## Purpose:
To reduce the level of fraud and corruption within the NHS by providing guidance to any member of staff when alerted to a potential fraud.

## For use by:
All Trust staff

## This document is compliant with /supports compliance with:
- Countering fraud in the NHS: The professional and ethical approach
- NHS Fraud and Corruption Manual

## This document supersedes:
Local Counter Fraud and Corruption Strategy, Policy & Procedures Version 2.0

## Approved by:
- Initial approval: Local Counter Fraud Group 14th May 2014
- Audit Committee 15th May 2014

## Approval date:
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## Ratified by:
Trust Board

## Date Ratified:

## Implementation date:

## Review date:

## In case of queries contact:
Responsible Officer: Paul Scott Director of Finance & Performance

## Division and Department:
Division 4 Finance & Performance, Executive Support

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Release of any strategy, policy, procedure, guideline or other such material must be agreed with the Lead Director or Deputy/Associate Director (for Trust - wide issues) or Division/Departmental Management Team (for Divisional or Departmental specific issues). Any requests to share this document must be directed in the first instance to Paul Scott, Director of Finance & Performance.
CONTENTS

Counter Fraud Strategy 4

Section 1 – Introduction
  1.1 Policy Statement and Rationale 5
  1.2 Key Principles 5
  1.3 Definitions 6

Section 2 – Code of Conduct 7

Section 3 – Duties and Responsibilities 7
  3.1 Role of The Ipswich Hospital NHS Trust 8
  3.2 Role of the Chief Executive 8
  3.3 Role of Director of Finance & Performance 8
  3.4 Role of Employees 9
  3.5 Role of Managers 9
  3.6 Role of Local Counter Fraud Specialist 10
  3.7 Role of Internal and External Audit 11
  3.8 Role of Human Resources 11
  3.9 Role of Information Management and Technology 11
  3.10 Role of the Local Counter Fraud Group 11

Section 4 – The Response Plan 12
  4.1 General 12
  4.2 Reporting fraud, bribery or corruption 12

Section 5 – Disciplinary action 13

Section 6 - Training and Education 13

Section 7 – Implementation of Policy and Dissemination 13

Section 8 – Monitoring Compliance and Effectiveness 14

Section 9 – Control of Documents including archiving arrangements 14

Appendices:
  - Form 2 - Referral Form 15
Counter Fraud Strategy

Fraud is a crime. It diverts resources away from patient care.

In line with national strategy The Ipswich Hospital NHS Trust is committed to reducing the level of fraud and corruption within the NHS to an absolute minimum and keeping it at that level, freeing up public resources for better patient care

1. To meet its objectives, the Trust has adopted the seven-stage approach developed by implemented a work plan which addresses the four key themes of counter fraud work contained within the Standards for Providers: Fraud, bribery and Corruption issued by NHS Protect:
   - Strategic governance;
   - Inform and involve;
   - Prevent and deter;
   - Hold to account.

2. To deliver these objectives the Trust will:
   - Investigate all suspected cases of fraud, bribery and corruption in a professional, effective and efficient manner
   - Integrate into systems, policies and procedures measures to prevent and detect fraud, bribery and corruption
   - Proactively review identified high risk areas
   - Work across the Trust to integrate an anti-fraud culture and maximise deterrence, detection, investigation, sanction and redress for all cases of fraud, bribery and corruption
   - Work with other organisations to identify those who commit fraud, bribery and corruption including full participation in all cross organisation fraud initiatives.
   - Pursue and seek full redress from those who perpetrate fraud, bribery and corruption against the Trust
   - Learn the lessons from how the fraud, bribery and corruption was perpetrated
   - Publicise action taken against fraud, bribery and corruption including successful actions and prosecutions

3. Any allegations of fraud, bribery and corruption will be investigated in line with the Trust's Fraud and Corruption Policy. Anyone who reports fraud is protected under this Policy and the Trust's Whistleblowing Policy.

4. The Trust is committed to taking appropriate action to pursue those who commit fraud, bribery and corruption.
1 INTRODUCTION

1.1 Policy Statement and Rationale

1.1.1 The Ipswich Hospital NHS Trust does not tolerate fraud and bribery/corruption within the NHS. The aim is to eliminate all NHS fraud and corruption as far as possible.

