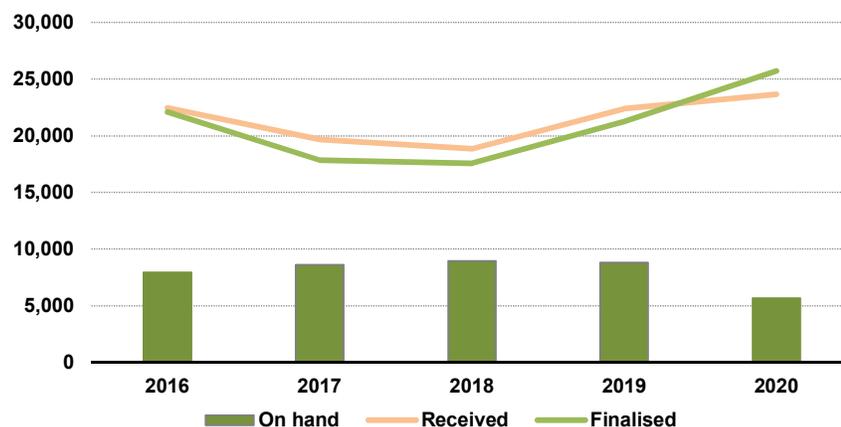


10 Management of social welfare appeals

- 10.1** The Department of Social Protection (the Department) oversees the provision of income support and other social services under a wide range of schemes.
- 10.2** When a person applies for income support under one of the Department's statutory schemes and is refused, s/he can in most cases appeal the decision to the Social Welfare Appeals Office (the Appeals Office).¹ The Appeals Office also receives appeals in relation to other decisions made by the Department, such as on the insurability of employment and on the back-payment of entitlements.
- 10.3** In addition to making a formal appeal to the Appeals Office, claimants have the right also to request the Department to review a decision. The request to review the same decision can be made at the same time as an appeal is lodged. The Department does not separately record the number of decisions it reviews by way of claimant requests other than record that a new 'revised' decision was made.
- 10.4** The Department has stated that the total number of decisions on welfare claims made in 2020 was approximately two million and that the appeal rate for 2020 was 1.3%.² Over 40% of the appeals received were accounted for by just two income support schemes: disability allowance which represented over one quarter of appeals; and the carer's allowance scheme which accounted for 15% of the total appeals received.
- 10.5** In 2020, just under 26,000 appeal decisions were finalised — an increase of 21% from 2019 (see Figure 10.1).³ The number of appeal cases on hand reduced significantly during 2020.

Figure 10.1 Appeals received and finalised in year and on hand at year-end, 2016 – 2020



1 Decisions in respect of certain entitlements, such as fuel allowance, are not appealable to the Appeals Office. Claimants can seek a review by the Department of decisions not within the remit of the Appeals Office.

2 The total number of decisions made by the Department annually include new claim, claim review and maintenance decisions made throughout the lifetime of a claim, all of which are appealable.

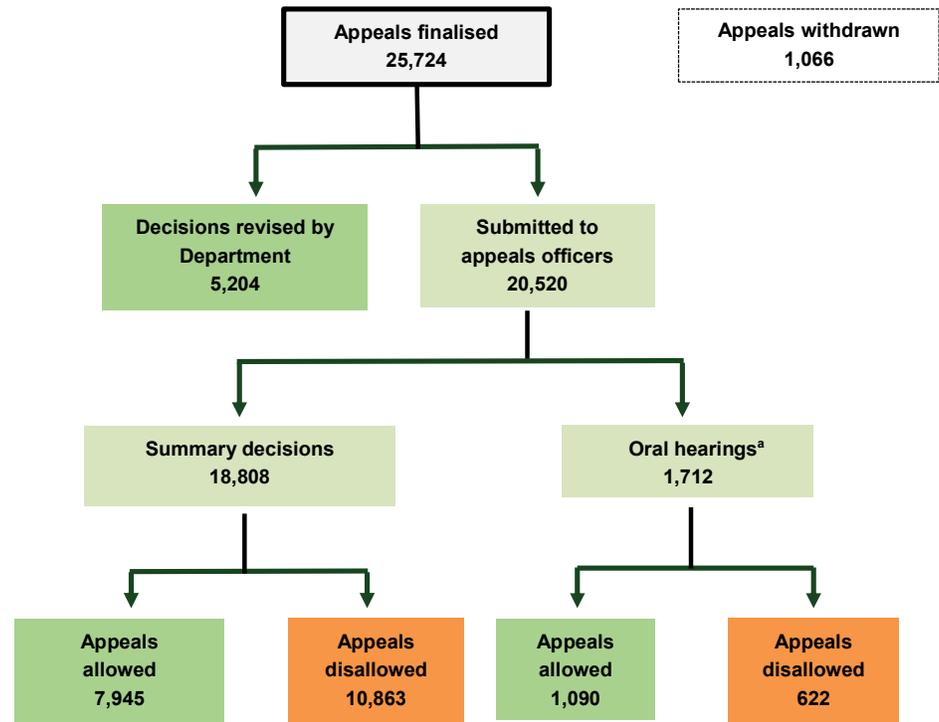
3 In 2020, 25,724 appeals decisions were finalised. This figure excludes 1,066 cases that were withdrawn.

