

Fraud Policy and Response Plan

Effective: April 2009

Review April 2012

1. Introduction

The main changes are the clarification of the first point of contact for reporting suspicions of fraud, reference to the Department of Health policy statement on the application of sanctions in respect of fraud and corruption in the NHS – “Applying Appropriate Sanctions Consistently”, and the renaming of the Counter Fraud Services, which is now known as the NHS Counter Fraud and Security Management Service (CFSMS) and is part of the NHS Business Services Agency.

The Trust has a Local Counter Fraud Specialist (LCFS) who has received specialist training in the professional investigation of detected fraud and related counter fraud activities.

Any fraud and response plan adopted by a NHS body needs to be consistent with its own internal rules e.g. Standing Financial Instructions. This can be confirmed as being the case.

Attention is drawn to the Trust’s Incident Management Policy, which includes guidance on how to deal with situations where more than one response procedure may be relevant. This is particularly relevant with fraud response, as it may be necessary to follow both the fraud response plan and disciplinary procedures concurrently.

The Trust’s Whistle blowing Policy provides further guidance to staff on raising concerns confidentially.

One of the basic principles of public sector organisations is the proper use of public funds. It is therefore important that all those that work in the public sector are aware of the risk of and means of enforcing the rules against, fraud and other illegal acts involving dishonesty. For simplicity all such offences are hereafter referred to as “fraud”, except where the context indicates otherwise. This document sets out the Trust’s policy and response plan for detected or suspected fraud or corruption. It should be noted that for other criminal acts theft, criminal damage and arson reference should be to the Trust’s Incident Management Policy.

For the purpose of this document the following terms are used:

Theft A person is guilty of theft if they dishonestly appropriate property belonging to another with the intention of depriving the other of it. Suspicions of theft should be reported to the Trust’s Security Manager.

E.g. to steal cash from a petty cash box would be theft.

Fraud The intentional distortion of financial statements or other records by persons internal or external to the Trust, which is carried out to conceal the misappropriation of assets or otherwise for gain.

English law does not specifically define fraud, however, the two key ingredients are “to defraud is to **deprive** by **deceit**”, underlining the two essential elements in fraud:

- deception or concealment and
- deprivation or loss to the victim.

E.g. To steal cash from a petty cash box is theft, but to conceal this by leaving a false receipt would be fraud.

Corruption The offering, giving, soliciting or acceptance of an inducement or reward, which may influence a person to act against the interests of the Trust.

The Board already has procedures in place that reduces the likelihood of fraud occurring. These include standing orders, standing financial instructions, documented procedures and a system of internal control and a system of risk assessment. In addition the Board tries to ensure that a risk and fraud awareness culture exists in the Trust.

This document is intended to provide direction and help to those officers and directors who find themselves having to deal with suspected cases of fraud or corruption. It gives a framework for a response and advice and information on various aspects and implications of an investigation. This document is not intended to provide direction on prevention of fraud.

All suspected cases of fraud should be reported to the LCFS or to the Finance Director. Under the direction of the Finance Director, the LCFS will routinely investigate all cases of suspected fraud. Contact details for the Finance Director and the LCFS are provided in Appendix 1.

2. Public Service Values

The Code of Conduct for NHS Boards published by the NHS Executive in April 1994 sets out the following public service values. It says 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.

Accountability: Everything done by those who work in the organisation 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: The organisation's activities should be sufficiently public and transparent to promote confidence between the organisation and its patients, staff and the public.

All those who work in the organisation should be aware of, and act in accordance with, these values.

3. The Board's Policy

The Board is absolutely committed to maintaining an honest, open and well intentioned atmosphere within the Trust. It is therefore also committed to the elimination of fraud within the Trust, to the rigorous investigation of any such cases, and where fraud or corruption is proven to ensure that fraudsters are appropriately dealt with. The Trust will also take appropriate steps to recover any assets lost as a result of fraud.

