



Fraud Policy Version 1

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Version Number/ Revision Number	Consultation Date	Names of Parties in Consultation	Summary of Changes
1.0		<ul style="list-style-type: none"> - VP Finance & Corporate Governance - Information and Data Compliance Officer - Project Accountant 	

Development and Approval Log:

Responsible for:	Title
Policy Developer:	Project Accountant – Governance & Compliance
Policy Owner:	Vice President of Finance & Corporate Governance
Recommended by:	Audit & Risk Committee
Approving Authority:	TUS Governing Body
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1. Policy Introduction

Technological University of the Shannon: Midlands Midwest, hereafter referred to as (“TUS”) recognises the importance of protecting the Technological University, hereafter referred to as (“the University”) its reputation and its employees from the consequences of fraudulent activity.

Accordingly, the University expects the highest standards of ethical behaviour from all University personnel, students, vendors, contractors, customers and others who transact business with the University by promoting a culture of integrity, honesty, awareness, transparency, accountability and vigilance.

2. Definitions

- 2.1 The term “fraud” is used to describe acts of dishonesty such as deception, bribery, forgery, extortion, corruption, theft, conspiracy, embezzlement, misappropriation, false representation, concealment of material facts, false pretence, false accounting and collusion in the foregoing. For the purposes of the policy, the term “fraud” includes attempted fraud.
- 2.2 For practical purposes “fraud” may be defined as the use of deception to obtain an advantage or attempt to obtain an advantage, avoid an obligation or cause loss to another party.
- 2.3 It is not possible to give an exhaustive listing of the activities and behaviours which constitute fraud. Some of the following are instances of fraudulent behaviour:
 - Knowingly creating false or misleading financial reports;
 - Offering or accepting gifts or hospitality in return for favourable decisions;
 - Claiming payment for goods not received or services not performed;
 - Claiming payment for time not worked;
 - Submitting false or exaggerated claims for reimbursement of expenses;
 - Forging or altering documents;
 - Purchasing items for personal use with University funds;
 - Theft, misappropriation or unauthorised use of University property
 - Any illegal activity including social engineering and generic internet and e-mail fraud.

3. Scope

- 3.1 This policy covers fraud relating to the University’s funds and assets and is applicable to all University and University controlled funds and assets, including research grants and consultancy projects administered by the University and University subsidiary companies.
- 3.2 This policy applies to all TUS Staff, Students, members of TUS Governing Body and Governing Body Committees.
- 3.3 University personnel should ensure that they are familiar with other relevant University policies, procedures and regulations, including:
 - TUS HR Policies and Procedures (including TUS’s disciplinary procedures);
 - TUS Protected Disclosures Policy;
 - TUS Conflict of Interest Policy;
 - TUS Intellectual Property Policy;
 - TUS Financial Policies and Procedures;
 - TUS Dignity and Respect Policy;
 - TUS Acceptable Usage Policy;
 - TUS Information Security Policy.

4. Purpose of Policy

The University takes a zero-tolerance approach to fraud and is committed to safeguarding the assets of the University by ensuring opportunities for fraud are mitigated against. The University considers that all forms of fraud (including third party cyber-fraud) has a detrimental impact by undermining good governance. This policy sets out the responsibilities and procedures to follow for members of TUS Staff, Students and Governing Body of the University where fraud or suspected fraud has been identified.

