

Business Plan 2022-2023

March 2022

NHS fraud. Spot it. Report it. Together we stop it.



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Executive summary

This document sets out the NHS Counter Fraud Authority's business plan for the 2022-23 financial year. This is the last year covered by our 2020-2023 strategy.

The Chair's message and CEO's foreword set out the context and rationale for our approach to delivering our strategic objectives in 2022-23. The document then describes our business model and integrated approach to delivery, followed by an overview of our achievements and learnings from the previous reporting year (2021-22).

At the core of the document is a delivery plan which highlights our areas of focus for 2022-23 under each of our strategic objectives, along with key planned activities and metrics.

Our over-riding performance goal is our financial target of £400 million for the three-year period of our current strategy, a reduction in fraud losses across the NHS measured through a combination of prevention, detection and recovery. We will also assess our impact in terms of a reduction in the NHS's vulnerability to fraud.

Resilience and engagement levels within the NHS as a whole are under pressure. Fraud and financial awareness generally has struggled for share of attention during the COVID-19 pandemic as a consequence. Achieving the umbrella target will require a step change in performance and stakeholder partnerships from all parts of the NHSCFA to galvanise our partners in the NHS and across the wider counter fraud community.

This plan explains how our focal points are informed by Strategic Intelligence as well as employee and external stakeholder perceptions. It also provides more details about how, despite the impact of the pandemic, we are striving for and intend to continuously evolve to bring about the step change needed in our enabling activities to deliver against our four strategic objectives for 2020-2023 and beyond:

- Lead and influence the NHS to find, prevent, and reduce fraud, recovering losses and putting money back into patient care.
- Work with partners to reduce fraud loss in the NHS.
- Support and empower our people to be the best in their roles and feel valued.
- Effectively use our resources, identify and pursue opportunities for growth and innovation and reduce our operating costs.

More details are also provided on our portfolio of key corporate projects for 2022-23 and

working as well as leveraging our stakeholder relationships to amplify our voice, impact and reach.

While the bulk of our fraud fighting activities have been adversely impacted by the COVID-19 pandemic over the last two years, we have taken the opportunity to listen, re-measure, analyse and refocus every aspect of our operating model. This includes the systems that drive our performance, planning and measurement processes now under the stewardship of a revitalised Board, new CEO and performance director. We believe we have the right mixture of combined skills to meet the challenge of the final year of this strategy period and are in the process of devising further, future-fit strategies to move us through and past the long tail of COVID-19.

Message from the Chair

I hold a number of governance roles with collective responsibility for billions of pounds of public purse funding, but I am especially proud to be the Chair of the National Health Service Counter Fraud Authority (NHSCFA), primarily because it is part of our NHS.

I am of a generation that can recall the roots of the NHS and the powerful part it has played in post-war national recovery, growing to be the envy of the world, showcased spectacularly at the 2012 London Olympic Games. Yet seldom have I derived more satisfaction from my role than I have during the global pandemic, when the value of our function as one of the protectors of the NHS finances came into stark relief.

The NHSCFA's current strategy was developed in 2019 and the period to which this plan aligns spans three years from 2020. This plan represents the last year of that strategy period, past the epicentre of the pandemic. It has been and will continue to be a time of unparalleled challenge and constant uncertainty. Now, as the broader impact of the pandemic is felt, financial challenges combined with new ways of working create circumstances in which fraud potentially thrives. Organisations like ours simply must stay ahead, continuously listen, learn and adapt.

The World Economic Forum recently suggested that resilience, flexibility and a “we” mentality are some of the future fit traits that successful leaders need. I can not agree more. A key role of the Board is to ensure that the financial resources allocated by the Government are invested by our teams in line with the agreed plan and that we extract maximum value from our people and systems in the process. We share best practice from elsewhere, we offer support and guidance and we provide challenge and expect flexibility and dedication in return.

Over the last twelve months I have overseen the cyclical change of a number of Non-Executive Director posts and seen the retirement of our former CEO Susan Frith. Despite Sue taking a wealth of NHSCFA expertise and experience with her, we have found an excellent replacement for her in the form of Alex Rothwell, a successor with much complementary experience drawn from a career with the police and a leadership skill-set future-fit for the challenges ahead. He has already made partnership working, the “we”, his watchword and collaborative working in partnership is very much the cornerstone of this plan.

During the first year of this strategy cycle, we recruited a new Performance Director, Tricia Morrison, who has overhauled our performance management and planning processes as well as introduced consistent project management processes and

systems. We then improved the remainder of our core processes and introduced common standards; a fresh approach to fraud risk assessment; knowledge sharing, horizon scanning and a new NHS fraud case management system: Clue. This has made the identification of best practice a great deal easier as well as providing much needed consistency in how we manage investigations and we are confident that we will increasingly bear the fruit of this work as we progress our plan.

Much of the apparatus of law enforcement had to be suspended during lockdown restrictions, impacting significantly on prosecutions and our bottom-line financial goals. However, we invested otherwise fallow time wisely, and even hit our revised financial goals, despite the restrictions. We still have a very significant, stretching financial target looming large over the remaining part of the strategic period but we are a resilient bunch and continue to strive for unprecedented results.

As we enter this business planning period, we have already completed the consultation phase of our Evolution programme, which is intended to ensure that we continuously improve our operating model to remain fit for purpose. We have simultaneously launched and significantly progressed a comprehensive Stakeholder Engagement Programme to ensure that we prioritise, consult, involve and empower our primary representatives within the NHS, across government and the counter fraud profession. We have also introduced new communication platforms, channels and campaigns to ensure that we continue to add value where they need it most.

None of us possesses a crystal ball that can show how the government's re-organisation of the NHS is going to work in practice or how long and hard the financial road ahead will be following COVID-19. We can, however, give our assurances as a Board on behalf of the wider NHSCFA team that we will remain committed to our core purpose and will do our utmost to deliver the performance targets detailed in this plan, as we simultaneously start the process of planning for the next three-year strategic cycle.

Tom Taylor
Chair



Foreword

As you explore the contents of this business plan for 2022-23, the last year in the NHSCFA's current strategy, you will become increasingly aware of the many iterations of the word 'together' in its various forms as they appear in here. It is a powerful word that means close association or happening at the same time, and is also used as an adjective to indicate confidence stemming from organisation and level-headedness. It is also the first word that comes to mind when I want to describe what an effective response to fraud looks like.

We certainly have a business model that represents a joined-up, systems way of thinking. We have a number of equally important components operating together to deliver our outcomes and core purpose. And we have an integrated approach where our planning and performance come together as part of a three-year strategy and align our people and processes, our key enablers.

Perhaps most importantly, togetherness applies to our people, specifically our colleagues, partners and multiple stakeholder groups inside and out. Ranging from our colleagues in the wider NHS counter fraud community (Local Counter Fraud Specialists, Counter Fraud Champions, Directors of Finance and Audit Committee Chairs) through to other arm's-length bodies, government departments and NHS staff, our stakeholders

"It is therefore no surprise that togetherness features so heavily as a theme in our strategy and planning – not just in what we say, but in everything we do, as I hope you can see from what we have achieved in the period leading up to this business plan".