The Board wishes to encourage anyone having reasonable suspicions of fraud to report them. Therefore it is also the Board's policy, which will be rigorously enforced; that no employee will suffer in any way as a result of reporting reasonably held suspicions.

This policy complies with the content of the Public Interest Disclosure Act 1998, which encourages employees to raise any concerns initially with their employers. The Act gives a legal protection against dismissal and other adverse actions (such as victimisation) if they disclose what they honestly consider to be malpractice and against the public interest.

All members of staff can therefore be confident that they will not suffer in any way as a result of reporting reasonably held suspicions of fraud. For these purposes "reasonably held suspicions" shall mean any suspicions other than those which are raised maliciously **and** found to be groundless. The Trust's Whistleblowing Policy provides further guidance to staff on raising concerns confidentially.

4. Roles and Responsibilities

- 4.1 In line with responsibilities set out in HSG (96) 12, the Chief Executive and Finance Director shall monitor and ensure compliance with Secretary of State Directions on fraud and corruption incorporated in the Standing Financial Instructions.
- 4.2 Responsibility for counter fraud arrangements has been delegated to the Finance Director. They shall be responsible for ensuring compliance with the Secretary of State's Directions on countering fraud and corruption. This involves ensuring that action to counter fraud and corruption is taken in accordance with the NHS Counter Fraud and Corruption Manual.
- 4.3 The Finance Director shall inform the LCFS at the first opportunity and delegate to them the responsibility for leading any investigation whilst retaining overall responsibility themselves.
- 4.4 In March 2003, the Department of Health issued a policy statement on the application of sanctions in respect of fraud and corruption in the NHS, named "Applying Appropriate Sanctions Consistently". This document provides guidance to ensure that the full range of available sanctions are considered at both the commencement of an investigation and as it proceeds.
- 4.5 In investigations where the suspect is a member of staff, the LCFS will inform a senior member of the Human Resources team of the allegation at the earliest opportunity. Details of the initial allegation will then be shared to allow disciplinary measures to be considered. The LCFS will continue to provide Human Resources with accumulated evidence to allow them to decide on further disciplinary measures.
- 4.6 All managers must immediately report any suspicion of fraud to the Finance Director or the LCFS.

- 4.7 Any employee of the Trust who becomes aware of any suspected or actual irregularity affecting the cash or property of the Trust should report the matter to the Finance Director or LCFS.
- 4.8 Allegations of corruption must be reported in the first instance to the Finance Director or LCFS. Responsibility for investigating corruption lies with the CFSMS, and therefore any allegations that are received of this nature will be passed onto the CFSMS.
- 4.9 The Finance Director shall liaise and reach agreement with the CFSMS (where the appropriate sanction is considered to be prosecution) before a decision is reached on the referral of a case of fraud to the Police.
- 4.10 Finally, all staff have a duty to protect the assets of the Trust. Assets include information as well as property. All managers have a responsibility to ensure that systems and controls are in place to safeguard assets and that those controls are adhered to.

5. The Response Plan

5.1 Introduction

5.1.1 This plan sets out the responsibilities of managers and the action that should be taken whenever a case of fraud is suspected within the Trust. The procedures allow for evidence gathering and collation in a manner that will facilitate informed initial decisions, while ensuring that evidence gathered will be admissible in any future criminal or civil action. Each situation is different; therefore the procedures will need to be considered carefully in relation to the actual circumstances of the case before action is taken.

Section 6 ‘Guidance to staff on fraud and corruption’ is a separate summary document for issue to all existing and new employees. This outlines the responsibilities of all staff for the prevention and detection of fraud, and corruption.

5.1.2 It is the responsibility of all managers to ensure that their staff are familiar with these procedures and that they are encouraged to bring forward any concerns they may have.

5.1.3 Cases of pure theft should be dealt with under the relevant incident reporting procedures referred to within the Trust’s Incident Management Policy.

5.1.4 Where a member of staff is suspected of fraud then the fraud procedures must be followed.

5.1.5 In some cases e.g. if a major diversion of funds is suspected, speed of response will be crucial to avoid financial loss.