5. Roles and Responsibilities

Responsible Person/Group	Role
VP, Finance & Corporate Governance & The Policy Unit	<ul style="list-style-type: none"> Review, monitor and distribute this policy and to provide awareness as required.
Governing Body	<ul style="list-style-type: none"> Review and approve the policy at least every 3 years.
President	<ul style="list-style-type: none"> Ensure processes and procedures are in place within the University to facilitate adherence to the policy.
Designated Person (<i>Information and Data Compliance Officer</i>)	<ul style="list-style-type: none"> Ensure instances of alleged or suspected fraud initially reported to them are investigated appropriately.
Review Group (President or nominee and the VP Finance & Corporate Governance. <i>Alternative Review Group (may consist of two members of the Executive Management Team who do not have any conflict of interest or an External Assessor)</i>)	<ul style="list-style-type: none"> Review the alleged or suspected fraud, progress the investigation and liaise with the Designated Person in relation to the alleged or suspected fraud. Where the Review Group deem it appropriate or in the event of a conflict of interest, an Alternative Review Group will be appointed.
Independent Oversight Person(s) (<i>Chairperson of Audit & Risk Committee, and/or their nominee</i>)	<ul style="list-style-type: none"> Provide objective oversight of the reports drafted by the Review Group, External Assessor or External Investigator.
External Assessor	<ul style="list-style-type: none"> The Review Group may decide to appoint an external person/body to assess the alleged or suspected fraud and make a determination on the issues and whether they should be investigated as an alleged or suspected fraud.
External Investigator	<ul style="list-style-type: none"> The Review Group may decide to appoint an external person/body to investigate the alleged or suspected fraud and provide a written report to the Review Group.
Vice Presidents and Deans of faculty	<ul style="list-style-type: none"> Monitor Compliance with the Policy.
Management or Supervisory Positions	<ul style="list-style-type: none"> Monitor Compliance with the Policy. Ensure that all members of staff in their department are aware of University policies and procedures and that these policies and procedures are adhered to at all times.
All Staff, Students	<ul style="list-style-type: none"> Adhere to the policy statements in this document. Report suspected breaches of the policy to the Designated Person.

Audit & Risk Committee	<ul style="list-style-type: none"> • Monitor matters arising under this policy and report to Governing Body.
Finance & Physical Development Committee	<ul style="list-style-type: none"> • Monitor matters arising under this policy as and when appropriate and report to Governing Body.

6. Policy Statement

- 6.1 It is the University policy to investigate all cases of suspected fraud and, when appropriate, to pursue legal remedies available under the law.
- 6.2 Any act of fraud involving members of TUS Staff, Students or members of TUS Governing Body and Governing Body Committees ascertained upon investigation, or pursuant to a criminal conviction, or through acknowledgement by the individual(s) concerned, shall result in the appropriate disciplinary and legal actions against them, to include the possibility of termination of employment, expulsion from studies, removal from office, civil action for restitution and/or forwarding information to the appropriate authorities for criminal prosecution.
- 6.3 The University ensures that it complies with all mandatory reporting requirements under relevant legislation and the TUS Code of Governance. For example, there may be a requirement to report a matter to An Garda Síochána and the Charities Regulator, as well as other relevant regulatory authorities including the Comptroller & Auditor General (C&AG), the Department of Further and Higher Education, Research, Innovation and Science (DFHERIS) and the Higher Education Authority (HEA).

7. Reducing the Potential for Fraudulent Activity

- 7.1 The University implements preventive measures which includes - a system of internal control, an effective risk management process and the independent external annual audit to reduce the potential for fraudulent activity. This would also include written policies and procedures.
- 7.2 TUS personnel with management or supervisory responsibilities should ensure that all members of staff in their department are aware of TUS policies and procedures and that these policies and procedures are adhered to at all times.

8. Reporting Procedures

- 8.1 It is the responsibility of all TUS Staff, Students, members of TUS Governing Body and Governing Body Committees to report any suspicions of fraud without delay. Members of the public can also report suspicions of fraud. Cases of fraud or suspected fraud will be reported to the Designated Person. The Designated Person in TUS is the Information and Data Compliance Officer and the e-mail address is disclosures@tus.ie
- 8.2 The University itself may determine to deal with a report of fraud or suspected fraud under its TUS Protected Disclosure Policy where it is deemed the incident falls under the definition of a "relevant wrongdoing" as outlined in the Protected Disclosures Policy.
- 8.3 Cases of fraud or suspected fraud may be reported under the University's Protected Disclosures Policy, where the person making the disclosure is a "worker" as defined in that policy and in the Protected Disclosures (Amendment) Act 2022, and the matter meets the other requirements of that policy and the act, such as falling within the definition of a "relevant wrongdoing".

