

# Welcome and induction pack

For accredited counter fraud specialists  
and associated roles

April 2017

## Contents

<b>About this induction pack</b> .....	4
<b>Introduction to NHS Protect</b> .....	5
Creation of the NHS Counter Fraud Authority .....	5
NHS Protect agreements with stakeholders .....	5
<b>Legal context of anti-crime work</b> .....	6
Secretary of State Directions to NHS bodies .....	6
The Health and Social Care Act 2012 .....	7
NHS Standard Contract.....	7
<b>NHS Protect standards</b> .....	7
Quality assurance process .....	8
<b>Accreditation training</b> .....	8
Accessing restricted information.....	8
<b>Overview of the nomination process</b> .....	9
NHS.net email.....	10
The six principles of good practice .....	10
<b>Roles and responsibilities</b> .....	10
Role and responsibilities of the Local Counter Fraud Specialist .....	10
Role and responsibilities of the Director of Finance .....	11
Appointing and managing the LCFS.....	11
Chair of audit/audit committee.....	12
<b>What happens next...</b> .....	12
<b>Appendix A – Standards of Business Conduct</b> .....	13

Version	Date	Summary
1	April 2017	n/a

## About this induction pack

Welcome to NHS Protect.

This is a welcome and induction pack to assist you in understanding your new anti-crime role and introduce you to the remit and work of NHS Protect.

It is for you if you are:

- new to the role of Local Counter Fraud Specialist (LCFS) or Director of Finance (DoF)
- new to the NHS if you already hold a relevant accreditation from a recognised training provider but have worked in another field
- returning from a long period of absence or requiring information about refreshing your skills or continuing professional development (CPD)

It may be that not all the information contained within this pack is relevant to you; however everything that you need to understand about your new role is contained in this document with further information available [on NHS Protect's website](#).

The information contained within this pack is designed to make you aware of, and point you to, the policies, procedures and documentation which may be relevant to you as one of the aforementioned roles or in an associated role such as chair of audit committee.

Any comments about the content should be emailed to [generalenquiries@nhsprotect.gsi.gov.uk](mailto:generalenquiries@nhsprotect.gsi.gov.uk)

## Introduction to NHS Protect

NHS Protect leads on work to protect NHS staff and resources from crime. We deliver anti-crime work that cannot be carried out by NHS health bodies regionally or in isolation. We use intelligence to identify serious and complex economic crime, reduce the impact of crime and drive improvements in anti-crime work.

Local NHS organisations are primarily accountable for dealing with crime risks in the NHS. A network of Local Counter Fraud Specialists (LCFSs) takes forward anti-fraud, bribery and corruption work for providers of NHS services and NHS commissioners. LCFSs are typically accountable to the organisation's Director of Finance. More details on these roles are provided below.

NHS Protect is the operating name of the NHS Counter Fraud and Security Management Service. We are part of the NHS Business Services Authority (NHSBSA) and work to a memorandum of understanding with the NHSBSA and the Department of Health (DH) for our work. The DH Anti Fraud Unit (DH AFU) is the departmental sponsor for NHS Protect.

Our remit covers England and Wales for economic crime, and only England for all other issues. In Wales we provide NHS anti-fraud services to the Welsh Assembly Government under section 83 of the Government of Wales Act 2006.

### Creation of the NHS Counter Fraud Authority

Work is under way to create a new special health authority dedicated to tackling fraud, bribery and corruption within the health service.

The NHS Counter Fraud Authority (NHSCFA) will begin in shadow form from April 2017 and will be established as an independent special health authority from July 2017.

The new organisation will be created using the existing professional resources and staff from NHS Protect.

The NHSCFA will provide a clear focus for both the prevention and investigation of fraud across the health service and will work with NHS England and NHS Improvement to properly uncover fraud and tackle it effectively.

The NHSCFA will not have a remit for security management work. NHS Protect's security management functions are currently being decommissioned as part of the transition leading to the creation of the NHSCFA.

### NHS Protect agreements with stakeholders

NHS Protect is committed to working with a range of other organisations to identify and tackle crime across the NHS. Our relationship with key stakeholder partners is often supported by formal memorandums of understanding (MoUs) and information sharing agreements, which are important in promoting joint working and good data protection practice in information sharing. Listed below are a number of our key stakeholders with which there are current agreements in place, please note this list is not exhaustive:

- UK Border Agency

- Care Quality Commission
- UK Anti-Doping
- Health and Safety Executive
- Crown Prosecution Service
- National Police Chiefs' Council

There is a service level statement in place between NHS England and NHS Protect setting out the way in which NHS Protect will interact with health bodies and the level of service which will be provided.

