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Anti-fraud, Bribery and Corruption Policy

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NAME OF RESPONSIBLE COMMITTEE / INDIVIDUAL:	Matthew Metcalfe, Director of Finance and Strategic Development	
NAME OF ORIGINATOR / AUTHOR:	Andy Knight, Local Counter Fraud Specialist	
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1. Introduction

1.1 General

- 1.1.1 Dorset HealthCare University Foundation Trust (Dorset HealthCare) is committed to maintaining honesty and integrity in all of its activities. It is also committed to the prevention of fraud, bribery and corruption and to the rigorous investigation of any such allegations. Dorset HealthCare wholly endorses the NHS Counter Fraud Authority strategy towards the elimination of fraud affecting the National Health Service (NHS).
- 1.1.2 Dorset HealthCare wishes to encourage anyone that has reasonable suspicions of fraud to report them. All employees, patients and contractors can be confident that they will not suffer in any way as a result of reporting reasonably held suspicions of fraud. For these purposes *reasonably held suspicions* shall mean any suspicions other than those which are raised maliciously and found to be groundless.
- 1.1.3 Dorset HealthCare has approved a Freedom to Speak Up Whistleblowing Policy in accordance with the Public Interest Disclosure Act 1998. Under the terms of this Act, a member of staff is protected if they act reasonably and responsibly.

1.2 Aims and objectives

- 1.2.1 This anti-fraud, bribery and corruption policy is intended to ensure that employees, patients and contractors of Dorset HealthCare are aware of the correct reporting requirements and of the action the organisation will take to counter fraud, bribery and corruption. The policy is also intended to ensure that fraud, bribery and corruption is recognised and reported by employees, patients and contractors who are aware of their responsibility to safeguard NHS funds.

1.3 Scope

- 1.3.1 This document is intended to provide direction and help, to those officers and directors of Dorset HealthCare who become aware of fraud, bribery or corruption against the NHS. It is not intended to provide direction on the prevention of fraud; that is the role of the organisations nominated Local Counter Fraud Specialist (LCFS).
- 1.3.2 The Policy will apply to all employees, contractors, consultants and other internal and external stakeholders engaged by Dorset HealthCare.

2. Definitions

2.1 NHS Counter Fraud Authority (NHSCFA)

2.1.1 Crime against the NHS can seriously undermine its effectiveness and ability to deliver healthcare services. The NHSCFA has responsibility for all policy and operational matters relating to the prevention, detection and investigation of fraud, bribery and corruption in the NHS. It also has a responsibility to ensure that all counter fraud work is conducted in accordance with NHSCFA guidance and other relevant legislation and regulations.

2.2 Fraud

2.2.1 Fraud is defined as: A dishonest act (or a failure to act) made with the intention of making a financial gain or causing a financial loss (or risk of loss).

2.2.2 The dishonest act does not need to be successful for fraud to be committed, as long as the intention exists. Neither does the financial gain have to be personal, but can be for the benefit of another. Where the intent is to cause a loss to the organisation, no gain by the perpetrator needs to be shown.

2.2.3 Petty theft, without the distortion of financial statements or other records, will normally be dealt with by the Local Security Management Specialist (LSMS) and reported to the Police. However, where an employee abuses their position to misappropriate cash or other income this may be considered to be fraud and dealt with accordingly.

2.2.4 The Fraud Act 2006 is the relevant legislation. The Act includes eight separate offences; the most relevant of which are listed below:

- **Fraud by false representation** - is defined by Section 2 of the Act. A person may be guilty of an offence if he dishonestly makes a false representation, and intends, by making the representation to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, an employee claiming travel expenses for journeys they have not done.
- **Fraud by failing to disclose information** - is defined by Section 3 of the Act. A person may be guilty of an offence if he dishonestly fails to disclose to another person information which he is under a legal duty to disclose, and intends, by failing to disclose the information to make a gain for himself or another, or to cause loss to

another or to expose another to a risk of loss. For example, failing to disclose criminal convictions when asked to do so as part of the recruitment process, in order to obtain employment.

