

Sanctions and Redress Policy

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Name of responsible Committee and date approved or recommended to Governing Body:	Audit Committee
Date approved by ICB:	
Next review date:	April 2028
Expiry date:	October 2028
Name of author and title:	Predecessor CCG Finance Team
Name of reviewer and title:	Liz Flavell-Smith, ICB Director of Finance
Department:	Finance

Date	Version	Changes made to the previous version	Consulting and endorsing stakeholders, Committees / meetings / Forums etc.
July 2020	1.0	New policy	Merger Policy Advisory Group
May 2021	1.1	As recommended by predecessor's CCG Merger Policy Advisory Group. Minor changes regarding possible prosecution where there is evidence to support.	Richard Loydall, NHS Counter Fraud Specialist
Dec 2021	1.2	CCG replaced with ICB	
Jan 2025	1.3	The range of available sanctions identified	Liz Flavell-Smith, ICB Director of Finance

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1. Introduction

- 1.1 NHS Coventry and Warwickshire Integrated Care Group ('the ICB') is committed to safeguarding their funds, and the wider NHS resources, and will fully investigate any allegations of fraud, bribery or corruption, or wrongdoing committed against the ICB as set out in the ICB's Counter Fraud, Bribery and Corruption Policy.
- 1.2 The ICB has a zero tolerance to fraud, bribery and corruption and will ensure that the appropriate sanctions and redress are considered and applied in response to financial crime or similar wrongdoing committed against the ICB.

2. Purpose

- 2.1 This document sets out the ICB's policy for applying sanctions against individuals who have been identified as committing a financial crime or other wrongdoing against the ICB.
- 2.2 To ensure that any criminal investigation is conducted in such a way that it enables the widest range of sanctions to be available.
- 2.3 The range of available sanctions which may be pursued by the ICB, following approval of the Chief Finance Officer, includes:
 - Criminal prosecution (potentially resulting in fine, imprisonment, community penalty, confiscation and/or compensation order) or out-of-court disposal
 - Civil action, including action to preserve assets and recover losses
 - Disciplinary action by the employing body
 - Regulatory action by a relevant professional / regulatory body.
- 2.4 Each matter will be considered individually on its own facts and merits. However, applying a consistent and thorough approach in all cases will ensure that:
 - Investigations are undertaken in the most effective manner, including the gathering and assessment of all relevant material which may form evidence of fraud, bribery, corruption or related misconduct
 - The most appropriate sanction or combination of sanctions is sought where fraud, bribery, corruption or related misconduct is identified.
- 2.5 The ultimate aim of the policy is to protect the property and finances of the ICB, to ensure that the appropriate sanctions are applied and any monies lost are recovered.

3. Responsibilities

- 3.1 The ICB's Chief Finance Officer will authorise the sanction and financial recovery to be applied, following advice from the appropriate supporting function (Anti-Fraud Lead, Human Resources Lead or ICB Solicitor)
- 3.2 The ICB's Anti-Fraud Specialist will investigate any allegations of financial crime against the ICB, as per the ICB's Counter Fraud, Bribery and Corruption Policy. Matters may be transferred to the NHS Counter Fraud Authority's National Investigations Team, the police or other investigatory body as appropriate.
- 3.3 The ICB's Human Resource Lead will investigate any allegations of misconduct by ICB employees, as per the ICB's Disciplinary Policy.

4. Applying Sanctions

- 4.1 The outcome of any investigation may result in either criminal, disciplinary or professional / regulatory body sanction (or a combination) being applied. Deciding on which sanction(s) are applied will be dependent on the findings of the investigation undertaken and the extent of any losses to the ICB.

5. Criminal Sanctions

- 5.1 All criminal investigations will be conducted in line with the relevant criminal legislation, and advice from the Police and Crown Prosecution Service (CPS).
- 5.2 Where there is evidence of a criminal offence having been committed, the ICB's Counter Fraud Lead will, in conjunction with the ICB's Chief Finance Officer, make an assessment of the evidence available and the seriousness of the offence(s), and decide whether to report the matter to the Police for investigation and submission of the case to the CPS for a decision on whether a prosecution should take place.
- 5.3 The CPS will make charging decisions in respect of all cases referred to it in accordance with the Code for Crown Prosecutors.
- 5.4 The CPS will prosecute any matters on behalf of the ICB and seek the most appropriate sanction from the Courts.

