

Corporate policy

Fraud, Bribery, and Corruption Policy and Response Plan

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Author	JR
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V.13	14/04/2025	JR	Audit & Risk Committee	Annual review and further amendments in relation to Functional Standard GovS 013: Counter Fraud and Continuous Improvement Framework

1. Introduction

The NHS Business Service Authority (NHSBSA) are committed to ensuring that public money is spent appropriately and effectively. One of the basic principles of public sector organisations is the proper use of public funds; this includes the assets bought through public funds.

The NHSBSA is committed to the elimination of any fraud, bribery, and corruption within the organisation and to the rigorous investigation of any such cases. It is essential everyone understands the importance of protecting the NHSBSA against the risk of fraud, bribery, and corruption. Guidance is shared with NHSBSA staff so that they are aware that they should be conducting themselves at work with honesty, integrity and objectivity in the work that we undertake to ensure collectively, we are safeguarding public money. This directly links to the ['Seven Principles of Public Life'](#) which apply to all those delivering public services.

It is therefore important that all NHSBSA employees, agency and contract staff are aware of the rules regarding any acts involving fraud, bribery, and corruption. The NHSBSA Corporate Strategy includes a goal for Value and Efficiency which targets strengthening how we operate to continue to improve how we mitigate risk of fraud in the payments we make on behalf of the health and care system. The NHSBSA Fraud and Loss Strategy 2024-2027 describes how fraud, bribery, corruption, and loss risks will be mitigated. The NHSBSA use a risk-based approach to tackling fraud, bribery, and corruption which includes controls to prevent, detect and deter as well as measuring the benefit of these controls. Allegations of fraud, bribery, and corruption are investigated and, where appropriate, sanctions are applied.

This policy applies to all NHSBSA employees, agency, and contract staff whilst they are working at the NHSBSA. It explains the different forms of fraud, bribery, and corruption and describes prevention, detection and investigation work undertaken within the NHSBSA. This policy explains how suspicions of fraud, bribery, and corruption can be reported internally to the NHSBSA Loss and Fraud Prevention Team (LFP) or externally to the NHS Counter Fraud Authority (NHSCFA). There is also the NHSBSA Freedom to Speak Up Policy, sometimes referred to as Whistleblowing.

NHSBSA customers should be aware of related policies and procedures, while not exhaustive these include.

- [Standing Financial Instructions -](#)
- [Freedom to speak up – 'Speaking Up' for all colleagues](#)

2. Principles

This policy incorporates the requirements of the Bribery Act 2010. It is an offence for a corporate body not to have adequate procedures in place to prevent bribery. There are implications for organisations who fail to prevent bribery; a range of penalties can be imposed to an individual or a company. These penalties can be unlimited fines and sanctions including orders for confiscation and recovery of the proceeds of crime and debarment from public procurement related contract bids.

In applying this policy, the NHSBSA will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, offending background, trade union membership, or any other personal characteristic.

This policy aims to:

- provide knowledge and understanding to NHSBSA employees, agency, and contract staff, irrespective of their position within the NHSBSA about fraud, bribery, and corruption
- encourage NHSBSA employees, agency, and contract staff to feel confident in raising concerns of fraud, bribery, and corruption
- provide avenues for NHSBSA employees, agency, and contract staff to raise those concerns both internally and externally in confidence
- ensure NHSBSA employees, agency and contract staff receive a response to their concerns and feedback from any action taken
- explain how NHSBSA will tackle reports of fraud, bribery, and corruption
- provide assurance that all reports are investigated fully

3. NHSBSA Fraud, Error and Loss Strategy 2024-27

The NHSBSA understands we are a target for fraudsters like the wider public sector therefore we must ensure our investment is effective. We will acknowledge and understand fraud and loss risks; create and implement effective controls to deter and prevent so we can reduce the loss to public services. We are building on the existing counter fraud foundations we have created, considering the high-risk areas and the strategic goals, we have created a vision statement with underpinning goals for what we want to achieve over the life of this strategy.

