

Skipton Fund

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Dr C R M Hay
Chairman of the UK Haemophilia Centre
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28th November 2008

Dear Dr Hay

Re: Alterations to the Skipton Fund Admin. Procedure

I have recently been in correspondence with Dr M Makris regarding the Skipton Fund's request for supporting documentation to be supplied for all applications to the scheme.

In his latest piece of correspondence (enclosed for your reference) he suggested that I write to you to explain why this is the case so that you may inform the UK Haemophilia Centre Directors if you so wish.

The alteration to the scheme came about when it was discovered that the previous scheme administrator, Mr Keith Foster, fraudulently completed a number of application forms and misappropriated a large sum of money from the Skipton Fund. As a consequence the Department of Health sent the NHS Counter Fraud and Security Management Service to review the scheme's administrative procedures. The counter fraud measures that were suggested actually went beyond the ones that were finally settled upon by the Skipton Fund Directors as they felt that they were impractical. However, for all applications it is now a requirement that we receive medical records to confirm that the applicant received treatment with NHS blood or blood products prior to September 1991 (previously the Dr only had to state that they had seen such records and this is one of the loop holes that Mr Foster exploited) and that they are currently hepatitis C positive or have undergone interferon based treatment in an attempt to clear the virus. Part 4B regarding other risk factors must now be completed in all cases as well.

The Skipton Fund are audited on an annual basis and the auditors randomly select a number of successful forms to ensure that all of the necessary information has been supplied. We must therefore request it even in cases where we are familiar with the completing doctor and are confident that the application is genuine.

Please be aware that these alterations do not disadvantage applicants in any way since previously the records had to have been seen by the doctor just not sent.

If you are able to pass this information on to UK Haemophilia Centre Directors then this would be much appreciated. The number of applications we receive on behalf of people with bleeding disorders is now minimal and I hope that the request for supporting documentation is not unreasonable and will not therefore cause a huge amount of extra work.

If you have any queries regarding this matter please don't hesitate to contact me.

Yours sincerely

GRO-C

Nicholas Fish
Scheme Administrator