- 8.4 In making a report, individuals must take care to avoid making incorrect accusations or alerting suspected individuals. The good name and reputation of individuals, the subject of suspicion of fraud, is not undermined where an honest and reasonable report of suspicious circumstances is made.
- 8.5 Anonymous reporting may be less capable of being addressed, as it may limit the University's ability to consider, address and investigate a matter. Please refer to the TUS Protected Disclosures Policy under Section 5. Where supporting evidence is available, such a report may form the basis of an investigation following the initial assessment process.
- 8.6 All cases of suspected third-party cyber fraud should be escalated and reported immediately both an appropriate line manager and the Designated Person and the correct incident responses followed.

9. Review Procedures

- 9.1 The first avenue for formal reporting of alleged or suspected fraud is internal and can be made verbally or in writing directly to the Designated Person. On receipt of a report relating to fraud or suspected fraud, the Designated Person will carry out an initial assessment. A process flow chart is set out in Appendix A of this policy.
- 9.2 Where an investigation is deemed appropriate, terms of reference will be determined with details of who will conduct the investigation and how the investigation will be carried out, while ensuring that the principles of natural justice and fair procedures are adhered to.
- 9.3 Once the initial assessment has been carried out, the Designated Person will furnish this assessment (via a report) to the Review Group who will review the report, establish the factual information and decide on the next course of action to be taken, if any. If an investigation is required, the Review Group in consultation with the Designated Person will decide how the matter should be investigated. The Review Group may call on external expertise at their discretion in order to assist them. This external expertise may be either an External Assessor or an External Investigator determined by the Review Group. Alternatively, the outcome of the assessment may require the matter to be dealt with under other relevant university policies.
- 9.4 On completion of the investigation, the report will be furnished to the Independent Oversight Person(s) to assess the following:
- 9.4.1 Whether the policy and procedures were followed;
 - 9.4.2 Whether the terms of reference were adhered to;
 - 9.4.3 Whether the conclusions/findings could or could not reasonably be drawn from the information/evident on the balance of probability.
- 9.5 In cases where the relevant alleged or suspected fraud is relatively straight-forward, or does not require consideration of the making of an adverse finding about an individual(s), the Review Group may decide to use an informal process to address the alleged or suspected fraud.

10. Disciplinary Procedures

Following completion of the initial assessment and/or investigation and where the facts established warrant further attention, the matter may be referred for further review in accordance with The University's established disciplinary procedures or to An Garda Síochána or other appropriate authorities.

11. Further Action

11.1 The person/persons appointed to carry out the investigation will provide a written report to the Review Group and the Designated Person(s) detailing their findings and recommendations(s) for consideration.

11.2 The Audit and Risk Committee will assess whether any weakness in the University's systems of internal control has been adequately addressed by the University.

11.4 In line with the Protected Disclosures Policy, the Audit and Risk Committee will include relevant details of and updates on disclosures in their reports to Governing Body.

12. Confidentiality

Matters arising under this policy cannot be disclosed or discussed with anyone other than those that have a legitimate need to know. This may include the Governing Body Chair and other relevant persons as determined by the Review Group. The Review Group will be cognisant of any potential conflict of interest to ensure there is no perceived or actual conflict of interest when determining who the matter(s) can be disclosed to or discussed with. This is important in order to avoid damaging the reputations of persons suspected but subsequently found innocent of wrongful conduct and to protect the University from civil liability.