ALEX ROTHWELL
CHIEF EXECUTIVE OFFICER



help us multiply and amplify the influence of our 160 or so people.

We now have a bespoke Stakeholder Engagement Programme designed to ensure that we continually and systematically adapt our operating model in line with changing stakeholder needs. We also have an internal Evolution programme that ensures our operating model remains fully fit for purpose. It is apt, following a period in which people were denied direct interpersonal contact during the pandemic, that people are the critical component in this business plan for the year ahead. Working together, we will increasingly take advantage of the millions of eyes and ears and voices in the service of fighting NHS fraud.

My tenure as the NHSCFA's Chief Executive may still be in its early days, but I have been listening intently before committing to this plan. The contents not only reflect the hard work of my colleagues but also enable me to bring my learnings, networks and skills gleaned from many years of counter fraud work at the Metropolitan and City of London Police to bear within our beloved NHS, where "brand" equity has never been higher.

There will be an expectation that my background will imply a renewed focus on the enforcement side of our work, where we have enjoyed considerable recent success. The law enforcement side of me is very much enjoying working with our teams there. But I am also passionate about taking forward the fraud prevention agenda upstream and where better than a healthcare setting to insist on the old adage that prevention beats cure?

I am fully aware I have joined at a time when the NHS is facing unprecedented pressure as a result of COVID-19. I wanted a fresh challenge and as I progress increasingly from listening to continuing listening *and* taking action, I remain acutely aware of the hard yards my colleagues have covered during the worst of the pandemic. They have put most of the sustainable performance building blocks in place and I see my role, very much, as a baton carrier in the same race. Our achievements this year will give us much needed confidence as we enter and navigate the volatile and unpredictable post-pandemic period and look to address the bulk of our deferred financial goals.

Having a sound strategy with a three-year horizon has helped us during challenging times, and despite the impact of COVID-19 the team is making good progress towards achieving its objectives.

I have heard, first-hand, of the benefits our new case management system, Clue, has brought to our Local Counter Fraud Specialist (LCFS) community especially and have seen the improved functionality myself. The system enables the community to record proactive work and capture the financial benefits of both prevention and enforcement outcomes, in a way we were not able to do before.

I am also pleased to see us playing an increasingly important part as facilitators and coordinators of standard raising operations within health bodies. Initiatives such as our national exercises and the new Functional Standard return may not have been universally welcomed from a workload perspective when they arrived, but they are bearing fruit in enabling a better understanding of fraud and counter fraud performance and the related financial impacts.

To amplify all this our corporate communication has moved swiftly through the gears in response to changing times and we are now sharing updates, wins and news via an increasing range of innovative platforms, from monthly webinars and bespoke newsletters through to dedicated digital platforms and regional meetings, workshops and forums.

Nobody is under any illusions that, while frontline NHS colleagues have been responding to the pandemic, the criminals have been dormant. Far from it. Our intelligence reports have included COVID-19 horizon scans and are becoming much more pragmatic in terms of suggesting actions that can be taken at a local level. However, we are anticipating constantly changing horizons as the health crisis wanes and gives way to new economic challenges.

The work we have undertaken to become better at anticipating, listening and responding will need to continually improve. Corporate agility will become a leadership watchword as we will need to stay ahead of fraudulent practice, especially while the NHS faces significant structural change.

This brings me back to the theme of togetherness. Our vision is to lead and proactively support the NHS to understand, find, prevent and respond to fraud: in order to fulfil this, we need to continue on the path of closer engagement with our colleagues in the wider NHS counter fraud community, so we think, feel and act as one fraud-fighting team. I am clear that we also need to work ever more closely with colleagues across the Government Counter Fraud Function and our partners in law enforcement.

The next step on this journey is making our objectives and activities into something we increasingly own together with our stakeholders. That is why we are planning to involve our colleagues in the NHS counter fraud community and beyond in the development of our new strategy right from the start. We will also continue to build more opportunities for two-way communication and engagement into everything we do. I look forward to leading the NHSCFA in delivering together with our wider community in 2022-23 and in tracing the road ahead.

Alex Rothwell

Chief Executive Officer

Our vision – what we are aiming to achieve

OUR VISION

Our vision is to lead and proactively support the NHS to understand, find, prevent, and respond to fraud.