5.2 Arrangements for Reporting Fraud

(See Also Section 6, “Guidance to Staff on Fraud and Corruption”)

5.2.1 Responsibilities of Managers

- 5.2.1.1 When you suspect fraud you are encouraged not to touch anything and above all, don't switch on any computers that you suspect may contain evidence. Failure to adhere to this fundamental principle could jeopardise the outcome of any investigation. Not only does the trust have to secure the evidence, but they also have to be able to demonstrate that it has not been interfered with in any way.
- 5.2.1.2 The referral can be made verbally via the contact numbers given in Appendix 1, or by using form CFS1 (Appendix 2). The Local Counter Fraud Specialist will respond within five working days indicating whether or not the referral is suitable for investigation.

5.2.2 Responsibilities of Finance Director

- 5.2.2.1 The Finance Director (if the first point of contact) shall inform the Local Counter Fraud Specialist at the first opportunity in all cases of fraud and corruption. The Local Counter Fraud Specialist will carry out an investigation in accordance with the NHS Executive Counter Fraud and Corruption Manual and associated guidance.
- 5.2.2.2 The Finance Director is responsible for ensuring that prompt preventative action against the continuation of the fraud. Any action that may alert the suspect and enable them to destroy evidence should be avoided.
- 5.2.2.3 The Finance Director will ensure that the LCFS records the details on the CFSMS Case Management System (CMS).
- 5.2.2.4 The Finance Director shall inform and consult the Chief Executive and the Audit Committee Chairman at the first opportunity in all cases where the loss may exceed £15,000 and where the incident may lead to adverse publicity.
- 5.2.2.5 The Finance Director shall liaise and reach agreement with the Regional Counter Fraud Operational Services (CFSMS) where the appropriate action is deemed to be prosecution or involvement of the police.

5.3 Arrangements for Investigating Fraud

- 5.3.1 The Local Counter Fraud Specialist is responsible for undertaking fraud investigation in accordance with the Secretary of States Directions and the NHS Counter Fraud and Corruption Manual. All reported suspicions (referrals) are immediately logged on the CMS and an investigation file is opened. The LCFS will then commence the investigation.
- 5.3.2 The CMS will contain details of reported suspicions, including those dismissed as minor or otherwise not investigated. It will also contain details of actions taken and conclusions reached.
- 5.3.3 In order to conduct a formal investigation into an allegation of fraud, the following arrangements will be put in place:

- 5.3.3.1 In cases of major fraud (including cases over £15,000, see below) a Steering Group will be set up including the Finance Director, the Local Counter Fraud Specialist and the Personnel Manager.
 - 5.3.3.2 In minor cases of fraud, the Local Counter Fraud Specialist will report to the Finance Director.
 - 5.3.3.3 In all internal fraud investigations involving Trust staff, the LCFS will periodically update a senior member of the Human Resources team.
- 5.3.4 Where fraud is suspected, it is important to obtain as much information as possible without alerting the suspect(s).

The Local Counter Fraud Specialist will undertake the fraud investigation and will provide the Finance Director and a senior member of Human Resources with updates as to the progress of the investigation on a regular basis. Close consultation between all relevant parties will be ongoing during the course of the investigation.