- **Fraud by abuse of position** - is defined by Section 4 of the Act. A person may be guilty of an offence if he occupies a position in which he is expected to safeguard, or not to act against, the financial interests of another person, dishonestly abuses that position, and intends, by means of the abuse of that position to make a gain for himself or another, or to cause loss to another or to expose another to a risk of loss. For example, a Nurse using prescriptions to obtain drugs for personal use.
- **Possession of articles for use fraud(s)** - is defined by Section 6 of the Act. A person may be guilty of an offence if he has in his possession or under his control any article for use in the course of or in connection with any fraud. For example, using a false passport or other documentation to secure employment.
- **Making or supplying articles for use in fraud(s)** - is defined by Section 7 of the Act. A person may be guilty of an offence if he makes, adapts, supplies or offers to supply any article knowing that it is designed or adapted for use in the course of or in connection with fraud, or intending it to be used to commit, or assist in the commission of, fraud. For example, producing a prescription in a patient's name with the intention of obtaining drugs and retaining them for personal use, or supplying them to another.

2.3 Bribery and corruption

2.3.1 The Bribery Act 2010 is the relevant legislation. The Act creates a number of criminal offences, the most relevant of which are listed below:

2.3.2 **Offence of bribing another person** - is defined by section 1 of the Act. It is also an offence for a person to offer, promise, or give a bribe to another person as an inducement for them improperly performing any duty. For example, this may include providing excess hospitality to a potential purchaser or commissioner of the organisation's services.

2.3.3 **Offence of being bribed** - is defined section 2 of the Act. It is an offence for a person to request, or agree to receive, or accept a financial or other advantage as an inducement to, or as a reward for, the improper performance of any function or activity. For example, where an employee who sells confidential information to a third party or provides preferential treatment to suppliers or patients for a fee.

- 2.3.4 **Failure of a commercial organisation to prevent bribery** – is defined within section 7 of the Act. If an individual bribes another person to obtain or retain business, or an advantage in the conduct of business for an organisation, then that organisation may also be guilty of an offence. For example if an organisation fails to put adequate controls in place to prevent bribery and an employee offers a bribe to a commissioning CCG to secure a contract.
- 2.3.5 A *financial or other advantage* has a wide meaning and could include holidays or entertainment, contracts, non-monetary gifts and offers of employment etc.
- 2.3.6 A *relevant function or activity* covers *any function of a public nature; any activity connected with a business, trade or profession; any activity performed in the course of a person's employment; or any activity performed by or on behalf of a body of persons whether corporate or unincorporated.*
- 2.3.7 The conditions attached are that the person performing the function should be expected to perform it in good faith or with impartiality, or that an element of trust attaches to that person's role.
- 2.3.8 Activity may be considered to be *improperly* performed when there is a breach of good faith, impartiality or a position of trust.
- 2.3.9 The standard in deciding what would be expected is defined by what a *reasonable person* in the UK might expect of a person in such a position.
- 2.3.10 Any concerns about bribery should be referred to the Local Counter Fraud Specialist.

3. Roles and Responsibilities

3.1 Chief Executive Officer (CEO)

- 3.1.1 The CEO has the overall responsibility for funds entrusted to the organisation as the Accountable Officer. They must ensure adequate policies and procedures are in place to protect the organisation and the public funds entrusted to it from incidents of fraud, bribery and corruption.

3.2 The Audit Committee

3.2.1 The Audit Committee should take overall responsibility for the effective design, implementation and operation of the anti-fraud, bribery and corruption initiatives. The Committee should ensure that senior management is aware of and accepts the initiatives, and that they are embedded in the corporate culture.

3.3 Director of Finance and Strategic Development

3.3.1 The delivery of all anti-fraud, bribery and corruption work within the organisation is overseen by the Director of Finance and Strategic Development. They shall be responsible for operational matters such as authorising the investigation of alleged fraud, interviews under caution and the recovery or write-off of any sums lost to fraud.

3.3.2 The Director of Finance and Strategic Development will inform the Local Counter Fraud Specialist of any incidents where fraud, bribery or corruption is suspected within the organisation. Depending on the outcome of initial investigations, the Director of Finance and Strategic Development shall inform and consult appropriate senior management in cases where there may be a material loss due to fraud, bribery or corruption, or where the incident may lead to adverse publicity.