Our vision is:

To protect our NHS by influencing change to remove the opportunity for loss and fraud by working collaboratively with Counter Fraud colleagues across government. We will create improvements across the health and care system delivering taxpayer value and ensuring ownership across the NHSBSA for fraud, bribery, corruption, and loss.

To achieve this, we collaborate with counter fraud colleagues across government by being members of the DHSC Counter Fraud Board (CFB), DHSC Counter Fraud Liaison Group (CFLG), NHS Counter Fraud Managers Group, NHSCFA Control Strategy & Strategic Tasking Group including the Operational Group and NHS Enterprise Fraud Risk Assessment (EFRA) Group. These forums allow us to offer support to and receive support from other organisations to develop response plans and define approaches to fraud, bribery, corruption, error and loss.

NHSBSA colleagues involved in counter fraud work will successfully complete the range of training courses and events delivered by the Government Counter Fraud Profession and Public Sector Fraud Authority (PSFA).

4. Definitions

The Fraud Act 2006

The Fraud Act 2006 came into effect in January 2007.

There are different sections to the Fraud Act, but the main ones are:

- **Section 2; Fraud by false representation**

An example of this is someone telling a lie e.g. submitting a false timesheet or expense form

- **Section 3: Fraud by failing to disclose information**

An example of this is someone hiding the truth e.g. student applying for a bursary and fails to declare they have a partner with an income which would affect their award

- **Section 4: Fraud by abuse of position**

An example of this is a supervisor knowingly authorising a false timesheet or expenses for someone else

In summary fraud is a dishonest act, with intent, to make a gain or cause a loss.

Fraud does not have to be successful and does not have to be for personal gain.

The maximum sentence is 10 years imprisonment.

The Bribery Act 2010

The Bribery Act 2010 came into effect in July 2011.

A person is guilty of bribing another person if either of the following two cases apply:

Where a person offers, promises or gives a financial or other advantage to another person and intends the advantage to induce a person to perform improperly a relevant function or activity or to reward a person for the improper performance of such a function or activity.

or

Where a person offers, promises or gives a financial or other advantage to another person and knows or believes that the acceptance of the advantage would itself constitute the improper performance or relevant function or activity.

A person is guilty of being bribed if either of the following two cases apply:

A person requests, agrees to receive or accepts a financial or other advantage intending that in consequence a relevant function or activity should be performed improperly, or requests, agrees to receive or accepts a financial or other advantage as a reward for improper performance of a relevant function or activity.

or

Where the request, agreement or acceptance itself, constitutes improper performance of a relevant function or activity by a person.'

In summary bribery and/or corruption refers to the offering, giving, soliciting, or receiving of any item of value as a means of influencing the actions of an individual or to use their position in an improper way to gain an advantage.

The maximum sentence is 10 years imprisonment and an unlimited fine.

Economic Crime and Corporate Transparency Act 2023 – Section 199

The Government has introduced legislation to tackle economic crime and improve transparency over corporate entities. The Economic Crime and Corporate Transparency Act 2023 (ECCTA) aims to deliver:

- reforms to Companies House
- reforms to prevent the abuse of limited partnerships
- additional powers to seize and recover suspected criminal crypto assets
- reforms to give businesses more confidence to share information to tackle money laundering and other economic crime
- new intelligence gathering powers for law enforcement and removal of nugatory burdens on business

Most of the measures outlined in the ECCTA will be implemented through secondary legislation, which is due to come into force on 1 September 2025. Section 199 of the Act addresses Failure to Prevent Fraud by relevant bodies, this applies to companies in all sectors however the scope is for large organisations who meet two out of the three following criteria:

- more than 250 employees
- more than £36 million turnover
- more than £18 million in total assets

An organisation will be liable where a specific fraud offence is committed by an employee, or agent for the benefit of the organisation and the organisation did not have reasonable fraud prevention procedures in place. It should be noted that it does not need to be proven that the company managers instructed or knew about the fraud offence(s).

