



PWYLLGOR ADNODDAU CYNALIADWY SUSTAINABLE RESOURCES COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	24 October 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Financial Procedures
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Huw Thomas, Director of Finance

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

Each year planned reviews are undertaken of the financial procedures operated by Hywel Dda University Health Board (HDdUHB). The procedures, which set out the main financial system controls, are reviewed in terms of: -

- Relevance
- Best practice
- Audit recommendations
- System change
- Health Board policy

Cefndir / Background

The following procedure has been reviewed and is presented to the Sustainable Resources Committee for approval: -

- FP066 Losses and Special Payments Procedure

Asesiad / Assessment

FP066 Losses and Special Payments Procedure

The purpose of this document is to outline the key processes to be followed by Health Board staff in connection with Losses and Special Payments and to set out associated roles and responsibilities. This procedure has been updated to be in line with the latest Financial Procedure format.

The current financial procedure details delegated limits for approving ex gratia payments for personal property claims which have been in place for a significant time. Therefore, it is deemed appropriate to increase the delegated limits to a more appropriate level.

The procedure is covered by a specific Financial Procedures Equality Impact Assessment (EqIA) with no negative impact.

Argymhelliad / Recommendation

The Sustainable Resources Committee is asked to approve the following updated financial procedure:

- FP066 Losses and Special Payments Procedure

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.13 Review and approve financial procedures on behalf of the Health Board.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	Previous procedures, internal audit report recommendations, standing financial instructions
Rhestr Termiau: Glossary of Terms:	Included within the body of the report

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Adnoddau Cynaliadwy: Parties / Committees consulted prior to Sustainable Resources Committee:	HDdUHB Finance HDdUHB Local Counter Fraud Service HDdUHB Workforce & OD HDdUHB ARAC NHS Wales Shared Services Partnership (NWSSP)
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Financial procedures are required to ensure sound financial control
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Financial procedures are required to ensure good governance and therefore minimise risk
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Financial procedures are required to ensure good governance and sound financial control
Gyfrinachedd: Privacy:	Not applicable

<p>Cydraddoldeb: Equality:</p>	<p>EqlA has been undertaken with no negative impacts on those with protected characteristics.</p> <p>Changes to the majority of financial policies and procedures to date have been assessed as having a low relevance to equality duties and have been mainly in relation to systems and responsibilities with no direct or indirect impact on individuals in relation to equality, diversity or human rights.</p> <p>Where policies and procedures have a more direct impact on patients, staff and service users in relation to their protected characteristics, e.g. those addressing the handling of patients' monies, etc, more detailed EqlAs have been undertaken and are published alongside the relevant document.</p>
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Losses and Special Payments Procedure

Procedure information

Procedure number: 066

Classification:
Financial

Supersedes:
Previous Versions

Local Safety Standard for Invasive Procedures (LOCSSIP) reference:
N/A

National Safety Standards for Invasive Procedures (NatSSIPs) standards:
N/A

Version number:
4

Date of Equality Impact Assessment:
21/10/2022

Approval information

Approved by: Sustainable Resources Committee

Date of approval:

Date made active:

Review date:

Summary of document:

This document provides a clear process to be followed for identifying, reporting, recording and investigating all losses occurring within the Health Board, except those relating to Clinical Negligence or Personal Injury which are dealt with through the Claims Management Policy.

Scope:
Hywel Dda University Health Board Wide.

To be read in conjunction with:

[Standing Orders Hywel Dda University Local Health Board](#) (opens in new tab)

[Standing Financial Instructions](#) (opens in new tab)

[815 - Counter Fraud, Bribery and Corruption Policy](#) (opens in new tab)

[Financial Procedures](#) (opens in new tab)

Patient information:

Include links to [Patient Information Library](#)

Owning group:

Finance Directorate

10/11/2022

Executive Director job title:

Huw Thomas – Director of Finance

Reviews and updates:

1.0 – New Procedure

2.0 – Revised

3.0 – Revised

Keywords

Losses, Special, Payments

Glossary of terms

NHS – National Health Service

LaSPaR - Losses and Special Payments Register

UK – United Kingdom

EEA - European Economic Area

FRAUD, BRIBERY AND CORRUPTION

All staff are required to comply with the Health Board's policies and procedures and apply best practice in order to prevent Fraud, Bribery and Corruption. Staff should be made aware of their own responsibilities in protecting the Health Board from these crimes.

