

COUNTER FRAUD AND CONFLICT OF INTEREST POLICY

ERDF 2014-20 PROGRAMME

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Counter Fraud Policy

1. Introduction

EU Regulation No 1303/2013 of the European Parliament and of the Council of 17 December 2013 for the 2014-20 programming period requires Member States to put in place “effective and proportionate counter fraud measures, taking into account the risks identified, to take the necessary steps to prevent, detect and sanction fraud (Article 125) and detect irregularities (Article 122) effectively.”

The managing authority for ERDF 2014-20 England Programme takes its responsibilities to protect public money very seriously and is fully committed to a **zero-tolerance** approach to fraud and corruption and will ensure the appropriate use of resource in the pursuance of its commitment.

According to Article 59(2) of the Financial Regulation, Members States are required to take all necessary measures, including legislative, regulatory and administrative measures, to protect the Union’s financial interests, namely by preventing, detecting and correcting irregularities and fraud.

For the purposes of Council Regulation (EC) No 2988/95 of 18 December 1995¹ on the protection of the European Communities' financial interests, the term irregularity is a wide concept and covers both intentional and non-intentional irregularities committed by economic operators.

Article 1(2) of Regulation (EC) No 2988/955 defines "**irregularity**" as:

"any infringement of a provision of Community law resulting from an act or omission by an economic operator, which has, or would have, the effect of prejudicing the general budget of the Communities or budgets managed by them, either by reducing or losing revenue accruing from own resources collected directly on behalf of the Communities, or by an unjustified item of expenditure".

The Convention drawn up on the basis of Article K.3 of the Treaty on European Union, on the protection of the European Communities' financial interests² defines "**fraud**", in respect of expenditure, as any intentional act or omission relating to:

"- the use or presentation of false, incorrect or incomplete statements or documents, which has as its effect the misappropriation or wrongful retention of funds from the general budget of the European Communities or budgets managed by, or on behalf of the European Communities;

- non-disclosure of information in violation of a specific obligation, with the same effect.

- the misapplication of such funds for purposes other than those for which they were originally granted."

It is therefore the component of intentional deceit which distinguishes fraud from the more general term of "irregularity".

2. Aims and Objectives:

This Strategy sets out the managing authority's commitment to preventing, detecting and deterring fraud and corruption and to taking action where this is suspected or detected. Our strategy is based around four key themes: Prevention, Detection, Investigation and Sanction.

It aims to:

- Ensure that the ERDF 2014-20 Programme is protected against fraud and loss
- Embed an "anti-fraud" culture which mainstreams our commitment to **zero tolerance** to fraud and sets out roles and responsibilities of all staff in ensuring the achievement of this objective
- Actively encourage detection by putting in place checks at different stages of our business process to act as a deterrent to fraudulent and corrupt acts
- Provide a clear route map for investigation and remedial action
- Provide clear guidance for identifying, declaring and recording conflicts of interest

3. Scope:

The managing authority for ERDF 2014-20 England programme will not tolerate fraud or corruption (or other forms of financial irregularity) by anyone. As such, this Counter Fraud Strategy applies to all staff and stakeholders involved in the 2014-20 programme and those who come into contact with ERDF, for example:

- All ERDF Staff (including staff on secondment or loan from other government departments or external organisations/partners) in the managing authorities and Intermediary Bodies (IBs)
- Partners (in IBs and ESIF-related committees)
- Applicants and grant recipients
- Final beneficiaries
- Other stakeholders

The ERDF Counter Fraud strategy therefore aims to promote a culture which prevents, deters and detects fraudulent activities. To achieve this objective all staff have the responsibility to act honestly and with integrity and to safeguard the public resources for which they are responsible. They will also recognise that there are checks and safeguards built into services which will review their conduct in managing public funds.

4. Internal Communication:

The managing authority regularly remind staff of their responsibility to adhere to the rules set out in the ERDF 2014-20 Counter Fraud Policy and any related procedures in its internal staff bulletin. Also, staff are reminded to undertake the mandatory Civil Service annual Counter Fraud online training.

Regular reminders of the Counter Fraud Policy, the message that fraud will not be tolerated and general awareness raising around fraud are provided by the Assurance Team and fed through to all staff by the counter fraud leads.

5. External Communication:

The managing authority publishes its Counter Fraud policy on www.gov.uk - this includes full details of how external stakeholders can report suspected or actual fraud to the European Commission directly and a dedicated managing authority email address – both communication channels (details detailed below) can be used by whistle-blowers in confidence.