An organisation found guilty of an offence under s199 will be liable to a fine.

Fraud, Bribery, and Corruption Risk Appetite

NHSBSA are commissioned by other organisations, such as Department of Health and Social Care (DHSC) or NHS England, to administer services on their behalf. It is the commissioning organisation that will decide on appetite for fraud, bribery, and corruption risks. Depending on the detail within the Directions or MoU, NHSBSA may not be responsible for all counter fraud activities however a Fraud Risk Assessment (FRA) is always produced and shared with the commissioning organisation.

5. NHSBSA Standing Financial Instructions (SFIs)

In accordance with the NHSBSA's Standing Financial Instructions (SFIs) and NHSBSA Conflicts of Interest Policy, all staff should identify and declare material interests at the earliest opportunity, and in any event within 28 days. If staff are in any doubt as to whether an interest is material then they should declare it, so that it can be considered. A declaration of interest should be made by [logging into your Electronic Staff Record \(ESR\) account](#). Full guidance can be found in the [Conflicts of Interest Policy](#).

It is the responsibility of all NHSBSA employees, agency and contract staff to ensure they adhere to this policy and the SFIs both of which can be located on the Hub.

Each year, the NHSBSA LFP Team will request a list of all declarations so they can proactively review what is being declared. In addition, the NHSBSA participate in the Cabinet Office National Fraud Initiative (NFI) data matching exercise where our ESR data for all NHSBSA employees including Non-Executive Directors is matched to data uploaded by other organisations. The output advises us of individuals who may have failed to notify NHSBSA about their employment elsewhere and interests they may have in other companies which could result in a conflict of interest.

6. Initial Fraud Impact Assessment (IFIA) and Due Diligence

PSFA introduced a mandatory IFIA across the public sector for significant areas of spend as best practice. The NHSBSA undertake IFIAs when required however, we have also adapted the IFIA and created a process called Due Diligence (DD) which helps us to identify not just fraud, bribery, and corruption risks but all system weaknesses (governance risks) when onboarding new services and making significant changes to existing services.

The prevention of fraud, bribery, corruption, and loss with DD therefore when new services are assessed for potential risks it allows us to factor in prevention controls into the service design. The DD process has been a positive prevention control for the NHSBSA. It ensures more open engagement, and the counter fraud process is linked with other areas such as Finance, Data, HR, Estates, and IT for an initial assessment before a full risk assessment is possible.

DD procedures must be applied, taking a proportionate and risk-based approach, about the individuals who perform or will perform services for or on behalf of the NHSBSA.

IFIA and DD together provide a higher level of assurance on fraud, bribery, corruption, and loss risks.

7. Roles and responsibilities

The NHSBSA has undertaken all necessary steps to counter fraud, bribery, and corruption within the organisation. The Chief Executive and the Chief Financial Officer monitor and ensure compliance as per the Secretary of State Directions for Counter Fraud. The Chief Financial Officer is responsible for all counter fraud provisions within the NHSBSA. The day-to-day management of the fraud control function within the NHSBSA has been delegated to the NHSBSA Counter Fraud Manager (CFM). The NHSBSA CFM ensures compliance with the Mandatory Government Functional Standard for Counter Fraud (GovS 013).

All NHSBSA employees, agency and contract staff contribute to the management of fraud, bribery, and corruption risks. This starts at the top, where senior management set the tone and promote an anti-fraud culture and commitment to respond to fraud, bribery, and corruption, through to operational staff who design, implement, and operate the control actions required to minimise the risk of fraud and error.