Source: Social Welfare Appeals Office

Disposal of appeals

- 10.6 When a claimant submits an appeal, it goes, in the first instance, to the Department where the original deciding officer in the case, or another deciding officer, has the opportunity to review the decision e.g. to consider whether any new or additional information has been provided that was not included in the original decision. If the decision is not revised, the Department sends the appellant’s file to the Appeals Office.¹
- 10.7 In the Appeals Office, the appeal can be decided ‘summarily’ by way of a desk review by the appeals officer, or through an oral hearing where the appellant can make their case in-person.
- 10.8 In over half (55%) of the appeal cases finalised (including revised decisions by the Department) in 2020, the original decision was amended.² In over one third of these successful finalised cases, the original decision was amended on review by the Department. Figure 10.2 shows how cases were disposed of in 2020.

Figure 10.2 Appeal cases finalised in 2020



1 A revision involves the deciding officer amending an element(s) of their original decision.

2 There are a number of different elements to any decision e.g. means assessment, rate of payment, medical criteria and capacity for work. These elements can be appealed individually or in any combination. The outcome of an appeal may disallow, allow or partially allow the element(s) appealed by the claimant. The appeal may result in a revised decision on that element but may not change the overall allow/disallow decision.

Source: Department of Social Protection

Note: a From October 2020, as a result of the pandemic restrictions, a small number of telephone and video conference call hearings were held in lieu of in-person hearings and deemed to be oral hearings.

Objectives of examination

- 10.9** In respect of the decisions appealed to the Appeals Office, this chapter
- evaluates whether the Appeals Office has a fair, transparent and efficient appeals system¹
 - assesses the extent to which the Department analyses the characteristics of successful appeals and uses that information to improve its operations.
- 10.10** The examination reviewed a randomly selected sample of 75 appeals finalised in 2019 across three different schemes — invalidity pension, disability allowance and domiciliary care allowance.² These schemes were selected due to their relatively high rates of appeal.

Operational basis for the Appeals Office

- 10.11** Legislation provides for the statutory right to appeal and the appointment by the Minister, within the Department, of appeals officers, a Chief Appeals Officer and a Deputy Chief Appeals Officer.³ Like deciding officers in the Department, the designation and independent decision-making role of appeals officers is set out in legislation.⁴ The Chief Appeals Officer submits a report detailing the activity of the Appeals Office to the Minister each year.⁵
- 10.12** The Chief Appeals Officer and the Deputy Chief Appeals Officer are supported by around 40 other appeals officers and 40 administrative staff. In addition,
- the Chief Appeals Officer is a member of the Department's Management Board, which is chaired by the Secretary General
 - the Appeals Office funding and the target for number of appeals on-hand at the end of the year are included as part of the Department's annual revised estimates
 - the Appeals Office's staffing levels are set by the Department, with HR and staff recruitment organised by the Department in the same way as for other civil servants in the Department.
- 10.13** Appeals bodies in respect of the decisions of civil service departments and offices operate using different models. Some function independently of the body whose decisions they review, while others operate as units within their respective departments but remain independent in their decision making. For example,
- The Tax Appeals Commission is a body corporate and has its own Vote.⁶ The chairman of the Commission is the Accounting Officer and is appointed by way of an external, open competition.
 - The Agriculture Appeals Office is not a separate body but is part of the Department of Agriculture, Food and the Marine. However, legislation requires its Director to be appointed by way of an external, open competition, with legislation ensuring that the Director is independent in her/his decision making.

1 A summary description of the appeals process is presented in annex 10A.

2 The 75 cases examined included three appeals that were withdrawn in 2019 before a decision had been reached.

3 Part 10, Chapter 2 of the Social Welfare Consolidation Act 2005.

4 Deciding officers are staff in the Department that are designated under legislation to decide claimants' entitlements in relation to the social insurance and social assistance provisions in the Social Welfare Acts.

