

COUNTER FRAUD STRATEGY AND POLICY

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1.0 PURPOSE

All staff working for Urgent Care 24 are made aware of the risk of fraud, corruption, theft and other illegal acts involving dishonesty.

2.0 SCOPE

All Staff and Associate GPs/Clinicians working for Urgent Care 24.

3.0 RESPONSIBILITIES

- 3.1 All employees have a responsibility to adhere to the terms and conditions of this policy.
- 3.2 Directors/Managers who are specified as the responsible people within the policy must ensure the correct procedure is carried out.
- 3.3 Any queries on the application or interpretation of this policy must be discussed with the Head of Human Resources prior to any action taking place.
- 3.4 This policy will be monitored and reviewed on an annual basis by the Head of OL&D and HR/Director of Finance and updated as appropriate.

4.0 INTRODUCTION

One of the basic principles of the NHS is the proper use of public funds. It is therefore important that all staff working in the public sector are aware of the risk of fraud, corruption, theft, and other illegal acts involving dishonesty.

Urgent Care 24 aims to reduce fraud to the absolute practical minimum and put in place arrangements to hold fraud at a minimum level permanently. This will enable the NHS to target more resources at providing better patient care. Our counter fraud approach will be professional, comprehensive, fair, balanced, cost effective, specialist and inclusive; the aim is to involve all stakeholders in this approach.

The seven key objectives of the strategy are:

- The creation of an anti-fraud culture;
- Maximum deterrence of fraud:
- Successful *prevention* of fraud which cannot be deterred;
- Prompt *detection* of fraud which cannot be prevented;
- Professional investigation of detected fraud;
- Effective sanctions, including legal action against people committing fraud;

• Effective methods for seeking *redress* in respect of money defrauded.

The ultimate aim of all counter fraud work is to support improved NHS services and ensure that fraud within the NHS is clearly seen as being unacceptable. Stopping the theft of public money by fraudsters who are committing criminal offences brings with it the bonus of being able to see that money deployed for the public good, as the taxpayer intended.

This document sets out our planned procedures for handling suspected cases of fraud and corruption and gives instructions to staff and managers about what to do, and who to contact/notify, if there are any concerns. Awareness of, and involvement in, counter fraud work should be a general responsibility of all professionals and the support of all staff is needed.

This Policy applies to all staff undertaking work for Urgent Care 24.

5.0 PUBLIC SERVICE VALUES

The Codes of Conduct for NHS Boards and NHS Managers set out the key public service values. They state that high standards of corporate and personal conduct, based on the recognition that patients come first, have been a requirement throughout the NHS since its inception. These values are summarised as:

Accountability:

Everything done by those who work for Urgent Care 24 must be able to stand the tests of parliamentary scrutiny, public judgements on propriety and professional codes of conduct.

Probity:

Absolute honesty and integrity should be exercised in dealing with NHS patients, assets, staff, suppliers and customers.

Openness:

Urgent Care 24's activities should be sufficiently public and transparent to promote confidence between the Board and its staff and the public.

All Urgent Care 24 Staff should be aware of, and act in accordance with, these values.

6.0 THE POLICY

- 6.1 The Board is absolutely committed to maintaining an honest, open, non-discriminatory and well–intentioned atmosphere throughout the organisation. It is therefore committed to reducing fraud to the absolute practical minimum and to the rigorous investigation of any such cases. Where any acts of fraud or corruption are proven, the Board will ensure that the culprits are appropriately dealt with, and will also take all appropriate steps to recover any losses in full.
- 6.2 The Board wishes to advise that it is the responsibility of all staff to report any reasonable suspicions of fraud or corruption. It is also the Board's policy that an employee should not suffer as a result of reporting reasonably held suspicions and there must be no unlawful discrimination on any grounds.

7.0 ACTION TO BE TAKEN BY STAFF SUSPECTING FRAUD OR CORRUPTION

- 7.1 Where a member of staff suspects that fraud or corruption has occurred, or is about to take place, it is important that they contact the appropriate person immediately. The first point of contact is the Director of Finance, in the event that the Director of Finance is implicated in the suspicions, the first point of contact should be the Head of OL&D and HR. Suspicions should be put in writing in a sealed envelope addressed to the appropriate individual.
- 7.2 There will be no recriminations against staff that report reasonably held suspicions and victimising or deterring staff from reporting concerns will be treated as a serious disciplinary matter.
- 7.3 Equally however, abuse of the process by raising malicious allegations will also be regarded as a disciplinary matter. Any contravention of this policy should be reported to the Managing Director.

8.0 INVESTIGATIONS WITH CLINICAL IMPLICATIONS

8.1 When investigating suspicions of fraud, it is important to consider whether there may be any clinical or health and safety implications which could have an adverse impact on the organisation. An example of this would be an individual working for the organisation is suspected of using a false name/identity. In such cases, the overriding consideration must be one of patient care. It must be appreciated that every case is different and it is therefore impossible to produce definitive guidance to follow.

- 8.2 In such an instance, it is important that the Director of Finance is informed of the potential risk at the earliest opportunity. The Director of Finance will decide which of his/her senior colleagues, should be informed and consulted with before reaching a decision. Any appropriate professional body may also be notified. It is essential that this happens to ensure that the Director of Finance's decision can take account of the full consideration of the clinical and non-clinical risks facing the organisation. To ensure that the investigation is not compromised however, it is vital that the number of people aware of the investigation is kept to an absolute minimum. If in any doubt, advice will be sought from the NHS Counter Fraud & Security Management Service's Legal Services Unit.
- 8.3 It may be appropriate or necessary for immediate action to be taken. All previously agreed parties should be involved in this process and should be kept informed of any action taken and the outcomes. Any decision to contact or suspend the individual(s) under suspicion must involve the Director of Finance and the Head of OL&D and HR unless either of those individuals is implicated in the reported activity.

Under no circumstances will issues of fraud take priority over patient care.

9.0 RELATED POLICIES

This Strategy and Policy should also be read in conjunction with the Public Interest Disclosure Policy (UC24POL18) and the Bribery Act Policy (UC24POL71) available on the Urgent Care 24 intranet.