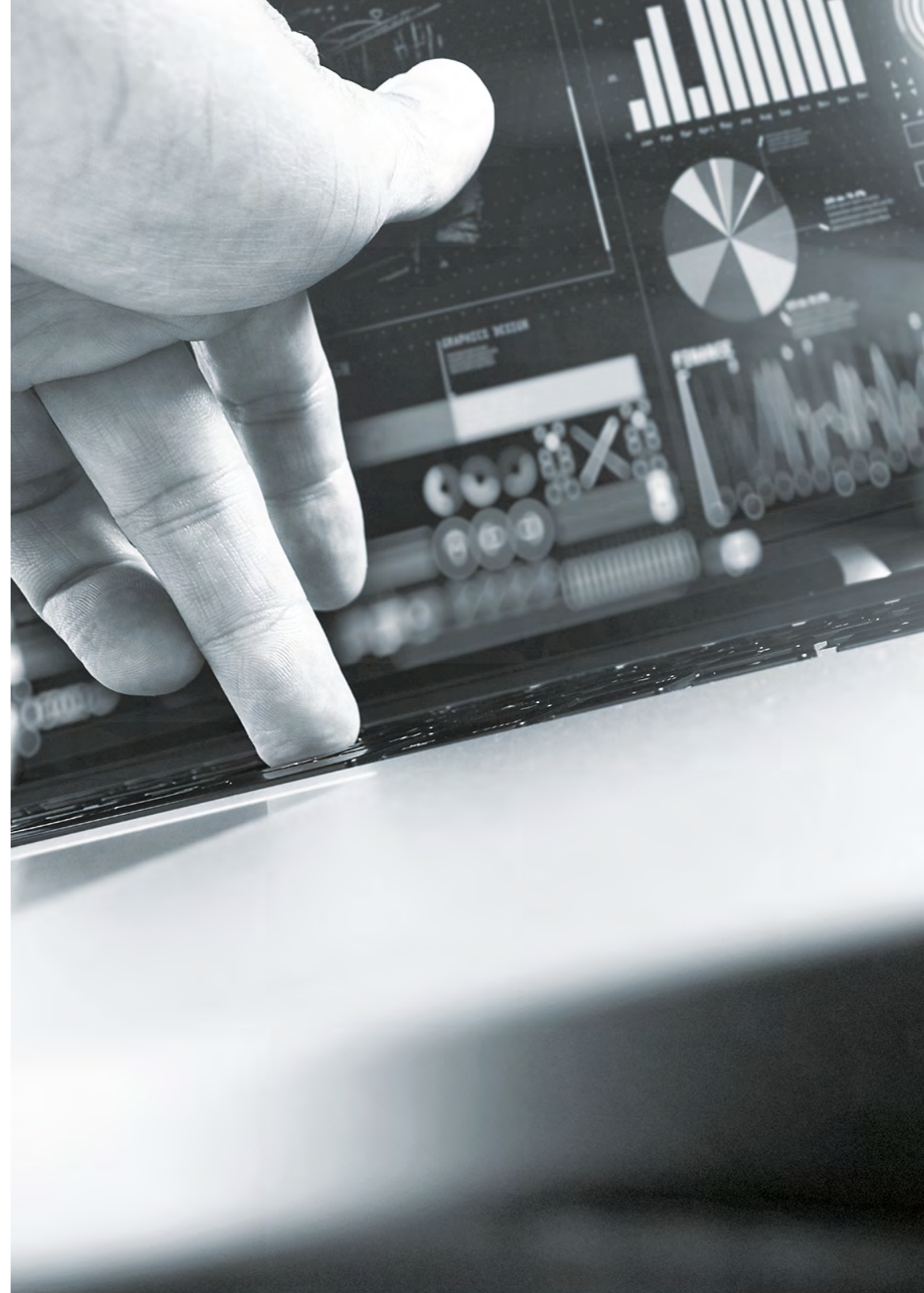
OUR PURPOSE

Our purpose is to:

- Provide leadership and expertise in counter fraud as a valued NHS partner.
- Collaborate nationally and locally with the NHS to understand fraud threats, vulnerabilities and enablers.
- Deliver intelligence-led counter fraud services to find, respond to and prevent fraud.
- Reduce the impact of fraud on the NHS.
- Work with partners to deliver financial savings that can be reinvested in patient care.

FLEXIBILITY OF THE PLAN

Over the past two years the NHS has experienced extraordinary challenges and at times uncertainty, therefore this business plan remains flexible in order to adapt to changing priorities, emerging threats and key areas of work that cannot be accounted for at this time. Any proposed change to the plan will be managed and communicated with our Board, our sponsors the Department of Health and Social Care Anti-Fraud Unit (DHSC AFU) and key stakeholders should the need arise.



At a glance – our successes by 2023

1. LEAD AND INFLUENCE

- More people understand NHS fraud, are engaged with the counter fraud agenda and report fraud.
- A network of counter fraud champions is embedded in NHS providers.
- All NHS organisations are supported in achieving compliance with the Government Functional Standard GovS 013: Counter Fraud (known as 'Government Counter Fraud Functional Standard').
- Membership of the Government Counter Fraud Profession is available to the whole NHS counter fraud community in England, with all eligible professionals empowered and supported to become members.
- Building relationships with our stakeholders, driving best practice by supporting and enabling the sector to achieve the strategic aims of the national counter fraud response.
- Designing our strategy to support and enable the counter fraud response across the NHS.

2. REDUCE FRAUD LOSS

- National and local counter fraud activity will result in measurable financial benefits.
- We continue to measure value for money in local counter fraud functions for both proactive and reactive counter fraud work.
- Targeted intervention by the NHSCFA in partnership with health bodies and counter fraud providers will have delivered measurable results.
- Data and technology drive efficiencies in how we work and innovate our services.

3. SUPPORT AND EMPOWER OUR PEOPLE

- We will continue to refine our smarter working principles.
- Leaders create an open, empowering, and supportive culture, where people feel they add value and are treated fairly.
- Our people have access to the training and development they need.
- The delivery of our people-related functions will be supported by a newly developed HR advisory function. Our workforce planning will reflect the promotion and support of equality, diversity and inclusion, and mental health and wellbeing.

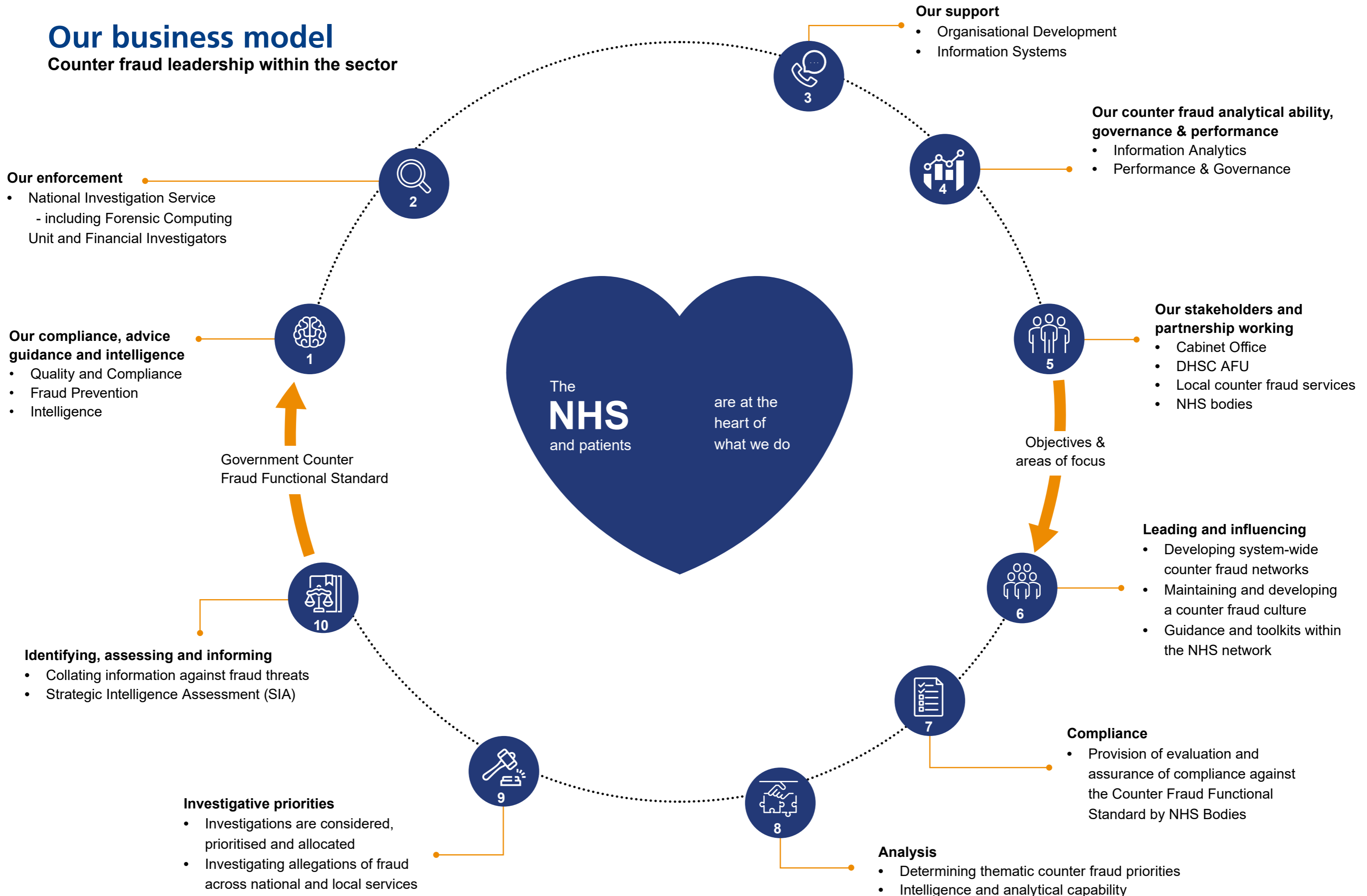
4. EFFECTIVE USE OF OUR RESOURCES

- We consistently deliver financial balance by integrated alignment of financial, business and workforce planning, translating our strategy into effective and resourced deliverables.
- We will continue to improve and develop performance and project management approaches to drive delivery of our priorities.
- All opportunities to secure additional funding are identified and pursued.
- NHSCFA will undertake a programme of evolution and change in order to align our service and support to drive the counter fraud response across the NHS.
- We will work with NHS partners to develop shared programmes of intervention and objectives.