5 Section 308(1) of the Social Welfare Consolidation Act 2005.

6 A body corporate is a group of people or an organisation that has a distinct legal identity.

Transparency in the appeals process

Information received by welfare claimants about decisions

- 10.14** When a claimant is refused an income support payment, s/he is informed by way of a letter from the deciding officer. Claimants who wish to appeal are required to do so within 21 days of being notified of the decision.¹
- 10.15** Deciding officers are required to provide the reason for the refusal of a claim. Each scheme area uses its own template format for its decision letter to the claimant which refers to the Act or a part of the Act as the reason for refusal in most schemes examined. All decisions issued in respect of the 75 sample appeal cases examined set out a reason for the decision that was made. However, it was notable that the information provided in respect of domiciliary care allowance decisions is more detailed than for the two other schemes.
- 10.16** The Department has pointed out that decision processes have been the subject of litigation on numerous occasions and the reasons provided by the Department for refusals have been accepted as satisfactory by the courts.
- 10.17** After lodging an appeal, the claimant may request a copy of any reports/documentation not provided by the claimant which the deciding officer used in arriving at her/his decision.

Information received by appellants

- 10.18** The appellant receives written correspondence from the Appeals Office confirming the outcome of their appeal, or from the Department confirming a revised decision. This correspondence was examined for a sample of cases as part of this examination and in all cases, irrespective of the outcome of the decision, the decision letter included an explanation for the decision.

Publication of appeal case studies

- 10.19** The Appeals Office publishes a number of case studies each year in its annual report. A total of 70 such case studies were published in respect of 2020. While not regarded as precedents, these provide useful guidance to the Department's deciding officers, and may be a useful source of information for potential appellants and/or their advisors. However, as the case studies are contained separately in each year's annual report, rather than collectively in a central database, it may be difficult for potential users to access and search the complete catalogue of past case studies.

¹ The Social Welfare (Appeals) Regulations 1998 (SI 108/1998) requires claimants to appeal within 21 days of a decision being issued. However, it also allows the Chief Appeals Officer the right to accept appeals after this deadline.

Efficiency of the appeals system

- 10.20** An efficient appeals process should ensure that appeals are finalised within a reasonable timeframe.

Types of decision making forum

- 10.21** Appeals may be determined in a variety of ways, as outlined in Figure 10.2.
- Appeals received are reviewed in the first instance by the Department. For around 20% of cases appealed, the Department revises its original decision and informs the appellant accordingly. Where decisions are not revised (80% of appeals received), the cases are transferred to the Appeals Office.
 - 92% of the cases finalised by the Appeals Office in 2020 were by way of a summary decision, with the balance determined following an oral hearing. This was a significant change when compared with 2019, when 65% of appeals were dealt with by way of a summary decision. Due to the Covid-19 pandemic, in-person oral hearings were suspended in March 2020 and online hearings commenced in October 2020.
- 10.22** In a summary decision, the appeal is determined on the basis of the documentary evidence. An oral hearing involves attendance by the appellant (who may be professionally represented) and may also include attendance by representatives from the Department including the deciding officer.
- 10.23** While appellants can request an oral hearing, the decision whether to allow an oral hearing is at the sole discretion of the appeals officer.¹ The Appeals Office has stated that, in practice, an oral hearing is held in situations where there is a conflict of evidence or a judgement to be made, or where there are multiple parties involved (e.g. insurability of employment). The Appeals Office does not have written procedures to guide appeals officers in making decisions about the format of the appeal procedure in individual cases.
- 10.24** In the 75 cases examined as part of this examination, only four appellants (5%) requested an oral hearing which was granted in all cases.
- 10.25** The right to an oral hearing varies across the public sector. The Agriculture Appeals Office allows the appellant the option of an oral hearing. A taxpayer has a right to have their appeal heard by the Tax Appeals Commission, but it is possible for the Tax Appeals Commission to adjudicate without a hearing, if both parties agree.