Specific roles and responsibilities within the NHSBSA of those who contribute to the implementation of preventative measures, reviewing of planned counter fraud activities as well as reporting fraud and other irregularities are as follows:

Audit and Risk Committee (ARC)

ARC will approve the NHSBSA Counter Fraud Annual Work Plan, this details the bribery, fraud and corruption work to be undertaken each financial year. The NHSBSA CFM will provide the ARC with an annual report detailing the work undertaken in relation to fraud prevention, creating an anti-fraud culture as well as a summary of the types of fraud being reported. Throughout the year the ARC will be provided with a summary of progress to date in completing the Work Plan as and when requested. The Chair of the NHSBSA ARC is responsible for providing assurance to the NHSBSA Board on counter fraud, bribery, and corruption activities.

Chief Executive

The Chief Executive is the Accountable Officer of the NHSBSA and has overall responsibility for funds entrusted to it. This also includes instances of fraud, bribery, and corruption. Accountable to Parliament, the Chief Executive must ensure adequate policies and procedures are in place to protect the organisation as well as the public funds it receives.

Chief Financial Officer

Chief Financial Officer, as a member of the NHSBSA Board, is responsible for approving financial transactions initiated by business areas across the organisation. They are responsible for overseeing and providing strategic management and support for all work to tackle fraud, bribery, and corruption within the NHSBSA. This ensures there is effective leadership and a high level of commitment to the tackling of economic crime within NHSBSA. Depending on the outcome of criminal investigations by the NHSBSA LFP Team they will inform appropriate senior management of suspected cases of fraud, bribery, and corruption, especially in cases where the loss may be above an agreed limit or where the incident may lead to adverse publicity.

Director of Corporate Services

The Director of Corporate Services is responsible for producing the Standing Financial Instructions and a separate Conflict of Interest Policy. All declarations are collated by the Corporate Services Directorate and shared annually with the NHSBSA LFP Team for their review. The Director of Corporate Services and Freedom to Speak Up Guardian receive all Freedom to Speak Up (Whistleblowing) referrals and decide on the appropriate course of action for each referral received directing fraud, bribery, and corruption referrals to the NHSBA LFP Team or NHSCFA.

Internal and External Audit

Internal and external audit review NHSBSA controls, identifying system weaknesses and ensure that the NHSBSA comply with financial instructions. Government Internal Audit Agency (GIAA) undertake audits on the processes within the LFP Team, this includes ensuring criminal investigations and intelligence are progressed in accordance with documented processes and relevant legislation. GIAA assess the proactive approaches we undertake to producing FRAs, Initial Fraud Impact Assessments (IFIA), mitigating risks and measuring fraud, error and loss.

NHSBSA Counter Fraud Operational Control Group

NHSBSA Leadership Team identified Heads of Service and Senior Managers in the organisation who attend this group. The purpose of this group is to provide governance and oversight of all counter fraud, error, and loss activities within the NHSBSA and is responsible for agreeing and monitoring the NHSBSA Outcome Based Metrics.

The membership is responsible for mitigating risks within their service area which are monitored by the NHSBSA LFP Team through FRA's or service area risk registers. Where it is identified that risks are not being mitigated or where there is major concern, this will be escalated by the NHSBSA CFM to the NHSBSA Leadership Team.

Prevented, detected and recovered fraud and error figures are shared with the group as well as an overview of fraud referrals being investigated to provide an overall picture of the current fraud risk to the NHSBSA. Emerging risks or referrals which are high value or may result in significant reputational damage are also highlighted and discussed.

The membership of this group also undertakes the role of Counter Fraud Champions for the NHSBSA.

HR Advisors

Suspected cases of fraud, bribery, and corruption, where appropriate, will be shared with an NHSBSA HR Advisor. In liaison with managers across the NHSBSA, an HR Adviser will give appropriate advice regarding disciplinary proceedings against NHSBSA employees who have committed an offence. Where parallel criminal and disciplinary sanctions are being progressed, these will be conducted separately and by different people, however close liaison between the NHSBSA LFP Team and HR Advisors will occur.

NHSBSA CFM

The NHSBSA CFM is head of the NHSBSA LFP Team and responsible for taking forward all anti-fraud work in accordance with Secretary of State Directions to NHS Trusts and Special Health Authorities in respect of Counter Fraud 2017.

