Fraud Policy

Printed copies must not be considered the definitive version

DOCUMENT CONTROL		POLICY NO.	05
Policy Group	Corporate		
Lead Author	Chief Internal Auditor (Fraud Liaison Officer)		
Lead Executive	Director of Finance		
Scope (Applicability)	Board wide	**Version no.**	1.8
Status	Approved	**Implementation Date**	October 2024
Last review date	May 2024	**Next review date**	October 2027
Approved by	Audit and Risk Committee	**Approval date**	October 2024
Equality Impact Assessed	Yes	**Equality Impact Assessment date**	October 2013
Data Protection Impact Assessed	No – Not required	**Data Protection Impact Assessment date**	Not applicable

Policy on a page

Summary & Aim	Key Requirements
This policy is intended to provide direction and help to Board staff who have suspicions or find themselves dealing with suspected theft, fraud or corruption. It sets out a framework, which centres on immediate discussions and agreement with CFS in respect of how each case will be taken forward. On behalf of the Board, CFS will consider investigating "Specified Offences" which have the potential for criminal prosecution and Board staff need to be aware of the many options and of their responsibilities in the event that a criminal prosecution is not the chosen route.	•
Target Audience	**Previous Names**
• All staff	•

Equality and Diversity Statement
NHS Dumfries and Galloway recognises that some communities within society are more likely than others to experience discrimination, prejudice and inequalities. The Equality Act 2010 specifically recognises the protected characteristics of **age, disability, sex, race, religion or belief, sexual orientation, gender reassignment, pregnancy and maternity, and marriage and civil partnership**. The Fairer Scotland Duty, also requires NHS Dumfries and Galloway to actively consider how socio-economic disadvantage can be reduced when making strategic decisions. The New Armed Forces Covenant Statutory Duty places an expectation on NHS Dumfries and Galloway to consciously consider the Armed forces Covenant when developing, delivering and reviewing policies and decisions which may impact the Armed Forces community and help improve their access to public services. Consideration on all of the protected characteristics, the Fairer Scotland Duty and the Armed Forces Covenant are included within the Equality Impact Assessment process and documentation, which must be completed as part of the Policy Development Process. NHS Dumfries and Galloway is committed to promoting and advancing equality, removing and reducing discrimination and harassment and fostering good relations between people that hold a protected characteristic and those who do not. This applies both in the provision of services and as our role as a major employer. NHS Dumfries and Galloway believe that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discrimination practice.

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1. PURPOSE AND RATIONALE

1.1 One of the basic underlying requirements of public sector organisations is being able to demonstrate the proper use of public funds. The majority of people who work in the NHS are honest and professional and find that fraud, corruption and bribery committed by a minority is wholly unacceptable. It is therefore important that all those who work in the public sector are aware of the risk of theft, dishonesty, fraud and similar illegal acts, and are aware of the means of reporting concerns.

1.2 Counter Fraud Services (CFS) was created specifically to assist all NHSScotland Boards in their efforts to reduce losses through fraud and corruption. This document sets out NHS Dumfries and Galloway's fraud policy and action plan to achieve such a reduction. The Board recognises that every pound of fraud prevented or recovered means increased funding for patient care.

2. POLICY AIMS

2.1 This document is intended to provide detailed direction and help to Board staff who have suspicions or find themselves dealing with suspected theft, fraud or corruption. It sets out a framework, which centres on immediate discussions and agreement with CFS in respect of how each case will be taken forward. On behalf of the Board, CFS will consider investigating "Specified Offences" which have the potential for criminal prosecution and Board staff need to be aware of the many options and of their responsibilities in the event that a criminal prosecution is not the chosen route.

Specified Offences are listed at Appendix 1.

2.2 This policy is intended to be an integral part of the Board's overall counter fraud strategy including measures to combat bribery and corruption.

3. POLICY SCOPE

Public Service Values

3.1 In order to safeguard the public interest and ensure the proper stewardship of public funds, it is essential that the three public service values of accountability, probity and openness underpin the behaviours and actions of all those who work in NHS Dumfries and Galloway.

- **Accountability**
  Everything done by those who work in the organisation 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, staff, assets, 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.

