



**THE
COTSWOLD
GROUP**



**Market Leading
Investigation and
Intelligence Services**

Who We Are

The Cotswold Group was established in 1990 and directly employs over 250 staff across offices in the UK. With 25 years of experience we are the UK and Europe's leading Investigation Company providing exceptional results through our specialist investigation and intelligence services.

In April 2011 the company was acquired by G4S plc as G4S Investigation Solutions (UK) Ltd but we continue to trade as The Cotswold Group. The acquisition provided us with additional expertise and a global reach.

We specialise in intelligence led fraud and liability investigations across the public and private sector, working for a range of industries, including some of the world's largest insurance companies, corporate businesses and local authorities.

We have complete nationwide coverage across all functions of our operation, enabling us to respond quickly to customer requirements 365 days a year.

Prospect, our market leading intelligence database, contains over 1.2 million fraud specific entities associated with all general insurance claim types including motor, property, liability and travel. Through working for 8 of the top 10 UK general insurers we are uniquely placed to provide clients with a truly market leading proposition based on our industry knowledge and experience.

Instructions can be managed via our online portal where we provide our customers with instant access to files, documents and reports throughout our investigations.

Our Values

Our core values of Customer Focus, Experience, Expertise, Flexibility, Passion Integrity, Innovation, Performance, Trust and Best People, are at the heart of everything we do, our clients know their brand and reputation are in the safest of hands at all times.

Our Services

- Surveillance
- Motor Fraud
- Intelligence
- Employers and Public Liability
- Claimant Profiling
- Motor Liability
- Motor Theft
- MOJ
- Desktop Investigations
- Non-reported Claims
- Low Speed Impact (LSI)
- Trace and Recoveries
- Creditor
- Property
- Travel
- Credit Hire
- Fraud Consultancy

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Intelligence

Our intelligence capability underpins all of our services and is a unique proposition. Prospect, our Fraud specific database, has over 1.2 million separate entities all gathered under Section 29(3) of the Data Protection Act (1998). This ensures that all data points have known associations with or links to fraudulent or suspected fraudulent activity.

Clients receive the benefit of our industry wide coverage which ensures they are searching against a rich pot of data from across the market.

'Prospect' is accessible to clients through a secure online portal, free of charge. This enables individual handlers to search 'Prospect' on specific claims, whereby building a more comprehensive intelligence picture of the parties involved. Search results are simply displayed and next steps clearly outlined.

We have invested in a dedicated team of Intelligence Analysts who will deliver a comprehensive intelligence report, including the use of i2 summary charts, for all instructions on relevant services.

Completing intelligence analysis both before and after interviews and enquiries are conducted, ensures that this activity is fully informed and is genuinely intelligence led.

Our investigative results and competitive edge stems from the combination of our intelligence and interviewing expertise.

In addition, our Pro Active Team use our data to identify patterns of offending and problem statements; these can be linked to specific geographical areas, individual subjects, commercial entities or an issue established during the course of an investigation.

Using our data as a starting point our Analysts conduct additional research to provide clients with comprehensive insight into the issue, often identifying further entities against which potential exposure can be checked.

Such detail allows clients to mitigate the risk of additional claims and can be built into underwriting criteria.

Our intelligence results are generated by the quality of our data and focused human intervention.

Key features include:

- Over 1.2m separate entities all gathered under 29(3) of the DPA (1998)
- Processes and governance audited by the Information Commissioner's office
- Intelligence led investigations
- Majority of services are free of charge to clients
- Front end fraud prevention (i.e. at underwriting stage) capability
- All enquiries and activities comply with all relevant legislation and regulations

"Clients typically achieve a Prospect 'hit rate' of between 15 and 20%."



Claimant Profiling

Profiling has rapidly become one of our core services; with the capability to be applied to a wide range of client circumstances, it has proven to be an invaluable tool. Our product complies with all applicable regulation or legislation.

Common scenarios are insurance claims, pre-or post-employment vetting, legal matters such as Tribunals or any situation where more information and insight is required about an individual or commercial company.