6. Disciplinary Sanctions

- 6.1 All Disciplinary Investigations will be conducted in line with the ICB's Disciplinary Policy.
- 6.2 When disciplinary proceedings are brought against ICB employees the appointed Disciplinary

Panel will apply the appropriate sanctions as set out in Disciplinary Policy.

7. Regulatory / Professional Body Sanctions

- 7.1 When the subject(s) of any investigation (criminal or disciplinary) is a member of a regulatory or professional body, the ICB will consider if it is appropriate to also notify their regulatory / professional body of the matter.
- 7.2 When appropriate the ICB will provide the required information to support the regulatory / professional body so that they can conduct their own investigation. The ICB will adhere to data protection legislation when sharing information.
- 7.3 In addition, the ICB may also report any investigation / proceedings (criminal, civil or disciplinary) to the NHS England and Improvement concerning any doctor, dentist, pharmacist or optician, where it is necessary for the protection of a member of the public or is otherwise in the public interest.

8. Seeking Redress

- 8.1 In addition to any criminal and disciplinary sanctions applied, the ICB is committed to fully recovering any losses identified as a result of criminal activity or wrongdoing committed against it.

9. Criminal Redress

- 9.1 If, during an investigation, there is evidence that property is being accumulated as a result of fraud or similar criminal activity, the ICB will also consider applying for a Restraint Order under the Proceeds of Crime Act 2002, to secure this property prior to a final decision on prosecution.
- 9.2 Where a prosecution is being undertaken, an order for the recovery of identified losses and any related investigation cost will always be sought as part of the criminal prosecution process.
- 9.3 When necessary, following any successful prosecution the ICB will seek to obtain a Confiscation Order under the Proceeds of Crime Act 2002, for any property identified to have been obtained via criminal activity affecting the ICB.

10. Civil Redress

- 10.1 If a criminal case is not being pursued for whatever reason, or an order for recovery of losses is not made by a court following a criminal conviction, or if the ICB is not fully compensated following a criminal conviction, the ICB will seek to recover any outstanding losses through civil action wherever possible and appropriate. The ICB's Chief Finance Officer will make an assessment of the finding of the investigation and decide whether to undertake civil recovery proceedings.

- 10.2 Consideration will first be given as to the appropriateness of seeking voluntary repayment to recover the loss prior to formal legal proceedings being undertaken.
- 10.3 Where an ICB employee is involved, the ICB will consider the following options;
- Recovery via salary deductions until the debt is met
 - For employees who have been dismissed or have resigned, recovery via a deduction from any final salary payment due
 - When the employee or ex-employee is a member of the NHS Pension Scheme consideration will be given to obtaining recovery of losses via National Health Service Pension Scheme regulations that relate to the recovery of losses caused by a scheme member's fraudulent acts.
- 10.4 Before undertaking any of the voluntary recovery options above, the ICB will obtain a written agreement from the individual agreeing the terms of the recovery method and the period for the repayment to be made.
- 10.5 For external bodies or contractors, recovery should be affected by formal written agreement. An invoice will be issued and repayment plan agreed.
- 10.6 If formal recovery proceedings are deemed to be necessary, the following points will be considered before consulting the ICB's Solicitors:
- Value of provable loss.
 - The known value of any assets of the individual(s) or organisation(s) from which recovery would be sought, including any NHS pension scheme membership
 - The likelihood of successful recovery action
 - The likely costs of recovery action, especially if any claim is disputed by the subject(s) of the claim, and a civil action is necessary to obtain a court judgement against the relevant subject(s)
 - The deterrent effect of successful recovery actions.
- 10.7 The ICB will instruct its solicitors and seek to obtain recovery using the most appropriate route, as advised by its solicitors.

11. Related Documents

- 11.1 The following documents contain information that relates to this policy:
- Counter Fraud, Bribery and Corruption Policy
 - Disciplinary Policy
 - NHS Counter Fraud Authority (NHSCFA) "Applying appropriate sanctions consistently – Policy Statement"
 - NHSCFA Document "Parallel criminal and disciplinary investigations – Guidance for Local

Counter Fraud Specialists” Dissemination.

12. Dissemination

12.1 This policy will be disseminated by the following methods:

- Publication on the ICB website.

13. Review and Compliance Monitoring

13.1 The Audit Committee will require assurance annually on compliance with the policy as part of its assurance programme.

Appendix 1: Equality Impact Assessment



The following assessment screening tool will require judgement against all listed areas of risk in relation to quality. Each proposal will need to be assessed whether it will impact adversely on patients / staff / organisations.