3.2 The Board will therefore foster a culture which promotes these values as it seeks to prevent and to expose fraudulent activity and the misuse of resources. There are a number of controls in place to regulate and monitor the conduct of the Board's business, namely:

- Standing Orders,
- Standing Financial Instructions (SFIs),
- operational and departmental policies and procedures,
- Internal Audit, and
- External Audit.

3.3 A requirement of higher level guidance is that we formulate robust protocols in order to ensure a prompt, measured and appropriate response to alleged, suspected or detected fraud or misappropriation, or other financial misconduct.

Scottish Government Fraud Strategy and Guidance

3.4 NHS Scotland's policy on countering fraud and other irregularities was originally laid out in The Strategy to Combat NHS Fraud in Scotland - CEL 3 (2008) with further detail in the Partnership Agreement with NHS Boards and the Memorandum of Understanding between Internal Audit Teams and NHSScotland Counter Fraud Services (CFS). This was updated in, CEL 11 (2013) – Strategy to combat financial crime in NHS Scotland, which gave an increased focus on fraud and financial crime, the "Tone from the Top" and also revised the roles and responsibilities of the Fraud Liaison Officer, Counter Fraud Champion and other officers within the Board.

3.5 In June 2015, the Scottish Government published its strategy "Protecting Public Resources in Scotland – A Strategic Approach to Fighting Fraud and Error". This expands on the key features provided within CELs 3(2008) and 11(2013). In November 2023, Counter Fraud Services issued their revised Counter Fraud Strategy detailing the priorities for countering fraud in the NHS over the next three years

Full details of the many pieces of guidance and legislation that relate to Countering Fraud in NHSScotland can be found at Appendix 2.

The Board's Policy on Fraud and Corruption

3.6 The Board has signed a Partnership Agreement with CFS, which outlines what must happen in the event of a fraud or other irregularity being discovered, and what the Board and CFS will do to actively counter the threat of fraud and corruption. These documents endorse the public service values of accountability, probity and openness stated above.

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

3.8 This Fraud Policy and Action Plan is to be followed in the event of suspected fraud being reported and is supplemented with a guidance notes issued to all staff during induction.

3.9 The Board will nominate a Board member as a Counter Fraud Champion, who will work with CFS on an annual proactive plan. The Counter Fraud Champion role is currently undertaken by the Chair of the Audit and Risk Committee.

Public Interest Disclosure Act 1998

3.10 As noted above, the Board will maintain an honest and open culture and wishes to encourage anyone having suspicions of theft, dishonesty, corruption or fraud to report them without delay. The Board has a Whistleblowing Policy which will be rigorously enforced, in order that all members of staff can be confident that they will not suffer in any way as a result of reporting suspicions held in good faith, i.e. suspicions other than those that are raised maliciously. The Whistleblowing Policy can be found on the policies page on Beacon.

3.11 Further information is also available on the Public Concern at Work website – **www.pcaw.org.uk**

3.12 The Fraud Liaison Officer (FLO) is authorised to receive enquiries from staff confidentially and anonymously and, where appropriate to report the matter to CFS, the Director of Finance and/or the Chair of the Audit and Risk Committee.

3.13 The Board's Appointed (External) Auditors are also authorised to receive enquiries and to report on these as above.

Regulation of Investigatory Powers (Scotland) Act 2000

3.14 The use of covert surveillance or covert human intelligence sources (CHIS) by public authorities is strictly limited by the provisions of the Regulation of Investigatory Powers (Scotland) Act 2000 (RIPSA) and NHS provisions are covered in HDL 30(2003) relating to the Act. NHS National Services Scotland is the only NHS Board which is a named authority under RIPSA and, as such, only the Director of Practitioner and Counter Fraud Services (P&CFS) and the Head of CFS can authorise the use of any form of surveillance and the use of covert human intelligence sources in NHSScotland.

3.15 Where appropriate CFS will authorise and conduct directed surveillance and the use of CHIS on behalf of the Board. Where the Board are considering surveillance or the use of CHIS in cases which do not involve fraud or other financial irregularities, such as public or staff safety or the prevention of disorder, they should contact the appropriate public body as outlined in the 2003 HDL. This will normally be the relevant police force.