3.3.3 A decision on whether to refer the matter wholly to the Police (or another agency), or to seek Police assistance, or to commence criminal proceedings, will be made with the agreement of the Director of Finance and Strategic Development, the Local Counter Fraud Specialist and where applicable the NHSCFA.

3.4 Internal and external audit

3.4.1 The role of internal and external audit includes reviewing controls and systems and ensuring compliance with financial instructions. They have a duty to pass on any suspicions of fraud, bribery or corruption to the Local Counter Fraud Specialist.

3.5 Human Resources (HR)

3.5.1 Human Resources staff play a vital part in identifying and reporting incidents of suspected fraud, bribery and corruption.

3.5.2 Criminal and disciplinary processes have different purposes, different standards of proof, and are governed by different rules. As such, it would not be appropriate for one investigation to cover both criminal and disciplinary matters. Criminal investigations will take primacy over disciplinary investigations. Where the commissioning manager or other

person deviates from this process, the LCFS will refer the matter to the Chair of the Audit Committee for review. However, a disciplinary enquiry can proceed in parallel with a criminal investigation as long as there is close co-operation between Human Resources staff; the organisation's investigating officer and the Local Counter Fraud Specialist.

- 3.5.3 A criminal investigation seeks to establish the facts in relation to a suspected criminal offence. Investigators are bound by rules of evidence, including the Criminal Procedure and Investigations Act 1996 (CPIA) and the Police and Criminal Evidence Act 1984 (PACE) and Codes of Practice. **Guilt in a criminal prosecution must be proven 'beyond reasonable doubt'.**
- 3.5.4 The purpose of a disciplinary investigation is to establish the facts of the case, i.e. to ascertain whether there is a reasonable belief that the alleged misconduct has occurred; whether the employee has any explanation for the alleged misconduct; and whether there are any special circumstances to be taken into account. Disciplinary investigations and ensuing proceedings must adhere to the Advisory, Conciliation and Arbitration Services (ACAS) Code of Practice on Disciplinary and Grievance Procedures, as well as any local HR policies. **The standard of proof in disciplinary matters has a lower threshold than for criminal cases; disciplinary matters must be proven 'on the balance of probabilities'.**
- 3.5.5 The NHSCFA approach to pursuing sanctions in cases of fraud, bribery and corruption affecting NHS resources is that the full range of possible sanctions – including criminal, civil, disciplinary and regulatory – should be considered at the earliest opportunity, and any or all of these may be pursued where and when appropriate. The consistent use of an appropriate combination of investigative processes in each case demonstrates an organisation's commitment to take fraud, bribery and corruption seriously and ultimately contributes to the deterrence and prevention of such actions.
- 3.5.6 It is not unusual for the criminal and disciplinary processes to overlap. For example, an employee who is being investigated for suspected fraud may also be the subject of disciplinary proceedings by their employer arising out of the same set of circumstances.
- 3.5.7 In the case of parallel criminal and disciplinary processes, these should always be conducted separately, but there needs to be close liaison between the Local Counter Fraud Specialist and the HR functions since one process may impact on the other. This may include the sharing of information where it is lawful to do so.

3.5.8 A joint working protocol has been established and agreed between the Local Counter Fraud Specialist and the Director of Human Resources. The protocol indicates the responsibilities of specific individuals; the frequency of liaison meetings; and specific interaction points during parallel investigations. Support and oversight is provided by the Director of Finance and Strategic Development and senior management as required to ensure this is implemented effectively.

3.6 Local Counter Fraud Specialist (LCFS)

3.6.1 The Local Counter Fraud Specialist is responsible for implementing actions to tackle fraud, corruption and bribery affecting NHS resources managed by Dorset HealthCare, in accordance with the organisations contractual obligations and with national NHSCFA standards. The LCFS reports to the Director of Finance and Strategic Development and at least annually to the Audit Committee.

3.6.2 The LCFS will work with key colleagues and stakeholders to promote anti-fraud work and effectively respond to system weaknesses and investigate allegations of fraud and corruption.

3.6.3 The LCFS will ensure that the NHSCFA case management system is used to record all allegations of suspected fraud, bribery and corruption, to provide information to inform national intelligence, and to support and progress the investigation of fraud, bribery and corruption allegations, in line with NHSCFA guidance.