6. Senior Management Responsibilities:

Senior management (including PDT Heads) are responsible for:

- Ensuring the message of **zero tolerance** to fraud is disseminated to internal staff and external stakeholders.
- The eradication of fraud and corruption within the programme, and adoption of the right tone from the top.
- Ensuring any systems, procedures and internal controls agreed by the ERDF Boards are implemented to prevent, detect and minimise fraud and corruption in their areas of responsibility.
- Preventing and detecting fraud.
- Ensuring due diligence and implementation of precautionary actions in case of suspicion of fraud.
- Taking corrective measures, including any administrative penalties, as relevant.
- Ensuring staff understand they have a formal duty to report any suspicions.
- Ensuring that all staff receive appropriate training in general 'Fraud Awareness', including during induction.

7. Staff Responsibilities:

The managing authority ERDF members of staff are a very important element in our efforts to combat fraud and corruption. All staff at all levels have the duty to comply with counter fraud policy and procedures and to detect and report any genuine concerns or suspicions up the management chain, to their dedicated Counter Fraud leads (see annex D).

All staff are expected to attend training and familiarise themselves with the ERDF Counter Fraud policy and process of prevention, detection and reporting. The level and extent of

training will depend on the role that individual staff is required to undertake at a particular period.

Alongside the ERDF training, all staff are expected to be aware of DLUHC Counter Fraud policy and sign up to any formal training on fraud made available either through Civil Service-Learning online or classroom training

8. Assurance Team/CFDO's:

The Assurance Team that sits within the Central Support Unit supported by the CFDO's is responsible for

- Management of counter fraud strategy, policy and procedure
- Updating the risk assessment tool
- Investigating low/medium cases
- Referral to GIAA for high-risk referrals
- Ensuring the continuous review and amendment of this strategy, alongside managing the risk of fraud to ensure that it remains compliant with the EU Regulation

The team are responsible for assessing fraud risks within the ERDF 2014-20 Programme, using the pre-populated toolkit designed by the Commission. The team will review the fraud risk self-assessment a year after its development and decide the frequency of subsequent reviews.

For each of the specific risks, the overall objective is to assess the 'gross' risk of particular, fraud scenarios occurring, and then identify and assess the effectiveness of controls already in place to mitigate against these fraud risks either from occurring or ensuring that they do not remain undetected. The Assurance team will collaborate with other key stakeholders as appropriate, such as:

- Operational staff with appropriate level of knowledge
- On the Spot Verification Leads (A125)
- Certifying Authority
- GLA
- PDT Heads
- DLUHC Finance Business Partner
- Technical Assistance and IT
- ERDF Centre of Excellence Team
- Counter-Fraud Designated Officers
- DLUHC Corporate Fraud
- GIAA

The Assurance Team will undertake reviews of key documents (e.g. Assessment/Appraisal, Development, Procurement, Contracting and Guidance) and consider these in light of audit outcomes and fraud risks and ensure appropriate and proportionate controls are embedded where necessary.

9. Fraud Detection:

All staff are required to report suspected or actual fraud (and any systemic errors detected whilst conducting reconciliation and review of all irregularities) to the Counter Fraud Designated Officers, counter fraud leads, or in an exceptional circumstance (for example where the suspected fraud case involves a member of staff) directly to the GIAA.

External:

Applicants/grant recipients are required to report any suspicions or actual fraud to the managing authority as soon as they are made aware.

Beneficiaries, partners or third parties shall report suspicion of fraud, corruption or financial malpractice to the managing authority, **in confidence**, through this dedicated email ERDFFRAUD@levellingup.gov.uk.

In **exceptional** cases, where beneficiaries, partners and third parties genuinely believe that reporting through the preferred option of the dedicated email may not be appropriate for reasons of conflict of interest or fear of reprisals, they shall report suspicion of fraud, corruption or financial malpractice to:

Government Internal Audit Agency – Counter Fraud and Investigation,

ReferralIntelligenceTeamCounterFraudandInvestigation@GIAA.gsi.gov.uk.

The GIAA can be contacted **anonymously**, with as precise and detailed information as possible (including documents when available).

10. Fraud Investigation:

Managing authority/Greater London Authority staff must report any suspicion of fraud to the Counter Fraud Designated Officers or counter fraud leads who will assess the information and where necessary ask the member of staff to complete the fraud referral form (Annex B) and submit it to the cases and decide when it is appropriate to refer cases to the fraud inbox ERDFFRAUD@levellingup.gov.uk

The assurance team, with CFDOs, will review any cases received and determine next steps as follows;

- No need for more formal referral – this will be communicated to the body who made the initial enquiry
- Investigation of low/medium risk referrals by a CFDO
- Investigation of high risk referrals by GIAA

The managing authorities Counter Fraud Designated Officers (CFDOs) will, as appropriate, liaise with the Government Internal Audit Agency and MOPAG in their role of undertaking prompt investigation and follow all other related protocols as set out in the DLUHC Corporate Fraud Strategy.

The managing authority, GIAA and MOPAG will learn lessons from investigations carried out and share good practice.

The Assurance Team will maintain records of all suspected fraud cases and analyse patterns. PDTs will report fraud to the European Commission through the Irregularity Management System (IMS).