1.1.2 This Policy relates to all forms of fraud and bribery/corruption and is intended to provide direction and help to employees who may identify suspected fraud. It provides a framework for responding to suspicions of fraud, bribery/corruption advice and information on various aspects of fraud, bribery/corruption and implications of an investigation.

It is not intended to provide a comprehensive approach to preventing and detecting fraud and bribery/corruption.

1.1.3 This policy applies to all employees of The Ipswich Hospital NHS Trust, regardless of position held, as well as consultants, vendors, contractors, and/or any other parties who have a business relationship with The Ipswich Hospital NHS Trust. It will be brought to the attention of all employees and form part of the induction process for new staff.

1.1.4 This policy also links in with other internal policies and procedures. The Board already has procedures in place to reduce the likelihood of fraud, bribery/corruption occurring. These include Standing Orders, Standing Financial Instructions, documented procedures, a system of internal control and a system of risk assessment.

1.2 Key Principles

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

1.2.2 The overall aims of this policy are to:

- improve the knowledge and understanding of everyone in The Ipswich Hospital NHS Trust, irrespective of their position, about the risk of fraud and bribery/corruption within the organisation and its unacceptability
- assist in promoting a climate of openness and a culture and environment where staff feel able to raise concerns sensibly and responsibly
- set out The Ipswich Hospital NHS Trust’s responsibilities in terms of the deterrence, prevention, detection and investigation of fraud and bribery/corruption
- ensure the appropriate sanctions are considered following an investigation, which may include any or all of the following:
  o criminal prosecution
  o civil prosecution
  o internal/external disciplinary action.
1.3 Definitions

The following definitions are used throughout:

**Fraud**

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

Fraud can be committed in three ways:
1) Fraud by false representation (s.2) – lying about something using any means, e.g. by words or actions
2) Fraud by failing to disclose (s.3) – not saying something when you have a legal duty to do so
3) Fraud by abuse of a position of trust (s.4) – abusing a position where there is an expectation to safeguard the financial interests of another person or organisation.

It should be noted that 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.

**Corruption**

Corruption was defined (in the context of the Prevention of Corruption Acts) as the offering, giving, soliciting or acceptance of an inducement or reward which may influence the action of any person. Bribery, a form of corruption, is an act implying money or gift giving that alters the behavior of the recipient.

The Bribery Act 2010 replaces the fragmented and complex offences at common law and in the Prevention of Corruption Acts 1889-1916.

**Bribery**

There is no specific definition within the Bribery Act 2010 of this term. The Act however does set out four offences of bribery from which a definition can be inferred as a financial or other type of advantage that is offered or requested intending to induce another person to perform improperly one of their functions in their position of trust or responsibility, or as a reward for improper performance.

In essence, bribery is offering an incentive or reward to someone to do/for doing something that they would not normally do.

There are four offences of bribery within the Bribery Act 2010:

1) Two general offences covering the offering, promising or giving of an advantage, and the requesting, agreeing to receive or accepting of an advantage
2) A discrete offence of bribery of a foreign public official to obtain or retain business or an advantage in the conduct of business
3) A new offence of failure by a commercial organisation to prevent a bribe being paid for or on its behalf.
Employees
For the purposes of this policy, ‘employees’ includes NHS Protect and The Ipswich Hospital NHS Trust staff, as well as board, executive and non-executive members (including co-opted members) and honorary members, agency staff, consultants, vendors, contractors, and/or any other parties who have a business relationship with The Ipswich Hospital NHS Trust.

NHS Protect
NHS Protect is, a business unit of the NHS Business Services Authority. It has responsibility for all policy and operational matters relating to the prevention, detection and investigation of fraud, bribery and corruption in the NHS and that any investigations will be handled in accordance with NHS Protect guidance. All instances where fraud is suspected are properly investigated until their conclusion by staff trained by NHS Protect. Any investigations will be handled in accordance with the NHS Counter Fraud and Corruption Manual and with reference to the NHS Protect strategy Tackling crime against the NHS: A Strategic Approach.