The NHSBSA CFM is responsible for providing the Chief Financial Officer with a quarterly update on all fraud allegations received. They are also responsible for ensuring that relevant fraud risks are identified and escalated to the Chief Executive, Chief Financial Officer, relevant Head of Service and LT member. Full explanation of this can be found under 'notification and escalation of fraud incidents to board level' in section 9, response plan.

NHSBSA Loss and Fraud Prevention Team (LFP)

The NHSBSA LFP Team consists of specialist fraud resources. All members of the team have successfully completed the Accredited Counter Fraud Specialist (ACFS) qualification or are in the process of completing it.

The LFP Team work with colleagues across the NHSBSA to identify system weaknesses and promote fraud prevention, detection and recovery, including investigating allegations of fraud, bribery, and corruption.

Members of the team have successfully completed the Government Counter Fraud Profession (GCFP) Fraud Risk Assessment (FRA) Training and are waiting to complete the GCFP Fraud Loss Measurement (FLM) Training.

Several members of the LFP Team are members of the GCFP and a continuous professional development programme (CPD) is in place for all members of the team. Personal Development Plans (PDP) are reviewed every six months in one-to-one meetings. All completed CPD is recorded centrally within the LFP Team which the NHSBSA CFM reviews at least annually and includes in the Annual Report to NHSBSA LT and ARC.

A mandatory weekly workshop is attended by the NHSBSA CFM, Lead Fraud Specialists (LFSs), Fraud Specialists (FSs) and the Fraud, Error and Loss Compliance Officer. The purpose of the workshop is to hold everyone in the team to account, provide relevant updates from external and internal stakeholders and a forum to raise concerns around identified risks for further discussion and potential escalation, where necessary.

Heads of Service and Senior Managers

This group are responsible for ensuring policies, procedures, and processes within their area are adhered to and kept under constant review. They are responsible for ensuring their staff complete the mandatory online e-learning modules, including the fraud, bribery, and corruption module. They are accountable for the FRA for their area, ensure staff understand the risks, and how they will be mitigated and monitored.

Where fraud, bribery, or corruption is suspected the Heads of Service are responsible for ensuring the NHSBSA LFP Team are notified. Where it is a high value and / or fraud that could result in reputational damage they must keep the relevant LT member, and where appropriate commissioning policy colleagues up to date on the NHSBSA proposed response to mitigating the fraud risk(s). The Head of Service will support their team to

work with the NHSBSA LFP Team to explore controls to reduce or eradicate the risk, ensuring these controls are tested to measure the benefit.

Information Security Assurance Group

This group is designed to ensure that information security risks, both financial and reputational, relating to NHSBSA assets (projects, deliverables etc.) are identified and effectively addressed through the implementation of applicable information security controls and formal acceptance of the risks by senior management. This involves working with project leads, delivery managers and other business stakeholders, as well as input and opinion from subject matter experts in Cyber Security, Business Continuity, Information Governance, Information Security Management and the NHSBSA LFP Team. Risks identified by the NHSBSA LFP team are also raised at this group, where appropriate. This open approach to sharing risks that put the NHSBSA at risk, especially where the NHSBSA LFP team are unable to directly mitigate the risk, allows for discussion with colleagues who may be able to identify and implement additional controls to reduce the risk of fraud continuing.

All NHSBSA employees, agency, and contract staff

All NHSBSA employees, agency and contract staff are required to comply with this policy and response plan, complete the mandatory fraud, bribery, and corruption eLearning module within one month of joining then complete a refresher every three years. All NHSBSA employees, agency and contract staff must act with propriety in the handling of public funds, be alert to incidents that could indicate, fraud, bribery, or corruption and report any concerns or suspicions to lcfs@nhsbsa.nhs.uk or via Freedom to Speak Up (Section 8 of this document).

