Welcome to the Autumn 2016 edition of The Ombudsman's Casebook. This edition contains a number of education cases, which is quite topical currently. The education complaints my Office deals with include those from 18 year olds (younger children can complain to the Children's Ombudsman), and complaints relating to exam administration and special supports for students with disabilities.

We have received a number of complaints about the RACE scheme, which is operated by the State Examinations Commission (SEC). The complaints we receive are from pupils about to sit their Leaving Certificate exam who believe they should have special supports such as a reader or a scribe. What makes this work more challenging is the need to complete it quickly. There is often little time between the young person learning the outcome of their appeal and the exam. My staff work closely with the SEC to turn these cases around within the timetable. Sometimes working into the weekend before the start of the exams.

The work with the SEC has been constructive, and its co-operation with my Office is excellent. The cases have revealed some flaws with the scheme itself, and positive proposals are being developed to improve the scheme in the future, which should avoid the need for last minute complaints.

Working with the SEC shows how the Ombudsman can secure improvements to public services while using the learning from complaints. Getting it right first time is good for an organisation's reputation, leads to happy service users and keeps costs down. Mistakes are inevitable, but minimising them by learning from them marks out effective organisations from those which will struggle.

These cases show how my Office can effectively deal with complaints about education which cannot be resolved locally. Because of this work, we were disappointed when proposals were announced to establish an Education Ombudsman. We believe that between my Office and that of the Children's Ombudsman, this work is already well covered. Creating an Education Ombudsman would be costly, and lead to confusion for pupils and students. Discussions with the relevant departments have been constructive. I hope that the aspirations for the Bill can be met without the needless expense of establishing a new office.
Agriculture

Live Valuation Scheme

Department of Agriculture, Food and the Marine
C01/14/1577
Completed 12/04/2016

# Not Upheld

Background

A farmer complained about a decision of the Department of Agriculture, Food and the Marine not to consider his herd as a milk recording herd for the purpose of valuing his animals in the Live Valuation Scheme for TB reactor animals, choosing instead to use a notional yield level. The farmer’s representative said that the Scheme had not been applied in the farmer’s case in the same way it had been applied for other farmers.

Examination

The guidelines for compensation arrangements for TB set out what is necessary for a herd to be considered as a milk recording herd i.e. an annual herd report from the previous year and/or the latest monthly report which provides information on completed lactations and/or cumulative lactation details for individual cows. The farmer was unable to provide milk recording figures to satisfy the criteria set out in the guidelines and he did not provide any evidence as to how the Scheme had been applied differently for other farmers.

Outcome

The Ombudsman found that the decision of the Department was in line with the Live Valuation Scheme for TB reactor animals and that it had based its decision on a reasonable interpretation of the guidelines.

Reconstitution Grant

Department of Agriculture, Food and the Marine
C01/16/1067
Completed 07/06/2016

# Upheld

Background

A man complained about the refusal of the Department of Agriculture, Food and the Marine to allow his application under the Reconstitution Scheme Document 2008 and the Forest Schemes Manual 2004. The man was a Forestry Consultant who had the consent of the landowner to replant the land following a fire. The fire had occurred some years previously. One of the terms and conditions of the scheme in 2009 was that the applicant and forester were obliged to advise the Department of any damage. When the man submitted his
application in May 2009, he made the Department aware that there was a breach of the terms and conditions and he submitted a report from An Garda Síochána confirming the date of the fire. Initially the Department approved the application. However, four years later, the Department revised its decision. The man said that on the basis of the approval, he replanted the area at a cost of €18,255.

Examination

The Ombudsman believed it was unreasonable of the Department to change its decision four years after approving the grant and after the man had replanted the area.

Outcome

The Department had approved the application in the full knowledge that there was a breach of the terms and conditions. It revised its decision and approved the grant.

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**Single Payment Scheme**

Department of Agriculture, Food and the Marine  
C01/15/1399  
Completed 23/06/2016

# Not Upheld

Background

A farmer was unhappy with the penalty imposed by the Department of Agriculture, Food and the Marine on his 2013 Single Payment. The Department had concluded that he had over claimed on some of his land, which is mountain land in a special area of conservation (SAC). It had reduced the eligible area because of excessive scrub. He was also aggrieved that all of his Disadvantaged Areas payment of €4,000 had been withheld in October, 2015 instead of offering him the option of repaying the overpayment by instalment.

Examination

The EU Commission had requested that the department conduct a review of all of its systems to ensure that it complied with the EU Regulations.

The farmer had appealed the initial findings and following a ground inspection it was found that the situation was actually worse and the penalty had been increased. The inspector had noted that the scrub was quite mature and in his opinion would continue to expand unless he increased the number of sheep grazing the land.

Under EU Regulations, areas of scrub are not eligible for payment under the Single Payment Scheme and any such overpayments must be recouped. With the prior permission of the National Parks and Wildlife Service, it is possible to burn the furze from SAC areas and to keep it down subsequently by grazing an appropriate number of animals on the land.

The Department also advised that a farmer can apply to have money recouped by instalment if s/he can provide evidence of undue hardship if the total amount was to be recouped in one go. In this instance, the farmer did not ask to repay the overpayment by instalment.
Outcome

The Ombudsman was satisfied that the Department had acted in accordance with the terms and conditions of the Single Payment Scheme and did not uphold the complaint.

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**Single Payment Scheme**

Department of Agriculture, Food and the Marine  
C01/15/0549  
Completed 30/06/2016

# Not Upheld

Background

A man complained about a decision of the Department of Agriculture, Food and the Marine to impose penalties under the Single Payment Scheme (SPS).

Examination

The terms and conditions of the SPS provide that all land claimed under the scheme should be used for an agricultural activity. This excludes areas under woods, scrub, lake, etc. The Department decided that certain parts of the land claimed by the man included ineligible areas and areas where no agricultural activity was taking place. This decision was made following remote and ground inspections and was partially upheld by the AAO, which decided a portion of land was eligible.

Outcome

The Ombudsman found that the inspections carried out by the Department were in line with the SPS and that its decision was reasonable.
**Social Protection**

**Child Benefit**

C22/15/1267
Completed 18/05/2016

# Not Upheld

**Background**

A woman sought to have a Child Benefit Claim backdated to 2008. She and her spouse are non-Irish nationals and claimed that they did not have sufficient English to submit the claim in 2008. She said that she had only submitted the application in 2014.