Insert your assessment as positive (P), negative (N) or neutral (N/A) for each area.

Record your reasons for arriving at that conclusion in the comments column. If the assessment is negative, you must also calculate the score for the impact and likelihood and multiply the two to provide the overall risk score. Insert the total in the appropriate box.

Quality Impact Assessment

Scheme Title:	Sanctions and Redress Policy v1.3		
Project Lead:	Liz Flavell-Smith, ICB Director of Finance	Senior Responsible Officer:	Madi Parmar, Chief Finance Officer
		Quality Sign Off:	n/a – policy does not require quality review
Intended impact of scheme:	To provide a fair, equitable and transparent process for all policies of the NHS Coventry and Warwickshire Integrated Care Board (ICB). The ICB has a zero tolerance to fraud, bribery and corruption and will ensure that the appropriate sanctions and redress are considered and applied in response to financial crime or similar wrongdoing committed against the ICB.		
How will it be achieved:	Through the process detailed in this document.		

Name of person completing assessment:	Liz Flavell-Smith
Position:	ICB Director of Finance Governance

Date of Assessment:	28 November 2024
Quality Review by:	Matt Hopkins
Position:	Governance and Corporate Affairs Officer
Date of Review:	21 January 2025

High level Quality and Equality Questions

The risk rating is only to be done for the potential negative outcomes. We are looking to assess the likelihood of the negative outcome occurring and the level of negative impact. We are also seeking detail of mitigation actions that may help reduce this likelihood and potential impact.

AREA OF ASSESSMENT		OUTCOME ASSESSMENT (Please tick one)			Evidence/Comments for answers	Risk rating (For negative outcomes)			Mitigating actions
		Positive	Negative	Neutral		Risk impact (I)	Risk likelihood (L)	Risk Score (IxL)	
Duty of Quality Could the scheme impact positively or negatively on any of the following:	Effectiveness – clinical outcome			√					
	Patient experience			√					
	Patient safety			√					
	Parity of esteem			√					
	Safeguarding children or adults			√					
NHS Outcomes Framework Could the scheme impact positively or negatively on the	Enhancing quality of life			√					
	Ensuring people have a positive experience of care			√					

delivery of the five domains:									
	Preventing people from dying prematurely			√					
	Helping people recover from episodes of ill health or following injury			√					
	Treating and caring for people in a safe environment and protecting them from avoidable harm			√					
Patient services Could the proposal impact positively or negatively on any of the following:	A modern model of integrated care, with key focus on multiple long-term conditions and clinical risk factors			√					
	Access to the highest quality urgent and emergency care			√					
	Convenient access for everyone			√					
	Ensuring that citizens are fully included in all aspects of service design and change			√					
	Patient Choice			√					
	Patients are fully empowered in their own care			√					

	Wider primary care, provided at scale			√					
Access Could the proposal impact positively or negatively on any of the following:	Patient choice			√					
	Access			√					
	Integration			√					
Compliance with NHS Constitution	Quality of care and environment			√					
	Nationally approved treatment/drugs			√					
	Respect, consent and confidentiality			√					
	Informed choice and involvement			√					
	Complain and redress			√					

*Risk score definitions are provided in the next section.

Equality Impact Assessment

Project / Policy Details

What is the aim of the project / policy?

The ultimate aim of the policy is to protect the property and finances of the ICB, to ensure that the appropriate sanctions are applied and any monies lost are recovered.

The policy sets out the ICB's policy for applying sanctions against individuals who have been identified as committing a financial crime or other wrongdoing against the ICB. It also ensures that any criminal investigation is conducted in such a way that it enables the widest range of sanctions to be available.

Who will be affected by this work? e.g. staff, patients, service users, partner organisations etc.

Staff, patients, service users and partner organisations.

Is a full Equality Analysis Required for this project?

Yes ✓	Proceed to complete this form.	No	Explain why further equality analysis is not required.
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If no, explain below why further equality analysis is not required. For example, the decision concerned may not have been made by the ICB or it is very clear that it will not have any impact on patients or staff.

Equality Analysis Form

1. Evidence used

What evidence have you identified and considered? This can include national research, surveys, reports, NICE guidelines, focus groups, pilot activity evaluations, clinical experts or working groups, JSNA or other equality analyses.