External Stakeholders

The NHSBSA also work closely and collaborate with several external stakeholders to ensure there is a joined-up approach to tackling bribery, fraud and corruption. We work with other organisations to share best practice, quality assure policies and processes for both proactive and reactive work, share relevant intelligence on emerging and developing risks identified across the sector. The main stakeholders are as follows:

Public Sector Fraud Authority (PSFA)

PSFA work with departments and public bodies, including NHSBSA to understand and reduce the impact of fraud. NHSBSA provides quarterly submissions and updates to PSFA in relation to:

- demonstrating progress against the NHSBSA annual action plan and outcome-based metrics
- the NHSBSA EFRA to show the overall picture of fraud risks across the NHSBSA
- Consolidated Data Request (CDR) which is a report of all fraud and error detected, recovered and prevented within the NHSBSA

PSFA provide feedback for improvements as well as assurance on these areas of work.

Department of Health and Social Care Counter Fraud Board (DHSC CFB)

The DHSC CFB brings together key partners across the NHS ensuring pace and co-ordination in delivery of the counter fraud agenda. They ensure a collaborative approach to drive forward the DHSC Counter Fraud Strategy. DHSC CFB is made up of senior representatives from NHSE, NHSBSA, NHSCFA, UKHSA and PSFA, and chaired by the DHSC Finance Capital Director. Each of these representatives has accountability for counter fraud activity and authority to make decisions where appropriate on behalf of their organisations.

Department of Health and Social Care Anti-Fraud Unit (DHSC AFU)

NHSBSA are commissioned by DHSC to deliver services on their behalf. We work closely with the DHSC AFU to ensure we have a joined-up approach to mitigating fraud, bribery, and corruption risks. An FRA is produced for each service they commission and shared with them for their consideration and where risks are transferred from the NHSBSA to DHSC, they are made aware at the earliest opportunity. We also share copies of the EFRA, annual action plan and outcome-based metrics as well as the CDR that are submitted to PSFA.

NHS Counter Fraud Authority (NHSCFA)

The NHSCFA is a special health authority tasked to lead the fight against fraud, bribery, and corruption in the NHS. NHSCFA are responsible for all policy and operational matters relating to the prevention, detection and investigation of fraud, bribery, and corruption in the NHS. They are responsible for conducting an annual strategic intelligence assessment (SIA) to estimate fraud losses, identify possible threats, vulnerabilities, and facilitators, and evaluate the risk of fraud to the NHS.

They are responsible for producing and monitoring the NHS Counter Fraud Action Plan which all Health ALBs feed into including NHSBSA. We also contribute to the EFRA for the health family which is NHSCFA are also responsible for collating and monitoring.

8. The Reporting Process

All NHSBSA employees, agency, and contract staff have a duty to report instances where they witness others failing to demonstrate the expected levels of integrity in their working life. This will include bribery, fraud, corruption or bringing the NHSBSA, the NHS or wider public service into disrepute.

All suspicions of non-compliance with the Bribery Act 2010 should be reported either internally via the NHSBSA Freedom to Speak Up (Whistleblowing) Policy or the NHSBSA LFP Team generic mailbox lcfs@nhsbsa.nhs.uk. Staff can also report externally via NHSCFA by calling the fraud reporting hotline on 08000 284060 or using the online [Report NHS Fraud | Home | NHSCFA](#)

Full details on reporting fraud, bribery, and corruption can be found in appendix 1.

9. The response plan

Activities to tackle fraud, bribery, and corruption are completed by the NHSBSA LFP Team as detailed in the NHSBSA Annual Workplan and the NHSBSA Fraud and Loss Strategy 2024-2027 which was published in March 2024. All Annual Workplan activities are directly

linked to one of the counter fraud strategic goals within the NHSBSA Fraud and Loss Strategy 2024-2027.