All staff have a duty to notify the Local Counter Fraud Department of any suspected fraud or inappropriate actions and are protected by the [AW Raising Concerns \(Whistleblowing\) Policy](#) (opens in a new tab). Anyone who suspects fraud or has any concerns reference Fraud Bribery and Corruption can make a referral by contacting the Counter Fraud Department by either of the following methods;

- Telephoning the office on 01267 266268,
- Emailing HDUHB.CounterFraudTeam.HDD@wales.nhs.uk ,
- Making an online referral at <https://reportfraud.cfa.nhs.uk> or
- Making an anonymous referral by telephoning Crimestoppers on 0800 028 40 60.

Staff should refer to the [Counter Fraud, Bribery and Corruption Policy](#) for further information.

Contents

Procedure information.....1

Approval information1

Introduction5

Scope5

Aim.....5

Objectives5

Definition and Principles of Losses and Special Payments5

Roles and Responsibilities6

Recording, Reporting and Investigation of Losses7

 Reporting and Investigation of Losses7

 Recording of Losses10

 Special Payments10

Delegated Authorisation Limits11

Monitoring and Review11

Appendix 1 – Delegated Limits12

Appendix 2 – Loss or Damage to Health Board Property Form.....15

Appendix 3 – Form PP1 – Loss or Damage to Personal Property.....17

Appendix 4 – Form PP2 – Approval for Payment of Exgratia Compensation.....19

Appendix 5 – Flowchart for Approval of Claims23

Introduction

This procedure details the processes to follow for the reporting of all Losses and Special Payments.

Scope

The financial procedure is Health Board wide.

Aim

The aim of this document is to:

- Ensure that a sound system exists for identifying, reporting, recording and investigating all losses/special payments occurring within the Health Board, except those relating to Clinical Negligence or Personal Injury which are dealt with through the Claims Management Policy.

Objectives

The aim of this document will be achieved by the following objectives:

- Ensure the effective recording, reporting and investigation of all losses in a timely manner.

Definition and Principles of Losses and Special Payments

Losses and special payments are items that the Welsh Government would not have contemplated when it agreed funds for NHS Wales or passed legislation. By their nature they are items that ideally should not arise. They are therefore subject to special control procedures compared with the generality of payments, and special notation in the accounts to draw them to the attention of the Welsh Government. They are divided into different categories, which govern the way each individual case is handled. This guidance is not applicable to any losses or special payments that arise from inter NHS Wales transactions.

In considering losses and special payments, it is always important to look beyond whether the proposed write off or payment represents value for money. The need for corrective action must also be carefully assessed to minimise the number (and cost) of future cases. This includes any wider lessons for NHS Wales as a whole.

NHS Wales Health Bodies do not have unlimited powers to make special payments or to write-off losses. They must obtain written approval of the Welsh Government H&SSG Finance Director before writing-off a loss or making, or undertaking to make, any special payment that exceeds their delegated limit. Where cover is provided through the Welsh Risk Pool, the delegated limits apply to the gross loss suffered by the NHS Wales body and the Welsh Risk Pool, but again net of any amount recovered or covered by insurance and excluding any defence or administrative cost.

All Health Board employees have a general responsibility for the security of Health Board property and for minimising the risk of loss. Service Delivery Managers have additional responsibility for the security of patients' property and monies where it has been deposited for safe custody in accordance with the Patient Property and Monies procedure.

Managers have a responsibility to notify their Heads of Department/Service Managers/Service Delivery Managers/Directorate General Manager and Director of Finance in writing off of all losses, using the appropriate documentation outlined in this procedure.

This financial control procedure incorporates the principles set out in the Welsh Government Manual for Losses and Special Payments.

The Manual includes the Welsh Government's delegated authority to HBs to approve payment and write off losses within specified limits. Any write offs and all payments made by Hywel Dda University Health Board will be compliant with these instructions.

The Manual also describes the different categories of loss and special payments that may arise for Health Bodies. These are detailed in [Appendix 1](#) of this procedure. On discovering a loss or considering a special payment Hywel Dda University Health Board will take the appropriate action as set out in the Manual.