Local Counter Fraud Group
The Local Counter Fraud Group works with the Local Counter Fraud Specialist to ensure that a process is in place to support the Trust’s aims within this document with advice and guidance from the nominated lead Local Counter Fraud Specialist (LCFS). It will ensure delivery of the proactive plan and review the effectiveness of that work.

2 CODE OF CONDUCT

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 in the authority must be able to stand the tests of parliamentary scrutiny, public judgments 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: The health body’s activities should be sufficiently public and transparent to promote confidence between the authority and its staff and the public.

3 DUTIES AND RESPONSIBILITIES

Through our day to day work we are in the best position to recognise any specific risks within our own areas of responsibility. We also have a duty to ensure that those risks, however large or small, are identified and eliminated. Where you believe the opportunity for fraud exists, whether because of poor procedures or oversight, you should report it to the LCFS, Director of Finance, the NHS Fraud and Corruption Reporting Line or via the National online reporting site.

This section states the roles and responsibilities of employees and other relevant parties in reporting fraud or other irregularities.
3.1 Role of The Ipswich Hospital NHS Trust

3.1.1 The Ipswich Hospital NHS Trust will take all necessary steps to counter fraud, bribery and corruption in accordance with this policy, the *NHS Counter Fraud and Corruption Manual*, the policy statement ‘Applying Appropriate Sanctions Consistently’ published by the NHS Protect and any other relevant guidance or advice issued by the NHS Protect.

3.1.2 The Ipswich Hospital NHS Trust will implement a work plan which covers the four key themes of counter fraud action. A key element in achieving this is the appointment of an LCFS.

3.1.3 The Ipswich Hospital NHS Trust will use counter fraud publicity material to persuade those who work in The Ipswich Hospital NHS Trust that fraud, bribery and corruption is serious and takes away resources from important services. Such activity will demonstrate that fraud, bribery and corruption is not acceptable and is being tackled.

3.1.4 The Ipswich Hospital NHS Trust will introduce such measures to minimise the occurrence of fraud, bribery and corruption.

3.1.5 The Ipswich Hospital NHS Trust has policies and procedures in place to reduce the likelihood of fraud, bribery and corruption occurring. These include a system of internal controls, Standing Financial Instructions and documented procedures, which involve physical and supervisory checks, financial reconciliations, segregation and rotation of duties, and clear statements of roles and responsibilities. Where fraud, bribery and corruption has occurred, The Ipswich Hospital NHS Trust will ensure that any necessary changes to systems and procedures take place immediately to prevent similar incidents from happening in the future.

3.1.6 The Ipswich Hospital NHS Trust will develop and maintain effective controls to prevent fraud, bribery and corruption and to ensure that if it does occur, it will be detected promptly and referred to the LCFS for investigation.

3.1.7 The Ipswich Hospital NHS Trust also has a duty to ensure that it provides a secure environment in which to work, and one where people are confident to raise concerns without worrying that it will reflect badly on them. This extends to ensuring that staff feel protected when carrying out their official duties and are not placed in a vulnerable position.

If staff have concerns about any procedures or processes that they are asked to be involved in, The Ipswich Hospital NHS Trust has a duty to ensure that those concerns are listened to and addressed.

3.2 Role of the Chief Executive

3.2.1 The Chief Executive, as the organisation’s accountable officer, has the overall responsibility for funds entrusted to it. This includes instances of fraud, bribery and corruption. The Chief Executive must ensure adequate policies and procedures are in place to protect the organisation and the public funds it receives.

3.3 Role of Director of Finance & Performance

3.3.1 The Director of Finance & Performance has powers to approve financial transactions initiated by Divisions across the organisation. They are responsible for preparing, documenting and maintaining detailed financial procedures and systems and applying the principles of separation of duties and internal checks to supplement those systems and procedures.
3.3.2 The Director of Finance & Performance will report annual to the Board on the adequacy of internal financial controls and risk management as part of the Board’s overall responsibility to prepare a statement of internal control for inclusion within the Trust’s annual report.

3.3.3 The responsible officer for this Policy is the Director of Finance & Performance, who is responsible for monitoring compliance with and the effectiveness of the contents of this document via the Local Counter Fraud Group.

3.3.4 The Director of Finance, in conjunction with the Chief Executive, monitors and ensures compliance with the Standards for providers: fraud, bribery and corruption.