4. DUTIES / RESPONSIBILITIES

4.1 All employees should be assured that there will be no recriminations against staff who report suspicions held in good faith. Victimising or deterring staff from reporting concerns is a serious disciplinary matter. Any contravention of this policy should be reported to the Chief Executive or Chair of the Audit and Risk Committee. Equally, however, abuse of the process by raising malicious allegations would, if proven, be regarded as a disciplinary matter.

4.2 If you believe you have good reason to suspect a colleague, patient or other person of fraud or an offence involving the Board or a serious infringement of Board or NHS rules you should discuss this in the first place with your manager.

4.3 If you have suspicions about the actions of your manager, such that you suspect that manager of involvement of fraud, then you have a choice of:

- going to the next more senior person in your department or directorate;
- reporting the matter confidentially with the FLO;
- reporting the matter directly to the Director of Finance.

Further choices for staff are:

- to follow the guidance within the Board's Whistleblowing Policy where fraud may not be the only concern,

- to use the Counter Fraud Services (CFS) Fraud Reporting Line 08000 151628 or report suspicions (anonymously if desired) through the CFS Website - www.cfs.scot.nhs.uk
- if you are concerned about speaking to another member of staff you could ask for advice first from the charity "Public Concern at Work" through the Confidential Alert Line on 0800 008 6112. They provide independent and confidential advice and can also be reached on 0207 404 6609.

4.4 The FLO liaises with CFS during the initial stages of a referral prior to any decision being made regarding the requirement for a full investigation on the part of CFS.

4.5 It should be noted that CFS have investigatory powers and rights that are not held within the Board and it is therefore recommended that discussions with the FLO and CFS take place prior to any actions being taken by the Board such as suspension of staff which may impact on an investigation.

4.6 Under no circumstances should staff speak to representatives of the press, radio, TV or other third party unless expressly authorised by the Chief Executive.

4.7 Staff should be aware that time may be of the utmost importance to ensure that the Board does not continue to suffer a loss.

4.8 A full list of roles and responsibilities in relation to fraud is attached in Appendix 3.

5. PROCESS / PROCEDURES

5.1 As Accountable Officer, the Chief Executive has the responsibility, in its broadest terms, for countering fraud. The Chief Executive may delegate the day-to-day responsibility for the management of fraud processes and individual cases to the Board's Director of Finance and Fraud Liaison Officer.

5.2 The Board's Counter Fraud Champion will support the Chief Executive in this role by heightening fraud awareness at Board level and ensuring the effectiveness of counter fraud efforts is measured.

5.3 The Fraud Liaison Officer will discuss each relevant case with CFS and decide if there is a potential for criminal prosecution, or disciplinary and/or civil action. If a criminal investigation is required then CFS will undertake the investigation on behalf of the Board. This will not preclude the Board taking disciplinary and/or civil action however that could only occur with agreement from CFS and potentially the relevant procurator fiscal. Any investigation will be carried out by CFS in accordance with the CFS Partnership Agreement with the Board in

direct consultation with the FLO. In cases where the FLO and CFS cannot agree on a course of action, the Accountable Officer shall make a decision based on the facts presented.

5.4 Where CFS is investigating a case on behalf of the Board no further action shall be taken by the Director of Finance, the FLO, the Workforce Director, or any other Board officer without consultation with CFS. This is necessary to maintain the integrity of the investigation. Where it is agreed that the Board shall commence an internal enquiry with a view to disciplinary proceedings and/or civil recovery, if at any stage it becomes apparent that a Specified Offence may have taken place, the investigation must be halted and CFS consulted.

5.5 Regardless of whether the investigation is carried out with a view to criminal prosecution, or disciplinary/civil recovery, all staff are under a duty to refrain from taking any direct action with regard to the enquiry without first consulting the FLO or the CFS Investigating Officer.

5.6 The Workforce Director or nominated Human Resources Manager shall ensure that those involved in the investigation are advised in matters of employment law and in other procedural matters, such as disciplinary and complaints procedures, as required. All HR staff should be familiar with the "Tackling NHS fraud" training DVD and ensure that advice that they give is consistent with this. Induction training within the Board will also include a general overview of fraud. The document “Guidance to staff on Fraud (Appendix 4) will be distributed to staff at induction.