13. Policy Compliance / Monitoring and Review

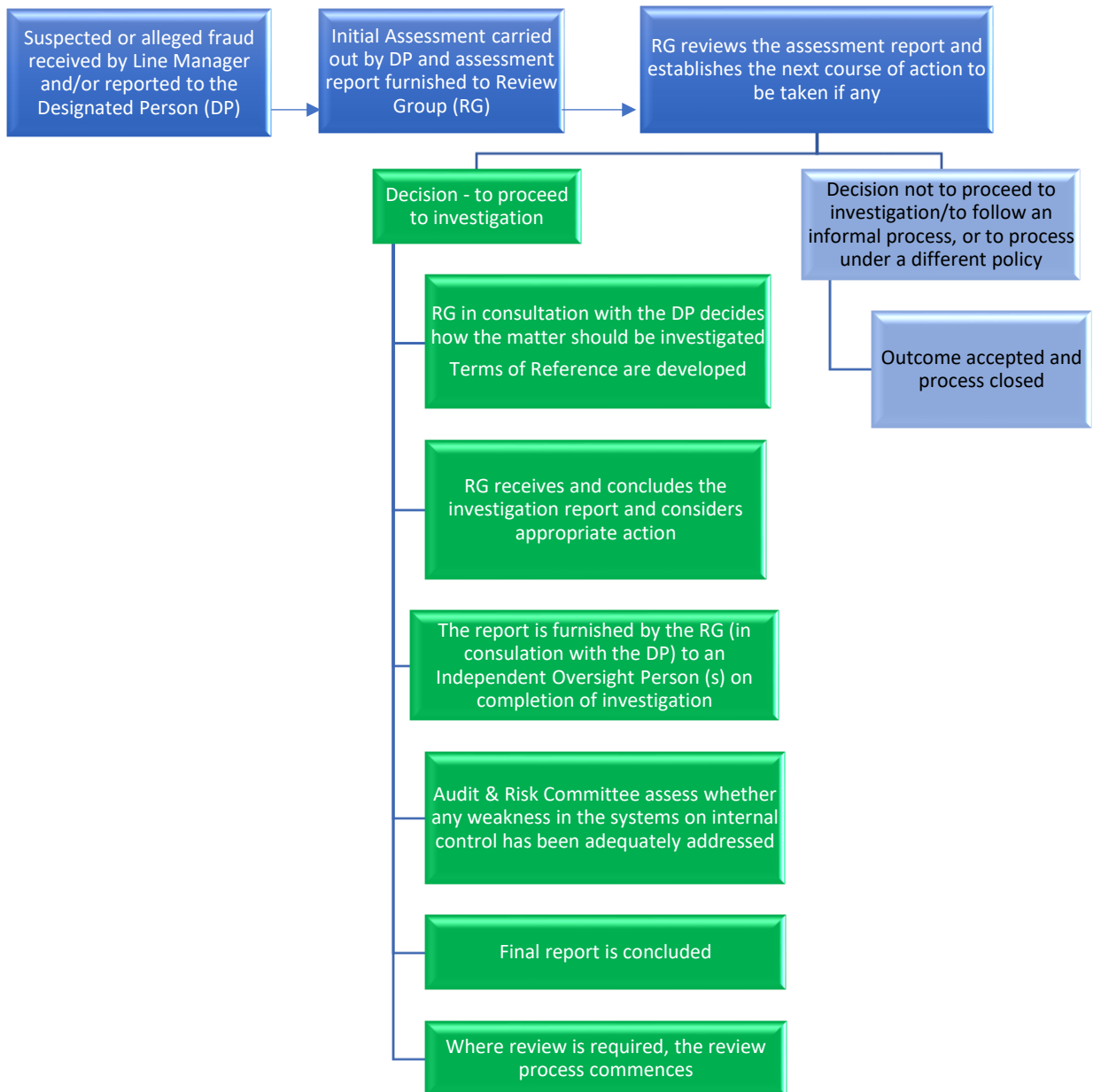
13.1 The Policy Unit is responsible for ensuring this policy is reviewed at least every 3 years.

13.2 The Policy Unit ensures that any associated policies are modified or superseded and archived.

13.3 The Policy Unit to liaise with the VP, Finance & Corporate Governance or the VP, Finance & Corporate Governance nominee to monitor the need for an audit to identify whether:

- There is an ongoing need for the policy in relation to its stated purpose and goals and that it remains consistent in relation to the TU's overall strategic plan.
- There is a potential need to change the policy to improve its effectiveness, or to ensure that it is up to date, and aligns with legislation, and best practice.

Appendix A – Flow Chart Process for Suspected or Alleged Fraud*



****At any stage throughout the investigation the matter may be referred to an Garda Síochána or other appropriate authorities.***