3.6.4 The LCFS will follow NHSCFA guidance, as set out in the NHS anti-fraud manual and current case acceptance criteria, in supporting the investigation of all allegations of fraud, bribery and corruption. The LCFS will ensure that relevant legislation, such as the Police and Criminal Evidence Act 1984 and the Criminal Procedure and Investigations Act 1996, is adhered to.

3.6.5 The LCFS will complete witness statements that satisfy the NHSCFA training model and best practice, and follow national guidelines approved by the Crown Prosecution Service.

3.6.6 The LCFS will ensure that interviews under caution are conducted following the NHSCFA training model, and in line with the National Occupational Standards (CJ201.2) and the Police and Criminal Evidence Act 1984.

3.6.7 The LCFS has developed and will deliver a comprehensive risk based Counter Fraud Work Plan in compliance with all relevant NHSCFA standards for fraud, bribery and corruption. The work plan will address the following four areas:

Strategic Governance – Work relating to the organisation’s strategic governance arrangements. The aim is to ensure that anti-crime measures are embedded at all levels across the organisation.

Inform and Involve – Work in relation to raising awareness of fraud, bribery and corruption risks against the NHS and working with staff, stakeholders and the public to highlight the risks and consequences of such crime.

Prevent and Deter – Work to discouraging individuals who may be tempted to commit crimes against the NHS and ensuring opportunities for crime to occur are minimised.

Hold to Account - Work to detect and investigate crime, prosecuting those who have committed crimes and seeking redress.

3.7 The NHS Counter Fraud Authority (NHSCFA)

3.7.1 All fraud allegations entered on FIRST by the LCFS will be controlled by Information Management Officers (IMOs) who will be overseen by a Senior Information Management Officer (SIMO). Their role is to process the allegations on the case management system and consider any data requests received from LCFSs. They are not able to offer any advice on how to progress an investigation; this is the responsibility of the LCFS and their managers.

3.7.2 The NHSCFA will act as a gateway for initial file submissions to the Crown Prosecution Service (CPS) in relation to LCFS investigations. The National Investigation Service within the NHSCFA will review case material to ensure that the submission to CPS meets the requirements of the National File Standard and will ensure the safe and secure transmission of material for CPS consideration. Thereafter, it is expected that CPS will liaise directly with the LCFS, and not via the NHSCFA.

3.8 Managers

3.8.1 Any instances of actual or suspected fraud, bribery or corruption brought to the attention of a manager should be immediately reported to the Local Counter Fraud Specialist or via the national Fraud and Corruption Reporting Line (FCRL) operated by Crimestoppers.

3.8.2 The NHS FCRL can be contacted on 0800 028 40 60, or alternatively, fraud can be reported confidentially online at www.reportnhsfraud.nhs.uk. These reporting methods

are not intended to replace existing local reporting lines, rather to provide a way for those who feel unable to report concerns internally.

- 3.8.3 It is important that managers should not investigate any suspected financial crimes themselves.
- 3.8.4 Managers will promptly provide support and information to the LCFS to enable them to carry out their duties. In particular, managers and their staff will co-operate with, and participate in, activities at the request of the NHSCFA and the LCFS upon approval by the Director of Finance and Strategic Development, including the implementation of national anti-fraud, bribery and corruption measures. Managers will also ensure that employees are informed of guidance provided in intelligence alerts, bulletins and local warnings issued by the NHSCFA and/or the LCFS.
- 3.8.5 Managers will proactively identify and report any system weaknesses that could facilitate fraud, bribery or corruption.

3.9 All employees

- 3.9.1 All employees are required to comply with the policies and procedures of Dorset HealthCare and apply best practice in order to prevent fraud, bribery and corruption. All employees have a responsibility to protect NHS resources from such crimes.
- 3.9.2 Employees who are involved in, or manage, internal control systems should ensure that they receive adequate training and support in order to carry out their responsibilities.
- 3.9.3 If an employee suspects that fraud, bribery or corruption has taken place, they should ensure it is reported to the LCFS or via one of the other reporting methods explained section 4 and Annex A of this policy.
- 3.9.4 Under no circumstances should a member of staff speak or write (including email) to representatives of the press, TV, radio, or to another third party, about suspected fraud, bribery or corruption. The established lines of reporting concerns to the Director of Finance and Strategic Development, the LCFS or via the Fraud and Corruption Reporting Line should be used and staff can be assured that all information is treated in the strictest confidence and that all allegations will be investigated.