Achieving the NHSBSA counter fraud strategic goals are underpinned by the following principles:

- **Identify** - Controls to mitigate or eradicate fraud, bribery, corruption, and loss risks are created and implemented to prevent and detect fraud.
- **Action** - Ensure fraud prevention is embedded, and detection controls are monitored, where the controls are not having the desired effect, be brave and change. Use the data effectively through data science (e.g. Machine learning or AI) and expert interpretation from SMEs and FSs.
- **Monitor and Measure:** Measure and report on the benefit of controls and hold to account those who are intentionally dishonest to ensure we recover public money.

Strategic Goals

NHSCFA Strategy 2023-2026 identifies four fraud focused pillars:

1. **Understand** how fraud, bribery, and corruption affect the NHS.
2. **Prevent** future losses from occurring by ensuring the NHS is equipped to take proactive action.
3. **Respond** to fraud when we know it has occurred.
4. **Assure** key partners, stakeholders and the public that the overall response to fraud across the NHS is robust.

Reports of fraud, bribery, and corruption

All reports of fraud, bribery, and corruption received by the NHSBSA are triaged and assessed against the acceptance criteria as detailed in the internal procedural document 'Intelligence Handling, Referral and Investigation Process' by a senior member of the NHSBSA LFP Team. All accepted reports are recorded on the NHSCFA case management system CLUE and are investigated in accordance with:

- the NHSBSA internal process document 'Intelligence Handling Referral and Investigation Process'
- NHSCFA Counter Fraud Manual
- guidance from PSFA
- Police and Criminal Evidence Act (PACE) 1984
- Criminal Procedure and Investigations Act (CPIA) 1996 Code of Practice
- Attorney General's Guidance on Disclosure
- NHSBSA Prosecution Policy

In some instances where an allegation does not meet the acceptance criteria, the source of the allegation may be directed to report to [Action Fraud](#).

Investigations are carried out by trained investigators and regular reviews of investigations are undertaken by a FS or LFS. These reviews ensure that the investigations are being progressed in accordance with the above legislation and guidance. As well as regular reviews, investigations are also reviewed at specific points such as initial investigation plan, before and after an interview under caution, before submission to CPS and on closure.

Due to the sensitive nature of an ongoing investigation, the detail of the investigation can only be accessed by members of the LFP team. Updates are only provided to the source of the allegation, any witnesses, the head of service and relevant FS at key times. The source and FS are advised that an allegation has been accepted and then on closure which is also advised to any witnesses and the head of service. Witnesses are advised of other key times such as interview under caution and submission to CPS.

Where required, NHSBSA can access additional specialist trained resources within NHSCFA such as financial investigators and forensic computing specialists to assist with more complex investigations.

NHSBSA seek advice from PSFA and other members of the DHSC CFB when dealing with highly complex, novel and sensitive fraud cases, or cases that carry a high potential for reputational damage to the NHSBSA or wider NHS.

Certain investigations may also require the assistance of local police.

Where intelligence or evidence would indicate that there is an associated fraud within another organisation, a joint investigation will be considered. Relevant intelligence will be shared as appropriate, and decisions will be made on a case-by-case basis. Previous joint investigations have been undertaken with colleagues in DHSC AFU, HM Passport Office and DWP.

Notification and escalation of fraud incidents to board level

The NHSBSA CFM is responsible for notifying the LT and the relevant Head of Service of fraud, bribery, and corruption with a high potential fraud value (over £50k) or where there is potential for significant reputational damage. These will be escalated by the NHSBSA CFM within two working days following the notification of the allegation and a briefing will be produced and shared within five working days. This information will also be reported to NHSBSA ARC.

The briefing will be shared with the commissioning organisation's fraud function and NHSBSA Head of Communications and Marketing so they are aware should any media or external enquiries be received and they can liaise with LFP team on what response can be issued.

In the absence of the NHSBSA CFM the LFS Reactive will complete the notification.

The investigation will be progressed by a member of the LFP team however, due to it being a live investigation, updates will only be provided at key stages, such as after arrests and interviews, if a file is being submitted to the Crown Prosecution Service or is closed.