Often applied to inform insurance claims settlement strategy and reserving accuracy, as well as confirming the extent of alleged injury or loss. Profiling provides invaluable insight into the background and lifestyle of the subject through intelligence gathering and deep web mining.

Our team of specialist Intelligence Analysts, who conduct over 4000 profiles annually, are all trained in the techniques developed in the National Intelligence Model, drawing information from DPA compliant data sources, including the internet and our own internal specific fraud databases.

Deep web mining uncovers open source intelligence that subjects never think to cover up or appreciate is publically accessible.

Our research department provide solutions to each client's unique circumstance with speed and accuracy, ensuring that reports are thorough and highlight the importance of discovered facts by detailing any necessary recommendations.

Having a dedicated team enables us to spend the required time on each individual instruction. Often it is a combination of specialist knowledge and the time to pursue an enquiry that ultimately drives the best result.

Key features include:

- Using a combination of unique techniques and strategies to establish detailed analysis of the subject
- Applicable to both individual and business subjects
- Our profiling covers searches for information including, but not exclusive to; full residency, financial history, asset identification, commercial aspects and social networking
- All data is washed through 'Prospect', our industry leading intelligence database; the subject may already be known to us
- Use of proxy sites to ensure we do not leave an online footprint and our IP address is re-directed
- Clear and detailed reports with recommended next steps
- All enquiries and activities comply with all relevant legislation and regulations

“Basic search engines only return results for 4% of information available on the internet. Our analysts can obtain key details about a subject using deep web mining techniques.”



Surveillance

Surveillance remains a valuable investigative tool when you require complete insight into an individual's capability, delivering clear evidence of a claimant's injuries and pattern of life.

Surveillance has been a core product since the The Cotswold Group began and we now conduct in excess of 9,000 surveillance days per annum, using only our directly employed Operatives. We deliver outstanding results whilst ensuring that all of our activity is completed with integrity and in accordance with legislation including Regulation of Investigatory Powers Act (RIPA), Data Protection Act and the Human Rights Act; protecting our client's brand and reputation at all times.

A robust governance agenda is driven by our Senior Management Team. This is reinforced through an extended training and development procedure for all new Operatives and on-going monitoring and training for existing staff. This ensures that our Operatives work to best practise and a clear Code of Conduct, set above industry standards.

Our capability is flexible and applicable to both urban and rural locations throughout the UK, Ireland and Europe.

Pre deployment activity and the insight this provides significantly increases the number of occasions where footage of the subject is secured.

Every instruction is approached on a bespoke basis by our dedicated team of Case Managers and will adhere to our mutually agreed protocol with you.

Following a detailed intelligence review, involving both desktop and covert field research, we provide a comprehensive deployment strategy that is tailored to the specific requirements of the investigation.

A dedicated Case Manager owns the instruction throughout the entire process, pro-actively informing you of our progress and outcomes.

Key features include:

- Compliance with all relevant regulations and legislation; we set the standard
- Directly employed Operatives only
- Adherence to written protocols agreed with you
- UK, Ireland and European coverage, 24 hours a day, 365 days a year
- Manned and static unmanned surveillance
- Flexible offering in terms of duration, commencement point and resourcing level applied
- Dedicated Case Manager acting as a single point of contact
- Investigations led by intelligence and research
- Footage and logs are reviewed by our specialist in house Editing team who prepare an edited DVD with all unedited footage securely stored and available upon request
- Final report includes a full intelligence and research review, Operative logs and a detailed commentary of all activity and findings along with a DVD of footage obtained

"We secure footage on over 90% of all instructions."



Employers & Public Liability

Our market leading field investigation service is led by our highly experienced team of Claims Investigators; the majority of who are CII and NEBOSH qualified, with an average of 27 years in the claims arena.

All of our team are highly adept at investigating all the major liability claims types including Employers, Public, Products, Liability, Professional Indemnity, Environmental and Disease Claims.

We understand that commercial/casualty cases require a specialist approach and therefore only use our highly skilled directly employed Investigators.