3.10 Information management and technology

- 3.10.1 The Computer Misuse Act became law in 1990; the Act identifies three specific offences:

1. Unauthorised access to computer material.
2. Unauthorised access with intent to commit or facilitate commission of further offences.
3. Unauthorised acts with intent to impair, or with recklessness as to impairing, operation of computer, etc.

3.10.2 Unauthorised access to computer material could include using another person's identifier (ID) and password without proper authority in order to use data or a program, or to alter, delete, copy or move a program or data.

3.10.3 Unauthorised access with intent to commit or facilitate the commission of further offences, could include gaining unauthorised access to financial or administrative records with intent.

3.10.4 Unauthorised acts with intent to impair, or with recklessness as to impairing the operation of computer, could include: destroying another user's files; modifying system files; creation of a virus; changing clinical records; and deliberately generating information to cause a complete system malfunction.

3.10.5 The fraudulent use of information technology should be reported by the Head of Information Security (or equivalent) to the Local Counter Fraud Specialist.

3.10.6 See the IT and Information Security Policy for more information.

4. The Response Plan

4.1 Reporting fraud, bribery or corruption

4.1.1 Any employee of Dorset HealthCare discovering or suspecting fraud, bribery or corruption should report the matter immediately to the Local Counter Fraud Specialist or the Director of Finance and Strategic Development.

4.1.2 The Local Counter Fraud Specialist for Dorset HealthCare is Andy Knight, they can be contacted by telephone, 07920 295097 or by email andyknight@nhs.net. All information received is treated in the strictest confidence.

- 4.1.3 If an employee is concerned that the LCFS or the Director of Finance and Strategic Development themselves may be implicated in suspected fraud, bribery or corruption, the matter should be reported to the Chief Executive Officer.
- 4.1.4 Suspicions of fraud, bribery and corruption can also be reported using the NHS Fraud and Corruption Reporting Line, operated by Crimestoppers, on 0800 028 40 60; or by filling in an online form at www.reportnhsfraud.nhs.uk, as an alternative to internal reporting procedures.
- 4.1.5 An Aide Memoir has been included in this policy (Annex A), to provide a reminder of the key contacts and a checklist of the actions to follow if fraud, bribery and/or corruption, is discovered or suspected. Managers are encouraged to bring this to the attention of staff.
- 4.1.6 All reports of fraud, bribery and corruption, however they are reported, will be treated in the strictest confidence, will be taken seriously and thoroughly investigated in accordance with NHSCFA guidance and relevant legislation.

4.2 Sanctions and Redress

- 4.2.1 Where an objective investigation has found that fraud, bribery or corruption is present, Dorset HealthCare will consider applying all appropriate sanctions. It is important that sanctions are applied in a consistent manner according to the seriousness of the crime involved. There are different types of sanctions, including disciplinary, professional, civil and criminal sanctions. These are not mutually exclusive.
- **Civil** – The use of civil sanctions enables the organisation to seek the recovery of money and/or assets which have been obtained fraudulently, costs and interest can also be recovered.
 - **Criminal** – Following an investigation and where there is evidence of fraud, bribery or corruption, the LCFS will work in partnership with the Director of Finance and Strategic Development, the NHSCFA, the police and/or the Crown Prosecution Service to bring a case to court against an alleged offender. The maximum penalty for offences under Sections 1 of the Fraud Act 2006 is 12 months' imprisonment on summary conviction and 10 years' imprisonment on conviction on indictment.

- **Disciplinary** – Disciplinary procedures will be initiated in accordance with the Dorset HealthCare Disciplinary and Capability Policy where there is sufficient evidence to suspect that an employee has been involved in a fraudulent act.
- **Professional/Regulatory Sanctions** - Where there is sufficient evidence to suspect that fraud has been committed by a member of a professional body, i.e. a Nurse or Doctor; following consultation with the LCFS, Dorset HealthCare will refer the matter to the relevant professional body. Through their statutory committees, professional bodies have powers to place conditions on, suspend, or remove the registration of professionals who are judged to be guilty of serious professional misconduct or who have been convicted in the British Isles of a criminal offence.

