging fraud risks, especially considering the COVID-19 pandemic and its impact globally, nationally and locally on the CCG.

3. Delivering Our Objectives

3.1 Support

KEY ACTIONS	KEY MEASURES
Improve awareness of fraud, including how it occurs and its impact, among people working in the CCG. Ensure Fraud awareness is included in the CCG's induction process. Support local counter fraud activity through awareness sessions.	 Number of awareness sessions to departments and teams undertaken annually. Suspicions of fraud reported by staff
The fraud champion to understand the threat posed by fraud within the NHS and support the CFS and NHS colleagues in understanding and reducing local fraud risks. The fraud champion to raise awareness of fraud at a strategic level and support the work that the CFS already does. Facilitate and support fraud awareness and fraud prevention work within the organisation and ensure that everyone knows how to recognise and report fraud.	Minutes from meetings Fraud Awareness material circulated
Liaise with the CCG's Human Resources department to ensure that any on-going criminal investigation is co-ordinated with internal disciplinary action and / or a referral to a relevant professional regulatory body	 Diciplinary outcomes Criminal / Civil Sanctions Referrals to professional regulatory bodies Meeting minutes

3.2 Reduce Fraud Risk

KEY ACTIONS	KEY MEASURES
Ensure the CCG has proportionate processes in place for preventing, deterring and detecting fraud, bribery and corruption in procurement. Ensure pro-active exercise on a procurement task has been undertaken and all findings have been reported back to the Audit Committee	 Proactive exercises undertaken, and reported back to Audit Committee Minutes from meetings Progress reports against the annual wor plan
Ensure the CCG has proportionate processes in place for preventing, deterring and detecting invoice fraud, bribery and corruption, including reconciliation, segregation of duties, processes for changing supplier bank details and checking of deliveries.	Evidence that any risks of fraud or error identified within Internal Audit reviews are discussed with the CFS, who has then reported them back to the Audit Committee and investigated where appropriate
Ensure the CCG ensures that all new staff are subject to the appropriate level of pre-employment checks, as set out in General Condition 5.9 of the NHS Standard Contract.	Evidence that a pro-active exercise on pre- employment checks has been undertaken and the findings have been reported back to the Audit Committee
Ensure the CCG seeks to recover, and/or supports NHSCFA in seeking to recover, NHS funds that have been lost or diverted through fraud, bribery and corruption, following an assessment of the likelihood and financial viability of recovery.	 Evidence where there is financial loss to the CCG through Fraud, the CCG has explored the financial recovery in proven fraud cases and pursue recovery either by way of voluntary repayment or enforcement. Ensure that any local cases are included in awareness material distributed across the CCG
Ensure the CCG publicises cases all that have led to successful recovery of NHS funds.	Evidence outcomes of local cases are included in awareness material distributed across the CCG.

3.3 Proactive Work

KEY ACTIONS	KEY MEASURES
Improve awareness of fraud, including how it occurs and its impact, among people working in the CCG and primary care environment.	 Awareness sessions training / presentation to staffing groups either directly or virtually has been provided. Including GP Practices Monthly counter fraud articles for the CCGs newsletter have been produce and distributed Bi-annual GP newsletters / articles

The organisation has a counter fraud, bribery and corruption policy that follows NHSCFA's strategic guidance, publicises NHSCFA's Fraud and Corruption Reporting Line and online reporting tool, and has been approved by the executive body or senior management team.	The Fraud, Bribery and Corruption Policy has been reviewed, and complies with the NHS Counter Fraud Authority guidance, legislation and national policy.
The organisation issues, implements and complies with all appropriate fraud, bribery and corruption intelligence bulletins, prevention guidance and alerts issued by the NHSCFA	Where relevant 100% of intelligence bulletins, prevention guidance and alerts have been circulated by the CFS.

3.4 Reporting to Audit Committee

KEY ACTIONS	KEY MEASURES
The CFS reports directly to the Audit Committee on progress against the work plan objectives, and how the CCG has met the Government Counter Fraud Functional Standards as per the CCG terms of reference.	 CFS Counter Fraud Progress Reports Minutes from meetings
The CFS reports through Progress Reports to the Audit Committee, the CCG Loss, Prevention and Recovery of any monies lost / potentially lost or recovered.	 CFS Counter Fraud Progress Reports Minutes from meetings

4. Challenges and Responses

All organisations can experience the risk of fraud, and most encounter similar challenges when fighting it. The NHS is not exempt from the risk fraud presents and faces some specific challenges.

The CCG's role in the fight against fraud

Fraud against the NHS has a serious impact on patient care by targeting taxpayers' money that funds NHS services. The Secretary of State has set four priorities for the whole of the NHS:

- **Prevention**: because prevention is better than cure.
- People: because we need more people working smarter.
- Technology: because patients and clinicians demand better.
- Infrastructure: because buildings matter too.

The Challenges the CCG Faces and its Response

CHALLENGES	RESPONSE
Fraud is a hidden crime. To fight it, you need to find it.	It is always better to prevent fraud before it takes place, therefore we will share preventative advice and guidance. We will encourage all staff and stakeholders to let us know if they suspect fraud against the NHS - if you spot it, report it.
People working in the NHS are rightly fo- cused on delivering the best possible care for patients using available resources. In this context, fraud can be seen as a secondary concern.	We will use a wide range of engagement tools and techniques to raise the profile of fraud and increase awareness of the impact it has on the NHS. We aspire to embed Fraud Champions in every NHS organisation to support counter fraud messaging and provide support at a strategic level.
Criminals actively look to exploit weaknesses in people and systems. They only have to be successful once to make money, while organisations must be vigilant all the time.	We will work to ensure that our prevention guidance provides a barrier before any exploitation can take place. We will provide timely notifications of risks and actions to take in order to defend against this sort of attack on patient resources.
Fraud can be complex and multifaceted. There are many different types of fraud, and while criminals are a small minority, this minority includes a wide range of people (staff, contractors, patients, suppliers, organised criminals).	We will promote an anti-fraud culture within the CCG, where fraud is not tolerated, and we will encourage all staff, patients and contractors to be part of the solution to fight fraud.

5. Strategic Accountability

The CFS annual work plan supports delivery of our strategy year on year. Bi-monthly Counter Fraud Progress reports to the Audit Committee provide an opportunity to discuss progress against our objectives and targets.

The Counter Fraud work plan is closely monitored by the Audit Committee. This provides a framework for performance management and delivery assurance in relation to ongoing delivery of our counter fraud strategy and work plan.

As a NHS organisation, we are required to report annually against the Government Functional Standard GovS:013 Counter Fraud, the submission process is overseen by the CCG's Chief Finance Officer and Audit Committee Chair in line with the organisation's existing approach to counter fraud assurance.

6. Conclusion

As we have set out during this strategy, working together is key. Working with all staff groups and stakeholders, as a CCG we will review fraud risks and develop counter fraud solutions to reduce the risk of loss to the NHS which ultimately effects patients care.