All enquiries are conducted with the utmost integrity, professionalism and all investigative avenues are explored.

Our approach is centred upon determining liability in detail by collecting and verifying all supporting documentation, conducting comprehensive scene assessments and gathering witness statements to a court compliant standard.

In response to MOJ reforms, our offering is tailored to deliver accurate liability decisions in line with procedural timescales.

We have the capability and technical expertise to report back an advised liability stance with evidence or alternatively can repudiate/accept liability on our client's behalf.

We can also provide full quantum handling in respect of both general and special damages across all Liability claim types enabling full delegated authority claims management.

Upon concluding our enquiries we also provide recommendations regarding the overall insurance risk posed by the Policyholder. This allows clients to take pro-active steps in respect of future policy decisions and to mitigate the likelihood of future losses/claims.

Key features include:

- A detailed review of the facts/allegations, with an early identification of any potential indemnity issues and fraud indicators
- Interviews undertaken with relevant witnesses (including the Insurance/Risk Manager), captured in a signed CPR compliant statement of truth
- Physical inspection of the incident location to validate the extent and cause of loss, providing photographic evidence and/or video footage, where applicable
- Reviewing all relevant documentation related to the incident, along with a pre-action disclosure statement
- Validation of policy cover and compliance of terms and conditions, endorsements and warranties
- Provision of a comprehensive report and supporting evidence, ensuring a clear view on liability, along with potential recovery opportunities. In addition we advise of the physical and moral hazard factors of the risk
- All enquiries and activities comply with all relevant legislation and regulations

“Liability stance confirmed within 15 days on 97% of all EL and PL instructions.”



Motor Fraud

The Cotswold Group are the leading provider of Motor Fraud investigation services within the UK; with several hundred new investigations undertaken every week.

All new instructions are managed end to end by dedicated specialist Case Managers, who work in conjunction with our team of specialist Intelligence Analysts, responsible for interpreting all available information (which is washed through 'Prospect') and our fully employed Fraud Investigators.

'Prospect', our unique market leading intelligence database, holds in excess of 1.2 million entities, all with known associations and links to suspected and proven fraudulent activity.

Organised Fraud Investigation:

An investigation spanning a number of claims where potential links have been established between the various entities involved with identified patterns.

Often described as a 'Fraud Ring', commonly the key individuals arranging these incidents have associations with serious and organised crime.

Where appropriate we will produce a 'Global Report' providing an overview strategy and insight as well as individual incident reports.

Complex Fraud Investigation:

A detailed investigation into motor vehicle collisions suspected of being fraudulently staged, contrived, induced or involving potential phantom passengers.

Our report includes a comprehensive intelligence review, indemnity and liability statements, all applicable mandates and clear findings with recommendations.


LSI (Low Speed Impact):

Based on a structured telephone interview with the subject (driver, insured or witness), utilising our desktop investigation service, we confirm whether any element of the incident is fraudulent and if the claim is defendable. This is done by clearly determining the facts and mechanics of the incident and assessing a subject's potential as a witness and their willingness to cooperate with any future defence.

Key features include:

- Provision of an i2 chart pictorially summarising all entities involved and highlighting all links and associations found
- Fully CPR compliant statements, signed and admissible during any potential litigation
- Case Managers supervise the entire operation implementing an investigation strategy, risk review, co-ordinating other experts and key stakeholders such as our field force, intelligence teams, engineers, legal representatives, etc.
- Obtaining completed mandates including ACPO & DVLA
- Pro-active communication of investigative developments as well as providing a detailed final report
- All enquiries and activities comply with all relevant legislation and regulations

“ 'Prospect' our intelligence database holds over 1.2 million fraud specific entities. All suspected fraud data is washed through the system to review any associations.”



“We investigate motor liability for clients representing over 60% of the personal motor market.”

Motor Liability

The focus of our Motor Liability services is to gather, interpret and assess all information relating to a motor vehicle collision; enabling us to deliver clear factual reports with recommendations on the likely apportionment of liability.