Our business model

Counter fraud leadership within the sector



Our integrated approach to successful delivery



This plan details the high-level programme of work the NHSCFA will implement during the final year of our three-year strategy. This includes continued working with partners to reduce the financial loss to fraud within the health sector by a minimum of £126 million this financial year and utilising a network of trained investigators across the NHS to realise a direct financial value from enforcement and local proactive activity.

We will continue to embrace technology to facilitate smarter working principles, allowing for a more flexible working environment for our people, whilst continuing to utilise data to identify areas for collaborative prevention activity across the health sector to strengthen the controls against fraud.

To fulfil our ambition for our organisation we have developed an integrated strategic approach. This will ensure that all our strategies around estates, finances, digital, data, service provision, business planning and workforce are aligned.

We have identified our key projects and programmes and will deliver them through a consistent organisational approach and



common standards. The Strategic Intelligence Assessment (SIA) details the key fraud threats, vulnerabilities, and enablers within the NHS. The SIA assists us in identifying which priority areas should be our focus for the period of the strategy. The SIA informs our Control Strategy, which sets out our decisions as to where and how we can have the most effective influence and impact on fraud within the NHS.

The SIA, Control Strategy, and integrated planning cycle inform our work to achieve the financial targets set over the lifespan of the strategy.

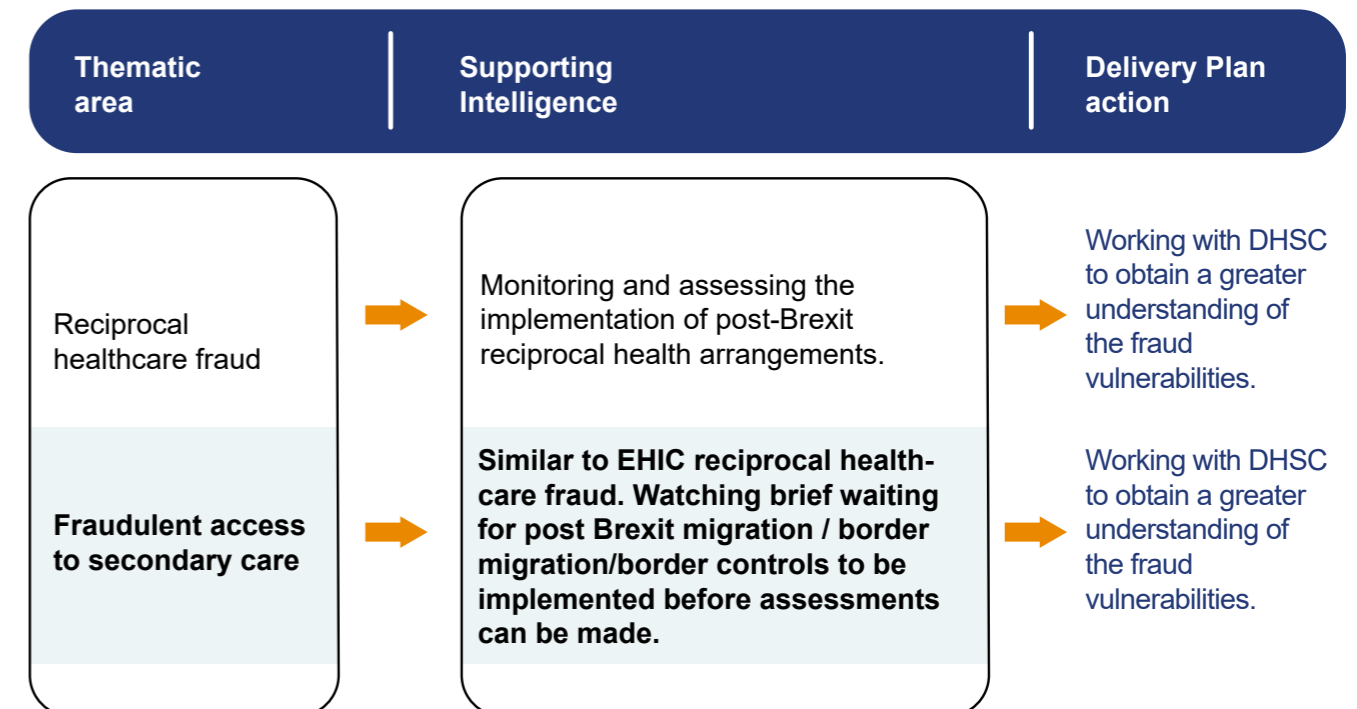
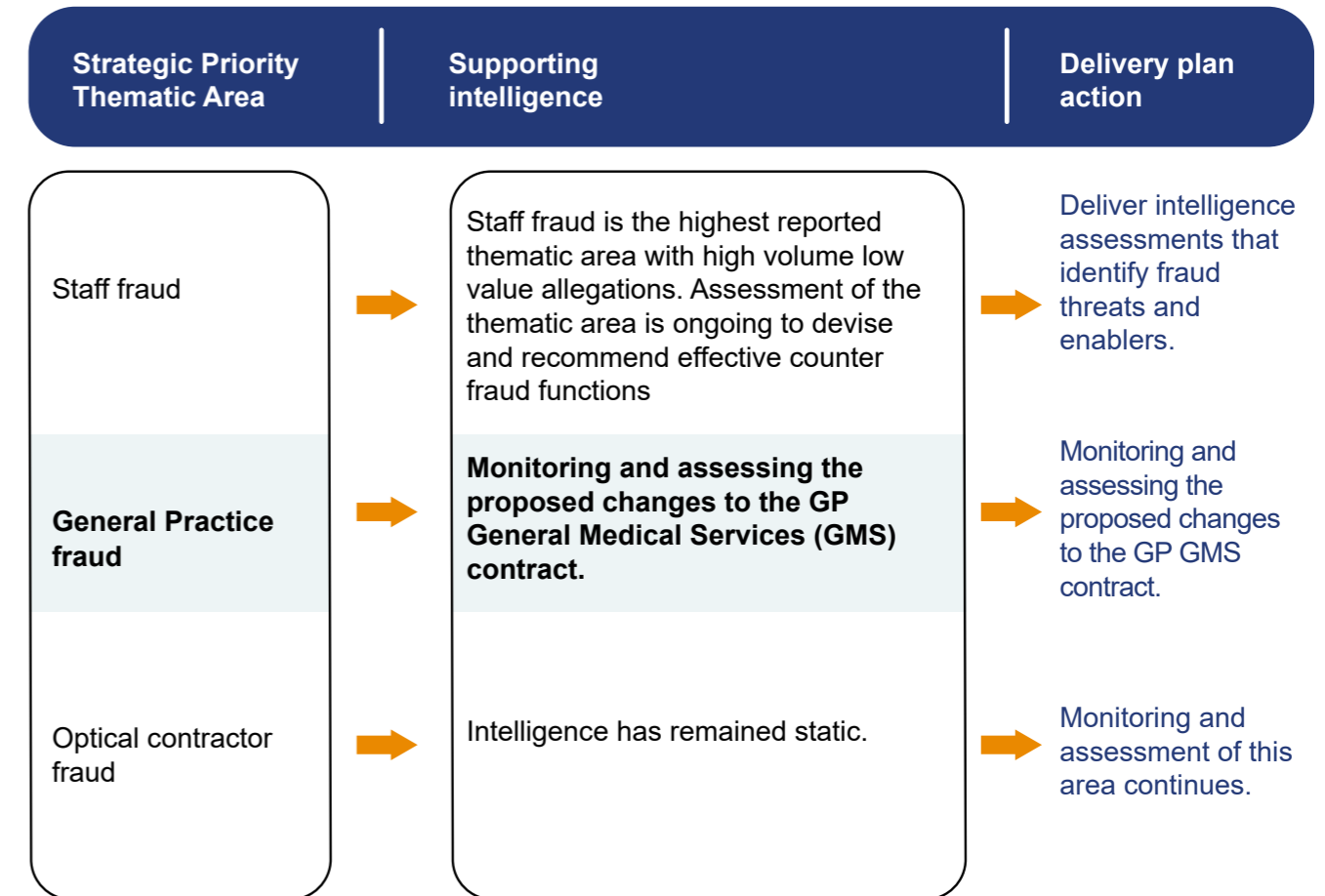
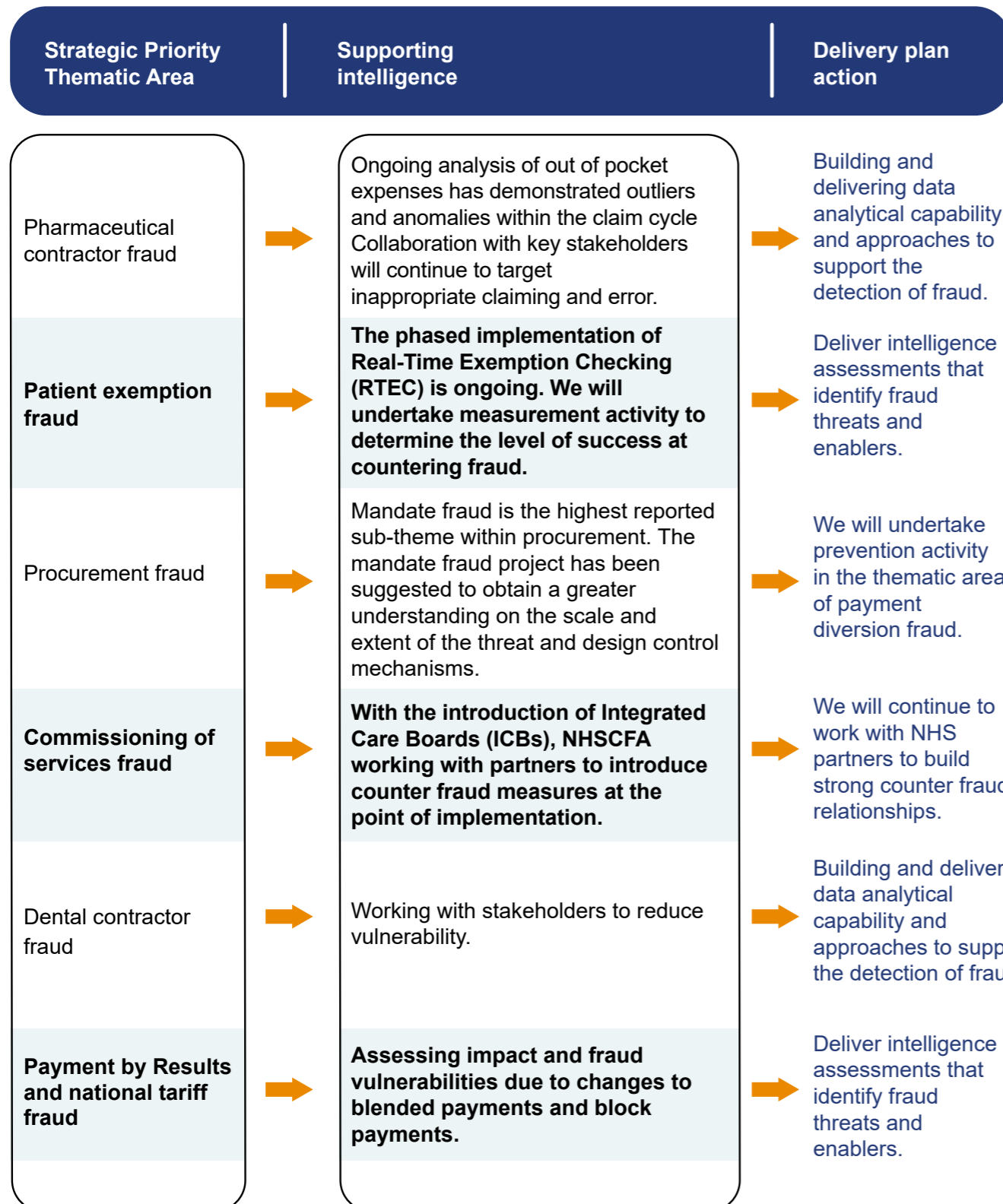
Financial assumptions