**Examination**

The Social Welfare Consolidation Act, 2005 states that valid Child Benefit claims will be paid from the date of receipt of the application. However there is provision for backdating the claim, where there is good cause for doing so. In order to qualify for Child Benefit, at least one parent must be habitually resident at the date of application.

In examining this complaint, the Ombudsman found the couple had submitted an application for Child Benefit after their daughter was born in 2008. However as they had not supplied evidence of habitual residency, the claim was deemed withdrawn. They were only granted permission to remain and work in the State by the Irish Naturalisation and Immigration Service (INIS) in December, 2012 and therefore could only have submitted a valid application for Child Benefit then. As they had been in the State for more than five years at that stage, it was not considered that a lack of English would have prevented them from submitting a valid claim in 2012.

**Outcome**

Given that the Department of Social Protection and the Social Welfare Appeals Office had applied the legislation correctly, there was no basis for the Ombudsman upholding the complaint.

**Guardian’s Payment**

C22/15/0433
Completed 03/06/2016

# Upheld

**Background**

A man complained that the Department of Social Protection was seeking to recover an overpayment of nearly €3,000 of Guardian’s Payment in respect of his grandson. The man had already appealed an earlier decision to recover nearly €13,000. The Department had not conducted a review of the payment since the man first received the payment 14 years ago.
ago. The grandchild had been in receipt of an allowance for an educational programme. The Department assessed the allowance as means. The Department never advised the man that the allowance was deemed to be means. The man had also given the Department all of the information which it had requested from him.

Examination

The Department explained that a review was not carried out earlier because it reviews these type of payments when the child is approaching 18 years of age to establish whether the child is in full-time education. The Department sent the file to the Social Welfare Appeals Office for a decision following the Ombudsman’s request for a report.

Outcome

The Social Welfare Appeals Office revised the decision and decided that the man was not responsible for the overpayment. It also accepted that the man had always given honest disclosures when he was asked.

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**Job Seekers Allowance**

C22/15/0203
Completed 03/06/2016

# Upheld

Background

A man complained that the Department of Social Protection had started to recover an overpayment of €10,000 in respect of a Job Seeker’s Allowance (JSA) payment he received in 2009. He advised the Department in November 2010 that his wife was returning to work in January 2011, following maternity leave. He said that he was asked to provide this information to the Department several times. The Department lost the documentation. The man queried the overpayment but he did not get a satisfactory response. He engaged a solicitor to write on his behalf but it took the Department 14 months to reply.

Examination

The Department’s file did not have any records of telephone calls or meetings with the man and it did not record the fact that he was asked and provided the Department several times with the information in relation to his wife’s date of return to work. The Department had failed to act on the information in relation to the man’s wife which was the cause of the overpayment. The man thought the increase was in respect of another child.

Outcome

The Department cancelled the overpayment and agreed to refund what had already been recovered. This is a case where there were incomplete records. The Department recognised the inadequacy of its records and failed to act on the information in a timely manner, which led to the overpayment. The local office has confirmed that it will ensure that all interactions with customers are recorded on all files and that correspondence is answered promptly. A new electronic claim system will ensure that all correspondence is recorded.
Exceptional Needs Payment

C22/16/0965
Completed 01/06/2016

# Not Upheld

Background

A woman complained to the Ombudsman about the decision of the Department of Social Protection to refuse her application for assistance towards an electricity bill. The decision was upheld on appeal. The bill in question contained arrears of approximately €1,900. The woman said that she had a serious medical condition that required the use of various electrical medical devices on a 24 hour basis.

Examination

The application had been refused on the grounds that the woman had provided no evidence of efforts to pay anything off the bill. In addition, the file indicated that she had received a monthly supplement of €65 for three years prior to her application. The supplement was granted at her previous address to assist with the cost of running the medical devices. The rate of payment was based on information provided by the woman detailing the running costs of the devices. A total of €2,340 had been paid to her.

Outcome

The Ombudsman was satisfied that the Department, and Review Officer, had considered all evidence, including the medical information provided by the woman. He concluded that the woman’s application had been properly processed.

The woman said that she was willing to make a weekly payment to reduce the arrears, but that she had not contacted the utility company. She was provided with details of a contact in the utility company who would outline her options. She was also referred to MABS who could negotiate on her behalf with the utility company.

State Pension (Contributory)

C22/15/1875
Completed 01/06/2016

# Not Upheld

Background

In 2011 a man applied to the Department of Social Protection to become a Voluntary Contributor for Pay Related Social Insurance contributions. He said he was told that these voluntary contributions would help satisfy the qualifying conditions for a mixed insurance pro-rata State Pension Contributory (SPC) by a Citizens Information Centre (CIC) and the Department.
Examination

While voluntary contributions paid by the man would have contributed to the level of pension awarded, there are other qualifying conditions that must be met to qualify for a SPC. One of these conditions is that a person must have at least 260 paid contributions at the full rate since entry into insurance or 1953, whichever is the later. The man has 211 contributions paid at the full rate and accordingly, he does not qualify for a SPC. The man agreed that there may have been a misunderstanding and lack of clarity in his contacts with the CIC and the Department.

Outcome

The Ombudsman found that the Department’s decision was reasonable and that it had properly applied the relevant legislation.
Environment

Leader Programme

Department of the Environment, Community and Local Government
C08/14/1656
Completed 09/06/2016

# Upheld

Background
A complaint was received from a group against the Department of the Environment, Community and Local Government (DECLG) about the manner in which it reviewed an application under the LEADER Programme and the imposition of a 25% penalty. The application had been approved by the Local Action Group (LAG) but during a random inspection by the Department, it was found that the group had not complied with the terms and conditions of a circular about tendering. The documents had been submitted to the Department in the summer of 2012 and at that time, some breaches of the programme were identified and remedied. In January 2014 the Department discovered other breaches and imposed the penalty. Circulars issued by the Department were confusing insofar as one circular gave an option to advertise on www.etenders.gov.ie OR a national newspaper whereas another circular did not give an option and instructed applicants to visit a different website. That website did not give applicants the option to advertise in a national newspaper.

Examination

The Department reviewed its decision and granted a payment of €23,000 on the basis that it was satisfied, among other things that the group had relied on advice provided by the LAG, that it did not deliberately contravene the procurement process, and that an independent engineer was engaged to ensure a fair procurement process.