3.3.5 The Director of Finance will, depending on the outcome of investigations (whether on an interim/ongoing or concluding basis) and/or the potential significance of suspicions that have been raised, inform appropriate senior management accordingly.

3.3.6 The Director of Finance will inform and consult the Chief Executive in cases where the loss may be above the agreed limit or where the incident may lead to adverse publicity.

3.4 Role of Employees

3.4.1 The Ipswich Hospital NHS Trust’s Standing Orders, Standing Financial Instructions, policies and procedures place an obligation on all employees and non-executive directors to act in accordance with best practice.

3.4.2 Employees are expected to act in accordance with the standards laid down by their professional institutes, where applicable, and have a personal responsibility to ensure that they are familiar with them.

3.4.3 Employees have a duty to protect the assets of The Ipswich Hospital NHS Trust, including information, goodwill and property.

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

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

3.4.5 All employees have a duty to ensure that public funds are safeguarded, whether or not they are involved with cash or payment systems, receipts or dealing with contractors or suppliers.

3.4.6 If an employee suspects that there has been fraud or corruption, or has seen any suspicious acts or events, they must report the matter to the nominated LCFS.

3.5 Role of Managers

3.5.1 Managers must be vigilant and ensure that procedures to guard against fraud and corruption are followed. They should be alert to the possibility that unusual events or transactions could be symptoms of fraud and corruption. If they have any doubts, they must seek advice from the nominated LCFS.
3.5.2 Managers must instil and encourage an anti crime culture within their team and ensure that information on procedures is made available to all employees. The LCFS will proactively assist the encouragement of an anti crime culture by undertaking work that will raise awareness of fraud, bribery and corruption.

3.5.3 All instances of actual or suspected fraud bribery or corruption which come to the attention of a manager must be reported immediately. It is appreciated that some employees will initially raise concerns with their manager. However, in such cases, managers must not attempt to investigate the allegation themselves; they have the clear responsibility to refer the concerns to the LCFS as soon as possible.

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

3.5.5 As part of that responsibility, line managers need to:
- inform staff of The Ipswich Hospital NHS Trust’s code of business conduct and counter fraud and corruption policy as part of their induction process, paying particular attention to the need for accurate completion of personal records and forms
- ensure that all employees for whom they are accountable are made aware of the requirements of the policy
- assess the types of risk involved in the operations for which they are responsible
- ensure that adequate control measures are put in place to minimise the risks. This must include clear roles and responsibilities, supervisory checks, staff rotation (particularly in key posts), separation of duties wherever possible so that control of a key function is not invested in one individual, and regular reviews, reconciliations and test checks to ensure that control measures continue to operate effectively
- ensure that any use of computers by employees is linked to the performance of their duties within The Ipswich Hospital NHS Trust.
- be aware of The Ipswich Hospital NHS Trust’s counter fraud policy and the rules and guidance covering the control of specific items of expenditure and receipts
- identify financially sensitive posts
- ensure that controls are being complied with
- contribute to the assessment of the risks and controls within their business area, which feeds into The Ipswich Hospital NHS Trust’s and the Department of Health Accounting Officer’s overall statements of accountability and internal control.

3.6 Role of the LCFS

3.6.1 The LCFS will be professionally trained and accredited to carry out all counter fraud activity, which includes investigations into suspicions of fraud and corruption to the highest standards. In liaison with the NHS Protect, the LCFS will professionally investigate all suspicions of fraud and corruption to prove or disprove the allegation. Ultimately, the LCFS reports directly to the Director of Finance.

3.6.2 Following the conclusion of an investigation, if there is evidence that substantiates the allegation/suspicion, available sanctions will be considered in accordance with the guidance issued by the NHS CFS – ‘Applying Appropriate Sanctions Consistently’. This may include criminal prosecution, civil proceedings and disciplinary action, as well as referral to a professional or regulatory body.

3.6.3 The LCFS will work with key colleagues and stakeholders to promote anti-crime work, apply effective preventative measures and investigate allegations of fraud, bribery and corruption.
3.6.4 The LCFS will conduct risk assessments in relation to their work to prevent fraud, bribery and corruption.