- 5.3.5 The Local Counter Fraud Specialist will prepare an investigation plan and proceed with the investigation. The fraud investigation will continue whilst any disciplinary action is being taken. The Local Counter Fraud Specialist will investigate all the facts and circumstances surrounding the incident and or allegation by interviewing the staff involved and obtaining relevant documentary evidence and witness statements.
- 5.3.6 From what has already been said it is clear that the conduct of the investigation will depend on the complexity of the case and the size of the fraud and to that extent each case will be different. It is the responsibility of the Local Counter Fraud Specialist to ensure that all parties are kept informed of developments and that close links are maintained.
- 5.3.7 Specialist investigative procedures such as searches, surveillance and interview under caution will normally be carried out in conjunction with Counter Fraud Operational Services (CFSMS). Authority must be obtained from CFSMS before the use of surveillance to obtain evidence.
- 5.3.8 Any suspension of a member of staff involved in a fraud investigation will be undertaken in accordance with the Trust's Disciplinary Policy.
- 5.3.9 Depending on the circumstances of the case, Human Resources may consider it necessary to conduct a disciplinary investigation concurrently with the fraud investigation. In these circumstances, the LCFS will continue to provide Human Resources with evidence gathered as part of the fraud investigation. Interviews with witness staff may be carried out within the normal remit of management duty where this is deemed appropriate by both the LCFS and Human Resources. Such interviews will be in accordance with the Trust's disciplinary investigation procedures, but will not involve the LCFS interviewing the individual(s) about whom the allegation was made. Any subsequent suspension will be in accordance with the Trust's disciplinary procedures.
- 5.3.10 If the loss from the fraud is likely to be over £15,000, the Local Counter Fraud Specialist must discuss the case with the CFSMS Regional Fraud

Manager. In accordance with the Service Level Agreement with CFSMS, the Local Counter Fraud Specialist will formally transfer responsibility for the investigation via the Finance Director to CFSMS.

- 5.3.11 When the Local Counter Fraud Specialist has completed the investigation he/she will provide a report for the Finance Director which provides an objective assessment of the evidence as to whether fraud or corruption is present and a recommendation as to whether or not the case is suitable for prosecution.
 - 5.3.12 The Finance Director will agree with CFSMS whether the case should progress to prosecution, The prosecution process will be managed by CFSMS. This will at some point involve the formal interviewing of suspects and this must be carried out under caution in accordance with the Police and Criminal Evidence Act.
 - 5.3.13 At some stage during the fraud investigation it may become apparent that there will be insufficient evidence to prosecute. In such cases the LCFS, after consultation with CFSMS, will report as above to the Finance Director who if there is evidence of any potential disciplinary issues will then pass the case to Human Resources team for appropriate action in accordance with the Trust's Disciplinary Policy, if not already started.
 - 5.5.14 Similarly, following prosecution, or if a case is not suitable for prosecution, the Finance Director will transfer responsibility for the case to Human Resources as above.
 - 5.3.15 The LCFS will assist the hand-over and will provide a report, a case summary, evidence and witness statements to Human Resources. The Trust's disciplinary procedure will then be followed.
- 5.4 Responsibilities of the Local Counter Fraud Specialist and Finance Director
- 5.4.1 When the LCFS has completed the investigation he/she will provide a report for the Finance Director giving an objective assessment of the evidence as to whether fraud or corruption is present and a recommendation as to whether or not the case is suitable for prosecution. The investigation files and report are passed to the Finance Director with a completed 'Authority to Prosecute' form (CFS13). The CFSMS is notified of the case through the CMS.
 - 5.4.2 The Finance Director and CFSMS will review the case and reach agreement on whether the case is suitable for prosecution. The CFSMS Regional Team will provide a technical assessment of the suitability of the case and file for prosecution.
 - 5.4.3 Once the case is accepted for prosecution it will be taken forward either by CFSMS or the LCFS in conjunction with CFSMS. The Department's Solicitors Branch or the Crown Prosecution Service, depending on the circumstance, may handle the actual prosecution.
 - 5.4.4 If the case is not suitable for prosecution the LCFS will transfer responsibility for the case to Human Resources for appropriate action in accordance with the Trust's disciplinary procedures. The LCFS will provide

a report, case summary, evidence and witness statements to Human Resources.

5.4.5 After the Court hearing the LCFS (CFSMS if they investigated the case i.e. over £15,000) will complete an Outcome of Investigation and Concluding Report for the Finance Director (copy to CFSMS & Internal Audit). The report should include:

- The outcome of the case (penalty, conviction etc).
- Any weakness in prosecution case.
- Any suggestions for improvement in procedures.