- ICB Counter Fraud, Bribery and Corruption Policy
- ICB Disciplinary Policy
- NHS Counter Fraud Authority (NHSCFA) “Applying appropriate sanctions consistently – Policy Statement”
- NHSCFA Document “Parallel criminal and disciplinary investigations – Guidance for Local Counter Fraud Specialists” Dissemination.

2. Impact and Evidence:
Age: A person belonging to a particular age (e.g. 32 year olds) or a range of ages (e.g. 18-30 year olds)
N/A
Disability: A person has a disability if he/she has a physical, hearing, visual or mental impairment, which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities
N/A
Gender reassignment (including transgender): Where a person has proposed, started or completed a process to change his or her sex.
N/A
Marriage and civil partnership: A person who is married or in a civil partnership.
N/A
Pregnancy and maternity: A woman is protected against discrimination on the grounds of pregnancy and maternity. With regard to employment, the woman is protected during the period of her pregnancy and any statutory maternity leave to which she is entitled. Also, it is unlawful to discriminate against women breastfeeding in a public place.
N/A
Race: A group of people defined by their race, color, and nationality (including citizenship) ethnic or national origins.
N/A
Religion or belief: A group of people defined by their religious and philosophical beliefs including lack of belief (e.g. atheism). Generally, a belief should affect an individual's life choices or the way in which they live.
Sex: A man or a woman

N/A		
Sexual orientation: Whether a person feels generally attracted to people of the same gender, people of a different gender, or to more than one gender (whether someone is heterosexual, lesbian, gay or bisexual).		
N/A		
Carers: A person who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support		
N/A		
Other disadvantaged groups:		
N/A		
3. Human Rights		
FREDA Principles / Human Rights	Question	Response
Fairness – Fair and equal access to services	How will this respect a person's entitlement to access this service?	N/A
Respect – right to have private and family life respected	How will the person's right to respect for private and family life, confidentiality and consent be upheld?	N/A
Equality – right not to be discriminated against based on your protected characteristics	How will this process ensure that people are not discriminated against and have their needs met and identified?	N/A
Dignity – the right not to be treated in a degrading way	How will you ensure that individuals are not being treated in an inhuman or degrading way?	N/A
Autonomy – right to respect for private & family life; being able to make informed decisions and	How will individuals have the opportunity to be involved in discussions and decisions about	N/A

choices	their own healthcare?	
Right to Life	Will or could it affect someone's right to life? How?	N/A
Right to Liberty	Will or could someone be deprived of their liberty? How?	N/A

4. Engagement, Involvement and Consultation		
If relevant, please state what engagement activity has been undertaken and the date and with which protected groups:		
Engagement Activity	Protected Characteristic/ Group/ Community	Date
N/A	N/A	N/A
For each engagement activity, please state the key feedback and how this will shape policy / service decisions (E.g., patient told us So we will):		
N/A		

5. Mitigations and Changes
Please give an outline of what you are going to do, based on the gaps, challenges and opportunities you have identified in the summary of analysis section. This might include action(s) to mitigate against any actual or potential adverse impacts, reduce health inequalities, or promote social value. Identify the recommendations and any changes to the proposal arising from the equality analysis.
N/A

6. How will you measure how the proposal impacts health inequalities?
e.g. Patients with a learning disability were accessing cancer screening in substantially lower numbers than other patients. By revising the pathway, the ICB is able to show increased take up from this group, this is a positive impact on health inequalities.

You can also detail how and when the service will be monitored and what key equality performance indicators or reporting requirements will be included within the contract.

The Audit Committee will require assurance annually on compliance with the policy as part of its assurance programme.

7. Is further work required to complete this assessment?

Please state what work is required and to what section. e.g. additional consultation or engagement is required to fully understand the impact on a particular protected group (e.g. disability).

Work needed	Section	When	Dare completed
N/A	N/A	N/A	N/A

8. Sign off

The Equality Analysis will need to go through a process of **quality assurance** by a Senior Manager within the department responsible for the service concerned before being submitted to the Policy, Procedure and Strategy Assurance Group for approval. Committee approval of the policy / project can only be sought once approval has been received from the Policy, Procedure and Strategy Assurance Group.

Requirement	Name	Date
Senior Manager Sign off	Liz Flavell-Smith, ICB Director of Finance	21/01/2025
Which committee will be considering the findings and signing off the EA?	Audit Committee	March 2025
Approved by the Policy Procedure and Strategy Assurance Group.	Laura Whiteley	10/02/2025

Once complete, please send to the ICB's Governance Team