10. Assurance Process

This policy and response plan will be reviewed at least every 12 months by the NHSBSA CFM, LFSs and FSs. If a significant incident occurs which would trigger an immediate review of this policy, a further review will be undertaken, as required.

The revised policy and response plan is approved by NHSBSA Leadership Team and the ARC.

It will also be submitted to the National Joint Committee via the Executive Director of Corporate Services for their consideration and approval when major changes are made to the policy.

The NHSBSA CFM will report to the ARC providing, at minimum, an annual report on the number of referrals received relating to reports of fraud, bribery, and corruption as well as proactive work undertaken.

All reports of suspected fraud, bribery, and corruption will be recorded by the NHSBSA LFP Team on the NHSCFA Case Management System CLUE. NHSCFA are the third party that quality assures all NHSBSA investigations. NHSBSA submit files to the Crown Prosecution Service (CPS) via NHSCFA for them to quality check. Periodically NHSCFA email the NHSBSA CFM a list of referrals recorded on their case management system and no action has taken place. The NHSBSA CFM will refer this list to the LFS Reactive to action this with the relevant investigating officers.

On closure of an investigation, a closing report is submitted to the relevant Head of Service. This will include recommendations where system weaknesses or lack of fraud controls has contributed to the fraud occurring. The relevant FS is copied into this report and will work with the service area to review processes and update the FRA, where appropriate.

Case studies and information relating to successful outcomes of investigations are shared internally with NHSBSA staff on My Hub as well as in fraud, bribery, and corruption awareness presentations.

Review of recommendations and lessons learned are undertaken in a weekly workshop attended by the NHSBSA CFM, LFSs, FSs and Fraud, Error and Loss Compliance Officer. Where outcomes require changes to processes or FRA's are required, these are implemented accordingly.

The NHSBSA CFM will provide quarterly updates to the Chief Financial Officer on the volume of referrals received, closed and progress made by the NHSBSA LFP Team in relation to both proactive and reactive work.

This policy and response plan will be disseminated to all NHSBSA employees, agency and contract staff via My Hub and Viva Engage, and on the NHSBSA website.

All NHSBSA employees, agency and contract staff including temporary staff will undertake the NHSBSA Fraud and Bribery eLearning module as part of mandatory training. This is a requirement when staff first commence post and refresher is mandatory every three years, completion rates are monitored every six months by the NHSBSA LFP Team.

To maintain staff awareness frequent articles will feature on the Bribery Section of My Hub and LFP Team Viva Engage community. In addition, part of the fraud awareness presentations delivered by the NHSBSA LFP team across the business will include reference to fraud, bribery, and corruption to ensure staff are aware of the policy and understand they have a responsibility to report any concerns. As part of International Fraud Awareness week, we will raise awareness around the consequences of bribery and how we, as an organisation prevent and deter.

Appendix 1

Internal and external reporting methods

Internal reporting: To report suspected bribery fraud and / or corruption internally to the NHSBSA LFP Team the following reporting methods are available:

- Email: lcfs@nhsbsa.nhs.uk
- Post: FAO: Counter Fraud Manager, NHSBSA, Stella House, Goldcrest Way, Newburn Riverside Business Park, Newcastle upon Tyne, NE15 8NY.

You can speak to a member of the NHSBSA LFP Team informally and in confidence.

If staff want to raise the matter via the NHSBSA Freedom to Speak Up Policy (Whistleblowing) Policy, there are a range of options available on My Hub.

If your concern relates to a member of the NHSBSA LFP Team please contact the Chief Financial Officer, details as follows:

- Post: NHSBSA, Stella House, First Floor, Goldcrest Way, Newburn Riverside Business Park, Newcastle upon Tyne, NE15 8NY.

External reporting

To report suspected fraud bribery and / or corruption externally the following reporting methods are available via the NHS Counter Fraud Authority:

- Free phone telephone: 0800 028 4060
- Online: [Report NHS fraud](#)