In addition, we will provide additional insight regarding validity of the incident, credibility of those involved, gathering of key counter fraud data e.g. vehicle occupancy, driver description, extent of damage etc. All of which is enhanced by the unique screening of all cases against 'Prospect', our market leading fraud specific database, providing a second line of defence to our clients' internal risk identification processes.

All Motor Liability instructions are managed within a dedicated team, solely handling motor vehicle collision investigation. The team operate extended working hours enabling contact rates in excess of 90%. Our offering includes both desktop and field based investigation.

Desktop Investigations:

Especially beneficial to ensure MOJ deadlines are adhered to, we conduct fast contact with your customer or witness with an extensive engagement to secure a recorded telephone interview covering both liability and indemnity.

If required, a formal statement is completed during this interview and immediately issued for verification and formal signature. The draft statement is made available to the instructing client upon completion of the interview to enable an immediate initial response.

On the rare occasions desktop contact is not successful, instructions are quickly escalated to 'cold call' field activity – essentially an unannounced attendance at the subjects address, usually 'out of hours' to maximise successful contact.

Field Investigations:


Supported by 'end to end' Case Management, those instructions where a face to face interview, formal statement and/or a Locus Report, of the collision location are required can be efficiently escalated to our directly employed Field Investigators.

Our Locus Report capability is extensive and flexible dependent upon the requirements of a specific collision. Scene video and/or diagrams can be provided where necessary and supported by the use of CAD software. This is often used where visibility, road gradient or sequencing is of particular importance.

We understand that a 'one size fits all' approach does not necessarily work on all claims: therefore we can also provide a Complex Liability Investigation which is bespoke to each instruction including options such as 'drive through' activity to obtain video footage of the incident scene, GPS mapping as well as utilising CAD software. We have a flexible offering, so just let us know what you need.

Key features include:

- Flexible offering
- Desktop and field capability
- All instructions screened against Prospect
- Locus Reports; video and/or scene diagrams
- Complex Liability service e.g. high value claims
- Liability resolution as well as evidence gathering enquiries and indemnity issues
- Our staff can formally agree liability apportionment with policyholders on behalf of insurer clients if required
- All enquiries and activities comply with all relevant legislation and regulations



"We target to get a liability stance within 15 days on all EL and PL instructions, with the target for motor stance confirmed within 10 days."

MOJ Claims

Due to Ministry of Justice (MOJ) reforms the focus of our MOJ specific liability products is to gather, interpret and assess all information relating to such claims, enabling us to deliver clear factual reports with recommendations on the likely apportionment and/or acceptance of legal liability.

All MOJ Liability instructions are managed within a dedicated team. The team operate extended working hours enabling contact rates in excess of 90%.

In addition, we will provide further insight regarding validity of the incident, credibility of those involved, gathering of key counter fraud data e.g. third party vehicle occupancy, driver description, extent of damage etc. All of which is enhanced by the unique screening of all cases against 'Prospect', our market leading fraud specific database, providing a second line of defence to our clients' internal risk identification processes.

Our offering includes both desktop and field based solutions to ensure that we can enable you to meet all your MOJ obligations, whilst fully validating all claims.

Desktop Investigations:

Especially beneficial to ensure MOJ deadlines are adhered to, we make contact with your customer or witness quickly with an extensive engagement to secure a recorded telephone interview covering both liability and indemnity.

If required, a formal statement is completed during this interview and immediately issued for verification and formal signature.

The draft statement is made available to the instructing client upon completion of the interview to enable an immediate initial response.

Field Investigations:

Supported by 'end to end' Case Management, for those instructions where a face to face interview, local investigation, scene assessment and/or verification of supporting documentation are required to establish liability.

Our market leading field investigation service is led by our highly experienced team of Claims Investigators, the majority of who are CII and NEBOSH qualified. With an average of 27 years in the claims arena, all of our team are highly adept at investigating all the major casualty/liability and motor claims.

With full UK wide coverage we can provide a swift response, giving you the evidence you need, well within MOJ timescales.