Outcome

The Ombudsman was satisfied with the Department’s decision. He was also satisfied that issues that were identified will be minimised by the new operating rules for the 2014 – 2020 LEADER programme. The new programme will contain explicit direction on public procurement. Also, a new project approval process will be examined by Pobal which will serve to reduce errors prior to inspection by the Department.
Revenue

Income Tax
C21/16/0651
Completed 16/06/2016

# Not Upheld

Background
An accountant complained about the level of service provided to him and to his clients by the Revenue Commissioners prior to October 2014. He said that the Revenue had regretted this unacceptable level of service and he wrote to the Ombudsman to seek redress.

Examination
The Revenue acknowledged that the service to the man and to his clients had not been acceptable in all cases in the past. It expressed regret that this happened and, in October 2014, it appointed a single contact person to deal with the man's correspondence to the Revenue to ensure a timely and efficient service to him.

Outcome
The Ombudsman found that the position of Revenue was reasonable and that its statement of regret was a proportional acknowledgement for the shortcomings in the level of service it provided to the accountant. Accordingly, the Ombudsman decided that the issue of further redress did not arise.
Education

RACE (Reasonable Accommodation at Certificate Examinations)
State Examinations Commission
E85/16/1624
Completed 07/06/2016

# Upheld

Background
A student asked the State Examinations Commission (SEC) for access to a reader in his upcoming Leaving Certificate examination. He suffers from dyslexia and dyspraxia. The application was refused and his appeal to the Independent Appeals Committee (IAC) was also refused.

Examination
In order to obtain access to a reader the student must meet all relevant criteria which are that the student must have a specified learning difficulty and have a standard reading score of less than 85; and reading error (accuracy) rate of 7% or more or a word reading rate of less than 90 words per minute.

A recently submitted educational psychologist report showed the student’s standard reading score to be less than 85 with a reading error (accuracy) rate greater than 7% and a word reading rate less than 90 words per minute.

Based on this new information the SEC reviewed the student’s case.

Outcome
The SEC granted access to a reader.

RACE (Reasonable Accommodation at Certificate Examinations)
Finn Valley College
E87/15/3104
Completed 04/04/2016

# Not Upheld

Background
A woman complained to the Ombudsman that her son’s application for a ‘reader’ under the State Examinations Commission’s RACE scheme was unfairly denied. She believed that the school her son was attending had not provided the correct information to the SEC or carried out its role in the application process properly. The woman complained to the school’s Board of Management but was not satisfied with how it examined her complaint.
Examination and Outcome

The Ombudsman wrote to the Chairperson of the school's Board of Management. The Chairperson reported that the school had performed its function in the RACE application process appropriately and that the school and the Board of Management had fully engaged with the woman in their attempts to provide an explanation to the woman regarding her complaint. The Ombudsman did not examine the school’s administrative actions in the processing of the student’s RACE application as such actions are not within the Ombudsman’s remit. Having examined the evidence provided by the school’s Board of Management the Ombudsman concluded that the Board of Management had made reasonable efforts to address and respond to the woman’s complaint.

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**RACE (Reasonable Accommodation at Certificate Examinations)**

State Examinations Commission  
E85/16/1539  
Completed 07/06/2016

# Assistance Provided

Background

A student asked the State Examinations Commission (SEC) for access to a reader, a scribe and waiver from the assessment of spelling/grammar/punctuation in his upcoming Leaving Certificate examination. He has multiple specific learning difficulties. The application was refused and his appeal to the Independent Appeals Committee (IAC) was also refused.

Examination

In order to obtain access to a reader, a scribe and a waiver from the assessment of spelling, grammar and punctuation, the student must meet all relevant criteria.

The criteria for a scribe are that the student must have a specified learning difficulty and have either illegible writing with a spelling/grammar/punctuation error rate of 20% or more or have exceptionally slow handwriting speed (12 words or less per minute).

The criteria for a reader are that the student must have a specified learning difficulty and have a standard reading score of less than 85; and reading error (accuracy) rate of 7% or more or a word reading rate of less than 90 words per minute.

The criteria for a waiver from spelling/grammar/punctuation are that the student must have a specified learning difficulty and a standard score for spelling of less than 85 and an error rate of 8% or more.

In reading the SEC's assessment of the student's standard score was greater than 85 and his error rate was less than 8%. In spelling his standard score was greater than 85. In writing his standard score was greater than 85 and writing speed greater than 12 words per minute.

The Ombudsman was satisfied that the SEC’s assessment had been properly carried out, and that on this basis its refusal of the student’s application on the grounds of an SLD was reasonable as he had not satisfied all of the criteria needed to qualify.
A new application, to the SEC, for a scribe on physical/medical grounds was made.

Outcome

The SEC granted access to a scribe on physical/medical grounds.

Investigation Procedures

Education Training Board
E90/15/4473
Completed 29/06/2016

# Not Upheld

Background

A man made a complaint to the Ombudsman about an Education and Training Board (ETB). His complaint related to an incident which occurred while he was a participant on the ETB Outdoor Instructor Traineeship course, and the outcome of the investigation of the incident which led to his expulsion from the course. He complained that he was unfairly treated as there were two people involved in the incident and he was disciplined while the other person was not. He alleged that he was bullied by the other person and that she initiated the confrontation that day.

Examination

The ETB made its decision in accordance with its Policy on Learner Code of Conduct Infringement Process which states that it will maintain a safe and productive learning environment for all learners on all courses. Where an infringement of the Learner Code of Conduct occurs, the following process will apply: Stage 1 - Verbal Warning; Stage 2 - First Written Warning, Stage 3 - Second Written Warning, Stage 4 Termination.

Stage 4 states that Learners who have failed to address performance issues outlined in previous warning(s), or where an action warrants termination, will have their case referred to the relevant Officer/Manager who will determine what action to take, up to and including termination from the course.

The Ombudsman sought to establish why Stage 4 of the process was invoked in view of the fact that this was the man's first infringement of the Code. In this regard he referred to the ETB Policy which state that the ETB “will not tolerate any form of verbal or physical abuse. The ETB Training centre reserves the right to withdraw services from people who engage in such abuse of our staff or of other clients”. Under the circumstances, the Ombudsman was satisfied that the ETB was within its rights to implement Stage 4 of the process as it deemed that the action warranted termination.

With regard to his claim that he was bullied by the other person, the ETB said that on no occasion throughout the period running up to the incident did he bring these allegations to the attention of staff or management. The Ombudsman also asked the ETB to clarify what triggered the investigation of this incident, in view of the fact that the man was disciplined while the other person was not. The ETB confirmed that its decision was triggered by the man’s behaviour which in its view was a serious breach of its policies.
Outcome

The Ombudsman was satisfied that fair procedures were followed in the investigation of this incident which led to the man's expulsion from the course.