5.7 CFS, in conjunction with the Board, must deliver such publicity campaigns, staff induction information and fraud awareness presentations, as to allow the Board to fulfil its obligation in countering fraud.

5.8 Finally, all staff have a duty to protect the assets of the Board. Assets include information, intellectual property and goodwill as well as cash and physical property.

5.9 Key contacts in relation to fraud issues are detailed below:

Director of Finance
Katy Kerr
Finance Directorate
Ground Floor North
Mountainhall Treatment Centre
Dumfries
DG1 4AP

Direct Dial: 01387 244035
Internal: 34035

E-mail: katy.kerr@nhs.scot

Chief Executive
Julie White
Chief Executive's Office
Ground Floor North
Mountainhall Treatment Centre
Dumfries
DG1 4AP

Direct Dial: 01387 272701
Internal: 32701

E-mail: julie.white2@nhs.scot

Fraud Liaison Officer
Julie Watters
Chief Internal Auditor
Internal Audit
Ground Floor North
Mountainhall Treatment Centre
Dumfries
DG1 4AP

Direct Dial: 01387 244355
Internal: 34355

Email: julie.watters2@nhs.scot

Counter Fraud Champion
Greg Black (Non-Executive Director)
Chair of Audit and Risk Committee
Dumfries and Galloway NHS Board
Ground Floor North
Mountainhall Treatment Centre
Dumfries
DG1 4AP

Direct Dial: 01387 272702
Internal: 32702

Email: greg.black@nhs.scot

Counter Fraud Services
Counter Fraud Services
Titan 7 Dovecote Road
Holytown
Lanarkshire
ML1 4GP

Telephone: 01506 705 200
Fax: 01506 465 182
Fraud Hotline: 08000 15 16 28

Website: www.cfs.scot.nhs.uk

External Auditors
Audit Scotland,
4th Floor, South Suite,
The Athenaeum Building
8 Nelson Mandela Place,
Glasgow
G2 1BT

Telephone: 0131 625 1934

Website: www.audit-scotland.gov.uk

6. CONSULTATION

6.1 Consultation on the content of the policy has been undertaken with Counter Fraud Services and Fraud Liaison Officers from other boards. This has also been discussed with staff side representation to ensure the policy is discussed in the correct forum.

6.2 Major revisions to this Policy will be taken to Board Management Team and the Area Partnership Forum for information and awareness prior to approval at Audit and Risk Committee. Minor revisions such as to key contact information will not be consulted upon and will be amended as required.

7. TRAINING AND SUPPORT

7.1 Counter Fraud Services offer many types of training and support from online modules covering general fraud, procurement and bribery and corruption to focussed training and support around anti-bribery and corruption to senior managers and investigation support to NHS Board staff.

8. MONITORING

8.1 The monitoring arrangements for this Policy are set out in the table below.

Element to be monitored	Monitoring Methodology	Reporting		
		Presented by	Committee	Frequency
Fraud Standard reporting	Reported through committee	Chief Internal Auditor (Fraud Liaison Officer)	Audit and Risk Committee	Quarterly

9. EQUALITY IMPACT ASSESSMENT

9.1 An Equality Impact Assessment (EQIA) has been carried out for the Board's Fraud Policy and an electronic copy of the completed EQIA has been forwarded to the NHS Dumfries and Galloway Equality Lead for publication on the NHS Dumfries and Galloway website in accordance with equality legislation.

10. DATA PROTECTION AND CONFIDENTIALITY IMPACT ASSESSMENT

10.1 A Data Protection Impact Assessment was not undertaken when reviewing this policy as the document did not review or handle confidential or personal information.