Key features include:

- UK wide coverage with a flexible desktop and field offering to meet the demands of MOJ
- Interviews undertaken with relevant witnesses and key staff for casualty cases
- A detailed review of the facts and allegations, with an early identification of any potential indemnity issues and fraud indicators
- Our interactive 'Prospect' system provides a full electronic solution from instruction through to conclusion with full visibility of case progress against MOJ timescales
- Our staff can formally agree liability apportionment with policyholders on behalf of insurer clients if required
- All enquiries and activities comply with all relevant legislation and regulations



Certificate of Motor Insurance

Non Reported Claims

Our bespoke service is aimed at claims where your client has not notified you of the incident.

Our 'Non Reported' product enables insurers to reduce the frequency of occasions where they are left to accept liability on a 'without prejudice' basis, insist on an unsatisfied judgment against their policyholder or simply settle third party claims without ever receiving confirmation of involvement and establishing the actual legal liability with their own policyholder.

We utilise our desktop, out of hours and field capabilities to contact and, where required, trace policyholders to secure the key facts of the claim.

If successful and where requested by a client, a full telephone interview is conducted confirming the client's involvement and a detailed account of the incident circumstances are obtained. If unsuccessful, the matter is escalated to a Field Investigator.

This process will also include gathering of key counter fraud data i.e. third party vehicle occupancy, driver description, extent of damage etc.

We also apply our fraud knowledge acting as a second line of defence against potentially staged, contrived and exaggerated claims.

Our clients have found that by applying this process they have been able to successfully defend liability on over 30% of cases which traditionally they would have settled on a 'without prejudice' or unsatisfied judgment basis.

Key features include:

- Background checks completed to ensure contact details are up to date and accurate
- Cold call desktop activity to engage with the insured
- Field Investigator conducts an additional telephone cold call, but if no contact is made the Field Investigator completes two unannounced visits
- Claim form completion and submitted to the Case Manager using Bluetooth pen technology
- Where instructed to do so, a CPR compliant indemnity and liability statement can also be obtained
- A detailed report which includes the full accident circumstances, involvement confirmation and summary of any fraud or indemnity concerns identified
- All enquiries and activities comply with all relevant legislation and regulations

“Liability is successfully defended on over 30% of all ‘non reported’ instructions.”



Motor Theft

Our Motor Theft offering is focused on providing a cost effective and high quality investigation service.

Working with our clients to support any existing internal processes; our approach is flexible and can be tailored to the specific customer's fraud strategy to protect both genuine customers and your reputation.

All activity is completed in a pro-active manner which positively supports the customer journey with genuine claims validated for early settlement, whilst suspect claims are effectively identified and indemnity considerations are validated.

Every instruction is managed end to end by our dedicated Motor Theft Case Managers, who utilise detailed research, intelligence and background checks prior to the interview process to highlight any known or potential causes for concern.

Motor Theft Desktop:

A specialist desk based investigation focused on a recorded telephone cognitive interview typically with the policyholder or last user. Through this proven method we are able to gather evidence quickly and accurately to enable a robust assessment of the risk posed by each claim.

High risk instructions can then be reported, outlining established facts upon which to repudiate policy liability or providing clear grounds for escalation to a field interview.

"Typically over 40% of client instructions have fraud or indemnity concerns identified following our investigation."

Motor Theft Field:

A specialist Motor Theft investigation managed by the Case Manager and carried out by our fully employed expert Field Investigators, with a face to face interview, CPR compliant indemnity and liability statement and scene assessment at its core.

Both desktop and field based services are available as standalone activities or as part of an escalating process.

Whether a case is dealt with by either 'Desktop' or 'Field', our aim is to establish the full facts and complete extensive post interview enquires with all relevant authorities to verify facts which enable us to provide full details with clear evidence and recommendations upon which a decision can be made.