The Finance Director and LCFS will consult with the Human Resources Manager regarding disciplinary action, see above. The LCFS should ensure any system weaknesses identified during the course of the investigation are brought to the attention of Internal Audit and line management so that preventative action can be taken.

5.4.6 Depending on the circumstances of the case, the Finance Director may consult with the Trust's legal advisors and CFSMS on whether civil law remedies should be pursued. **Note that in some cases prosecution, disciplinary and civil law remedies may be pursued concurrently.**

5.4.7 The Finance Director will record any losses in the Losses and Special Payments Register. The LCFS will update the CMS to indicate the case was cleared.

5.4.8 The LCFS and Finance Director will keep the Audit Committee updated on all ongoing investigations.

6. Guidance to Staff on Fraud and Corruption

This section is intended to be used as a separate instruction to be given to staff

As part of the Board's programme to enact all the elements of current best practice in corporate governance, this document is approved by the Board as outlining the Trust's policy and advice to employees in dealing with fraud or suspected fraud or corruption.

All staff have a responsibility to protect the assets of the Trust.

6.1 Public Service Values

The three fundamental public service values underpinning NHS and all public sector work, specified by the *Code of Conduct for NHS Boards*, are:

Accountability: Everything done by those who work in the organisation must be able to withstand public and parliamentary scrutiny.

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

Openness: The organisation's activities should be sufficiently public and transparent to promote confidence between the organisation and its patients, staff and the public.

6.2 The Board's Policy

The Board is absolutely committed to maintaining an honest, open and well intentioned atmosphere within the Trust, so as best to fulfil the objectives of the Trust and of the NHS. It is therefore also committed to the elimination of fraud within the Trust, to the rigorous investigation of any such cases, and where fraud or other criminal act is proven to ensure that wrong doers are appropriately dealt with. The Trust will also take appropriate steps to recover any assets lost as a result of fraud.

The Board wishes to encourage anyone having reasonable suspicions of fraud to report them. The Trust's policy, which will be rigorously enforced, is that no employee should suffer as a result of reporting reasonably held suspicions.

6.3 Definitions

For the purpose of this document the following terms are used:

Theft A person is guilty of theft if they dishonestly appropriate property belonging to another with the intention of depriving the other of it. Suspicions of theft should be reported to the Trust's Security Manager.

E.g. To steal cash from a petty cash box would be theft.

Fraud The intentional distortion of financial statements or other records by persons internal or external to the Trust, which is carried out to conceal the misappropriation of assets or otherwise for gain.

English law does not specifically define fraud, however, the two key ingredients are "to defraud is to **deprive** by **deceit**", underlining the two essential elements in fraud:

- deception or concealment and
- deprivation or loss to the victim.

E.g. To steal cash from a petty cash box is theft, but to conceal this by leaving a false receipt would be fraud.

Corruption The offering, giving, soliciting or acceptance of an inducement or reward, which may influence a person to act against the interests of the Trust.

6.4 Responsibilities of Staff to Report Fraud

6.4.1 Staff are encouraged to raise any suspicions they may have of fraud or corruption with the LCFS or Finance Director who will guarantee anonymity where this is requested (refer to Appendix 1 for contact details).

6.4.2 The referral can be made verbally via the contact numbers given in Appendix 1, or by using form CFS1 (Appendix 2). The Local Counter Fraud Specialist will respond within five working days indicating whether or not the referral is suitable for investigation.

- 6.4.3 In addition to the above routes for raising concerns about fraud, members of staff may also refer to the Trust's Whistleblowing Policy, which gives details of external contacts where staff can properly report matters to external bodies. Alternatively, staff may contact the National Fraud Reporting Line on 0800 028 40 60 to report concerns. Staff should choose whichever route they feel most comfortable with to raise their concern.
- 6.4.4 Staff are encouraged to act quickly if their suspicions are aroused about a potential fraud. In many cases speed of action may result in recovery of property and money that otherwise would be lost to the NHS.
- 6.4.5 When you suspect fraud you are encouraged not to touch anything and above all, don't switch on any computers that you suspect may contain evidence. Failure to adhere to this fundamental principle could jeopardise the outcome of any investigation. Not only does the Trust have to secure the evidence, but they also have to be able to demonstrate that it has not been interfered with in any way.
- 6.4.6 Patients and other members of the public are also encouraged to raise their concerns about fraud directly with the National Fraud Reporting Line (0800 028 40 60). Separate promotional material will be widely displayed to encourage concerns to be raised.