Once fraud has been suspected within an investigation, GIAA Counter Fraud & Investigations Team or MOPAG, will notify the MA and CA. In-line with agreed protocol this will be the appropriate point for the MA/CA to notify OLAF.

In regards to GIAA Counter Fraud & Investigations Team or MOPAG making a successful referral to the police/CPS as 'identified fraud' following their completed investigation, once again they will notify the MA/CA who will communicate this OLAF.

The Assurance Team will also ensure that Article 122 CPR requirements are adhered to and report suspected fraud to OLAF. In-line with EC guidance, only irregularities that are categorised as suspected fraud will be reported via IMS. Other instances under investigation for the possibility of fraud will be fully investigated and the activity and outcomes will be summarised in the end of year reporting through the Management Declaration Annual Summary (MDAS) and the Annual Control Report (ACR). The key reporting areas will include:

- the number of allegations received.
- the number of cases referred for further investigation by GIAA/MOPAG.
- cases classified as 'suspected fraud';
- cases referred to the police/CPS.

This information will give OLAF a clear picture of the fraud investigations during the reporting period, the detected irregularities and the associated preventive and corrective measures undertaken by DLUHC Assurance Team.

11. Fraud Sanction:

Disciplinary action and/or other legal action, including prosecution, will be taken against those found and proven guilty of fraud. The action will be in line with DLUHC Corporate Fraud Strategy, which includes seeking to work with other parties, in particular the Police, wherever appropriate. All appropriate financial and other redress will be pursued to recover any loss experienced as a result of fraudulent acts.

12. Learning Lessons, Knowledge sharing and Improvement:

A list of recommendations will be prepared by the Government Internal Audit Agency following all investigations of suspected and actual fraud cases. The managing authority will report suspected fraud and the effectiveness of its anti-fraud measures in the Annual Summary Report to the Commission.

The GIAA will include in its Annual Control Report a section on fraud suspicions detected during the year.

The managing authority, where appropriate, will share case studies of lessons learnt and best practice with staff and applicants. In addition, regular best practice will be reviewed at meetings of the ERDF Counter Fraud Leads network group and implemented across the programme, wherever appropriate.

13. Arachne (from mid-2020):

ARACHNE is a risk scoring tool which can increase the efficiency of project selection, management verifications and further strengthen fraud identification, prevention, and detection.

DLUHC has continued to work with IT developers and the EC to enable E-CLAIMS data to be used by Arachne. Data from DLUHC was entered into Arachne in early 2020 and is now updated on a monthly basis. The Assurance Team will use Arachne as a tool when looking at fraud referral cases, and the option will be available for PDTs to contact one of the Arachne users if they have a particular concern they want looking at when they are carrying out an appraisal or their due diligence. This will support the fraud controls and measures already in place through the ERDF business process.

Fraud Referral Process

14. Introduction

DLUHC as the managing authority is ultimately responsible for the successful delivery of the 2014- 2020 Programme and has made the GIAA responsible for the investigation of high-risk fraud cases throughout the Programme. The Government Internal Audit Agency as ERDF (England) Audit Authority (GIAA) has clearly defined and independent roles for the delivery of the 2014 – 2020 ERDF Programme.

15. Overarching Roles and Responsibilities

The European Commission has not given direction as to which authority should have the responsibility for investigating suspicions of fraud. In the absence of guidance, the managing authority and the GIAA have agreed the following roles and responsibilities:

The MA will be responsible for:

- Reporting irregularities including suspected frauds through E-CLAIMS and IMS.
- Responding to ad-hoc enquiries from the EC in relation to fraud.
- Creating a counter fraud culture throughout the ERDF programme.
- Ensuring that adequate proactive fraud detection measures are in place to identify potential cases of fraud.
- Coordinating and managing the fraud arrangements for ERDF Programme.

- Conducting investigations into allegations of low and medium risk fraud, via referrals.
- Making the final decision on which investigations are reported to the police.

16. The GLA will be responsible for:

- Reporting suspected or actual fraud to the managing authority.
- Conducting investigations into allegations of fraud relevant to its managing of ERDF programme in London, through MOPAG.
- Providing all information required by the managing authority and working closely during investigations.
- Providing the managing authority with investigation reports.

17. The GIAA will be responsible for:

- Providing fraud advice and training, as and when requested, for the managing authority, Certifying Authority, and A127 Teams.
- Conducting and managing investigations into allegations of high risk fraud.
- Providing the managing authority with investigation reports.

18. Reporting Suspected Cases of Fraud

Fraud can be suspected or detected at any stage in the ERDF end to end business process from the time applications are being appraised/assessed to when projects are closed.

