Belfast Health and Social Care Trust
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Reference No: TP 63/10

Title:	**Fraud Policy Statement**		
Policy Author(s)	[redacted], Fraud Liaison Officer Tel : [redacted]@belfasttrust.hscni.net		
Responsible Director:	[redacted], Director of Finance		
Policy Type: (tick as appropriate)	*Directorate Specific ☐	Clinical Trust Wide ☐	Non Clinical Trust Wide ☒
If policy type is confirmed as ***Directorate Specific** please list the name and date of the local Committee/Group that policy was **approved**			
Audit Committee		13 October 2016	

Approval process:	Trust Policy Committee Executive Team Meeting	**Approval date:**	1 February 2017 8 February 2017
Operational Date:	February 2017	**Review Date:**	February 2022

Version No.	2	**Supercedes**	V1 – November 2010 – November 2015
Key Words:	Fraud		
Links to other policies	BHSCT Fraud Response Plan (2017) TP 62/10		

Date	Version	Policy Author	Comments
October 2015	1.1	[redacted]	Updated
3 October 2016	1.2	[redacted]	Review and update
February 2017	1.2	[redacted]	Finalised
May 2021	2		Uploaded to intranet.

1.0 INTRODUCTION / SUMMARY OF POLICY

See Appendix 1.

2.0 SCOPE OF THE POLICY

See Appendix 1.

3.0 ROLES AND RESPONSIBILITIES

See Appendix 1.

4.0 CONSULTATION

See Appendix 1.

5.0 POLICY STATEMENT/IMPLEMENTATION

See Appendix 1.

6.0 MONITORING AND REVIEW

See Appendix 1.

7.0 EVIDENCE BASE/REFERENCES

See Appendix 1.

8.0 APPENDICES

Appendix 1 Fraud Policy Statement.

9.0 NURSING AND MIDWIFERY STUDENTS

Nursing and/or Midwifery students on pre-registration education programmes, approved under relevant 2018/2019 NMC education standards, must be given the opportunity to have experience of and become proficient in the **Fraud Policy Statement policy**, where required by the student's programme. This experience must be under the appropriate supervision of a registered nurse, registered midwife or registered health and social care professional who is

adequately experienced in this skill and who will be accountable for determining the required level of direct or indirect supervision and responsible for signing/countersigning documentation.

Direct and indirect supervision

- Direct supervision means that the supervising registered nurse, registered midwife or registered health and social care professional is actually present and works alongside the student when they are undertaking a delegated role or activity.
- Indirect supervision occurs when the registered nurse, registered midwife or registered health and social care professional does not directly observe the student undertaking a delegated role or activity. (NIPEC, 2020)

This policy has been developed in accordance with the above statement.

Wording within this section must not be removed.

10.0 EQUALITY IMPACT ASSESSMENT

The Trust has legal responsibilities in terms of equality (Section 75 of the Northern Ireland Act 1998), disability discrimination and human rights to undertake a screening exercise to ascertain if the policy has potential impact and if it must be subject to a full impact assessment. The process is the responsibility of the Policy Author. The template to be complete by the Policy Author and guidance are available on the Trust Intranet or via this **link**.

All policies (apart from those regionally adopted) must complete the template and submit with a copy of the policy to the Equality & Planning Team via the generic email address equalityscreenings@belfasttrust.hscni.net

The outcome of the equality screening for the policy is:

Major impact	☐
Minor impact	☐
No impact	☒

Wording within this section must not be removed

11.0 DATA PROTECTION IMPACT ASSESSMENT

New activities involving collecting and using personal data can result in privacy risks. In line with requirements of the General Data Protection Regulation and the Data Protection Act 2018 the Trust considers the impact on the privacy of individuals and ways to militate against any risks. A screening exercise must be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this **link**.

If a full impact assessment is required, the Policy Author must carry out the process. They can contact colleagues in the Information Governance Department for advice on Tel: 028 950 46576

Completed Data Protection Impact Assessment forms must be returned to the Equality & Planning Team via the generic email address equalityscreenings@belfasttrust.hscni.net

The outcome of the Data Protection Impact Assessment screening for the policy is:

Not necessary – no personal data involved ☒
A full data protection impact assessment is required ☐
A full data protection impact assessment is not required ☐

Wording within this section must not be removed.

12.0 RURAL NEEDS IMPACT ASSESSMENT

The Trust has a legal responsibility to have due regard to rural needs when developing, adopting, implementing or revising policies, and when designing and delivering public services. A screening exercise should be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this link.

If a full assessment is required the Policy Author must complete the shortened rural needs assessment template on the Trust Intranet. Each Directorate has a Rural Needs Champion who can provide support/assistance.

Completed Rural Impact Assessment forms must be returned to the Equality & Planning Team via the generic email address equalityscreenings@belfasttrust.hscni.net

Wording within this section must not be removed.

13.0 REASONABLE ADJUSTMENT ASSESSMENT

Under the Disability Discrimination Act 1995 (as amended) (DDA), all staff/ service providers have a duty to make Reasonable Adjustments to any barrier a person with a disability faces when accessing or using goods, facilities and services, in order to remove or reduce such barriers. E.g. physical access, communicating with people who have a disability, producing information such as leaflets or letters in accessible alternative formats. E.g. easy read, braille, or audio or being flexible regarding appointments. This is a non-delegable duty.