11. DOCUMENT CONTROL SHEET

11.1 Document Amendment History

Version	Section(s)	Reason for update
1.1 & 1.2	Section 9 and App D	Amendment to Chief Executive and CFC contact information
1.3	Whole document review	CEL 11(2013) issued to update NHSScotland strategy and contains specific actions at board level
1.4	Section 9 and App D	Amendment to DoF and CFC contact information
1.5	Whole document review	Amendments to reflect changes to the Partnership Agreement and updated guidance
1.6	Section 9 and App D	Amendment to DoF, CFC and External Auditor contact information
1.7	Section 5 and App 4	Document transferred onto revised template and amendments made to reflect Chief Executive details
1.8	Section 5 and App 4 Appendix 2	Amendment to Fraud Liaison Officer contact information Guidance section updated to include revised Strategy

11.2 Distribution

Name	Responsibility	Version number
Corporate Business Manager	Place on policy register	1.8
Board Comms	Inclusion in core briefing	1.8
Fraud Liaison Officer	Place on intranet and in 'Latest news'	1.8
Board Management Team	Dissemination to all staff through line management	1.8
HR – Learning and Development	For inclusion in Board induction training	1.8

11.3 Action Plan for Implementation

Action	Lead Officer	Timeframe
Taken to Area Partnership Forum	Chief Internal Auditor	22nd August 2024
Taken to Audit and Risk Committee	Chief Internal Auditor	29th October 2024
Place on policy register	Corporate Business Manager	Following Committee approval
Dissemination to senior staff through line management	Board Management Team	Following Committee approval
Raise awareness and inform staff	All line managers	Following Committee approval
Use policy	All staff	

Appendix 1

NHSScotland

National Services Scotland - Counter Fraud Services

List of Specified Offences

The remit of Counter Fraud Services (CFS) is limited to matters of loss by theft, dishonesty, deception and/or manipulation of documents/records where there is a loss to NHSScotland. The following is a list of offences which, following the consultation process, CFS may investigate:

- Falsehood, Fraud and Wilful Imposition;
- Embezzlement;
- Corruption;
- Theft by fraud;
- Theft by omission;
- Other financial irregularities involving dishonesty or deception such as timesheet irregularities, sick leave irregularities, failure to declare gifts, breaches of NHS Circulars or Standing Financial Instructions or other accounting irregularities.

This list is not exclusive, but contains only examples of the type of offence that may attract a CFS investigation.

In exceptional circumstances, or in the interest of the Service, but always as directed by the Accountable Officer, CFS will investigate the alleged commission of any of the specified offences where there is no direct loss to NHS funds e.g. patient or endowment funds. However, the employing NHS Board must intend to report the matter to the Police or the Procurator Fiscal in order to seek criminal proceedings.

Where an employee has been accused of theft, which does not involve the type of offences listed above, the matter will be reported to the Police or Procurator Fiscal, and any investigation is to be left up to the Police, in accordance with current practice.

Appendix 2

Relevant Fraud Guidance and Legislation

SGHSCD Publications		
Reference	**Name of Publication**	**Date**
DL(2023)30	NHS Counter Fraud Strategy	29/11/2023
DL(2022)06	Partnership agreement between NHSScotland Counter Fraud Services and NHS boards and special health boards	23/02/2022
DL(2019)04	Partnership agreement between NHSScotland Counter Fraud Services and NHS boards and special health boards	19/03/2019
DL(2016)03	Partnership agreement between NHSScotland Counter Fraud Services and NHS boards and special health boards	26/02/2016
CEL(2013)11	Updating CEL 3 (2008): Strategy to combat financial crime in NHS Scotland	30/05/2013
CEL(2012)15	Partnership agreement between NHSScotland Counter Fraud Services and NHS Boards and Special Health Boards	27/04/2012
CEL(2010)40	Regulation of Investigatory Powers (Scotland) Act 2000	25/11/2010
CEL(2010)33	"Tackling NHS fraud" training DVD	14/09/2010
CEL(2010)10	Revised Scottish Financial Return (SFR) 18: enhanced reporting of NHS frauds and attempted frauds	29/03/2010
CEL(2009)18	Partnership agreement between NHSScotland Counter Fraud Services and NHS Boards and Special Health Boards	05/05/2009
CEL(2008)44	Revised form SFR 18: enhanced reporting of NHS frauds and attempted frauds	09/10/2008
CEL(2008)18	National Fraud Initiative (NFI)	04/04/2008
CEL(2008)15	Primary medical services: payment verification procedures	20/03/2008
CEL(2008)03	Strategy to combat NHS fraud in Scotland	28/01/2008
CEL(2007)16	Safer management of controlled drugs: private requisition forms for schedules 1, 2 and 3 controlled drugs	06/11/2007
CEL(2007)12	Family health services: payment verification procedures	04/10/2007
HDL(2006)44	National Fraud Initiative	18/07/2006
HDL(2005)05	Tackling fraud in NHSScotland: joint action programme: financial control: procedure where criminal offences are suspected	16/02/2005