University - Investigation Procedures

E66/15/1790
Completed 26/05/2016

# Not Upheld

Background

A woman complained about the handling of her complaint by a University into the alleged treatment she received from her lecturers. She was not happy with the length of time taken or the fact that she was not contacted during the course of the investigation.

Examination

The University's Student Complaint Procedure sets out the process for dealing with complaints including acknowledgements, initial assessments, investigations of complaints and possible meetings with all those involved. The University said that the proper procedures were followed and that the complaint had been dealt with correctly. Regarding meeting with the woman as part of the investigation, the Ombudsman noted that the Complaints Procedure provides for a meeting to be held at the discretion of the University's Complaints Board. The Board decided not to meet the woman and it had notified her accordingly. The Ombudsman did not consider this was unreasonable in the circumstances of the case.

Outcome

The Ombudsman found that the complaint had been dealt with in line with the University's Complaint Procedure.

Higher Education Grants

SUSI / SGAB
E78/16/0313
Completed 31/05/2016

# Not Upheld

Background

A young woman was refused a Higher Education Grant by Student Universal Support Ireland (SUSI) on the basis that her family income exceeded the guidelines. She considered that her family's income had not been correctly assessed, especially in relation to the income generated from two rental properties which she claimed didn't meet the mortgage payments on the properties. She also said they had not taken into account the fact that two of her siblings were also in college.
Examination

In examining the complaint the Ombudsman obtained the student’s grant application and all other relevant information. He also reviewed the terms and conditions applying to the Higher Education Grant Scheme. In assessing income, SUSI has access to both the Revenue Commissioners and Department of Social Protection databases and can confirm the accuracy of income declared from these sources. It became clear that the student had not initially provided SUSI with the required information about the rental properties and her siblings. When this was provided SUSI reassessed the reckonable income. However it still exceeded the income limits for a grant. While certain expenses and earnings can be deducted from income for the purposes of the grant scheme, there is no provision for the deduction of mortgage payments, including interest on those payments, from income.

Outcome

As SUSI had applied the terms and conditions of the Scheme correctly, there was no basis for upholding this complaint.
Health

Care and Treatment
Letterkenny General Hospital
H21/15/4507
Completed 15/04/2016

# Assistance Provided

Background

A woman who had been clinically diagnosed as having a brain aneurysm three years ago complained that she had received no appointment for the treatment. Despite having been under the care of multiple medical personnel in several different hospitals, she had yet to receive the necessary treatment required to resolve these outstanding issues.

Examination

The Ombudsman sought a report from the consultant responsible for the woman’s care. The report explained that due to the woman’s medical history, she was not considered suitable for major surgery, either performed with general or regional anaesthesia, until the follow up cerebral angiogram had been performed in a Dublin hospital. The consultant had recently met with the woman and discussed her care plan with her.

Outcome

It was explained to the woman that the Ombudsman could not assist her given that clinical decisions had been made in relation to her care. However, information was provided to her in relation to the Cross Border Healthcare Directive should she decide to avail of treatment in another member state.

Care and Treatment
Mater Misericordiae Hospital
H81/15/3686
Completed 01/04/2016

# Not Upheld

Background

A man complained about the hospital care provided to his late wife prior to her death from a pulmonary embolism in 2013. The woman had been admitted from the Emergency Department to the High Dependency Unit but was transferred to the Special Care Unit due to her deteriorating condition. The Specialist Registrar had discussions with her family and had explained her clinical prognosis to them. The woman had been reviewed by the medical team and as her condition was considered to be stable, she was transferred to a ward. However, over the next twenty four hours, the woman’s condition deteriorated and she was transferred back to the Special Care Unit where she passed away. The man complained that his wife should
never have been moved from the Special Care Unit to a ward and queried whether there were insufficient special care beds in the hospital.

Examination

In its response to the man, the hospital explained that the transfer of patients from one area to another involves the exercise of clinical judgement which is an excluded matter under Part 9 of the Health Act, 2004. However, it sought a medical report from the treating consultant which clarified that his wife was deemed to be clinically stable based on her oxygen saturation levels and observations. The hospital said it was standard practice to transfer stable patients to a ward as there were only 5 beds in the Special Care Unit. It had apologised to the family for the distress or upset they experienced during the woman’s inpatient stay and extended sincere sympathy on their sad loss.

In examining this complaint, the Ombudsman agreed with the hospital that the transfer of a patient from special care to ward based care was a clinical decision, which was outside the scope of the complaints process. However, he asked the hospital to clarify the purpose of the Special Care Unit and he reviewed the woman’s clinical records to gain a better understanding of her care at ward level.

Outcome

The hospital explained that the Special Care Unit is a 5 bedded high dependency medical unit that cares for acutely ill medical patients who may require specialised drug infusions, non-invasive ventilation, intense physiological monitoring or monitoring following clot busting therapy. It said that patients are transferred out of the Special Care Unit once they are clinically deemed fit and this is what occurred in this case. The records supported the hospital’s view that the woman’s clinical observations were normal on transfer to the ward and that she was transferred back to the Special Care Unit once her condition deteriorated. The hospital said that doctors have to continuously review patients in the Special Care Unit to ensure that the beds are allocated to those patients who may not be in a stable condition.

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**Care and Treatment**

Mater Misericordiae Hospital  
H81/15/2420  
Completed 03/06/2016

# Partially Upheld

Background

A man complained about the development of a pressure ulcer on his mother’s back while she was a patient in the Mater Hospital. He also complained that nursing staff had repeatedly failed to dress it correctly and that this made the problem worse.

The man also complained about his mother’s discharge to an off-site care facility. He said that the consent box on the transfer form had been ticked before he had been contacted and he disputed the hospital’s claim that it had tried to contact him at an earlier time to discuss the move. The man was also unhappy that his mother was dressed inappropriately when she was moved.
Examination

A review of the medical records showed that the hospital regularly assessed the woman’s risk of developing a pressure ulcer. They also indicated that the woman was frequently agitated as a result of her medical condition. This would appear to have been a contributing factor in the development of the ulcer. A ‘Wound Assessment Chart’ was completed by staff indicating that the woman’s ulcer had been cleaned and dressing changed every 48 hours. The Ombudsman could not examine whether or not the wound had been properly dressed as this was, in his view, a clinical matter.

Following a review of the transfer documentation, the Ombudsman felt that the evidence supported the man’s contention that the consent box was ticked before the family were contacted. He was also of the view that contacting the family a few hours before the transfer didn’t give them enough time to consider the transfer or make any necessary arrangements, including the provision of adequate clothing.