Key features include:

- Provide optimum balance between protection from fraudulent activity and early validation of genuine claims
- Intelligence review on key facts and entities using our fraud specific database 'Prospect'
- Detailed interview of Insured resulting in fully CPR compliant statement covering indemnity and liability
- Validation of circumstances leading up to and surrounding the incident
- Strategic partnerships with forensic motor engineers and key analysis experts
- Strict adherence to agreed service levels
- Obtaining completed mandates including ACPO & DVLA
- Final report outlining key findings and recommendations
- All enquiries and activities comply with all relevant legislation and regulations



Credit Hire

Within the Credit Hire environment we are able to offer two distinct but often complementary products to clients.

Credit Hire Claim Validation:

This service is aimed specifically at 'Non-General Terms of Agreement (GTA)' Credit Hire claims, which require a more robust validation process.

By utilising a unique combination of specialist dedicated Case Managers with in-depth specialist Credit Hire backgrounds and knowledge, allied to an intelligence led approach via our 'Prospect' database containing unrivalled fraud specific data; we are able to identify cases which pose a potential fraud risk, rather than solely delivering cost savings through negotiating the value of payment packs.

'High Risk' claims are investigated in detail, gathering the evidence required for significant savings, including 'nil settlements'. In such instances we outline a recommended strategy detailing our concerns and further lines of enquiry to be completed including where applicable:

- Full field based claim validation investigation
- Intelligence led validation checks
- Claimant interviews
- Drive-bys of specific locations to capture video footage or stills when required
- Credit hire surveillance

Where no concerns are identified, our Credit Hire experts then default to a 'line by line' negotiation on the costs incurred including confirmation of:

- | | |
|--|------------------------------------|
| • Hire duration | • Additional costs incurred |
| • Appropriateness of replacement vehicle | • Related repairs / vehicle damage |
| • Daily rate applied | |

Credit Hire Organisation (CHO) Validation:

Our market leading investigation service and intelligence enable us to provide you with an unrivalled full insight into any Credit Hire, storage or accident management company presenting a claim.

- Using both desktop and field based expertise, we are able to build up a detailed picture of the CHO which will allow us to accurately assess the risk posed. Information includes:
- Identity of owners/Directors
- Photographic evidence of registered trading addresses or other linked locations through covert physical attendances
- Obtaining vehicle registration numbers stored at specific premises through capturing stills/video footage
- Identification of known associations/links to previous claims/activity
- Establish other commercial interests/Directorships potentially for other CHOs
- Document validation

Through detailed research and field data gathering we are able to highlight specific concerns whilst providing clients with insight into other commercial entities which are linked to or associated with the original CHO.

Key features include:

- Focus on Non-GTA Credit Hire claims and organisations
- Intelligence and capability led product
- Delivery of significant savings
- Opportunity to 'RAG Rate' any Credit Hire company
- Avoid 'Phoenix' Credit Hire firms
- All enquiries and activities comply with all relevant legislation and regulations



Desktop Investigation

In its simplest form, Desktop Investigation is a customer focused structured telephone interviewing technique used to validate genuine claims whilst identifying potential 'High Risk' claims including fraud and indemnity risks posed by a claim.

The main objective is to use our expertise to build empathy and rapport with the customer whilst undertaking an interview incorporating behavioural psychology. This ensures that those customers with genuine claims feel supported with a positive customer journey, whilst exposing inconsistencies or deception in a non-confrontational manner in the proportion of claims which are not genuine in part or as a whole.

Our approach enables consistent, auditable and accurate risk assessment with a key focus on all of your customers being treated fairly.

We focus upon the events leading up to and surrounding the claim as well as the items involved. Desktop Investigation can be deployed as part of any process where a financial outcome is dependent upon the information gathered during an interview.

Effective Desktop Investigation adds an extra outcome other than settlement and repudiation, which is that of the 'walkaway'.

Repudiation on grounds of fraud can prove difficult to evidence and sustain, however through the use of subliminal messages, client customers who display dishonest responses are given the opportunity not to pursue claims further or 'walk away'.