The Audit and Risk Assurance Committee of the Health Board will be adequately informed to ensure it is in a position to make proper decisions with regards to the following key points:

- The nature of the case and the circumstances in which it arose,
- What recovery action has been taken, if any,
- Reasons why the write-off or special payment should be approved by the Board (if the case falls within the level of delegated limits given to Health Board), or the Health and Social Care Department – Resource Directorate in Welsh Government,
- Whether legal advice has been sought, and if so, its content,
- Whether fraud, dereliction of duty or failure of supervision is involved,
- Whether appropriate legal and/or disciplinary action has been taken, and if not, why not,
- Whether investigation has shown defects in existing systems of control and, if so, what remedy is proposed,
- Whether any general lessons emerge which are of benefit to other NHS Health bodies,
- The Health Board will ensure that approval of case write-off is obtained from either the Health Board's Audit and Risk Assurance Committee or Welsh Government depending on the level of delegation given to Health bodies,
- The Health Board will close the case once all reasonable action pertaining to the case has been taken.

Roles and Responsibilities

	Procedure	Responsible party
1	Notify the Police, Welsh Government, Chief Executive and Counter Fraud of losses where relevant	Director of Finance
2	Ensure all managers implement financial and other related management controls to promptly detect any losses	Director of Finance
3	Approve ex gratia payments in line with the delegated authorisation limit	Director of Finance
4	Maintain the computerised losses and special payments register held on Laspar	Director of Finance

5	Report all losses over £5,000 to the Audit and Risk Assurance Committee	Director of Finance
6	Report all losses in line with this procedure	Service Managers, Heads of Department, Service Delivery Managers and Directorate General Managers
7	Approve ex gratia payments in line with the delegated authorisation limit	Service Managers, Heads of Department, Service Delivery Managers and Directorate General Managers
8	Ensure internal controls are in place to promptly detect any losses	Service Managers, Heads of Department, Service Delivery Managers and Directorate General Managers
9	Undertake a full management investigation where losses have occurred	Service Managers, Heads of Department, Service Delivery Managers and Directorate General Managers
10	Processing of payments once authorised	Financial Accounting

Recording, Reporting and Investigation of Losses

Reporting and Investigation of Losses

Any employee or officer discovering or suspecting a loss of any kind must either immediately inform their head of department or line manager, who must immediately inform the Chief Executive or the appropriate officer under the scheme of delegation and/or the Director of Finance.

Where a criminal offence is suspected, the Director of Finance shall immediately inform the Police if theft or arson is involved. If the case involves suspicion of fraud and corruption, then the Director of Finance must inform the Local Counter Fraud Specialist and Counter Fraud Service Wales, in accordance with the Welsh Government's directions to NHS Bodies on counter fraud measures. The Director of Finance or the Local Counter Fraud Specialist must notify the Audit Risk and Assurance Committee, the External Auditor and Welsh Government via Counter Fraud Service Wales.

The Audit and Risk Assurance Committee shall approve the writing off of losses (including bad debts, or the making of special payments) within delegated limits at each committee meeting.

Losses are divided into the following categories in accordance with the WG Manual on losses and special payments: -

- Category 1 – Losses of cash
- Category 2 – Fruitless payments
- Category 3 – Bad debts and claims abandoned

- Category 4 – Damage to buildings, their fittings, furniture and equipment and loss of equipment and property in stores and in use (see additional detail below)
- Category 5 – Theft of IT equipment

All losses reported should have sufficient details attached as to the circumstances surrounding the loss. Such details should include where appropriate; statements from members of staff, date of loss, cause (if known), its value based either on historic or replacement value, a description of the items, model number etc., together with recommended preventative action which could be taken to prevent a recurrence.

Loss of Damage to Health Board Property

All incidents which result in loss or damage to Health Board Property should be reported promptly by a Manager to the Director of Finance using the Loss or Damage to Health Board Property Form ([See Appendix 2](#)). Refer to the flowchart ([See Appendix 5](#)) to assist with the approval of any claims.

This covers cases including:

Culpable causes e.g. suspected or proven theft or criminal damage (including arson), fraud or sabotage (whether proved or suspected), neglect of duty or gross carelessness.

- Other causes, for example
 - Losses by fire (other than arson);
 - Losses by weather damage or by accident proved on due enquiry to be beyond the control of any reasonable person;
- Losses due to deterioration in use and deterioration in store due to some defect in administration such as:
 - Over provisioning
 - Retention of excess or obsolete stocks
 - Storage of items with a known shelf life in quantities greater than could be turned over within that life
 - Failure to turn over stocks in proper sequence; and
 - Failure to set and to observe property standards to keep stock in good condition.

