



Independent Case Examiner

The ICE Service

Our Mission

Judging the issues without taking sides

Our Purpose

We have two primary objectives: to act as an independent referee if customers of the Department for Communities consider that they have not been treated fairly or have not had their complaints dealt with in a satisfactory manner; and to support the Department in improving the service they deliver by providing constructive comment and meaningful recommendations

Our Aim

To provide a free, effective and impartial complaints review and resolution service for Department for Communities customers that makes a difference to the way in which the Department discharge their public responsibilities

Our Vision

To deliver a first rate service provided by professional staff

1. Overview

The Independent Case Examiner's Office consider each case strictly on its own merits, taking account of individual circumstances and nuanced differences, in order to determine appropriate redress, even where the facts of the case may appear superficially to be similar.

2. Possible complaint outcomes

Withdrawn cases

Complaints may be withdrawn for several reasons. For example, some complainants decide to withdraw their complaint when we explain to them the appeal route for legislative decisions, or that the nature of the complaint does not otherwise relate to maladministration. From time to time people also withdraw their complaint because the business subsequently takes action which addresses it.

Resolved cases

We try to resolve complaints without the requirement to consider the evidence, by agreement between the business and the complainant, as this generally represents a quicker and more satisfactory result for both.

Settled cases

We try to reach settlement of complaints following an examination of the evidence, by agreement between the business and the complainant. This approach avoids the need for me to be called upon to reach a finding.

Findings

In cases where I find that the business have failed to provide an acceptable standard of service, I consider what action the business have taken subsequently to try to put things right. Below are details of the findings I can reach:

- **Upheld**

If there is evidence of maladministration in relation to the complaint which was not remedied prior to our involvement, the complaint is upheld.

- **Partially upheld**

If only some aspects of the complaint are upheld, but others are not, the complaint is partially upheld.

- **Not upheld**

If there is no evidence of maladministration in relation to the complaint, the complaint is not upheld.

- **Justified**

Although the complaint may have merit, the business has taken all necessary action to remedy it prior to the complainant's approach to ICE.

Redress

If I uphold or partially uphold some or all elements of complaint I will make recommendations for redress such as an apology, a consolatory payment or financial loss payment.

3. Social Security Agency

Context

The former Social Security Agency (SSA) administered and provided guidance on a range of social security benefits and pensions to the people of Northern Ireland. The number of cases received at ICE from Northern Ireland remains relatively small and as in previous years, the overall picture of how the SSA deals with complaints remains positive.

Statistical Information 1 April 2015 to 31 March 2016

Complaints Received

Complaints received and accepted during the period are given in the table below:

Received	15
Accepted	8

Case Clearances*

The table below details the number of cases cleared during the reporting period:

Resolution	1
Settlement	1
Investigation Report from the ICE	4
Total	6

*case clearances can be higher than cases accepted as some cases cleared were accepted in the previous financial year

Outcomes

ICE investigation report findings are detailed below.

Fully upheld	0 (0%)
Partially upheld	0 (0%)
Not upheld	4 (100%)
Total	4

Categories of complaint

ICE office records the top 3 reasons for complaint, which are detailed below for SSA:

Complaint categories	Number
The business got it wrong	3
The business haven't given me the information that suits my needs	2
The business took too long	2

Live caseload

Cases outstanding at 31/3/16	7
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Case Study 1

Ms J attended a medical assessment on 7 June 2013. She complained that the SSA had failed to conduct an adequate investigation into the concerns she raised about the Healthcare Professional who completed the assessment, and failed to provide an adequate explanation as to why her medical assessment was amended following the assessment.

In response to our representations the SSA explained that Ms J had attended a medical assessment on 7 June 2013 and a report had been completed by the Healthcare Professional. The case was then selected for audit on 13 June 2013 and the auditor identified that the Healthcare Professional had not properly recorded the medication being taken by Ms J. This was raised with the Healthcare Professional and the report was amended to reflect the medication list. The finalised report was completed on 17 June 2013, which is why the date of completion is different to the date of the examination.

The SSA acknowledged that the Healthcare Professional failed to accurately record the source of the medication list, causing Ms J to question whether the report accurately reflected her health. They also accepted that they did not correctly annotate the report to reflect the source of the information about Ms J's medication. Consequently, they agreed to issue a letter of apology to Ms J and award her a consolatory payment of £50 in recognition of the inconvenience caused by their maladministration. Ms J agreed that the action taken by the SSA resolved her complaint with us without a need to progress to full investigation

Case Study 2

Mr K complained that the SSA had delayed for over four years – from September 2010 to April 2015 in enabling his appeal to be heard by The Appeals Service (TAS).

We found that Mr K appealed in September 2010 against a decision that found that he did not have Limited Capability for Work. The decision was reconsidered that month and as it remained unchanged the SSA submitted Mr K's appeal to TAS at the beginning of November 2010.