Key features include:

- We have successfully used Desktop Investigation in the following areas; Motor Theft, Property Claims, Creditor Claims, Travel Claims, assessment of liability
- Our team have both insurance and psychology expertise
- Full delegated authority service available on Travel and Household claim types
- When inconsistencies are exposed more traditional investigative approaches can be used where necessary, safe in the knowledge that any additional cost is justified
- Our final report is provided with clearly outlined key findings, validation of circumstances leading up to and surrounding the incident, risk assessment, policy indemnity and liability enquiries and our key conclusion and recommendations based on the recorded Desktop investigation interview
- Engagement with all other key stakeholders and suppliers

"We typically deliver a 40% claims indemnity spend saving, following application of our Desktop Investigation specialism."



Travel

We believe Travel claims are often overlooked in terms of investigation due to relatively small reserves and problematic loss types such as medical expenses.

Our service is aimed at claims where clear concerns or indicators exist and clients want a cost effective but thorough investigation.

Our objective is to provide a service to validate claims whereby those customers with genuine claims feel supported with a positive customer journey; whilst at the same time identifying potential 'High Risk' claims including fraud and indemnity risks posed by a claim.

Commencing with a robust desktop investigation offering, which is supported with extensive open source research activity, we are able to move quickly to a field based face to face interview where appropriate. Our field capability extends from the UK to 95% of locations across the globe.

Utilising detailed background research, we conduct a detailed telephone based interview with the insured, leading to the completion of a statement where appropriate. All key facts are validated including extensive contact activity with official parties, including the Police, Hotels, Medical organisations, airlines etc.

All of our Case Managers are trained in Cognitive Interview and/or desktop investigation techniques, with all calls recorded.

Our focus is to gather sufficient evidence on high risk claims, to enable challenges to be raised where appropriate or validated claims to be settled with confidence.

Where necessary a more traditional face to face interview can be used safe in the knowledge that additional investigation costs are justified.

Our approach enables consistent, auditable and accurate risk assessment with a key focus on all of your customers being treated fairly.

Key features include:

- Robust desktop proposition minimising the requirement for unnecessary field activity
- Extensive pre-interview research of all online data sources
- All instructions screened against 'Prospect'
- Escalation to face to face investigation only where appropriate
- Global coverage
- Expert knowledge of all Travel specific loss types
- Comprehensive medical data
- Our final report clearly outlines key findings, risk assessment, policy indemnity with our key conclusion and recommendations based on our investigation
- End to end delegated authority option for vast majority
- All enquiries and activities comply with all relevant legislation and regulations

“Desktop expertise supported by truly global coverage delivering 30% claims indemnity spend savings for clients.”



"We positively trace and locate over 75% of all individuals."

Trace and Recoveries

We have been conducting high volume Trace and Recovery activity for over ten years.

Through a dedicated team comprising both desk based Case Managers and specialist Field Operatives, we are able to offer an extensive range of services aimed at locating individuals and securing vital information, whatever the circumstances.

Initially aimed at finding 'at fault' third parties involved in motor vehicle collisions, this offering has been expanded to provide a wide range of services to include:

- Residency and financial feasibility information on any person or commercial entity
- Completion of accident report and/or claim forms
- Third party insurance policy details
- Serving of court summons
- Proof of trade
- Validation of residency and identity

Our success is driven by the research skills of our staff and the data sources utilised which ensures we resolve a high proportion of cases without referral to field activity. By minimising costs our clients are able to instruct us on occasions where traditionally action would have been financially unviable.

Every Case Manager uses a range of tools and techniques which identify where an individual or commercial concern is located and then proceed to build a comprehensive picture of the financial status of that entity. Often where clients lack contact information or hold incorrect data, we are able to locate current addresses and telephone numbers which facilitate additional contact. However, where specific instructions require, we are able to escalate our handling to specialist field operatives who engage with the parties concerned to obtain or in some cases to provide information on your behalf.

We operate on an extended hours basis which includes weekends and evenings, which further underpins our results. All activity is conducted in a Data Protection Act (1998) compliant manner with access to only publically available data sources.

In addition to our standard Trace service, we provide:

- End to end subrogated Motor Recoveries service including pre and post litigation case management
- Complex Recovery handling – recovering from own insured, driver or where fraud has been proven

These services are delivered by dedicated staff with specific focus on the speed and cost effectiveness of recovery action, with litigation used appropriately and as part of a robust and defined end to end strategy.