In the case of buildings, the amount to be written off depends on whether the building is repaired. If a decision is made not to repair it, the amount to be written off is the value of the building (or part) and lost contents immediately prior to the incident. If it is repaired, the amount to be written off is either the cost of repair to the building and contents, or the estimated value of the contents if destroyed, less any sum received from the sale of scrap.

In the case of vehicles, the amount to be written off is either;

- The cost of repairs to the vehicle (if readily ascertainable) less any sums recovered from an insurance company or other party should be treated as a stores loss.
- Payments to an insurance company or other party should be treated as compensation payments (made under legal obligations).
- If the vehicle is a total loss the amount to be written off is the value immediately prior to the accident less any sum received from the sale of scrap.

Unless there are special features or circumstances justifying exceptional treatment, all losses of bedding and linen in use should be valued at 50% of the current replacement cost. Where stores losses and write-offs occur, they should be valued at book value less net disposal proceeds.

Where equipment on loan to patients is lost or becomes valueless in circumstances not justifying recovery of the cost, it should be treated in the same way as articles that have deteriorated in use. Failure to recover a sum due to be paid by a patient should be treated as a bad debt.

Loss or Damage to Personal Property

All incidents which result in loss or damage of personal property should be reported promptly by a Manager to the Director of Finance. Where no ex gratia payment is to be made, losses forms are not required.

To initiate the claim procedure, the claimant will need to complete Personal Property Form PP1 ([See Appendix 3](#)) and submit this form to the Manager where the incident occurred.

The Manager will need to investigate the details stated in the PP1 form and decide on the recommended course of action, whether the Health Board is liable for the loss, and ultimately whether or not to authorise an ex gratia payment. It is also important to note that any payment should be made on an indemnity basis.

If an ex gratia payment is to be made, an Approval for Payment of Ex Gratia Compensation Form ([See Appendix 4](#)) should be completed by a Manager and authorised in accordance with the delegated authorisation limits stated in section '[Delegated Authorisation Limits](#)'.

When determining the value of the payment to be made, a reasonable value may need to be offered taking into account the age of the item. The Head of Department will also need to consider taking appropriate action to reduce the risk of similar incidents occurring in the future.

When submitting a claim to the Director of Finance please ensure the following is included: -

- PP1 form (completed by the claimant)
- PP2 form (completed by the Manager and authorised in line with the Health Board's delegated authorisation limits)
- Evidence to substantiate the amount claimed
- Copy of the Datix report

Once the claim has been fully authorised, the Losses and Compensation Accounting Officer will arrange for the ex gratia payment to be processed and record the loss on the Health Board's Losses and Special Payments Register (LaSPaR). Refer to the flowchart ([See Appendix 5](#)) to assist with the approval of any claims.

Loss or Damage to Personal Property (Staff)

Ex-gratia payments to staff for the loss or damage to their personal property follows the procedure above, but may only be made when all the following criteria apply:

- The incident occurs during the course of their employment;
- The articles lost or damaged were reasonably carried during the course of their employment;
- The articles are sufficiently robust for the treatment they might reasonably be expected to bear;

- The loss or damage is not due to the officer's own negligence; and
- The loss or damage is not covered by insurance or by any provision for free replacement.

Where the article can be repaired the payment should cover the actual cost of repair. However, where it is lost or damaged beyond repair the value of the property immediately before the incident should be paid (the cost of replacement less the estimated amount by which the property had depreciated since purchase). Refer to the flowchart ([See Appendix 5](#)) to assist with the approval of any claims.

Recording of Losses

All payments made by Hywel Dda University Health Board which fall under the Welsh Government category of Losses and Special Payments shall be recorded using the Losses and Special Payments Register (LaSPaR) system.

The main control procedures to be followed by Hywel Dda University Health Board in administering the LaSPaR system are set out below: -

- The Health Board will register any losses and special payments cases onto the LaSPaR system on a case-by-case basis;
- The Health Board will nominate a named individual to be its case system administrator;
- The Health Board will formally transfer structured settlement cases to the Welsh Risk Pool once approval to settle on a structured basis has been secured from Welsh Government (legal responsibility will continue to lie with the Health Board);
- The Health Board will regularly monitor its cases on LaSPaR to ensure the system is accurately maintained and that they are always fully appraised of the status of each case.

Special Payments

Special payments are those defined as such in the Welsh Government Losses and Special Payments Manual.