The policy has been developed in accordance with the Trust's legal duty to consider the need to make reasonable adjustments under the DDA.

Wording within this section must not be removed.

SIGNATORIES
(Policy – Guidance should be signed off by the author of the policy and the identified responsible director).

[redacted]

1 February 2017

_____ **Date:** _____
Policy Author

[redacted]

1 February 2017

_____ **Date:** _____
Director

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Appendix 1

FRAUD POLICY STATEMENT

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INTRODUCTION

1. One of the fundamental objectives of the Trust is to ensure the proper use of the public funds with which it has been entrusted. In pursuit of this objective, the Trust promotes an anti-fraud culture which requires all staff to act with honesty and integrity at all times and to take appropriate steps to safeguard resources.

2. The majority of people who work in the Trust and throughout the HPSS are honest and professional and they rightly consider fraud to be wholly unacceptable. Nevertheless, fraud is an ever-present threat and must be a concern for all members of staff. Fraud may occur internally or externally and may be perpetrated by staff, external consultants, suppliers, patients/clients, contractors or development partners, individually or in collusion with others.

3. The purpose of this document is to set out the Trust's position on fraud and thereby set the context for the ongoing efforts to reduce fraud to the lowest possible level.

DEFINITION

4. The Fraud Act 2006 was introduced on 15th January 2007. Under the Act fraud is now a specific offence in law. The Fraud Act 2006 supplements the Theft Act (Northern Ireland) 1969 and the Theft (Northern Ireland) Order 1978. Fraud is used to describe acts such as deception, bribery, forgery, extortion, corruption, theft, conspiracy, embezzlement, misappropriation, false representation, concealment of material facts and collusion.

5. For practical purposes, fraud may be considered to be the use of deception with the intention of obtaining an advantage, avoiding an obligation or causing loss to

another party. The criminal act is the attempt to deceive and attempted fraud is therefore treated as seriously as accomplished fraud.

6. Computer fraud is where information technology equipment has been used to manipulate programs or data dishonestly or where an IT system was a material factor in the perpetration of a fraud. Further guidance on computer fraud is contained in the Trust's IT Policy.

TRUST POSITION ON FRAUD

7. The Trust Board is absolutely committed to maintaining an anti-fraud culture in the organization so that all staff who work in the Trust are aware of the risk of fraud, of what constitutes a fraud and the procedures for reporting it. The Trust adopts a zero-tolerance approach to fraud and will not accept any level of fraud within the organization. It is also Trust policy that there will be a thorough investigation of all allegations or suspicions of fraud and robust action will be taken where fraud is proven in line with the Trust's Fraud Response Plan.

8. The Trust Board wishes to encourage anyone having reasonable suspicions of fraud to report them. It is the policy of this Trust, which will be rigorously enforced, that no employee will 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 that are raised maliciously. Further guidance on the protection afforded to staff is contained in the Trust's policy on Whistle Blowing.

9. The Trust Board will, however, take a serious view of allegations against staff that are malicious in nature and anyone making such an allegation may be subject to disciplinary action.

10. After proper investigation of any allegation or suspicion of fraud, in line with the Trust's Fraud Response Plan, the Trust will consider the most appropriate action or actions to take. Where fraud involving a Trust employee is proven, the Trust will instigate disciplinary action against the employee which may result in dismissal.

11. Where there is strong evidence that fraud has occurred, whether involving an employee or an external party, the Director of Finance will report the matter to the PSNI with a view to pursuing a criminal prosecution. The Trust will also seek to recover all losses resulting from the fraud, if necessary through civil court proceedings.

12. The Trust has adopted the HPSS Counter Fraud Strategy as the basis for its anti-fraud activities. The key elements of this Strategy are as follows:

- The creation of an anti-fraud culture
- Maximum deterrence of fraud
- Successful prevention of fraud
- Prompt detection of fraud
- Professional investigation of detected fraud
- Effective sanctions, including appropriate legal action against anyone found guilty of committing fraud
- Effective methods for seeking recovery of money defrauded or imposition of other legal remedies.

FRAUD PREVENTION AND DETECTION

13. The Trust wholeheartedly supports the role of the DHSS&PS Counter Fraud Policy Unit and will ensure that appropriate fraud prevention and detection measures are implemented in accordance with the Unit's guidance.

14. The Trust has implemented a range of policies and procedures that are designed to ensure probity, business integrity and minimise the likelihood and impact of incidents of fraud arising.

15. The Trust has also put in place a robust Internal Audit service that is actively involved in the review of the adequacy and effectiveness of control systems thereby further deterring the commissioning of fraud.

AVENUES FOR REPORTING

16. The Trust has available a number of avenues by which staff can raise suspicions of fraud. These are detailed in the Trust's Fraud Response Plan and Whistle Blowing Policy. Concerns should be raised initially with the appropriate line manager. However, staff can raise their concerns directly with their Director, the Director of Finance or the Chief Internal Auditor if they so wish. Staff should also be aware that DHSS&PS has initiated a fraud reporting hotline that can be used to highlight concerns in confidence and anonymously if preferred. The telephone number for the Hotline is **08000 963396.**

CONCLUSION

17. Whilst the individual circumstances surrounding each fraud will vary, the Trust takes all cases very seriously and adopts a zero-tolerance approach. All reported suspicions will be fully investigated and robust action will be taken where fraud can be proven.