Key features include:

- Generic capability to locate individuals and provide residency verification and financial background information
- Escalation to field engagement to obtain or validate information once residency identified at desktop stage
- All services include the capacity to perform multiple field attendances at a variety of different times and/or days
- Extended operating hours
- Clear report format outlining facts and information secured
- Range of recovery focused services designed to support cost effective, volume recovery activity – pre and post legal process
- All activity conducted discreetly by directly employed staff
- All enquiries and activities comply with all relevant legislation and regulations



Creditor

During over ten years of managing Creditor investigations, we have developed a bespoke set of services aimed at enabling effective assessment of payment protection, personal accident and sickness claims.

Often linked to a defined monthly benefit, there is a real focus on providing low cost solutions which only escalate once risk is established. In the vast majority of instructions the key question is whether the subject has returned to work or is more capable of working than claimed.

Commencing with detailed background research on the claimant and any commercial associations, we start to build a picture of the potential fraud risk posed. This will involve all social media, financial background checks, Directorships, property and motor vehicle ownership.

Given the strength of our employed field staff, we are then able to escalate activity to covert observations, often comprising 'drive by' visits at specific times or static surveillance cameras to identify a pattern of life.

If evidence is obtained to support the requirement for formal surveillance, this will be completed at an appropriate time and with limited resource, maximising the opportunity to secure footage whilst minimising investigative costs. When footage is obtained of claimants working, we have specialist Field Investigators who conduct a challenge interview during which an initial statement is obtained.

In addition, if required, our experienced investigators can provide your policyholder with the opportunity not to pursue their claim further.

Our recovery department can also seek reimbursement of any overpayments which have been made.

As part of a package of services we are also able to complete:

- Overt telephone enquiries
- Case reviews to assess risk on 'on-going' claims

Key features include:

- Flexible and cost effective solution
- Initial desktop approach to establish extensive background information
- Supported by low cost field based intelligence activity
- Tailored surveillance offering
- Challenge interview delivered by directly employed expert Field Investigators
- Wider service offering includes overt engagement with Claimant on genuine and suspicious claims
- All enquiries and activities comply with all relevant legislation and regulations

"63% of Self Employed PPI / PA claims we investigated were categorised as 'invalid'."



Fraud Consultancy

We are uniquely placed to offer an extensive range of Fraud Consultancy services which can be tailored to meet individual company requirements.

Initially focused on mechanisms aimed at counter acting fraud exposure throughout the end to end insurance process from point of sale to claims settlement; our capability now extends to broader commercial scenarios.

Our experts include former Fraud and Risk Managers, Police and Loss Prevention Officers. These experts coupled with our Investigation Unit and Prince II Project Management skills ensure we can provide the correct portfolio of skills required on each bespoke instruction. In each case we apply a structured and consistent methodology, leading to concise evidence based findings and clear future recommendations.

Our Insurance Fraud Consultancy offering is diverse, ranging from a full end to end process review including strategy, counter fraud philosophies and policies, identification tools, investigation and risk assessment methods, to an audit or health check on a specific activity or problem area.

We operate across all insurance product types and have broad experience of working in fraud prevention arenas such as product design and underwriting procedures. Given our investigative experience we are also able to provide a truly industry wide view with benchmarking data on current processes.

In addition to insurance related consultancy we are specialists in:

- Internal fraud, theft and potential financial crime investigation
- Pre-and post-employment vetting and identification verification
- Trade monitoring
- Physical security risk assessment
- Stock loss and prevention
- Supplier due diligence

Key features include:

- Broad and bespoke team of specialists
- Insurance and non insurance industry capability
- Collaborative approach working with clients to provide robust solutions and clear insight
- Diverse non insurance offering
- Project Management framed governance when appropriate
- Prevention and investigation of actual incidents
- Best Practice revision
- Discrete 'health check' and market benchmarking

“Unique breadth of experience and knowledge with consultancy skills unmatched by traditional consultancy firms.”



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