Outcome

The Director of Nursing apologised to the man and his family for the distress caused as a result of the development of the pressure ulcer. She said that since the complaint was made considerable resources had been invested in nurse education across the hospital to ensure correct identification and treatment of pressure ulcers. A hospital-wide audit had also been carried out.

The hospital also apologised for the upset and distress the woman’s transfer caused her. It accepted that the communications, documentation and circumstances surrounding the transfer did not meet the normal standards expected. It said the nursing management team had started weekly mentoring / educational meetings with staff on the ward to improve this aspect of the service and prevent a recurrence.

The Ombudsman welcomed the apologies and the steps taken by the hospital to prevent a recurrence of the issues experienced in this case.

Care and Treatment

Mayo University Hospital
H23/15/2947
Completed 23/05/2016

# Partially Upheld

Background

A woman complained to the Ombudsman about the misreading of her blood tests results by a doctor in the Emergency Department (ED) in Mayo University Hospital (MUH) and the decision to discharge her without further treatment. The results were reviewed several days later during an outpatient appointment in Galway University Hospital (GUH). The woman said that her health had deteriorated rapidly at that stage and that she spent two weeks in GUH, some of which was in the High Dependency and Intensive Care Units.

The woman was also unhappy with how her complaint was handled, saying that it took four months to get a reply.
The Ombudsman was unable to examine the issues about the misreading of the woman’s blood test results and her discharge from MUH as he cannot examine issues which, in his opinion, relate to clinical judgement. However, he noted that the Consultant in Emergency Medicine had spoken with the doctor in question and that the hospital had apologised to the woman for her experience. The matter was also discussed with nursing management in the ED.

With regard to the handling of the woman’s complaint, a review of the file indicated that it was not processed within 30 working days and that she was not updated on her case. The Complaints Manager had apologised for the delay. The hospital also informed the Ombudsman that the delay was due to staff changes and that there had been significant improvements since the complaint was made.

Outcome

While he could not examine the key issues in the case, the Ombudsman was satisfied that steps had been taken by MUH to prevent a recurrence of the woman’s experience. He also acknowledged that there had been improvements in complaint handling within the hospital. However, he reiterated the importance of finalising complaints within the relevant timeframe and, when necessary, keeping complainants informed of developments in their cases.

Care and Treatment

St Vincent’s University Hospital
H71/15/1753
Completed 30/05/2016

# Partially Upheld

Background

A man complained that nursing staff in St Vincent’s University Hospital held him down against his will during a routine medical procedure. He said that it was his understanding that the procedure was to be carried out under general anaesthetic. However, he said that he was given no medication.

The man also raised a number of issues about the performance of a minor surgical procedure during a subsequent out-patient appointment. The Ombudsman was unable to deal with this element of his complaint as it was a clinical matter.

Examination

The hospital’s policy indicated that all such procedures are carried out using conscious sedation. The medical records confirmed that the man had been given a sedative. The Ombudsman noted that a doctor had written on the consent form that the risks of sedation were explained to the man. However, he was unable to determine what information was given to the man about the use of sedation or how he came to believe that he would be given a general anaesthetic. The Ombudsman also noted that, in addition to consenting to the medical procedure, a patient must give verbal consent for the use of sedation. He found no evidence on file that the patient had given verbal consent.
In relation to the use of restraint during the procedure, the hospital said that the man became uncomfortable during the procedure. In the interest of patient safety and to enable the procedure to be completed, the man had to be restrained by staff while an additional dose was administered.

**Outcome**

The hospital apologised to the man unreservedly for his experiences. It also agreed to provide patients at ward level with an information leaflet on the procedure, which includes details of the use of conscious sedation, and advised that it was in the process of introducing a separate ‘conscious sedation’ leaflet. It advised that the relevant Clinical Nurse Manager was actively involved in the introduction of a new procedural information leaflet / consent form. The Ombudsman welcomed these developments as they would ensure that patients and family members have information about the procedure and are fully aware of the use of ‘conscious sedation’.

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**Private Nursing Home**

NAH/16/1032  
Completed 23/06/2016

# Not Upheld

**Background**

A complainant said that they had received a notification from a private nursing home informing them that visits to a sibling, a resident in the nursing home, would have to be pre-arranged. In addition the nursing home had indicated that supervision would be imposed on the visits.

**Examination**

There had been difficulties previously in the relationship between the two siblings. For this reason the resident sibling wanted to be notified of when visits were to take place. From our enquiries it seemed that the resident had the capacity to make this decision. However, supervision of visits was deemed necessary due to a previous incident in the nursing home involving the complainant and their sibling.

**Outcome**

The Ombudsman was satisfied that the nursing home’s actions were reasonable under the circumstances. From the evidence available it appeared that the resident was content and well supported in the nursing home. The nursing home said that they wanted to promote good relations between the siblings and that any supervision of visits would be carried out in a sensitive manner.
HSE - Mobility Allowance Refused

HC1/15/2354
Completed 10/06/2016

# Assistance Provided

Background

A man complained about the HSE’s decision to refuse his application for Mobility Allowance on financial grounds.

Examination

The man provided details of his finances for the period in question, which clearly showed a reduction in his income between February 2012 and June 2013. The Ombudsman reviewed the information and found that the HSE had not correctly assessed the man’s application. He put the information to the HSE and asked that it review its decision.

Outcome

The HSE accepted the Ombudsman’s view and paid arrears of over €2,500 in respect of the man’s initial application and a further €8,000 in respect of the period up to September 2016. It also confirmed that he would receive a monthly payment of €208.50 from October 2016.

HSE - Nursing Home Support Scheme

HB2/15/0207
Completed 06/05/2016

# Not Upheld

Background

A man complained on behalf of his mother about the HSE’s financial assessment of her home under the Nursing Home Support Scheme (NHSS). His mother had taken out a life loan against her home and the man felt that the HSE should have discounted the value of the loan against the value of his mother’s home.

Examination

The NHSS Act allows for certain deductions to be made from the market value of a relevant asset for the purpose of financial assessment. Allowable deductions are payments which are made ‘in respect of interest on monies borrowed for the purchase, repair or improvement of the principal residence of the person’. The man did not give the HSE evidence of the purpose of the loan and therefore it was not treated as an allowable deduction. The Ombudsman asked the man for documentary evidence, e.g. a copy of the application form, that would confirm that the loan was for any of the reasons set out by the legislation. The man said the loan was used for home improvements, to purchase furniture and to cover funeral expenses but he was not able to supply documentation for these items and could not state their costs.
Outcome

While the Ombudsman sympathised with the man’s position he found that the HSE has conducted the assessment in accordance with the legislation.