You can view the full range of agreements currently in force on [NHS Protect's website](#).

## **Legal context of anti-crime work**

Historically, NHS bodies were required to put in place arrangements to counter fraud under Secretary of State Directions. Provisions introduced under the Health and Social Care Act 2012 mean that such arrangements are now set out in the NHS Standard Contract. The commissioning contract and its clauses apply to all providers. Service Condition 24.2 of the NHS Standard Contract requires those providers which are licensed by Monitor and NHS trusts, to take the necessary action to meet the anti-crime standards set by NHS Protect. Standards are also issued in conjunction with NHS England for commissioners.

The anti-fraud, bribery and corruption remit is delivered locally through an extensive network of professionally trained and accredited LCFSSs. These specialists are put in place by health bodies to undertake this work. NHS Protect produces a range of guidance and information to accredited specialists and their organisations on tackling fraud, bribery and corruption ; this is available on NHS Protect's website and extranet.

## **Secretary of State Directions to NHS bodies**

Secretary of State Directions to NHS bodies on counter fraud measures are still applicable. With the enactment of the Health and Social Act, from 1 April 2013, Secretary of State Directions to NHS bodies on counter fraud and security management measures still apply to NHS trusts and NHS special health authorities.

For NHS trusts, the counter fraud and security management requirements of the NHS Standard Contract effectively sit alongside the provisions in the Secretary of State Directions.

The directions to identify functions and responsibilities in relation to counter fraud and security management measures in the NHS and how they are allocated are available on [NHS Protect's website](#).

## **The Health and Social Care Act 2012**

Under the Health and Social Care Act 2012, strategic health authorities and primary care trusts were abolished from 1 April 2013, with some of their functions transferred to NHS England (legally known as the NHS Commissioning Board) and clinical commissioning groups (CCGs).

NHS England guidance states that CCGs should have clear anti-crime (counter fraud) arrangements and access to appropriate accredited anti-crime specialist support in the form of Local Counter Specialists.

## **NHS Standard Contract**

Most NHS healthcare services are commissioned under the NHS Standard Contract. Service conditions within the standard contract require providers to put in place and maintain appropriate counter fraud arrangements.

NHS Protect has produced standards for fraud, bribery and corruption.

For more information see the [Anti-crime standards pages](#) on NHS Protect's website.

## **NHS Protect standards**

NHS Protect is committed to raising the standards of anti-crime arrangements within the NHS. Standards have been developed to support NHS providers and commissioners implement appropriate measures to counter fraud, bribery and corruption.

The standards have been developed to support NHS providers in ensuring they have appropriate arrangements in place to protect NHS resources from fraud, bribery and corruption. They will also help providers to identify areas requiring improvement and develop their own plans to address them. It is the responsibility of the health body/provider to ensure the required standards are met. The work undertaken by the LCFS on behalf of the health body will be measured by NHS Protect against these standards.

We are also committed to ensuring that effective anti-fraud, bribery and corruption arrangements continue to be in place in the NHS at a time of significant change. We are working with NHS England to continually review the way crime affecting NHS commissioning should be tackled.

NHS Protect standards cover the following areas:

- Strategic Governance
- Inform and Involve
- Prevent and Deter
- Hold to Account

For more information see the [Anti-crime standards pages](#) on NHS Protect's website.

## Quality assurance process

NHS Protect provides national leadership for all NHS anti-crime work and is responsible for strategic and operational matters in relation to anti-fraud, bribery and corruption work in the NHS. A key part of this function and one of NHS Protect's strategic aims is to quality assure the delivery of anti-fraud work with stakeholders to ensure that the highest standards are consistently applied.

The aim of our quality assurance programme is to ensure that quality requirements are fulfilled. This will be done through systematic measurement, comparison with standards, monitoring of processes and a continuous loop of feedback.

The NHS Protect quality assurance programme comprises two main processes: assurance and assessment.

The assurance process includes an annual self review against the standards, which is conducted by organisations and submitted to NHS Protect. The assessment process is conducted by NHS Protect's Quality and Compliance team in partnership with the organisation.