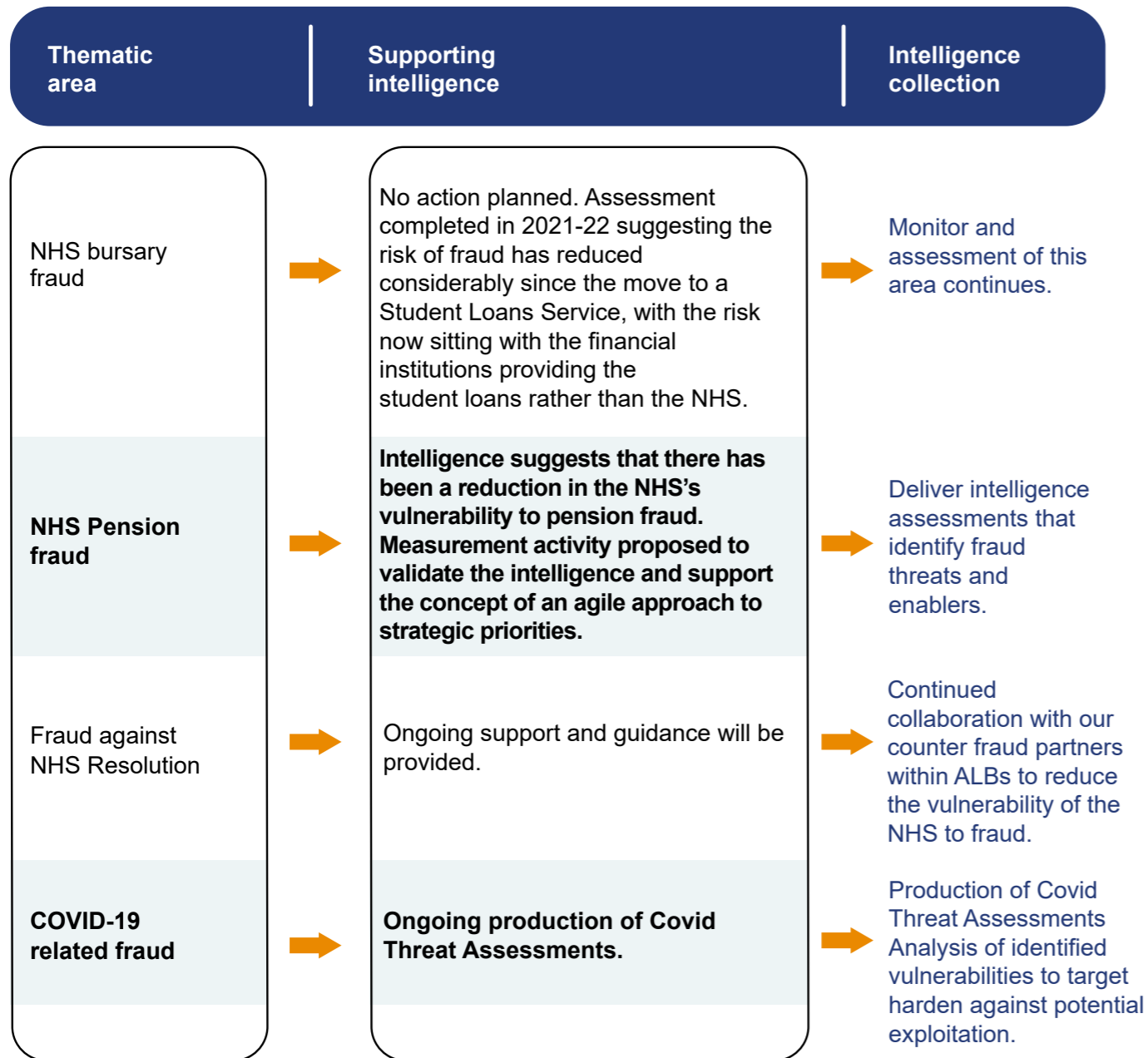
The delivery of this business plan is supported by financial planning that includes some key assumptions:

- We will deliver against cost improvement plans (CIP) in year.
- The NHSCFA annual parliamentary funding allocation remains at £12.7 million for financial year 2022-23.
- There will be no further changes in service delivery requirements outside of the current plans.
- There are no further cost pressures above the current growth and inflation assumptions.

Intelligence-led planning

We have used intelligence from across the health sector, focusing on key thematic areas, to support the business planning process. This intelligence, gathered in the NHSCFA's Strategic Intelligence Assessment, has helped drive our areas of focus for the 2022-23 financial year.





Our achievements

The activities laid out in this business plan build upon the results the NHSCFA has achieved so far, working together with our colleagues in the wider NHS counter fraud community, in the fight against fraud. Highlights of our achievements over the past year, grouped according to the four objectives in our 2020-2023 strategy, are provided below.

Please refer to our [annual report and accounts 2020 to 2021](#) for more details on our achievements in [2019-2020](#).

Lead and influence

- We published our annual SIA in a digital format for the first time, making it easier for our stakeholders and the wider public to find our latest assessment of the NHS's vulnerability to fraud, both overall and in 13 key thematic areas.
- We increased the volume and quality of intelligence shared with the NHS counter fraud community (e.g. through our quarterly threat assessments).
- We continued to provide intelligence and guidance to the NHS on COVID-19 related fraud and supported it in tackling COVID-19 passport fraud.
- We continued to deliver monthly webinars for the NHS counter fraud community, covering a range of counter fraud topics and enabling a two-way conversation on progress against our strategic objectives and planning for the future. These sessions have been increasingly popular with senior leaders within the community.
- We developed a new Fraud Risk Knowledge Hub for the community, providing national risk assessments on a range of fraud types, while continuing to build LCFs' capabilities on fraud risk assessment and local proactive exercises through a series of dedicated workshops.
- We launched a new monthly e-newsletter, with bespoke editions for Local Counter Fraud Specialists and for senior leaders, now featuring articles from the community highlighting successes in the fight against fraud.
- We took forward the development of the Counter Fraud Champion role and achieved our 95% coverage target among NHS providers.
- We continued to work closely with the Cabinet Office to develop and implement the Government Counter Fraud Functional standard across the sector as we prepare for the first formal return by NHS organisations at the end of 2021-22.

- We increased engagement with our counterparts in the devolved nations and started planning for a four-nation summit in 2022-23 to share experiences and explore opportunities to further work together to tackle fraud against the NHS.
- One of our colleagues from the wider counter fraud community colleagues joined the organisation on a secondment working across a number of cross cutting corporate projects.
- We re-engineered our onboarding process for members of the community, in readiness for the development of a customer relationship management system .
- In November 2021 we delivered our most successful ever campaign for International Fraud Awareness Week, which was publicly supported by over 120 health bodies.

Reduce fraud loss

- Our national exercises on COVID-19 procurement post-event assurance and Purchase order vs non-purchase order spend saw a return rate of over 90% and enabled us to identify a significant reduction in fraud vulnerability from the implementation of fraud prevention guidance.
- We achieved a number of successful criminal justice outcomes as court activity resumed following the disruption brought by the COVID-19 pandemic. Three NHSCFA led investigations into complex/high-value cases of NHS fraud resulted in the sentencing of those responsible, and we continued to pursue recovery of funds lost to the NHS.
- Two of our investigations featured in Season 4 of the BBC One documentary 'Fraud Squad', alongside cases investigated by NHS England & Improvement and NHS Counter Fraud Service Wales. These programmes attract millions of viewers and will have advanced the awareness and prevention causes considerably, thus contributing to reducing the financial impact of NHS fraud.
- We carried out our latest Fraud Prevention Guidance Impact Assessment, relating to the period 2020-2021, which will further improve our understanding of financial benefit and provide vital feedback to inform our fraud prevention efforts in future.

Support and empower our people

- We introduced a colleague recognition scheme.
- We continued to invest in the skills of our people through training, leadership development and talent management programmes.
- We continued to support our people in working remotely as the COVID-19 pandemic evolved and have put arrangements in place to support a safe return to the office as restrictions eased. This was managed in the context of our longer-term programme to adopt Smarter Working principles across our activities.