HSE - Medical & GP Card

H09/16/0097
Completed 19/04/2016

# Not Upheld

Background

A man complained that he was refused the over 70’s medical card by the Primary Care Reimbursement Service (PCRS) as it deemed him over the income threshold. He claimed the PCRS incorrectly excluded his capital allowances from his income calculation and that it also incorrectly assessed his interest earned.

Examination

The National Assessment Guidelines for the over 70 Medical Card/GP Visit scheme shows that the assessment is done on a gross income basis but with a high qualifying threshold of €500 per week for a single person for a full medical card. This excludes capital allowances from income calculation.

The PCRS outlined the basis for assessing investment income. This can be on a notional interest rate basis or on the basis of certificates of interest submitted. The PCRS originally assessed the man’s investment income on the notional basis. Following a request for a reassessment, the PCRS sought certificates of interest paid. This had the effect of reducing the man’s weekly income by an amount of €85.76. However, it still did not bring him below the €500 per week threshold.

Outcome

The Ombudsman found that the PCRS’ decision to refuse the man a full medical card was made in accordance with the Over 70 Medical Card/GP Visit Card National Assessment guidelines. However, the man was entitled to the GP visit card.

HSE - Respite Care offered after death of woman

S39/15/3685
Completed 01/06/2016

# Assistance Provided

Background

A man complained that several months following his wife’s death he received a telephone call from The Carers Association to offer a respite service. The Carers Association provided this service on behalf of the HSE at the time. The HSE’s Community Nursing Service had made a referral in December 2010 to the Carers Association without the man’s knowledge,
for the provision of respite care hours. It was not until four years later and over one year after his wife had passed away, that the man received a call offering assistance. He wrote a letter of complaint to the HSE explaining that he could not understand why the either the HSE or the Carers Association had not checked that the service was still required. In making a complaint, the man wanted to ensure that another family in the same circumstances was not contacted.

Examination

The HSE contacted the Carers Association to clarify how waiting lists were managed and the processes in place for contacting clients. The Carers Association explained that the waiting list was not constrained by time limits and that they would normally try to contact the health professional who made the referral before contacting the client. However, if they were unable to do so, they would then contact the next of kin listed on the referral form. The Carers Association apologised to the man for the distress caused and the HSE also apologised for not advising the Carers Association of the woman’s passing.

The Carers Association has since merged with another organisation to form “Family Carer’s Ireland”. The Ombudsman was assured that when this new organisation was putting a service in place, it would liaise with the local Community Nursing Service. The new organisation now shares its waiting list with the HSE. The Ombudsman was reassured that the level of communication between the HSE and “Family Carers Ireland” has improved the delivery of its services.

Outcome

The HSE confirmed that clients are now contacted by “Family Carer’s Ireland” once a referral was made to it by the Community Nursing Service. This contact with clients will ensure that they are aware that the referral has been made and that their name has been placed on the waiting list.

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**Lost Property**

Mater Misericordiae Hospital
H81/16/0721
Completed 04/05/2016

# Upheld

**Background**

A man’s wife complained that her husband’s dentures had been lost while he was a patient in hospital. The man suffered from advancing Vascular Dementia, with additional confusion at that time, due to Urosepsis (a blood infection in the urinary tract). She wanted to be reimbursed for the cost of replacement dentures.

**Examination**

The hospital said its policy on patients’ personal property was outlined on its website and in information packs supplied to patients. This policy advises patients that the hospital does not accept liability for the loss or damage of personal property.
The Ombudsman’s view was that, due to his medical condition, the man was a very vulnerable person. He did not have the capacity to assimilate information relating to ‘personal belongings’ as stated on the website or information pack. His medical conditions were clearly marked on his file and his wife drew the hospital’s attention to his confusion. In these circumstances the Ombudsman’s view was that the Mater Hospital had an especially strong duty of care to ensure that something as important as his dentures should not get lost.

Outcome

The hospital reimbursed the replacement cost of new dentures as a gesture of goodwill. It said that, in light of this case, it is in the process of developing a Patient Property Policy to include patient information at the point of admission.

Social Work Services - Child Welfare and Protection

Tusla
H04/15/3445
Completed 13/04/2016

# Partially Upheld

Background

A woman complained to the Ombudsman about Tusla – The Child and Family Agency. Her son had entered into voluntary care. She said that her address was given as the same as her son’s address on the Standard Form for Reporting Child Protection and Welfare Concerns. This was not her correct address.

She also said that her signature was forged on the ‘Application for Admission to Voluntary Care’ form. She said that she had not provided consent for her son to be admitted to voluntary care.

Examination

When the woman complained to Tusla about these two issues, Tusla acknowledged that her address was incorrect on the Standard Form for Reporting Child Protection and Welfare Concerns. It amended its records accordingly. This Office confirmed that this amendment was made.

Tusla stated that the woman’s signature was not forged on the ‘Application for Admission to Voluntary Care’ form. Tusla said that the social worker had written on the form (including on the line for signature) that the woman was too upset to sign the form but gave verbal consent via the phone. Having viewed this form, the Ombudsman agreed that the woman’s signature was not forged on the ‘Application for Admission to Voluntary Care’.

Outcome

Aside from the note on the ‘Application for Admission to Voluntary Care’ form, there was no other written record of the telephone conversation where the woman provided the social worker with consent for her son to enter voluntary care. The Ombudsman was not in a position to conclusively establish if verbal consent was provided. However, he believed that
there was a problem with the administrative process of taking consent. Tusla apologised to the woman for this administrative failing.

Tusla has commenced the development of a revised voluntary care form and guidance. However, in the interim, they have issued an internal circular advising of best practice in terms of taking consent for voluntary care. This includes a recommendation that written consent should be sought as soon as practicable.
Local Authority

Motor Tax
Clare County Council
L05/15/1717
Completed 03/05/2016

# Not Upheld

Background

A man complained that he had been given incorrect information during a telephone call with an official of Clare County Council which he says resulted in him making a late application for a refund of motor tax. He also complained about the delay in making a decision on his refund application.

Examination

While calls are not recorded, the Council said that it would appear from the paperwork that followed that the man’s query was about the car being off the road and not about a refund of motor tax. However, the Council accepted that a delay had occurred and it provided an explanation and apologised for the delay. It said that it had updated its administrative processes for dealing with similar motor tax refunds.