Further information and a copy of the Trust's Fraud Policy & Response Plan and the Whistleblowing Policy may be obtained from your manager. (refer to Appendix 3 for further guidance.)

7. Monitoring

Compliance will be monitored by an annual sample of managers being surveyed regarding the use and usefulness of this policy and an annual sample of staff to access knowledge of the policy.

All cases of fraud are reported quarterly to the Audit Committee.

Author: Local Counter Fraud Specialist

Newcastle upon Tyne Hospitals NHS Foundation Trust

CONTACT DETAILS

1. Finance Director 0191 2137622

2. Local Counter Fraud Specialist

John Brown 0191 2194772
Mobile 07876 594661

3. National Fraud Reporting Line 0800 028 40 60

The Newcastle upon Tyne Hospitals NHS Foundation Trust

REFERRAL FORM:

NAME

DEPT, JOB TITLE

WORK LOCATION

TELEPHONE NUMBER

THIS ALLEGED FRAUD RELATES TO:

NAME

WORK LOCATION

Referrals should only be made when you can substantiate your suspicions with one reliable piece of information.

Suspicion, Please provide details

Possible useful contacts

Please attach any available additional information.

Signed..... **Date**.....

The Trust Local Counter Fraud Specialist will undertake to acknowledge receipt of this referral direct to you within 5 working days unless otherwise requested.

The Newcastle upon Tyne Hospitals NHS Foundation Trust

Fraud Response - Guidance to Staff

What should **you do** if you suspect **Fraud** or **Corruption**?

Why should you read this guidance?

- Fraud and corruption within the public sector costs the taxpayer hundreds of millions of pounds each year.
- Detected cases of fraud and corruption are on the increase.
- ALL public sector organisations are likely to be affected in some way by fraudulent or corrupt activity.

A new Act of Parliament - the Public Interest Disclosure Act 1998 - will protect you from any reprisals as long as you meet the rules set out in the Act.

Guidance on what you should and should not do if you suspect fraud or corruption within the organisation is given below.

Acting upon your suspicions

- **Do**

- ✓ Make an immediate note of your concerns - note all relevant details
- ✓ Convey your suspicions to the Local Counter Fraud Specialist or Director of Finance
- ✓ Deal with the matter promptly, if you feel your concerns are warranted

- **Don't**

- × Do nothing
- × Be afraid of raising your concerns
- × Approach or accuse any individuals directly
- × Try to investigate the matter yourself
- × Convey your suspicions to anyone other than those with the proper authority

Rules for making a protected disclosure:

- You must disclose the information in good faith
- You must believe it to be substantially true
- You must NOT act maliciously and make false allegations
- You must NOT seek any personal gain

NHS Counter Fraud and Security Management Service

Tackling Fraud in the NHS

Every year, millions of pounds are being diverted from the National Health Service through fraud, corruption and error. The vast majority of staff within the NHS are professional and honest, but there are a small minority who think that such behaviour is acceptable. This deprives the NHS of valuable resources, which should be focused on improving patient care. Examples of fraud within the NHS range from the submission of false travel claims by staff and intentional evasion of NHS charges by patients, to complex and high value fraud, sometimes involving millions of pounds.

The NHS Counter Fraud and Security Management Services (CFSMS) was set up in September 1998 with a remit to counter all fraud and corruption within the NHS. It has concentrated on creating a counter fraud structure within the NHS with the view to:

- Reduce fraud to an absolute minimum within 10 years
- Put in place arrangements to hold fraud at an absolute minimum level, permanently
- Free up resources for better patient care

The CFSMS has recruited dedicated specialists to counter fraud within the NHS and has specialist teams working in each of the NHS regions, supported by a national proactive team and specialist teams working to investigate pharmaceutical, dental and ophthalmic fraud.