Mr K's appeal hearing was listed for 18 April 2011 but was adjourned until 17 May 2011. TAS records show that Mr K withdrew his appeal at the hearing on 17 May 2011. However, as there is no record of SSA receiving the appeal notice from TAS, his payments of ESA incorrectly continued to be paid until April 2014.

We were able to settle Mr K's complaint as we provided him with an explanation of the events on his case - he was satisfied that our explanation addressed his complaint. Mr K accepted that his appeal was in fact withdrawn from TAS on 17 May 2011 and that SSA continued to pay his ESA in error since that date until 29 April 2014. Mr K said that he did not want any further action to be taken on his case.

4. Child Maintenance Service

Context

The Child Maintenance Service (CMS) operates within the same legislative framework and in the same way as the Child Maintenance Group in other parts of the United Kingdom. It also administers Child Support applications originating from some parts of England.

A new 2012 Child Maintenance scheme was introduced in November 2013 – there are differences in the administration of the new scheme, most notably the introduction of charges if the collection service is used – paying parents pay an amount in addition to their maintenance liability and receiving parents receive a reduced amount of maintenance to cover these charges.

The number of cases received at ICE from Northern Ireland remains relatively small and as in previous years, the overall picture of how the CMS deals with complaints remains positive.

Statistical Information 1 April 2015 to 31 March 2016

Complaints Received

Complaints received and accepted during the period are given in the table below:

	Legacy cases	2012 cases
Received	19	2
Accepted	16	2

Case Clearances

The table below details the number of legacy cases cleared during the reporting period – no 2012 cases have been cleared in this period. These figures show the total number of complaints investigated, which include 4 CMS investigation cases relating to two complainants who had multiple complaints, 3 of these complaints were fully upheld and 1 partially upheld.

Resolution	1
Settlement	0
Investigation Report from the ICE	6
Total	7

Outcomes

ICE investigation report findings are detailed below.

Fully upheld	4 (67%)
Partially upheld	2 (33%)
Not upheld	0 (0%)
Total	6

Categories of complaint

ICE office records the top 3 reasons for complaint, which are detailed below for CMS:

Complaint categories	Number
The business got it wrong	6
The business haven't given me the information that suits my needs	5
The business took too long	2

Live caseload:

Legacy cases outstanding at 31/3/16	11
2012 cases outstanding at 31/3/16	1

Case study 1

Mr S complained that CMS had failed to take timely and appropriate action to complete a full maintenance assessment using the income details he had provided and to deal with his complaint.

When Mr S' benefit claim ended CMS wrote to him requesting details of his circumstances and told him that if he failed to provide this information they could implement a default maintenance decision. Mr S failed to provide this information so a default maintenance decision was implemented.

Mr S subsequently disputed this decision and provided invoices for work he had completed. CMS considered those invoices and decided that they did not provide sufficient information for the default decision to be revised. We considered that

decision to be reasonable as Mr S had confirmed to us that he had tampered with the invoices to remove the names of the companies he had worked for.

Mr S was given appeal rights against CMS' default maintenance decision, but he did not appeal it. He continued to send information to them that had been tampered with and CMS told him that they would not revise the DMD until he provided them with suitable evidence. I did not uphold this element of Mr S complaint, noting that it remained open to him to provide the outstanding information to enable a full maintenance calculation to be completed.

Regarding Mr S' element of complaint about CMS' failure to deal with his complaint, our investigation found that since April 2013 Mr S had made 12 complaints to CMS, the vast majority of which they had failed to acknowledge or provide a response within their service standard of 15 working days. They also took 12 months to provide Mr S with a final response signposting him to my office. I upheld this element of Mr S' complaint – I recommended that CMS apologise to him and award him a consolatory payment of £125.

Case study 2

Mr T complained that CMS had provided him with conflicting information surrounding the completion of the maintenance enquiry form (MEF). He also complained that they failed to provide him with a full Data Protection Print within the published 40 day timescale.

Mr T said from the outset that he did not receive the MEF that CMS had recorded as being sent to him, however the evidence available confirms that a form was sent to him at his correct address. However, Mr T was subsequently given incorrect and misleading information surrounding the issue of the MEF which understandably gave him cause for concern as to whether CMS had followed their procedures correctly.

When providing a final response to this complaint CMS were able to provide additional and supporting evidence to show that the MEF had been issued to Mr T and they acknowledged and apologised for giving him incorrect and conflicting information. I upheld this element of Mr T's complaint as CMS had given him incorrect information on more than one occasion; furthermore, when they received no response from the MEF they delayed taking any further action for six months which caused him to owe arrears.

Although CMS honoured Mr T's Data Protection request within the 40 day timescale, some information was missing from the information he received – most notably regarding the MEF being sent to him. Although Mr T raised this matter with CMS it was over six months before they adequately addressed this and provided him with the additional records.

I upheld this element of Mr T's complaint as CMS failed to adequately provide him with a full Data Protection print and the omission of those records caused him to believe that CMS had acted inappropriately.

I recommended that CMS apologise to Mr T and make a consolatory payment of £100.