HDL(2004)23	Fraud: tackling National Health Service fraud: extension of counter fraud role of NHSScotland Counter Fraud Services (CFS); treatment of financial recoveries	29/04/2004
HDL(2003)30	Regulation of Investigatory Powers (Scotland) Act 2000	08/07/2003
HDL(2002)88	Fraud: tackling National Health Service fraud: extension of counter fraud role of the Fraud Investigation Unit of the Common Services Agency	11/12/2002
HDL(2002)23	Financial control: procedure where criminal offences are suspected	05/04/2002
MEL(2000)28	Tackling family health service fraud: integrated programme of action: establishment of family health services Fraud Investigation Unit (FIU)	18/05/2000

Legislation
Regulation of Investigatory Powers (Scotland) Act 2000
Public Interest Disclosure Act 1998

Other Guidance
Memorandum of Understanding - CFS and Association of Chief Police Officers (ACPOS)

Appendix 3

FRAUD ROLES AND RESPONSIBILITIES

Members of Staff

- to protect the assets of the Board
- to report in confidence any reasonable suspicion of fraud or misappropriation as appropriate
- to co-operate in any investigation
- to maintain confidentiality and not divulge any information to a third party

Heads of Department

- to assess the risk of fraud within their areas of responsibility and to encourage staff to review controls and systems in order to identify vulnerable areas
- to develop and maintain effective controls to prevent or detect fraud or misappropriation
- to encourage staff with any reasonable suspicions of fraud or misappropriation to report the matter
- to reassure members of staff they will in no way suffer as a result of reporting reasonably held suspicions
- to ensure that they do not divulge information to a third party and ensure that staff are aware of the same
- to report to the Director of Finance or FLO any suspicion of fraud or misappropriation
- to co-operate with CFS on any investigation
- to liaise with the appropriate Workforce Business Partner regarding any possible resort to the Disciplinary Procedure and where applicable, initiate disciplinary action.
- to secure locally held documentation likely to be required in an investigation
- to not confront/interview persons likely to be responsible for committing a Specified Offence

Director of Finance

- to assume overall responsibility for investigations, liaising as appropriate with Internal Audit, Police and Management
- to refer timeously to the FLO/Chief Internal Auditor regarding investigations
- to agree the scope and timescale for any investigation
- to keep the Chief Executive informed of issues, and discuss management of the case as appropriate
- to inform the CFS and make full use of their expertise and resources in countering fraud and investigating Specified Offences
- to maintain a record of any suspected or actual fraud or misappropriation and action taken

- to pursue recovery of losses
- to ensure compliance with Standing Financial Instructions regarding the reporting and recovery of losses
- to review internal controls in the light of the conclusions of any investigation

Board Members

Should make themselves available to discuss in confidence with members of staff any reasonably held suspicions regarding fraud or misappropriation and should convey to the Director of Finance the details of any suspected fraud or misappropriation.

Chief Internal Auditor

The Chief Internal Auditor must ensure that audit plan coverage includes areas where independent assurances are required on systems of internal control in place to prevent fraud.

Counter Fraud Champion - Updated Roles and Responsibilities – CEL 11(2013)

1. Raising the Profile of Counter Fraud Initiatives and Publicity

The CFC should be in a position to gauge the level of understanding of financial crime in the organisation. If the level is low, the Champion should work with the board communications team to think of imaginative ways to promote fraud awareness. The Champion should also liaise with CFS to seek ideas, and mediums, to explain the message, utilising existing initiatives.

2. Make Regular Reports and/or presentations to the Audit Committee

The Champion must be an Executive Director/ Non Executive Director who is a regular attendee at the Audit Committee. This means that they will have a direct influence on the agenda when fraud is discussed, and can highlight gaps in the counter fraud regime.