There are **Local Counter Fraud Specialists (LCFS)** situated in each Health Authority, NHS Trust and Primary Care Trust. Each **LCFS** has received professional training and is accredited as a counter fraud specialist through the Institute of Criminal Justice Studies. All staff are trained to conduct their work in a professional, confidential and ethical manner.

LCFSs have a vital role to play within the counter fraud structure. They act as the "first line of defence" against fraud and corruption within Health Bodies. Working closely with CFSMS, they apply their practical knowledge of the environment within which they work, together with the skills they have developed through training, to be an effective weapon in tackling fraud and corruption.

Underpinning this structure is the counter fraud strategy outlined in "*Countering Fraud in the NHS*", the main components of which are:

The creation of an **anti-fraud culture**

Everyone has a part to play in the fight against fraud, whether it is the public, NHS staff, professionals, managers or policy makers. We must work together to raise fraud awareness and enforce the message that fraud within the NHS is not acceptable and will not be tolerated. We all have a responsibility to protect our organisation and its resources.

Maximum **deterrence** of fraud

The most effective deterrent will come from those of us within the NHS who value the services provided and disapprove of those who abuse the systems through fraud. In addition, publicity surrounding our counter fraud work will deter some that perpetrate or consider perpetrating fraud.

Successful **prevention** of fraud

If it is not possible to deter fraudsters, the next preferable course of action is to prevent fraud from succeeding. Robust systems are essential, so that if fraud is attempted, it will fail.

Prompt **detection** of fraud, which cannot be prevented

Detection processes are being developed in order to discover fraud, which has not been deterred or prevented. Early detection of a fraud helps effective investigation and can establish links between different types of fraud.

Professional **investigation** of detected fraud

Detected fraud will be investigated by accredited NHS counter fraud specialists in a professional, objective and timely manner.

Effective **sanctions**, including appropriate legal action against people committing fraud

Following the investigation of fraud, it is important to ensure that appropriate sanctions, whether disciplinary, criminal or civil are applied to those who have committed fraud. Advice is be available from the NHSCFS on the application of appropriate sanctions.

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

It is important that resources fraudulently obtained are recovered, wherever possible. Detailed advice and guidance is available to support health bodies in their efforts to ensure that fraudsters do not benefit from their crimes, and that the money recovered is put back into patient care.

If you have any concerns regarding fraud and corruption within The Newcastle Upon Tyne Hospitals NHS Foundation Trust, you should contact your Local Counter Fraud Specialist (Tele: 0191 2194772, mobile 07876 594661).

More information can also be found on the NHS counter fraud website at www.nhsbsa.nhs.uk/fraud and on the Trust's intranet site.

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST
IMPACT ASSESSMENT – SCREENING FORM A

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	Fraud Policy and Response Plan	Policy Author:	John Brown LCFS
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		Policy provides direction and help to those who find themselves having to deal with suspected cases of fraud or corruption.
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems.	No	
2.	Is there any evidence that some groups are affected differently?	No	Policy applies to all groups
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4(a).	Is the impact of the policy/guidance likely to be negative? <i>(If “yes”, please answer sections 4(b) to 4(d)).</i>	No	No, ensures a consistent approach for dealing with fraud.
4(b).	If so can the impact be avoided?		
4(c).	What alternatives are there to achieving the policy/guidance without the impact?		
4(d)	Can we reduce the impact by taking different action?		

Comments: No need for full impact assessment	Action Plan due (or Not Applicable): n/a
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Name and Designation of Person responsible for completion of this form: John Brown, Local Counter Fraud Specialist____ Date: 20th March 2009_____

Names & Designations of those involved in the impact assessment screening process: John Brown, LCFS; Angela Dragone, Acting Director of Finance._____

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)