In practice, the vast majority of special payments made by the Health Board will be in respect of compensation payments for Clinical Negligence and Personal Injury claims which are dealt with separately under the Claims Management Policy. This procedure outlines the process to be followed for payments for other minor claims. Special payments are categorised as follows: -

- Compensation payments made under legal obligation
- Extra contractual payments to contractors
- Ex gratia payments
- Loss of personal effects
- Personal injury and other negligence and injury cases
- Other cases e.g. settlements on termination of employment, special severance payments
- Maladministration
- Patient referrals outside of the UK, the European Economic Area (EEA) and Switzerland
- Extra statutory or extra regulatory payments
- Voluntary Early Release Scheme

Clinical Negligence and Personal Injury

Claims for alleged Clinical Negligence and Personal Injury should be dealt with through the Health Board's Claims Management Policy and recorded on the Losses and Special Payments Register (LaSPaR).

Refer to the flowchart ([See Appendix 5](#)) to assist with the approval of any claims.

Delegated Authorisation Limits

The Welsh Government Manual for Losses and Special Payments specifies the Health Board's delegated authorisation limits by type of loss ([See Appendix 1](#)).

The delegated limit for approving ex gratia payments for personal property claims within directorates is as follows:

- Up to £250 – Directorate Managers
- Up to £1,000 – General Managers
- Up to £1,500 – Senior Finance Business Partner (Accounting & Statutory Reporting)
- Above £1,500 – Director of Finance

It should be noted where Welsh Government approval is required to write-off any Loss or Special Payment, the loss should not be recorded in the Register until approval has been received. The Welsh Assembly Government will allocate a loss reference number, which should be noted in the Health Board's Register, and identified as such on the annual return (LFR4) submitted to Welsh Government.

Monitoring and Review

The monitoring and review of this procedure is the responsibility of the Finance Business Partners in the Statutory Reporting team. Reviews will be undertaken in line with the Health Board's review policy, which is every 3 years, or when changes are identified prior to the required review date.

Appendix 1 – Delegated Limits

The delegated limits relate to the requirement for NHS Wales health bodies to obtain approval for write-off of the loss or special payment.

<u>CATEGORY OF LOSS/SPECIAL PAYMENT</u>	DELEGATED LIMITS (£)
Losses (except in respect of primary care provider services)	
1) Loss of cash due to:	
a. theft, fraud, etc	50,000
b. overpayment of salaries, wages, fees and allowances	50,000
c. other causes, including Foreign Exchange losses, including un- vouched or incompletely vouched payments, overpayments other than those included under 1(b); physical losses of cash and cash equivalents e.g., stamps due to fire (other than arson), accident and similar causes	50,000
2) Fruitless payments (including abandoned capital schemes)	250,000
3) Bad debts and claims abandoned:	
a. private patients (Sections 65 and 66 NHS Act 1977)	50,000
b. overseas visitors (Section 121 NHS Act 1977)	50,000
c. cases other than a-b	50,000
4) Damage to buildings, their fittings, furniture and equipment and loss of equipment and property in stores and in use due to:	
a. culpable causes eg, theft, fraud, arson or sabotage whether proved or suspected, neglect of duty or gross carelessness	50,000
b. other causes	50,000
Special payments (except in respect of primary care provider services)	
5) Compensation payments made under legal obligation	FULL *
6) Extra contractual payments to contractors	50,000
7) Ex-gratia payments	
a. to patients and staff for loss of personal effects	50,000

b.	for clinical negligence (negotiated settlements following legal advice) where the guidance relating to such payments has been applied	1,000,000 including plaintiff's costs, defence costs and other payments *
c.	for personal injury claims involving negligence where legal advice obtained and relevant guidance has been applied	1,000,000 including plaintiff's costs, defence costs and other payments *
d.	other clinical negligence cases and personal injury claims	50,000 *
e.	other, except cases for maladministration where there was <u>no</u> financial loss by claimant	50,000
f.	maladministration where there was <u>no</u> financial loss by claimant	NIL
g.	patient referrals outside the UK and EEA guidelines	NIL
<p>* For all clinical negligence and personal injury cases (including court cases) the use of periodical payments should be considered for any settlement (exclusive of legal costs) involving costs to the NHS of £250,000 or more, or for lower awards when this represents good value for money. <u>Proposed out of Court periodical payment awards require approval from the WG H&SSG Finance Department.</u></p>		
8)	Extra statutory and extra regulatory payments	NIL