Effective use of our resources

- We completed the rollout of Clue, the new NHS fraud case management system – this enables not just improved management of investigations but also the recording of proactive counter fraud work and its outcomes as well as the reporting of system weaknesses.
- We continued to expand Ngage, the digital collaboration platform for the community, as well as the operational guidance and resources in the Digital Fraud Manual.
- We conducted a series of reviews of our functions as part of a programme of organisational evolution to ensure the NHSCFA remains fit for the future.
- We transformed our planning and performance measurement model and made significant progress on developing a corporate dashboard.
- We managed significant change in our estate, including sourcing new premises for our London office, and migrated a significant part of our IT infrastructure to the cloud.

2022-23 Delivery Plan

This plan covers the core areas of focus for 2022-23, underpinned by detailed delivery plans which set out our key metrics and activities.

This plan will remain agile and responsive to the needs of the counter fraud effort of the wider NHS during these challenging times. We have also reflected on our impact within the sector and embraced the opportunity to evolve as the national body leading the NHS response to fraud.

Strategic Objective 1
 - We will lead and influence the NHS to find, prevent and reduce fraud, recovering losses and putting money back into patient care

We will improve awareness of fraud, including how it occurs and how it impacts the NHS

Key areas of focus

- We will continue work to improve stakeholder engagement across the health sector, to build counter fraud capability, support NHS organisations, and develop better understanding of their fraud risks.
- We will develop a counter fraud community-based approach to tackling fraud with a strong focus on shared objectives and priorities across the system.
- We will continue to undertake measurement of our engagement and increase satisfaction among our key stakeholders in the NHS counter fraud community by 5% year on year against the baseline established in 2021-22¹.
- Having achieved our target of 95% of providers having a Counter Fraud Champion (CFC) in 2021-22, we will continue to develop and evolve the CFC role and support networks as part of the NHS counter fraud community.

We will share our expertise with the Government Counter Fraud Function from a healthcare fraud perspective

Key areas of focus

- We will continue to develop a suite of standardised corporate dashboards and reporting for internal and external partners that support continuous improvement in counter fraud activity.
- We will continue to assess the impact of NHSCFA and local counter fraud proactive and reactive activity by undertaking a measurement of return on investment (ROI).
- We will enhance our fraud prevention guidance and advice to the sector.
- We will continue to assess the counter fraud landscape on an annual basis within the NHS in order to drive improved outcomes.

¹ A 'dip test' survey of stakeholders in the NHS counter fraud community was carried out in 2021. A larger survey which is being undertaken in early 2022 will enable us to establish the baseline for this measure.

Develop capability through targeted support to NHS organisations enabling a deeper understanding of fraud

Key areas of focus

- We will maintain Government Counter Fraud Profession membership for 100% of those eligible within the NHSCFA.
- We will facilitate and enable access to associate membership of the Government Counter Fraud Profession within the LCFS community, with 50% of those eligible being members by the end of 2022-23.

Support the health sector in meeting the Government Counter Fraud Functional Standard

Key areas of focus

- 98% of NHS bodies to make an annual return against the Counter Fraud Functional Standard².
- We will undertake assurance against the Government Counter Fraud Functional Standard returns.
- Improving counter fraud outcomes by engaging with appropriate organisations and adopting a risk-based approach towards prevention and detection work, resulting in measurable proactive and reactive outcomes.
- We will deliver a process of health body reviews in respect of the Government Counter Fraud Functional Standard, to provide assurance to the DHSC and Cabinet Office regarding levels of compliance, and to identify areas where we can provide further support to the local counter fraud function.

² Government Functional Standard, GovS 013: Counter Fraud, Counter fraud, bribery and corruption, V2.0, Date Issued: August 2021

Continue to develop the functionality within the NHS fraud case management system

Key areas of focus

- We will continue to develop and configure the NHS fraud case management system (Clue) to ensure that it meets the needs of counter fraud specialists operating across the NHS.
- We will deliver complementary processes that support the sector, e.g. onboarding of members to the NHS counter fraud community, and the recording of key information that supports the overall value of the local counter fraud response.

We will develop a strategic plan and approach that supports and enables the counter fraud response across the health sector

Key areas of focus

- We will produce a strategic plan in collaboration with partners that covers the period 2023-2026 and aligns with DHSC priorities.
- We will produce an integrated business plan that covers the period 2023-24 for the 2023-24 financial year.
- We will develop the performance management approach that underpins the new strategy.

We will continue to work with NHS partners to build strong counter fraud relationships

Key areas of focus

- We will continue to work with NHS partners to build an effective relationship with Integrated Care Boards and the counter fraud community to ensure that the counter fraud agenda is embedded in these new bodies.
- We will provide support to the COVID-19 Inquiry, liaising with the inquiry team when requested and undertaking work that enables the inquiry to establish its core base of information.

Improved alignment of our priorities with our control strategy and intelligence base to drive improved outcomes across the counter fraud landscape

Key areas of focus

- We will continue to develop the SIA and other intelligence products to provide strategic direction in countering fraud and to improve coordination across the counter fraud response.
- We will enhance intelligence where there are gaps in our knowledge.
- We will develop clear partnership delivery plans against the annual SIA.
- We will ensure full integration of the Control Strategy in our integrated business planning approach.
- We will continue to produce and evolve our COVID-19, quarterly, strategic, and financial threat assessments to ensure they continually develop as a valuable asset in countering fraud together.
- We will develop our online fraud reporting system, to make reporting easier and drive process efficiencies internally that will improve our intelligence for the NHS.
- We will record and report the proportion of allegations converted to investigations and improve this by 4% in 2022-23 with our ambition to extend and report on a broader range of outcomes.

Strategic Objective 2
- We will work with partners to reduce fraud loss in the NHS

With our counter fraud partners, we will increase the value of fraud detected and prevented across the NHS

Key areas of focus

- We will undertake the investigation of serious fraud, bribery and corruption matters that fall outside the powers, capability, and capacity of individual health bodies, or where there is a national interest requiring the national body to intervene.
- We will support and enable our local counter fraud partners to undertake all counter fraud activity and report and promote their counter fraud outcomes.
- We will undertake forensic computing services to recover digital evidence for use in criminal, civil and disciplinary proceedings, and undertake National Crime Agency (NCA) accredited financial investigation work to support our counter fraud partners across the sector.

Deliver intelligence assessments that identify fraud threats and enablers

Key areas of focus

- We will undertake loss analysis to support and enhance the intelligence picture in a range of thematic areas identified in the SIA, specifically pension fraud, and Real-Time Exemption Checking (RTEC).
- We will undertake an impact assessment of counter fraud solutions deployed within the thematic area of patient fraud.

Continued collaboration with our counter fraud partners within arm's-length bodies (ALBs) to reduce the vulnerability of the NHS to fraud

Key areas of focus

- We will continue to work with our ALB partners to prevent, detect and recover losses to fraud.
- We will also engage and support our counter fraud partners within ALBs whilst recording the impact of counter fraud work undertaken across the sector.