4.2.2 Dorset HealthCare will seek financial redress whenever possible to recover losses to fraud, bribery and corruption, in accordance with the organisations Overpayment Recovery Policy. This redress can take the form of confiscation and compensation orders, a civil order for repayment, or a local agreement between the organisation and the offender to repay monies lost.

4.2.3 All appropriate factors will be considered when deciding upon applicable sanctions. This includes, but is not limited to, the size of the loss, cost of pursuing sanctions, and the deterrent value. All decisions will be recorded on the case management system, indicating the reasons behind any course of action taken.

5. Review

5.1 Monitoring and auditing of policy effectiveness

5.1.1 Dorset HealthCare and the LCFS will monitor the effectiveness of this policy to ensure that it remains appropriate and continues to provide clear direction and help to those officers and directors of Dorset HealthCare who become aware of fraud, bribery or corruption.

5.1.2 Where deficiencies are identified as a result of monitoring, the LCFS will make appropriate recommendations for improvement. These will be considered by the Director of Finance and Strategic Development and the Audit Committee.

5.2 Dissemination of the policy

5.2.1 This policy should be accessible to all Dorset HealthCare staff and all employees should be reminded of the existence and scope of this policy at least annually.

5.3 Review of the policy

5.3.1 This policy will be reviewed in response to new guidance, legislation or regulation, or after two years.

6. Associated Internal Documents

- Framework for Liaison with Human Resources
- Disciplinary and Capability Policy
- Overpayment Recovery Policy
- Freedom to Speak Up Whistleblowing Policy
- IT and Information Security Policy

7. Associated External Documents

- NHSCFA - *Tackling crime against the NHS: A strategic approach*
- NHSCFA - *Parallel criminal and disciplinary investigations policy statement*
- NHSCFA - *Parallel criminal and disciplinary investigations guidance for Local Counter Fraud Specialists*
- NHSCFA - *Bribery Act Guidance*
- NHS Standard Contract – *Service Condition 24*
- NHS Standard Contract – *General Condition 27*
- Committee on Standards in Public Life - *Ethical Standards for Providers of Public Services*

ANNEX A

Fraud, Bribery and Corruption Aide Memoir

FRAUD is the intent to obtain a financial gain from, or cause a financial loss to, a person or party through false representation, failing to disclose information or abuse of position.

BRIBERY & CORRUPTION is the deliberate use of payment or benefit-in-kind to influence an individual to use their position in an unreasonable way to help gain advantage for another.

DO

- **Note your concerns**
Record details such as names, dates, times, details of conversations and possible witnesses. Time, date and sign your notes.
- **Retain evidence that is at risk**
Retain any evidence that may be destroyed, or make a note and advise your Local Counter Fraud Specialist.
- **Report your suspicions**
Confidentiality will be respected – delays may lead to further financial loss.

DO NOT

- **Confront the suspect or convey concerns to anyone other than those authorised,**
Never attempt to question a suspect yourself; this could alert a fraudster or lead to an innocent person being unjustly accused.
- **Try to investigate the matter yourself, or contact the police directly**
Never attempt to gather evidence yourself unless it is about to be destroyed; gathering evidence must be done in line with legal requirements in order for it to be useful. Your LCFS can conduct an investigation in accordance with legislation.
- **Be afraid of raising your concerns**
The Public Interest Disclosure Act 1998 protects employees who have reasonable concerns. You will not suffer discrimination or victimisation by following the correct procedures.
- **Do nothing!**

If you suspect that fraud against the NHS has taken place, you must report it immediately, by:

- directly contacting the Local Counter Fraud Specialist, or
- using the free-phone NHS Fraud and Corruption Reporting Line, or website, or
- by contacting the Director of Finance and Strategic Development.

Do you have concerns about a fraud, bribery or corruption?

NHS Fraud, Bribery and Corruption Reporting Line: **0800 028 40 60**
All calls will be treated in confidence and investigated by professionally trained staff.

Online: www.reportnhsfraud.nhs.uk

Your Local Counter Fraud Specialist is Andy Knight,
who can be contacted by telephoning 07920 295097, or emailing andyknight@nhs.net
For further information please visit www.securityandfraudexperts.org.uk