3.7 Role of Internal and External audit

3.7.1 Internal and external audit are responsible for reviewing controls and systems and ensuring compliance with financial instructions. Any incident or suspicion that comes to internal or external audit’s attention will be passed immediately to the nominated LCFS. The outcome of the investigation may necessitate further work by internal or external audit to review systems.

3.8 Role of Human Resources

3.8.1 Human Resources (HR) will liaise closely with managers and the LCFS from the outset if an employee is suspected of being involved in fraud and/or corruption, in accordance with agreed liaison protocols. HR staff are responsible for ensuring the appropriate use of The Ipswich Hospital NHS Trust’s disciplinary procedure. The HR department will advise those involved in the investigation on matters of employment law and other procedural matters, such as disciplinary and complaints procedures, as requested. Close liaison between the LCFS and HR will be essential to ensure that any parallel sanctions (i.e. criminal, civil and disciplinary sanctions) are applied effectively and in a coordinated manner. It should be noted that disciplinary actions may take place in advance of any court case.

3.8.2 HR will take steps at the recruitment stage to establish, as far as possible, the previous record of potential employees, as well as the veracity of required qualifications and memberships of professional bodies, in terms of their propriety and integrity. In this regard, temporary and fixed-term contract employees are treated in the same manner as permanent employees.

3.8.3 HR will be responsible, in conjunction, with the LCFS, for the training of fraud awareness within the Trust.

3.9 Role of Information management and technology

3.9.1 The Assistant Director of IM&T or the Head of Information will contact the LCFS immediately in all cases where there is suspicion that IT is being used for fraudulent purposes. HR will also be informed if there is a suspicion that an employee is involved.

3.10 Role of the Local Counter Fraud Group

3.10.1 The Local Counter Fraud Group supports the LCFS in delivering proactive work through co-ordinating the use of the required Trust resources. Through regular meetings – prior to the Audit Committee – it will review the effectiveness of counter fraud activity. Minutes of the meetings will be submitted to the Audit Committee for information and comment.

3.10.2 The Local Counter Fraud Group will review the Fraud & Corruption Policy annually to ensure it remains relevant and develop any action plans to improve processes and level of compliance/effectiveness. The group will also review and approve the Annual Work Plan prior to submission to Audit Committee.
4 THE RESPONSE PLAN

4.1 General

4.1.1 The Trust has conducted risk assessments in line with Ministry of Justice guidance to assess how bribery and corruption may affect the organization. Proportionate procedures have been put in place to mitigate identified risks.

4.1.2 The identification and response to risks is also covered in other Trust Policy documents including the Standards of Business Conduct and Whistleblowing policies.

4.2 Reporting fraud, bribery or corruption

This section outlines the action to be taken if fraud or corruption is discovered or suspected.

4.2.1 If an employee has any of the concerns mentioned in this document, they must inform the nominated LCFS or the Director of Finance immediately, unless the Director of Finance or LCFS is implicated. If that is the case, they should report it to the Chair or Chief Executive, who will decide on the action to be taken.

Local Counter Fraud Specialist: 07779 030925 or fraud@ipswichhospital.nhs.uk

4.2.2 Concerns or suspicions can also be reported to NHS Protect via the National Fraud Reporting Line – 0800 028 40 60 – or via the online reporting tool at www.reportnhsfraud.nhs.uk

You can remain anonymous if you wish

4.2.3 Form 1 provides a reminder of the key contacts and a checklist of the actions to follow if fraud, bribery, corruption, or other illegal acts, are discovered or suspected. Managers are encouraged to copy this to staff and to place it on staff notice boards in their department.

4.2.4 Staff should always be encouraged to report reasonably held suspicions directly to the LCFS. You can do this by filling in the NHS Fraud and Corruption Referral Form (form 2) or by contacting the LCFS by telephone or email using the contact details supplied on form 1.

4.2.5 The Ipswich Hospital 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 Public Interest Disclosure Act 1998, The Ipswich Hospital NHS Trust has produced a Whistleblowing policy (Raising Concerns in the Workplace Policy). This procedure is intended to complement The Ipswich Hospital NHS Trust’s counter fraud and corruption policy and code of business conduct and ensures there is full provision for staff to raise any concerns with others if they do not feel able to raise them with their line manager/management chain. It can be found on the hospital intranet site.