Losses and special payments in respect of provision of primary care provider services

Losses		Limit
		£
9)	a. Losses due to overpayments to practitioners of fees, allowances or salary	
	i. involving fraud	1,000
	ii. other	1,000
	b. unvouched or incompletely vouched payments	1,000
10)	Claims abandoned	1,000

**Special
Payments**

11)	Ex gratia payments	1,000
12)	Extra statutory and extra regulatory payments	
a.	to pharmacist contractors for drugs supplied in good faith in respect of forged, etc, prescriptions forms	1,000
b.	excusal of statutory charges for replacement dentures in certain circumstances	up to appropriate maximum statutory charge
c.	other	NIL

Losses: Fraud cases under investigation

13)	a.	Losses in cases investigated by the health body in respect of prescription fraud.	1,000
	b.	Losses in cases investigated by the health body in respect of dental fraud.	1,000
	c.	Losses in cases investigated by the health body in respect of ophthalmic fraud.	1,000

Appendix 2 – Loss or Damage to Health Board Property Form

DATIX Case Reference (Attach a copy of the DATIX report):

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State the date and location of the incident

State the reason for the loss or damage and the circumstances in which it arose

Record the item(s) and value(s) based either on historic or replacement value(s)

Is the value of the loss reduced by insurance?

Was theft involved? If so, have the police been informed?

What actions have been taken, including any legal action to cover the loss?

Did an investigation show defects in existing systems of control and, if so, what remedy is proposed?

Approved by (Manager):

Signature			
Print Name		Date	/ /
Position			

This form is to be submitted to the Director of Finance

Appendix 3 – Form PP1 – Loss or Damage to Personal Property

This form is to be completed by the claimant

Personal Details

Name:	
Address:	
Postcode:	
Telephone Number:	

At the time of the occurrence please indicate whether you were (please circle):

Patient	Visitor	Staff Member
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Incident Details

Please state where the incident occurred:

Ward / Department	
Hospital / Premises	

Date of Occurrence	/ /	Approximate Time	
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Details of loss or damage caused:

If personal articles / possessions were lost or damaged, please state:

Item Description	Date Purchased	Approximate cost at date of purchase	Cost of repair (where applicable)
	/ /	£	£
	/ /	£	£
	/ /	£	£
	/ /	£	£
	/ /	£	£

Attach documentation to substantiate the cost of replacement or repair (eg official quotations, invoices, receipts etc). Failure to provide documentation may result in no payment.

Do you have a personal insurance policy against which a claim could be made?	Yes		No	
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Additional Information

I confirm that the information provided is true and accurate to the best of my knowledge.

Signature		Date	
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Print Name	
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Please submit this form to the Directorate / General Manager where the incident occurred

Appendix 4 – Form PP2 – Approval for Payment of Exgratia Compensation

This form is to be completed by the Directorate / General Manager

DATIX Case Reference (Attach a copy of the DATIX report):

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Facts of the case

Was an investigation undertaken at the time of the incident?

Has an objective account of the incident been compiled, and contact established with relevant staff in post at the time?

Was theft involved? If so, have the police been informed?

Has appropriate legal advice been sought?

Reason for proposed ex-gratia payment

Did an investigation show defects in existing systems of control and, if so, what remedy is proposed?

Has any recommendation been discussed at a Risk Management Group meeting?

Recommended payment amount

£

Authorisation (Complete for all payments)

Recommended by:

Signature			
Print Name		Date	/ /
Position			

Authorisation (Complete for all payments)

Recommended Endorsed by (Directorate Manager):

Signature			
Print Name		Date	/ /
Position			

Additional authorisation (Complete for all payments > £250)

Approved by (General Manager):

Signature			
Print Name		Date	/ /
Position			

Additional authorisation (Complete for all payments > £1,000)

Approved by (Senior Finance Business Partner (Accounting & Statutory Reporting)):

Signature			
Print Name		Date	/ /
Position			

Additional authorisation (Complete for all payments > £1,500)

Approved by (Director of Finance):

Signature			
Print Name		Date	/ /
Position			

Once approved and ready for payment, this form is to be submitted (with a copy of Form PP1) to the Losses and Compensation Officer, Financial Accounts, Ty Gorwel, Building 14, St David's Park, Jobs Well Road, Carmarthen, SA31 3HB.

Appendix 5 – Flowchart for Approval of Claims

