



Cwm Taf Morgannwg University Health Board

Audit & Risk Committee – 09 June 2021

Counter Fraud Progress Report

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1. INTRODUCTION

The purpose of this report is to update the Audit Committee on key areas of work undertaken by the Health Board Local Counter Fraud Specialists (LCFS) since the last meeting.

2. BACKGROUND

The following sets out activity under the Key Principles specified within the Fraud, Bribery and Corruption Standards for NHS Bodies (Wales).

3. RESOURCE UTILISATION

AREA OF WORK	Planned Days	Days to Date
Strategic Governance		
Ensuring that anti-crime measures are embedded at all levels across the organisation	66	7
Inform and Involve		
Identifying the risks and consequences of crime against the NHS, and raising awareness of these risks amongst NHS staff, stakeholders, and the public.	135	3
Prevent and Deter		
Discouraging those who may want to commit crimes against the NHS and ensure that such opportunities are minimised.	135	3
Hold to Account		
Detecting and investigating crime, prosecuting those who have committed crimes and seeking redress as a result.	255	57
TOTAL	591	70

A new member of staff has joined the team as a Local Counter Fraud Specialist commencing on 24 May 2021. This brings the Team to full resource in line with workplan and SLA provisions. The new member of staff already holds Counter Fraud Specialist Accreditation and has a wealth of experience in the role having performed similar actions for the Local Authority for a number of years.

The resource utilisation presented reflects the use of available resource. The total planned days for the year was reduced from the SLA provision of 616 days on the basis of the ongoing recruitment process. The use of resourced days will increase relatively to the Team now being fully staffed throughout the remainder of the year.

4. STRATEGIC GOVERNANCE

Following discussion the Director of Corporate Governance has agreed to be nominated as the Health Board's Fraud Champion. The view of NHS CFA is that the role of champion would be to support and challenge the organisation in relation to its commitment to fraud work. The role supplements the arrangements in place and sits well with the progression of counter fraud activity towards a proactive risk based approach.

The Health Board's self-review against Functional Standards has been submitted to NHS CFA. A part year review will be undertaken to enable scrutiny of progress against areas that were identified as requiring improvement.

5. INFORM AND INVOLVE

Analysis of the page views of the Counter Fraud SharePoint site has returned disappointing results. In the period 01 Jan 2021 - 11 May 2021 there were only 42 unique page views across the site with an average of 48 seconds spent on pages. An action to review the communications strategy was included in the Counter Fraud Work Plan 2021/22. This work will be undertaken and the SharePoint site used as a base to drive staff to for information of counter fraud services. Further analysis reports will be gathered throughout the year to monitor impact of this work and presented to Audit Committee for review.

A schedule of counter fraud awareness sessions has been developed and publicised within the Health Board. To supplement general awareness sessions targeted risk based training will be arranged for key staff groups such as Finance, Workforce & Organisational Development (WOD), Payroll and Recruitment, something which had been delayed throughout last year due to the shift of business focus.

Learning and Development colleagues have advised on revised process for consideration of mandatory learning. Proposals for Counter Fraud mandatory learning for sections of staff most at risk of exposure to fraud will be submitted as part of this process.

The Counter Fraud Team have disseminated 4 awareness messages, alerts and bulletins to staff in this year. They cover targeted communications to local Departments and Teams around specific fraud risks to their area to all staff communications via SharePoint.

6. PREVENT AND DETER

Work on the Health Board's NFI matched datasets is progressing. Where issues are identified these will be included in future update reports. There is opportunity to utilise the data within the Health Board as part of a proactive exercise around declaration of interests compliance within the context of the Standards of Behaviour Policy. The NFI supplies matched data around Payroll to Companies House and Creditors to identify where employees have interests that should potentially be declared under that Policy. Proactively seeking assurance around compliance with this area delivers good

evidence of the Health Board taking action to prevent potential for bribery and corruption which is included in the Functional Standards and a requirement for defence against s.7 Bribery Act liability. Discussions will be held with the Corporate Governance Team to establish an approach to this potential exercise.

7. HOLD TO ACCOUNT

The status of the LCFS investigative caseload is summarised in Appendix 1. A summary of basic investigation Key Performance Indicator (KPI) data is presented at outset of appendix.

Case information presented is split by between those cases which are currently open and under active investigation by the LCFS; contained in the Open Cases table.

The Pending Cases table reflects those cases where active investigation by the LCFS has concluded, however the case must remain open due to other outstanding actions from third parties such as (but not limited to) disciplinary, professional body enquiries, financial recoveries.

A table of Closed Cases is also presented to review outcomes of investigations.