In relation to the reporting and investigation of suspected fraud the following principles shall apply as set out in the Flowchart at **Annex A**:

- All staff (MA/CA/GLA/A127) must report suspicions of fraud (whether suspected or actual) by completing the **ERDF referral Form Annex B** and send it to the fraud referral inbox :
ERDFFRAUD@levellingup.gov.uk
Staff may approach their ERDF CF lead initially for advice or send a referral direct to the inbox
- DLUHC staff (MA/CA) can also report suspicions of fraud (where e.g. it involves a member of staff or where they feel uncomfortable reporting to CFDOs) through DLUHC Whistle-blowing route.
- The fraud inbox is regularly monitored by the Assurance team who will pick up any referrals and ensure they are seen by the CFDOs.
- The CFDOs, in the first instance, will provide staff with advice on their initial concerns. Where the CFDOs are of the opinion that there is a potential for fraud, staff may be asked to provide additional information on further fields within **ERDF referral Form Annex B (stage 2)**.
- The CFDOs will undertake an in-depth review of allegations received via the Fraud Referral Form in order to further assess the potential of fraud being present. Following the review of allegations, a **Counter Fraud Referral Plan, Annex C**, will be completed by the CFDOs detailing the work undertaken and recommendations for further action.

- Where it is considered likely that fraud is present, these cases will be deemed suspected fraud cases. Where it is deemed unlikely that fraud is present these cases will be returned to the PDT or GLA to be dealt with by them.
- Where the CFDOs recommend a formal investigation is required, high risk referrals will be reported by the Assurance Team to GIAA (or MOPAG for GLA). When the fraud is deemed low to medium risk the CFDO will conduct the investigation.
- GIAA or MOPAG will make the final decision, in relation to high risk referrals, as to whether an investigation is required, providing the Assurance Team with written confirmation as to the reasons for their decision.
- In relation to high risk referrals, where agreement to investigate is reached, GIAA or MOPAG will undertake the investigation keeping the Assurance Team updated with progress as appropriate. The Assurance Team will update the PDT or GLA as appropriate.
- Where suspected frauds have been identified the decision to pay claims will remain with the Managing Authority (or GLA) through discussions with the CFDOs/PDT/GLA.
- Following the conclusion of an investigation by the CFDO on low to medium risk referrals, the Counter Fraud Referral Plan will provide complete details of the investigation in the summary section and the CFDOs will ensure the proposed recommendations highlighted in the referral plan are taken forward following discussions with the Assurance Team Manager and working alongside the appropriate Growth Delivery Team (PDT).
- Following the conclusion of an investigation by GIAA or MOPAG for high risk referrals, an investigation report will be produced. The CFDOs will ensure the recommendations of the investigation report are taken forward following discussions with the Assurance Team Manager and working alongside the appropriate Growth Delivery Team (PDT).
- The Assurance Team will be responsible for maintaining case records (except the investigation file) and for informing the relevant Bodies such as the European Anti-Fraud Office where necessary.
- The Audit Authority will include the conclusions of any suspected or actual fraud cases in its Annual Control Report to the Commission.
- Following the conclusions of fraud investigations, the Assurance Team will conduct (with input from the GIAA where necessary) a thorough and critical review of any related internal control systems that may have exposed the MA to the potential or proven fraud.
- The Assurance Team will feed the outcome of the investigation into the review of the Fraud Risk Self-Assessment process.

19. When to refer a case

It is not possible to provide an exhaustive list of circumstances of when a case should be referred. The key factor in determining that a referral is necessary is that fraud is suspected, or malpractice is indicated. All cases must be referred, even if it is for advice where staff are uncertain.

Examples of information that may help inform a decision to refer include:

- desk scrutiny of ERDF applications, during a On the Spot Verification visit or claims check.
- as a result of information received by telephone call or letter from an external or internal source e.g. a whistle-blower.
- lack of evidence to support outputs claimed.
- trends identified during reconciliation and review of all irregularities.
- a grant recipient failing to co-operate in rectifying an error or refunding monies following correspondence or a visit.
- following a visit to a related organisation.

Where there is a formal referral, and suspected high-risk fraud, the CFDO will pass to the GIAA with the following details:

- What the issue is and how the concern arose.
- What action has been taken so far, listing dates.
- What action/support is requested from GIAA to assist in resolving the issue e.g. advice on suspicions or assistance with the investigation.
- Any relevant background information to support the suspicion.

20. Responsibilities during Referral Process

The following section sets out in outline the main responsibilities of those involved in the referral process.

The PDT is responsible for:

- Identifying and reporting suspected frauds.
- Referring suspected or actual fraud cases to the fraud referral inbox for assessment and decision.
- Assessing the impact on other project related funds.
- Considering recommendations made as a result of investigations.
- Implementing any lessons learnt.
- Informing the European Anti Fraud Office of cases of fraud investigated through IMS

The Counter Fraud Designated Officers are responsible for:

- Providing advice on action and way forward.
- Investigating low to medium risk referrals.
- Deciding whether to block further payments to beneficiaries in collaboration with the PDT
- Identifying any lessons to be learnt for the PDT or the wider ERDF network.
- Reviewing controls subsequent to a confirmed fraud case.