Building and delivering data analytical capability and approaches to support the detection of fraud

Key areas of focus

- We will undertake further analysis of fraud within dental systems and deliver counter fraud activity and intervention together with key partners.
- We will deliver analysis and intervention required to support changes to policy, working with partners to influence policy changes to eliminate specific system weaknesses.

We will undertake prevention activity in the thematic area of payment diversion fraud

Key areas of focus

- We will lead a system wide response to payment diversion fraud in the NHS.
- We will lead and collaborate with colleagues and stakeholders in the NHS and other agencies to reduce the threat and measure the impact of this crime.

Strategic Objective 3
 - Enable our people to
 be the best in their roles
 and feel valued

Refine our smarter working principles, encompassing organisational evolution

Key areas of focus

- We will embed the principles of smarter working across the organisation through the use of collaborative digital technology, alignment to agile estates access and a flexible workforce.
- We will realise 100% of the workforce adopting smarter working principles by virtue of combined home and office-based working and wider consideration of ad-hoc NHS workspaces.

Establish a Human Resources (HR) function that supports and enables our people-processes and provides technical people-related expertise

Key areas of focus

- We will establish appropriate in-house (or hybrid) HR services that will enable and support all areas of our human resource management.
- We will develop a sustainable approach to workforce and succession planning aligned to our people strategy, such as learning and development, coaching and talent management.
- We will deliver a portfolio of people related activities, including policy development, reward and recognition, analysis of organisational health and management data, wellbeing and equality, diversity and inclusion initiatives.

Empower our people to innovate by creating a safe and supportive environment to develop and implement new ideas

- We will achieve a 10% improvement on the 2021-22 people survey in how our people feel they are led.
- We will achieve a 10% increase in our people satisfaction rating from the 2021-22 people survey.
- We will ensure 90% of our people with identified Learning & Development requirements are able to access relevant programmes.

Strategic Objective 4

- Effective use of resources

Managing our existing budget and exploring additional funding opportunities by demonstrating positive financial impact

Key areas of focus

- We will manage our existing and strive to secure additional funding to support improved financial outcomes across the counter fraud community.
- We will account for a 15% reduction in our estate's footprint, with alignment to the Government's Places for Growth principles.
- We will monitor the cost of travel and subsistence baseline as we emerge from the pandemic and implement new models of working to agree a revised baseline position for 2023-2026.

Embed effective performance, programme, and project management approaches to drive delivery of our priorities

Key areas of focus

- We will continue developing our programme and project management approach, embedding a consistent approach to managing our delivery.
- We will continue to demonstrate robust governance, assurance, and performance.

Optimise business solutions and IT infrastructure that supports current and future delivery of our counter fraud response

Key areas of focus

- We will enhance the business tools, systems and solutions that support our work: for example, analytical tools, communication and information services, data collections, bespoke IT solutions, security, and collaboration tools to support smarter working in an agile workforce.
- We will drive our cloud first agenda in order to benefit from flexibility to scale, improved security and to enable agile and flexible working.

Our portfolio of key corporate projects

Through our Integrated Business Planning process, the following have been identified as the key projects for the organisation scheduled for delivery/commencement during 2022-23. These areas of work will be governed by a combination of project boards, highlight reports and strategic updates during the performance cycle and accountability process. All of this will be visible on the organisation’s performance, programmes, and portfolio management system.

We will also deliver a programme called Building a Better NHSCFA - Evolving Together that will influence all areas of business delivery and strategic objectives.

The programme is to challenge and facilitate efficiencies and improvements in service delivery for the sustainable future of the organisation.

We will also ensure that the organisation remains fit for purpose within a flexible, agile operating model designed for the future. The specifics of the programme are to:

- Deliver a new blueprint for the way the organisation operates.
- Collaborate with all service areas and identified stakeholders to ensure a successful transition from the current state to the future state.
- Facilitate and support the organisation and its sponsor to deliver the organisational transformation required to successfully operate.
- Deliver financial stability and sustainability for the organisation, now and into the future.

This has been captured under effective use of resources.

2022-2023 Objective	Key Corporate Project/Project Lite/Programme(s)
Lead and influence the prevention, detection and reduction of NHS fraud and recover financial loss for the health sector to invest in patient care.	<ul style="list-style-type: none"> • Development of the NHSCFA Strategy 2023-2026. • Delivery of the NHSCFA Annual Report 2022-23. • Continue to develop our corporate stakeholder engagement programme. • The development of a suite of standardised corporate dashboards and reporting for internal and external partners. • Continue to work with NHS partners to build an effective relationship with ICBs (Integrated Care Boards) and the counter fraud community.* • Support the COVID-19 Inquiry.* • Continued development of the case management system (Clue).* • Evolution of NHSCFA strategic intelligence.
We will work with partners to reduce fraud loss in the NHS.	<ul style="list-style-type: none"> • Analysis of fraud within dental systems with counter fraud activity and intervention being delivered with key partners. • Identify and reduce the risk of payment diversion fraud. • Fraud Prevention Guidance Impact Assessment.* Undertake loss analysis to support and enhance the intelligence picture in a range of thematic areas.* • Undertake an impact assessment of counter fraud solutions deployed within the thematic area of patient fraud.*
Enable our people to be the best in their roles and feel valued.	<ul style="list-style-type: none"> • Delivery of an in-house (or hybrid) HR service that will enable and support all areas of NHSCFA and drive workforce strategy delivery including a portfolio of people related activities.
Effective use of our resources.	<ul style="list-style-type: none"> • Building a Better NHSCFA - Evolving Together.

NHSCFA programmes and projects will be delivered in two distinct ways:

- Full governance incorporating a project board and managed reporting of workstreams and activities under the direction of a Senior Risk Owner within the organisation.
- *The Lite approach, which is similar to that operating within full governance but without the need to report to a central board. The work will still be delivered under a project management framework for reporting and accountability.

Accountability and performance delivery

Our annual business plan supports delivery of our strategy year on year. The NHSCFA has a framework underpinning its business planning cycle and subsequent performance management and delivery assurance. Quarterly strategic accountability meetings with the DHSC, attended by the NHSCFA's Chair and Chief Executive Officer, provide an opportunity to discuss progress against our objectives and targets.

Our strategy sets out our key performance indicators that have been developed in line with delivery of the three strategic objectives of the organisation. Delivery of these is discharged through this business plan. The plan is then supported by divisional and unit business plans to ensure a golden thread and alignment across the organisation's plans.

This plan will be closely managed and monitored at Board and Executive level through a Board level performance report and Portfolio Dashboard Report for our key projects and programmes.

The transparency of our Board reporting is underpinned by quarterly Performance and Assurance Panels where delivery and performance across all four divisions of the organisation are reviewed by the Panel. The Heads of Service for each division along with their management teams actively engage in this process of delivery assurance and mitigation.

The Panels are chaired by the Director of Performance and Improvement, who directly escalates any key issues, concerns, or risks to the Senior Management Team (SMT), Chief Executive and Board Secretary. The management decision making forum on all escalated delivery and performance risks is the SMT in the first instance. The mitigations against these and all other strategic risks are regularly reviewed as part of our risk management framework and are reported to the Audit and Risk Assurance Committee.

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