The assessment process is a means of evaluating an organisation's effectiveness in dealing with the risks it faces. The process is designed to be flexible, transparent and responsive to locally and nationally identified fraud, bribery and corruption risks. Where required, we shall provide organisations with recommendations to support them in mitigating their risks.

Further information about the quality assurance process may be obtained by viewing the standards corresponding to your organisation on the [Anti-crime standards pages](#) of NHS Protect's website.

## Accreditation training

NHS Protect's standards for providers and standards for commissioners set out the requirement for health bodies to employ or contract an accredited person (or persons) to undertake the full range of anti-fraud, bribery and corruption work. The training is mandatory in order to perform each role.

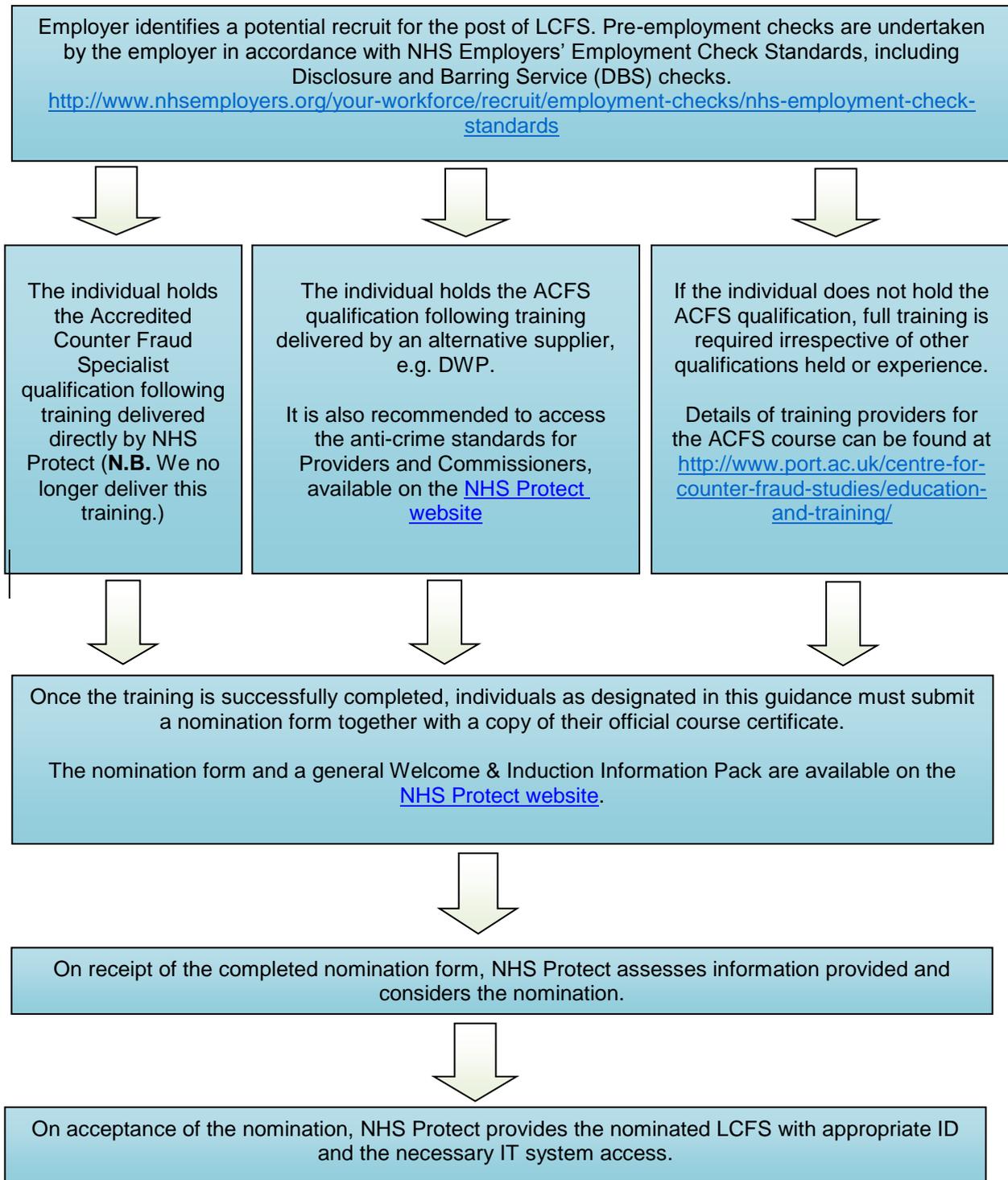
Training is no longer directly available from NHS Protect. A list of providers of accredited counter fraud specialist training can be found on the [Counter Fraud Professional Accreditation Board \(CFPAB\) website](#).