Outcome

The Ombudsman did not uphold the complaint with regard to the telephone call as there was insufficient evidence in the case to make a finding either way. The Ombudsman was satisfied that the Council had applied the relevant legislation correctly with regard to the motor tax refund. He was also satisfied that the Council had taken action to ensure this type of delay would not happen again and that the delay had not affected the man financially.

Planning Administration

Fingal County Council
L60/16/0160
Completed 04/05/2016

# Not Upheld

Background

A man complained that Fingal County Council was not enforcing compliance with planning conditions on the developer of his estate. He wanted the Council to take enforcement action or, alternatively, take the estate in charge and complete the work itself.
Examination

The Council's planning file showed conditions associated with the original planning permission were incorporated into a subsequent permission for further development and this in turn was extended by five years. As this permission does not expire until 2019, the developer has until that date to comply with the planning conditions. Under the Planning and Development Act 2000 (As Amended) there is no enforcement action open to the Council at this time.

Section 180 of the Planning and Development Act 2000 (As Amended) provides for the ‘Taking in Charge’ by Councils of residential developments. In line with Section 180 the Council cannot take a development in charge as long as there is existing planning permission which has not yet expired.

Outcome

The Ombudsman found that the Council had acted in accordance with the relevant legislation and regulations.

Pollution

Louth County Council
L32/15/4183
Completed 13/04/2016

# Not Upheld

Background

A couple complained that Louth County Council was not enforcing environmental legislation regarding smoke emissions from a neighbour’s flue. They said their health was suffering as a result of smoke pollution and they wanted the Council to force the owner take remedial action.

Examination

The Council’s file showed that it had engaged with the owner of the flue. While there are no specific limits on emissions from domestic flues, it conducted a number of inspections and did not deem the smoke from the flue as excessive. The Council advised the owner as to the acceptable types of fuel to use. It also referred the construction of the flue to the Council’s buildings control officer who stipulated that the flue height be increased by one metre to comply with building regulations. The Council ensured that this was done.

Outcome

The Ombudsman found that the Council had acted in accordance with the relevant regulations and procedures.
Roads

Tipperary County Council
L48/15/0843
Completed 12/04/2016

# Not Upheld

Background

A woman complained that Tipperary County Council had dug an inlet from the road into the ditch near her property which caused her house flood. She wanted the Council to compensate her for the damage caused.

Examination

The Council provided evidence indicating pre-existing inlets at the location and noted that they are routinely cleared out. It also explained that hundreds of acres of land in the area were flooded at the time. Following site inspections, the Council was of the view that the flooding at the woman's property was mainly due to the high water table and not surface water run-off from the road.

Outcome

The Ombudsman informed the woman that in the absence of independent corroborative evidence he could not reach a determination on whether the Council had only dug the inlet just before the flooding occurred. Notwithstanding this, he was satisfied the Council had provided a reasonable explanation for the cause of the flooding.
Other Service Providers

Passport Application
Department of Foreign Affairs and Trade
C11/16/0335
Completed 04/04/2016

# Not Upheld

Background
The complainant sought a second Irish Passport as he wanted to travel to the Middle East and Israel for business purposes. He is an Irish citizen who also holds Pakistani citizenship. He said that if he had an Israeli stamp on his current passport he would be unable to travel to other Middle Eastern countries. His application was refused.

Examination
The man's employer had submitted information in support of his application for the second passport. However, the employer did not specify that the man would be required to travel on business. Furthermore, the employer indicated that his job would be retained until he returned from his travels which implied that the intended travel was personal rather than for business purposes.

Under the Passport Acts, 2008 the Minister for Foreign Affairs and Trade can refuse to issue a second passport where s/he deems that there are insufficient grounds for doing so. The onus is on the applicant to provide compelling evidence as to why a second passport should be provided.

Outcome
The Ombudsman decided that the complaint could not be upheld as there was no evidence that the Department had refused the passport without proper authority or had treated him unfairly.

Boat Removal
Waterways Ireland
C47/15/1446
Completed 24/05/2016

# Not Upheld

Background
A man complained about a decision of Waterways Ireland to remove his boat from Grand Canal Dock and to charge him for the cost of moving and storing the boat in dry dock. The boat was subsequently sold by Waterways Ireland to defray the costs involved.
Examination

Having identified the boat as a health and safety risk, i.e. taking on water and in danger of sinking, Waterways Ireland initiated its health and safety procedure to deal with enforcement for non-compliance with the relevant bye laws. These procedures involve informing the owner of the infringement and giving the owner an opportunity to remedy the situation. If no action is taken a final notice issues indicating that the boat will be removed at the owner’s expense. It also provides for the sale of the boat to defray costs incurred. In this case there was no evidence that, following receipt of warnings, the man had attempted to remedy the situation.

Outcome

The Ombudsman found that, as there was no evidence that the man attempted to rectify the situation, the decision of Waterways Ireland was in line with its enforcement procedures for the Grand Canal.

Non-Reply to Correspondence

National University of Ireland, Maynooth
O56/15/3498
Completed 12/04/2016

# Upheld

Background

A woman made a complaint to the Ombudsman about the National University of Ireland, Maynooth (NUIM). She wrote to the college raising concerns about her experiences while under contract to train as a Family Mediator with the Legal Aid Board and NUIM. However she did not receive a response.

Examination

A number of the issues the woman raised were not within the Ombudsman’s jurisdiction. However, he considered the lack of response to the woman to be contrary to fair and sound administration. He requested NUIM to respond to the woman's letter.

Outcome

NUIM engaged with the woman regarding the issues she raised in her letter. The Ombudsman told the woman that she could contact him again if she was unhappy with the outcome of the engagement with NUIM, where he would review any issues that were within his remit.
Application for Grant

Caranua
O83/16/1081
Completed 23/06/2016

# Not Upheld

Background

A man complained to the Ombudsman about the manner in which his application for financial assistance was handled by Caranua. Caranua is an independent State Body set up to administer a fund for survivors of Residential Institutions to provide health, housing and education support. The man applied for replacement windows for his home, but the application was not processed as it did not form part of his initial application for financial assistance. He complained that it said nothing on the application that he had to reapply again. He said he was told he was making too much contact with Caranua and that the phone was hung up on him several times.