4.2.6 The Trust is committed to investigating all reports of potential fraud, bribery or corruption and to taking appropriate action where wrong doing is found to have taken place.
5 DISCIPLINARY ACTION

5.1 The disciplinary procedures of The Ipswich Hospital NHS Trust must be followed if an employee is suspected of being involved in a fraudulent or otherwise illegal act.

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

6 TRAINING AND EDUCATION

6.1 The Ipswich Hospital NHS Trust’s Chief Executive is liable to be called to account for specific failures in The Ipswich Hospital NHS Trust’s system of internal controls. However, responsibility for the operation and maintenance of controls falls directly to line managers and requires the involvement of all of The Ipswich Hospital NHS Trust's employees. The Ipswich Hospital NHS Trust therefore has a duty to ensure employees who are involved in or who are managing internal control systems receive adequate training and support in order to carry out their responsibilities. Therefore, the chief executive and director of finance will monitor and ensure compliance with this policy.

6.2 It is a mandatory requirement that everyone who works at the Trust receives counter fraud training. Training is offered to all Trust staff via the induction process and e-learning module to raise awareness of fraud, how to recognise it and what to do if there is a possible concern or real suspicions. All newly appointed employees should complete the e-learning package within 3 months of commencement and attend face-to-face training, before going through their KSF foundation gateway and/or within one year of appointment.

6.3 The e-learning package is not an alternative to the face-to-face session, it provides valuable background information. Training for existing employees will be via face to face update training triennially or via e-learning.

6.4 Face to face training dates are available via the intranet under the Training Prospectus link. There is no requirement to book sessions and staff should arrange with their line manager which date would be suitable. E-learning is available via the Training Prospectus link on the intranet.

7 IMPLEMENTATION OF THIS POLICY AND DISSEMINATION

7.1 This policy has been written in accordance with the terms of The Development and Management of Strategies, Policies, Procedures, Protocols, Guidelines and other Guidance Material Policy.

7.2 The Local Counter Fraud Group, Local Counter Fraud Specialist, Director of Finance & Performance have been involved in the review and drafting of this Policy.

7.3 The Local Counter Fraud Group will lead on its implementation.

7.4 The Policy will be submitted to the Local Counter Fraud Group for initial approval, who will, in turn, submit to the Audit Committee for final approval prior to ratification by Trust Board.

7.5 Once ratified this document will be disseminated to all Senior Managers and placed on the intranet. Members of the Local Counter Fraud Group will champion its implementation and advise staff accordingly.
8 MONITORING COMPLIANCE AND EFFECTIVENESS

8.1 Compliance with the effectiveness of this policy will be monitored by the Audit Committee by:
- Review of highlight report and minutes of the Local Counter Fraud Group
- Receipt of interim reports from the Local Counter Fraud Specialist

9 CONTROL OF DOCUMENTS INCLUDING ARCHIVING ARRANGEMENTS

9.1 Once ratified by the Trust Board the Responsible Officer will forward this document to the Information Governance Department for a document index registration number to be assigned and for the document to be recorded onto the central hospital master index and central document library of current documentation.

9.2 In order that this document adheres to the Hospital’s Records Management Policy, the Information Governance Department will:
- Ensure that the most up-to-date version of this document is stored on the documentation library.
- Archive previous versions of this document.
- Retain previous versions of this guideline for a period of time in accordance with the NHS Records Retention and Disposal Schedule.
NHS fraud and corruption referral form
All referrals will be treated in confidence and investigated by professionally trained staff

Note: Anonymous referrals are accepted but may delay any investigation.

1. Date

2. Anonymous application <Delete as appropriate>
   Yes (If ‘Yes’ go to section 6) or No (If ‘No’ complete sections 3–5)

3. Your name

4. Your organisation/profession

5. Your contact details

6. Suspicion

7. Please provide details including the name, address and date of birth (if known) of the person to whom the allegation relates.

8. Possible useful contacts

9. Please attach any available additional information.

Submit the completed form (in a sealed envelope marked ‘Restricted – Management’ and ‘Confidential’) for the personal attention of LCFS, CEAC, The Old Tannery, Hensington Road, Woodstock, Oxon, OX20 1JL