Further information about continuing professional development (CPD) can also be found on the CFPAB website.

## Accessing restricted information

Once nominated as an LCFS, further guidance and information will be available on [NHS Protect's extranet](#).

## Overview of the nomination process



NHS Protect does not employ LCFSs.

Health bodies/providers in England currently engage LCFS provision through direct NHS employment, service level agreements and contracted services.

Health bodies in Wales currently engage LCFS provision through direct NHS employment, service level agreements and contracted services.

To provide counter fraud and security management services, accredited LCFSs must be nominated by the health body/provider using the Nomination Process. Guidance on the nomination process is available on [NHS Protect's website](#).

### **NHS.net email**

All nominated LCFSs require an NHS.net email address for communications in line with Government Security Classifications. NHS.net email can be obtained through the nominating health body. Further information is available from NHS Digital at <http://systems.digital.nhs.uk/nhsmail/using>

### **The six principles of good practice**

To take up the LCFS role, individuals must successfully complete the relevant accredited training course as provided by a recognised training provider.

The CFPAB requires all accredited counter fraud specialists to adhere to six principles of good practice. These are:

- Professionalism
- Objectivity
- Fairness
- Expertise
- Propriety
- Vision

### **Roles and responsibilities**

The key parts of the anti-crime structure are those carrying out the anti-crime roles locally. A number of roles are important to take forward NHS Protect's counter fraud, bribery and corruption remit. The key roles in this area are the:

- LCFS
- DoF or member of the executive board/equivalent body responsible for counter fraud, bribery and corruption at strategic level
- Chair of audit/audit committee

All LCFSs are expected to adhere to the 'Health Service Guidance (93) 5 Standards of Business Conduct for NHS staff'; further information is available in Appendix A.

### **Role and responsibilities of the Local Counter Fraud Specialist**

Following successful completion of the professional accredited training, only then can the nominated individual undertake the role and functions of the LCFS, which means they are

responsible for the delivery of counter fraud work within their nominated health body. The LCFS role incorporates a range of activities to ensure that the health body is meeting the NHS Protect anti-crime Standards for Providers/Commissioners.

The LCFS is required to work and act in accordance with NHS Protect published guidance and documentation.

Key LCFS functions include (this list is not exhaustive):

- Develop and maintain close working relationships with relevant stakeholders, including NHS Protect.
- Create an anti-crime culture through fraud awareness communications and delivery across the health body, professional groups and stakeholders.
- Deliver professional, comprehensive and ethical counter fraud provision.
- Produce counter fraud workplans and annual reports in line with NHS Protect Standards.
- Conduct investigations into referrals of fraud, bribery and corruption (having regard to the NHS Protect published case acceptance criteria).
- Apply a range of sanctions against those responsible for committing fraud against NHS resources.

## **Role and responsibilities of the Director of Finance**

The DoF (or member of the executive board/equivalent body responsible for counter fraud, bribery and corruption at strategic level) is responsible, along with the chief executive, for monitoring and ensuring that appropriate anti-fraud, bribery and corruption measures are implemented. These measures should be managed and reviewed at board level, or equivalent, within the organisation and this should be documented. Where additional or corrective measures are necessary, the DoF should ensure that appropriate action is taken.

The DoF should communicate and support the anti-fraud, bribery and corruption needs of the NHS health body at the executive board level, ensure compliance with legal and regulatory requirements and any NHS Protect guidance, and appoint and manage the LCFS. This includes overseeing the work of the LCFS through submitted workplans and annual reports, and for informing third parties such as the external auditors of any significant cases of fraud when appropriate.

## **Appointing and managing the LCFS**

The DoF has overall responsibility for the appointment and subsequent nomination of an LCFS to their health body. They should also support and monitor the LCFS on an ongoing basis to ensure that anti-fraud, bribery and corruption work is being carried out to the highest standard.

An LCFS may be employed internally, shared with neighbouring NHS health bodies or employed through an external contractor, such as an audit consortium.