GIAA is responsible for:

- Providing advice on action.
- Undertaking high risk referral investigations.
- Providing report after each investigation.
- Providing regular updates on ongoing investigations.

The Assurance Team is responsible for;

- Monitoring the fraud referral inbox
- Referring fraud cases to GIAA as appropriate and liaising with DLUHC fraud team
- Undertaking thorough review of any processes, procedures and controls connected to the suspected or actual fraud following investigation
- Including details of any cases in the managing authority annual summary report.

21. Reporting Details

The table below contains the contact details for GIAA and the Assurance Team with the responsibility for fraud and irregularities, all cases should be referred to these staff in the first instance.

Name:	Simon Hannah (Assurance Team Leader)
Address:	Second Floor, Eastbrook, Shaftesbury Road, Cambridge CB2 8DF
Phone:	0303 444 6403
Email:	Simon.hannah@levellingup.gov.uk
	Counter Fraud Designated Officers listed in TOR are the primary contact
Name:	Graeme Bowers (GIAA Primary Contact)
Address:	Government Internal Audit Agency , Counter Fraud and Investigation, Floor 2, Crown House, New Street, Burton on Trent DE14 3SN
Phone:	01283 505061 or 07717 786184
Email:	Graeme.Bowers@giaa.gov.uk or ReferralIntelligenceTeamCounterFraudandInvestigation@GIAA.gov.uk .

Conflicts of Interest Policy

22. Scope

This policy guidance applies to all staff members of the European Programme and Local Growth Delivery Directorate, in delivering their duties on the ERDF and ETC programme.

This policy covers the procedure to follow when identifying, declaring and recording conflicts of interest.

23. Conflicts of Interest

A conflict is where an external interest might influence or be considered to be capable of influencing an individual's judgement. The individual does not need to abuse their position or receive an actual benefit (financial or non-financial) before a conflict of interest can take place. There are a number of potential scenarios which could cause a conflict of interest, for example, having a financial interest in a partner, beneficiary, third party organisation, accepting gifts or money from stakeholders.

24. Types of Conflicts of Interest

Conflicts of interest may be classified into four categories:

- Financial interests – conflict of interest may arise where there is potential for financial gain to a member of staff, their family or friends as a result of a decision the individual has taken, it could be through the assessment or appraisal of an application.
- Organisational relationships - conflict of interest may arise where the staff member has a relationship with a partner organisation, beneficiary or third party organisation which are or may be affected by their role in the ERDF or ETC programme.
- Personal relationships – this is where there is a risk that personal relationships will affect the member of staff's judgement, e.g., close relationships such as spouses and civil or cohabiting partners. Here there may be conflicting loyalty in decision making or action.
- Prejudgement – this is where an approach to decision making is compromised by application of information outside the ESIF 2014-20 programme set criteria, which impacts on the ability of the individual to be impartial.

25. Conflicts of Interest Policy & Register

The managing authority is required by the Commission to have in place a conflicts of interest policy, a register for all staff and to ensure these are adhered to as part of our counter-fraud risk assessment. It is also an important mechanism for managing risk and calculating the counter fraud 'culture' in staff; a factor which the managing authorities counter fraud policy and strategy aim to achieve. The conflicts of interest policy also plays an important part in the managing authority's designation process.

26. Disclosure of Personal Conflicts

All members of staff will behave in accordance with the 'Seven Principles of Public Life' (selflessness, integrity, objectivity, accountability, openness, honesty and leadership) known as the 'Nolan Principles' (found [here](#)).

If a member of staff has an interest outside of work which impinges or has the potential to impinge on any of the Nolan Principles, the individual must declare it in their local Conflicts of Interest register. They should do this by notifying their counter fraud lead.

An example of a potential conflict of interest is where an individual is a member of a charitable organisation which has applied for funding, or the individual has previously worked for such a charitable organisation. The managing authority will adopt the principle of '*if in doubt, disclose*' to avoid any inadvertent conflicts.

27. Steps for Disclosing Personal Conflicts

Step1: report immediately to line manager and counter fraud lead and complete the 2014-20 Conflicts of Interest register.

Step 2: the line manager (or other suitable senior official), with the individual, decide on proportionate and appropriate action to minimise the risk of and advert impact – or of the conflict occurring. This may include an alteration of role or refraining from decision making.

28. Completion of the Register

All staff are required to complete the ERDF 2014-20 Conflicts of Interest register with the details required on the form and any declarations of interest. Counter fraud leads in PDTs will remind staff of this requirement and when any changes are made will forward the register to the Assurance Team within the Centre of Excellence Team, marked OFFICIAL - SENSITIVE. This must be completed by everyone, including a NIL response where there is nothing to disclose, for completeness.