3. Involvement in Counter Fraud Initiatives

The Champion should have oversight of and, where possible be involved in, any initiatives being considered by the NHS Body for deterring and disabling fraud.

4. Monitor the degree to which recommendations resulting from investigations by CFS have been implemented within his/her organisation and take steps to ensure full compliance

This is an important responsibility, and may well be the task of others within a Body. However, it should be the role of the Champion to enquire as to whom that responsibility is placed and make it their duty to ensure that matters resulting from investigations are being addressed. Again, this is best facilitated by the Champion

being a member of the Audit Committee, but if the Champion is of sufficient seniority, then questions can still be asked as to the compliance with fraud investigation outcomes.

5. Relationship with FLO

The FLO is the key, day-to-day link with CFS. All matters relating to any fraud investigation and counter fraud initiatives within NHS Bodies, comes through that portal. It is therefore important that the Champion knows who the FLO is, and offers support as necessary. The FLO and the Champion should certainly meet up to discuss ongoing cases and counter-fraud initiatives. Particularly important will be the need to spot any gaps in policy or counter-fraud awareness regimes and work closely to brief the Executive Management Team.

6. Relationship with Director Human Resources

The Champion should make it known to the Director of HR that he/she is in place, and able to assist with promoting an anti-fraud culture in the organisation. In particular, the Champion should support the use of training tools developed in conjunction with HR Directors and their Teams; including the Counter Fraud DVD and the eLearning package.

7. Relationship with Head of Communications

The Champion should be alive to any communication going to staff which involves counter-fraud messages. Ideally, the Champion should be involved in the drafting of any communication. The Champion should also be advised, in advance, of any media coverage resulting from successful prosecutions.

8. Relationship with Employee Director

Encountering fraud in any organisation is stressful for staff. The Champion should therefore liaise with the body's Employee Director and work together to promote a safe environment for staff who report, or are witnesses in, any fraud investigation.

9. Relationship with CFS

CFS exists to support any NHS Scotland Body in countering fraud. The Champion should feel free to contact CFS at any time to seek general advice on policy and policy implementation. Care should be taken not to obstruct the duties of the FLO, but this can be resolved through close working relationships with FLOs. The Champion will have access to the CFS Secure Website, so that general information can be accessed. The Champion should also attend an introductory briefing with CFS at the beginning of their tenure.

Fraud Liaison Officer - Updated Roles and Responsibilities – CEL 11(2013)

1. Acting as Lead Conduit between CFS and the Health Board

The FLO is the key first point-of-contact between CFS and the Board, relating to specific cases.

2. Responsible for receiving information about suspected frauds, within their organisation, from staff or others and passing such information to CFS

In line with the Partnership Agreement, the FLO is the key channel for communication of fraud to CFS.

3. Responsible for facilitating investigations in their organisations and liaison between CFS and those within the Board whose interests are closely linked to any fraud referral to CFS

As summed up in the Board Partnership Agreement with CFS.

4. Responsible for briefing the Chief Executive and other senior Board Executives on specific cases

So that the tone from the top can be maintained, the FLO will have the responsibility to keep all senior managers (including the Chief Executive) fully briefed on any current cases.

5. Working with HR Department

Responsible for working with the Workforce Director to ensure that staff governance is observed, in particular the timing of actions which may involve staff.

6. Ensuring that Audit & Risk Committees are kept informed

Working with principal executive officers responsible for conduct of the Audit and Risk Committee, to ensure the Committee is properly briefed on fraud matters.

7. Facilitating Deterrence and Awareness Initiatives

Support CFS, national proactive initiatives to raise awareness by facilitating communications with the relevant Board officers (e.g. CFC, HR Directors, Learning & Development Leads, Communications Manager, etc.)

Appendix 4

DUMFRIES AND GALLOWAY NHS BOARD

GUIDANCE TO STAFF ON FRAUD

This document provides an introduction to the Board's policy on fraud and gives advice to employees in dealing with fraud or suspected fraud or other illegal acts involving dishonesty or damage to Board property.

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

1. Public Service Values

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

- **Accountability**
  Everything done by those who work in the organisation 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, staff, assets, 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.