It is important that LCFS provision is proportionate to the organisation's risks, needs and requirements. The DoF should consider local issues such as the number of staff employed by the trust, the type of trust (for example, acute or mental health), the geographical spread of the trust, and budgetary restraints.

In order to carry out their duties, the LCFS needs to be able to:

- work in sufficient security and privacy to protect the confidentiality of their work
- attend the NHS body's audit committee meetings where required

The LCFS also needs access to all external and internal contacts necessary to perform their function, as well as the cooperation of other staff (subject to contractual or legal constraints) in disclosing information for the investigation, prevention or detection of fraud, bribery and corruption.

### **Chair of audit/audit committee**

The audit committee will oversee and monitor, along with the respective executive board member (with responsibility for counter fraud and security management work), all anti-crime work conducted on behalf of the organisation. It will review the LCFS's final reports and consider any necessary improvements to controls.

Following an assessment as part of NHS Protect's quality assurance programme, the audit committee will be provided with a copy of the final report highlighting recommendations on mitigating any anti-crime risks.

### **What happens next...**

If you are an LCFS, once your nomination has been processed you will be granted access to NHS Protect's extranet, where further information and guidance is available. It is recommended that you familiarise yourself with the respective anti-crime standards that are applicable for your organisation and the range of available information and guidance material on NHS Protect's website.

NHS Protect wishes you every success in your new role and for the contribution that you will be making to fighting crime committed against the NHS.

## Appendix A – Standards of Business Conduct

All LCFSs are expected to adhere to the 'Health Service Guidance (93) 5 Standards of Business Conduct for NHS staff'. These require NHS staff to:

- ensure that the interests of patients remain paramount at all times
- be impartial and honest in the conduct of their official business
- use public funds entrusted to them to the best advantage of the service, always ensuring value for money
- ensure that they do not abuse their official position for personal gain or to benefit their families or friends; and
- ensure that they do not seek to gain personal advantage or further private business or other interests in the course of their official duties.

It is for these reasons that LCFSs have an ongoing duty to notify their employer of any interests which might impinge, or might reasonably appear to others to impinge, upon their employment in their role. In cases of doubt advice should be sought from NHS Protect.

Examples of conflict of interests include:

- Any controlling or significant financial interests which an employee, or a close relative or associate of theirs, holds in a business (including a private company, public sector organisation, other NHS employer and/or voluntary organisation) which may compete for an NHS contract to supply goods or services to the employer.
- Any additional outside employment, including representation in the role of LCFS at another NHS body.
- Trusteeships, directorships or memberships of any organisations which may have dealings with the NHS, contractors with the NHS, or the Department of Health or may be reasonably considered by others to constitute a special interest (e.g. Freemasons, Rotary Club, Inner Wheel, Mechanics).
- Any interests, activities, events or circumstances which may reasonably be considered to affect the employee's performance or their public duties.

The organisation for which the LCFS is nominated has an ongoing responsibility to ensure that the person remains suitable to be nominated.

The Bribery Act 2010 modernises the law on bribery. It came into force on 1 July 2011. Very generally, bribery is defined as giving someone a financial or other advantage to encourage that person to perform their functions or activities improperly or to reward that person for having already done so.

Under the Bribery Act 2010, any money, gift or consideration received by an employee in public service from a person or organisation holding or seeking to obtain a contract will be deemed to have been received corruptly unless the employee proves to the contrary.

It is for that reason that no LCFS should accept any gift without seeking authorisation from their employer.

Beyond these generally applicable standards, the LCFSs are in an especially sensitive and responsible position. They are entrusted with the important task of reducing fraud and tackling security related issues within the NHS so that more NHS resources can be used to provide better patient care and ensure the best protection for patients, staff, professionals and property. They often have privileged access to confidential information involving very large sums of public and private money and to personal and private data.

LCFSs are charged with creating an anti-fraud and pro security culture, deterring and preventing fraud and security breaches, detecting and professionally investigating crime, working towards the imposition of effective sanctions and creating effective measures to recoup monies lost. It is not enough merely to ensure that propriety is maintained, it is essential that there is never any perception of impropriety. It is for this reason that particularly stringent checks are in place in relation to LCFSs.

Any case of actual suspicion of fraud by a person employed as an LCFS will be treated in the same way as cases of suspicion elsewhere in the NHS, with appropriate enquiries and, if necessary, disciplinary procedures being undertaken. This procedure is designed to ensure that those circumstances do not arise.