Examination

The man's initial application to Caranua was approved in 2015. The application for additional support for replacement windows was received in June 2015. Caranua's guidelines state that “You can apply for a single service or a range of services. There is no limit”. Caranua said that in the interests of ensuring that they address needs as far as possible, it had been their practice to consider repeat applications. However, this led to a situation whereby applicants who had already received payments continued to make repeat applications, making it difficult for them to have the time to address new applications, and impossible to ensure that the Fund would be available in an equitable way to all eligible applicants. To address this situation, Caranua decided in July 2015, that priority be given to first time applications over re-applications.

With regard to the man's level of contact with its office, Caranua stated it considered it necessary to deal with the man under its Unacceptable Actions Policy in its Customer Service Charter which sets out how Caranua staff will deal with challenging customers.

Outcome

The Ombudsman was satisfied that the Board’s decision that priority be given to first time applications over re-applications was fair and reasonable. With regard to the man's level of contact with the office and having regard to the particular circumstances of this case the Ombudsman decided that Caranua had acted in accordance with its Unacceptable Actions Policy in the Customer Service Charter.
Complaints Procedure

Pobal
O80/16/0138
Completed 09/06/2016

# Upheld

Background

A woman complained to the Ombudsman in relation to Pobal and the Better Start Scheme. Better Start provides, among other things a specialist on site mentoring service for creches. In her complaint, the woman expressed concern that the Better Start mentor stepped outside her role as mentor as she gave directives to staff members, as opposed to advice. She complained that Pobal’s investigation of her complaint was flawed as staff members were not asked for their account of the events. She said that Pobal did not comply with its own Complaints Procedure which stated “All complaints received into Pobal are logged and categorised as upheld, dismissed or withdrawn” as her complaint was categorised as “partially upheld”. The Complaints Procedure also stated that complaints will be fully investigated and a response issued within 15 working days, which did not happen in this case.

Examination

Pobal said that in order to maintain the integrity of the investigation and sufficient proportionality, interviews would take place only with the direct parties involved. It appeared to the Ombudsman that by limiting the scope of the investigation the conclusions were not fully informed, and that the woman’s point that staff members should be interviewed seemed reasonable. In the interest of fair procedure, Pobal was requested to re-examine this complaint, to enable relevant staff members to be interviewed and to amend the final report if necessary.

With regard to compliance with Pobal’s Complaints Procedure, the CEO apologised to the woman for the delay and for any confusion caused with the interpretation of the Complaints Procedure. The Complaints Procedure has been amended for the future to ensure that this does not occur again.

Outcome

Pobal re-examined the complaint and to enabled relevant staff members to be interviewed. It also agreed to amend the final report and outcome category as appropriate.
Registration/Recognition of Qualifications

The Teaching Council
R29/14/2227
Completed 29/06/2016

# Partially Upheld

Background

A man complained to the Ombudsman about the decision of the Teaching Council to grant him ‘conditional’ registration only when he applied to be registered as a post-primary teacher. The Teaching Council believed that he needed to complete an additional module of study before being eligible for full registration.

Examination

The Teaching Council's actions at assessment stage were fair and reasonable with procedures in place to support consistency across the process. The Ombudsman noted that the assessors are subject experts. However, the Ombudsman was concerned that there was nothing to suggest that a different assessor would have come to a different conclusion, using the same assessor for internal review could be considered to be an undesirable administrative practice and contrary to fair or sound administration.

Outcome

In view of these concerns about the internal review process, the Ombudsman wrote requested the Teaching Council revise its review processes. The Teaching Council indicated its willingness to do so. The Teaching Council also stated that, in the meantime, all reviews of registration decisions will, as far as possible, be conducted by a second assessor who was not involved in the original decision.
An explanation of the Ombudsman’s Case Closure Categories

1. Upheld:
The following describe some of the scenarios where the Ombudsman upholds a complaint:

- It has been accepted by the public body that maladministration has occurred which has adversely affected the complainant.
- The complainant is found to have a genuine grievance and the body agrees to resolve/rectify the matter.
- The body departs from the original position and some form of redress is offered.

- While the complaint was not Upheld or Partially Upheld, the public body has adopted a flexible approach and has granted a concession to the complainant which has improved his/her position or resolved the complaint fully.

4. Not Upheld includes:
The actions of the public body did not amount to maladministration. In other words, the actions were not:

(i) taken without proper authority,
(ii) taken on irrelevant grounds,
(iii) the result of negligence or carelessness,
(iv) based on erroneous or incomplete information,
(v) improperly discriminatory,
(vi) based on an undesirable administrative practice,
(vii) contrary to fair or sound administration.

5. Discontinued/Withdrawn includes:

- The complainant does not respond within a reasonable time to requests from the Ombudsman for relevant information.
- It has been established in the course of the examination/investigation that the complainant has not been adversely affected.
- The Ombudsman is satisfied that maladministration has occurred and that appropriate redress is being offered by the public body. The complainant refuses to accept the redress and is insisting on a level of redress which the Ombudsman considers to be unreasonable.
- The complainant initiates legal action against the public body in relation to the matter complained about.
About the Office of the Ombudsman

The role of the Ombudsman is to investigate complaints from members of the public who believe that they have been unfairly treated by certain public service providers.

At present, the service providers whose actions may be investigated by the Ombudsman include:

- All Government Departments
- The Health Service Executive (HSE) (and public hospitals and health agencies providing services on behalf of the HSE)
- Local Authorities
- Publicly-funded third level education institutions and educational bodies such as the Central Applications Office (CAO) and Student Universal Support Ireland (SUSI)
- Public and private nursing homes

The Ombudsman also examines complaints about failures by public bodies to provide accessible buildings, services and information, as required under Part 3 of the Disability Act 2005.

Making a Complaint to the Ombudsman

Before the Ombudsman can investigate a complaint, the person affected must try to solve their problem with the service provider concerned. In some cases there may be formal local appeals systems which they will have to go through before coming to the Ombudsman - for example, the Agriculture Appeals Office, the Social Welfare Appeals Office etc. If they fail to resolve their problem and they still feel the provider concerned has not treated them fairly, they can contact the Ombudsman.

Further details on making a complaint can be found on our website http://www.ombudsman.ie/en/Made-a-Complaint/

Contacting the Ombudsman

The Ombudsman’s Office is located at 18 Lower Leeson Street in Dublin 2.
Lo-call: 1890 223030 Tel: 01 639 5600 Fax: 01 639 5674
Website: www.ombudsman.ie Email: Ombudsman@ombudsman.ie
Twitter: @OfficeOmbudsman

Feedback on the Casebook

We appreciate any feedback about the Ombudsman’s Casebook. Please email us at casebook@ombudsman.ie with any comments.