2. The Board's Policy

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

The Board wishes to encourage anyone having suspicions of fraud to report

them. The Board's policy, which will be rigorously enforced, is that no employee should suffer as a result of reporting suspicions held in good faith.

The Board has therefore set in place procedures (in the form of Standing Orders, Standing Financial Instructions and procedure notes) designed to minimise the likelihood of the Board being a victim of fraud, a Fraud Policy and Response plan to be followed in the event of suspected fraud being reported and these guidance notes issued to all staff.

3. Instructions to Staff

You should be assured that there will be no recriminations against staff who report suspicions held in good faith. Victimising or deterring staff from reporting concerns is a serious disciplinary matter. Any contravention of this policy should be reported to the Chief Executive or Chair of the Audit and Risk Committee. Equally, however, abuse of the process by raising malicious allegations would, if proven, be regarded as a disciplinary matter.

If you believe you have good reason to suspect a colleague, patient or other person of fraud or an offence involving the Board or a serious infringement of Board or NHS rules you should discuss it in the first place with your manager.

Examples could include theft of Board property, abuse of Board property or deception or falsification of records (e.g. fraudulent time or expense claims).

If you have suspicions about the actions of your manager, such that you suspect that manager of involvement of fraud, then you have a choice of:

- going to the next more senior person in your department or directorate;
- discussing the matter confidentially with the Fraud Liaison Officer
- reporting the matter directly to the Fraud Liaison Officer.

Further choices for staff are:

- to follow the guidance within the Board's Whistleblowing policy where fraud may not be the only concern
- you may use the Counter Fraud Services (CFS) Fraud Reporting Line 08000 151628 or report your suspicions (anonymously if desired) through the CFS Website - www.cfs.scot.nhs.uk
- if you are concerned about speaking to another member of staff you could ask for advice first from the charity "Public Concern at Work" through the Confidential Alert Line on 0800 008 6112. They provide independent and confidential advice and can also be reached on 0207 404 6609.

The Chief Internal Auditor is the Fraud Liaison Officer (FLO) for the Board and as such liaises with CFS during the initial stages of a referral prior to any

decision being made regarding the requirement for a full investigation on the part of CFS.

It should be noted that CFS have investigatory powers and rights that are not held within the Board and it is therefore recommended that discussions with the FLO and CFS take place prior to any actions being taken by the Board such as suspension of staff which may impact on an investigation.

Under no circumstances should staff speak to representatives of the press, radio, TV or other third party unless expressly authorised by the Chief Executive.

Please be aware that time may be of the utmost importance to ensure that the Board does not continue to suffer a loss.

Relevant contacts are as follows:

Director of Finance
Katy Kerr
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Ground Floor North
Mountainhall Treatment Centre
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DG1 4AP

Direct Dial: 01387 244035
Internal: 34035

E-mail: katy.kerr@nhs.scot

Chief Executive
Julie White
Chief Executive's Office
Ground Floor North
Mountainhall Treatment Centre
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Direct Dial: 01387 272701
Internal: 32701

E-mail: julie.white2@nhs.scot

Fraud Liaison Officer
Julie Watters
Chief Internal Auditor
Internal Audit
Ground Floor North
Mountainhall Treatment Centre
Dumfries
DG1 4AP

Direct Dial: 01387 244355
Internal: 34355

Email: julie.watters2@nhs.scot

Counter Fraud Champion
Greg Black (Non-Executive Director)
Chair of Audit and Risk Committee
Dumfries and Galloway NHS Board
Ground Floor North
Mountainhall Treatment Centre
Dumfries
DG1 4AP

Direct Dial: 01387 272702
Internal: 32702

Email: greg.black@nhs.scot

Counter Fraud Services
Counter Fraud Services
Titan 7 Dovecote Road
Holytown
Lanarkshire
ML1 4GP

Telephone: 01506 705 200
Fax: 01506 465 182
Fraud Hotline: 08000 15 16 28

Website: www.cfs.scot.nhs.uk

External Auditors
Audit Scotland,
4th Floor, South Suite,
The Athenaeum Building
8 Nelson Mandela Place,
Glasgow
G2 1BT

Telephone: 0131 625 1934

Website: www.audit-scotland.gov.uk