The Assurance Team will ensure the annual update of the register, as a minimum. However, it is the responsibility of all staff to inform their line manager and complete the register where they consider there is or a potential for a conflict of interest in between the timeframe of the annual update.

29. Data Protection

The information provided in the ERDF 2014-20 Programme Disclosure of Conflicts of Interest register will be processed, stored and accessed in accordance with data protection principles as set out in the Data Protection Act 2018. The information may be used for the purposes of preventing, detecting or investigation of fraud. The Assurance Team are the owners of the document and the information will not be shared with other team members and will be stored in a secured environment.

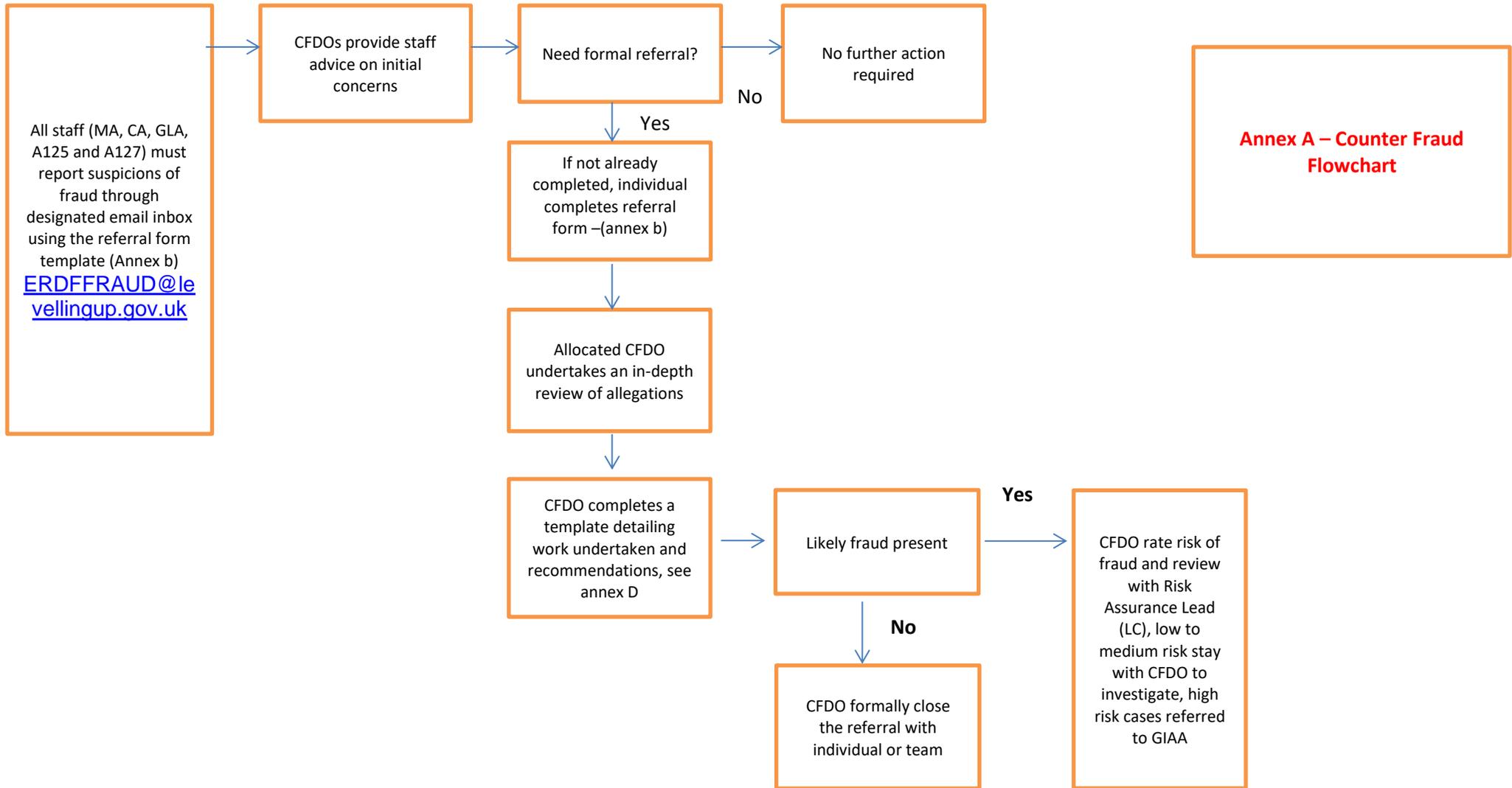
See attached:

Annex A – Referral flowchart

Annex B - ERDF referral form

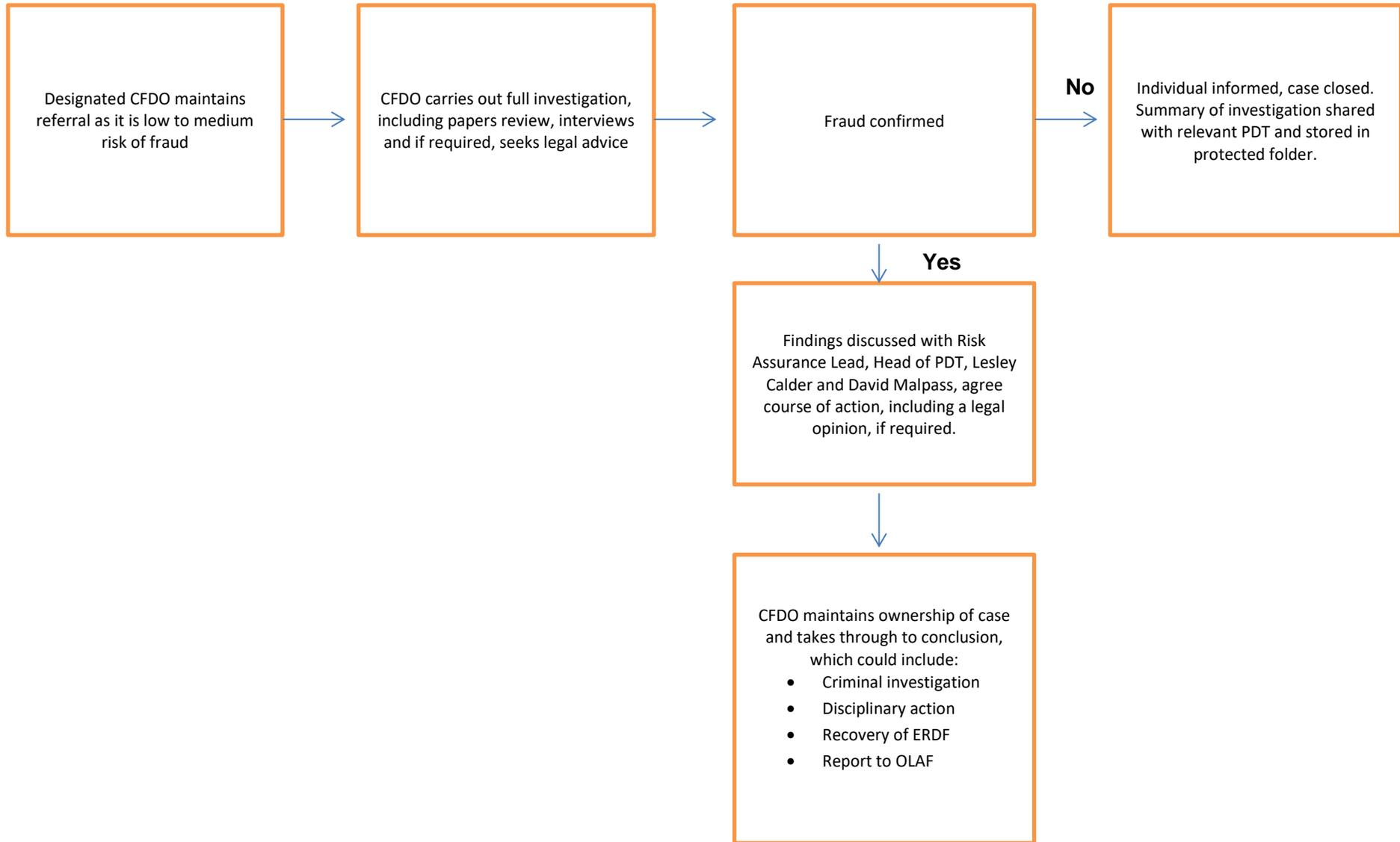
Annex C – Counter Fraud referral form

Annex D – Counter Fraud leads

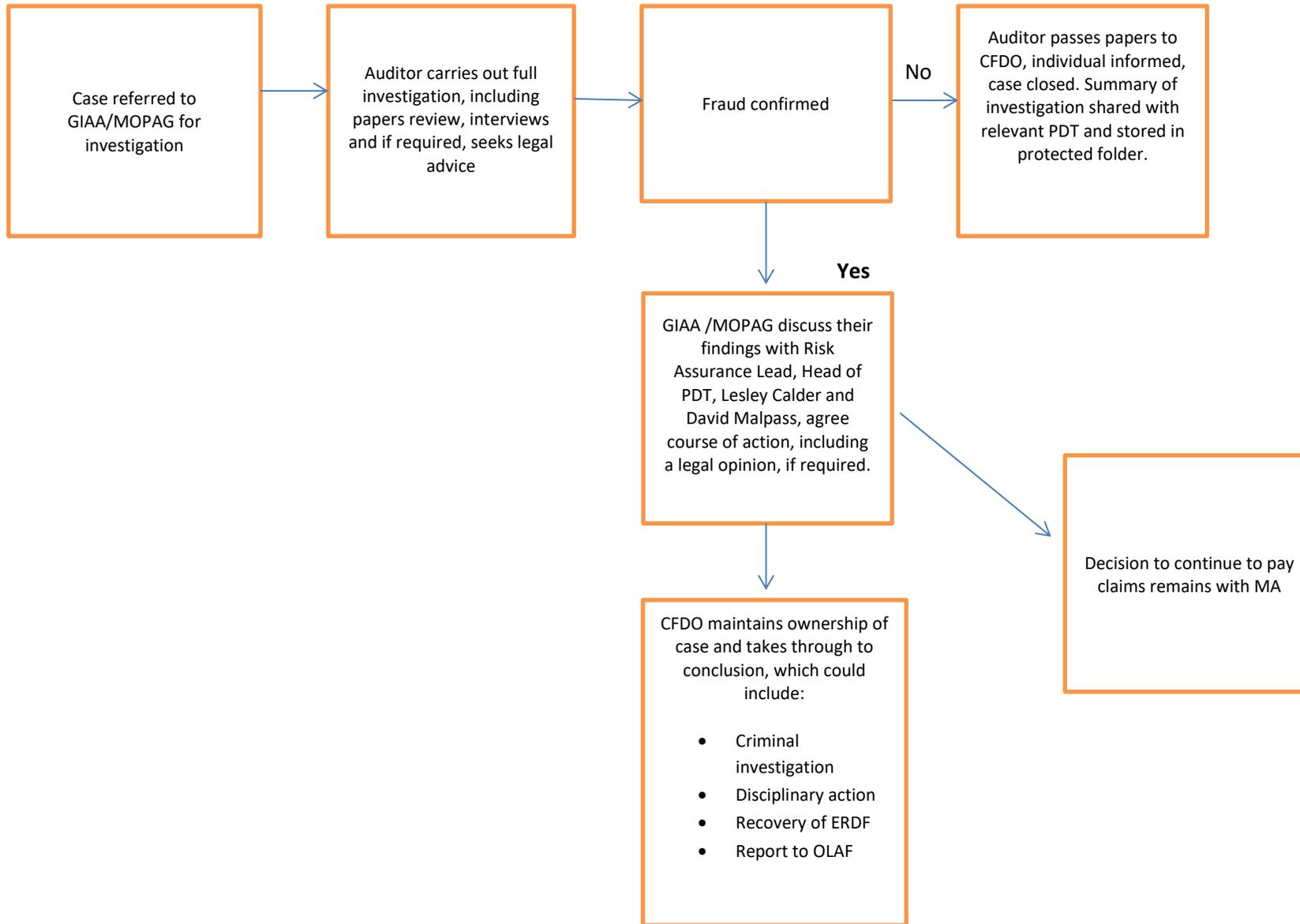


Annex A – Counter Fraud Flowchart

Stage 1 – initial referrals



Option 1 - Medium and Low risk investigations by CFDOs



Option 2 - High risk investigations by GIAA/MOPAG



European Union

European Regional
Development Fund

Fraud Referral Form - Annex B

Name of Programme	
Name of applicant organisation	
Address of applicant organisation	
Project Reference Number/s	
Value of project including ERDF element	
Period covered by claim	
Details of issue/query	
Details of any action taken to date	
Action required from CFDO	
Any significant timescales	
Impact analysis related risk value and political considerations	
List of any attached documentation	
Contact Details – Name	
Position	
Contact number	
Email	
Date	

Once completed, this form and the forwarding email should both be marked: **OFFICIAL – SENSITIVE**.
The completed form should be sent electronically to: ERDFFRAUD@levellingup.gov.uk

Stage 2

Further detail requested by CFDO

Date:

CFDO:

Detail required	Response



European Union

European Regional
Development Fund

XXX PDT COUNTER FRAUD REFERRAL PLAN

Reference number

[OFFICIAL SENSITIVE]

Annex C

Grant Recipient:

Project Name:

Project Number:

ERDF Amount:

Agreement Date:

Project Details:

Referral details:

Preliminary background research undertaken by CFDO:

No.	Item	Received	Completed	CFDO Comments	Follow up work
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					

Summary:

Proposal Recommendations:

Counter Fraud Designated Officer:		Signature:		Date:	
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Counter Fraud Assurance Lead:		Signature:		Date:	
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Comments and Next steps:

Annex D - List of Counter Fraud Leads

Each key part of the organisation will continue to provide at least one Counter Fraud Lead Due to high staff turnover re-releasing guidance to maintain this list of representatives has become impractical. The Terms of Reference for the Counter Fraud Network will now maintain an updated list of contacts.