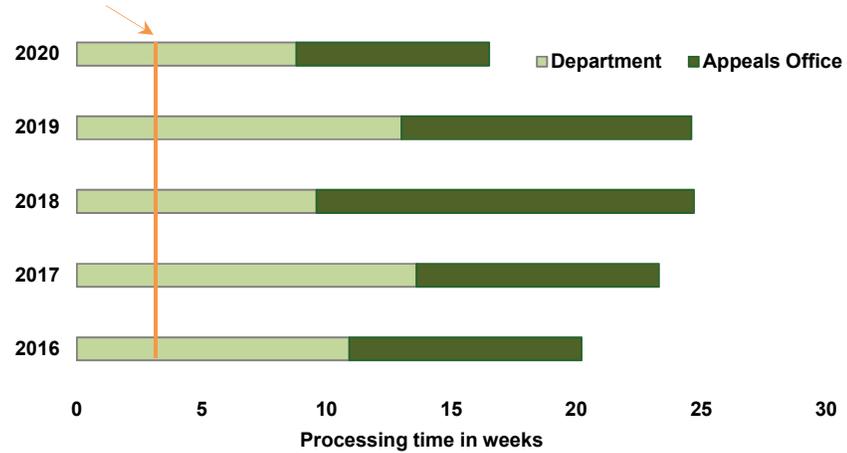
¹ Following submission of an appeal, an appellant can request an oral hearing if they wish to elaborate on some aspect of the evidence or consider that they can better make the case if they appear in person to present their evidence. However, the Appeals Office has stated that a request for an oral hearing will not be granted where it is decided that there is no prospect that additional information could be provided that would affect the outcome of the appeal.

Timeliness of appeals decisions

- 10.26** It is important that appeals occur in a timely manner. The Chief Appeals Officer routinely reports on timeliness of processing of cases at the Department's Management Board and is required to submit an annual report on the activities of the Appeals Office to the Minister for Social Protection. The report discloses the progress of cases throughout the year, the timeliness of appeal decisions and the number of cases on hand at year-end.

Figure 10.3 Average time taken to process appeals^{a,b}

Target for Department to process appeals (3 weeks)



Source: Department of Social Protection

Notes: a Appellants are estimated to add approximately one day to the appeals processing time.
 b Includes the time taken in respect of appeal cases withdrawn by claimant at any stage in the process.

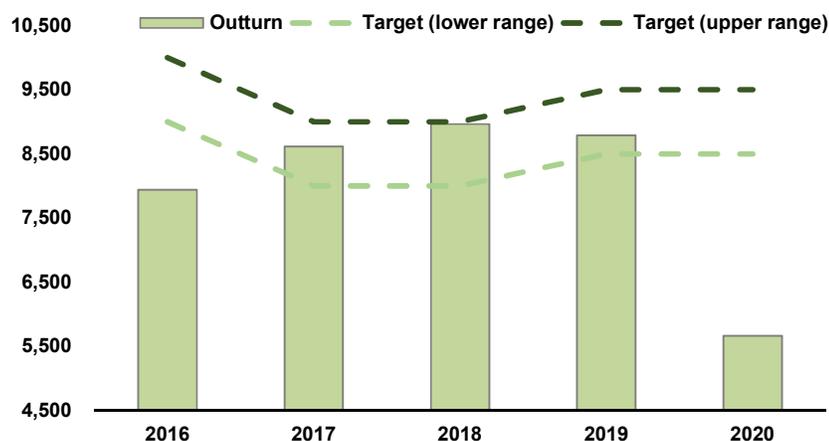
10.27 The average time to process an appeal increased from just over 20 weeks in 2016 to around 25 weeks in 2018/2019 (see Figure 10.3). However, the timeliness of the process improved markedly in 2020 — the average time taken was 16.5 weeks.

10.28 The Department has adopted a target of three weeks to review an appeal case and to dispose of an appeal — either by issuing a revised decision, or transferring the case file to the Appeals Office.¹ The Department significantly exceeded the three-week target over each of the last five years but made improvements in 2020 when the average time before a file was transferred to the Appeals Office was 8.8 weeks.

10.29 In 2020, the time taken by the Appeals Office to finalise appeals decreased to 7.7 weeks compared with 11.6 weeks in 2019. This reflects the much higher proportion of cases that were determined following a summary process in 2020. Analysis of data in relation to 2019 cases shows that appeals involving an oral hearing took four weeks longer on average than those finalised following a summary decision.

10.30 The Appeals Office has not adopted target timescales for the finalisation of appeals but does set targets in relation to the number of appeals on hand at year-end. The targets set are expressed as a range (see Figure 10.4). For 2020, the target for the cases on hand at year-end was a range of 8,500 cases to 9,500 cases. This target implies a backlog at year-end equivalent to about 33% of the work finalised in 2020 (or around 17 weeks' worth of work).

¹ The Department in reviewing original decisions may engage with a claimant to determine all relevant information relating to entitlement. The Department has stated that while this can delay the review process, it can lead to a revised decision which reduces the volume of appeals submitted to the Appeals Office.

Figure 10.4 Cases on hand at year-end, targets versus outturns

Source: Department of Social Protection

- 10.31** Between 2017 and 2019, the cases on hand were within the target ranges adopted. In 2020, the number of cases on hand at the year-end was significantly below the target range set.

Actions taken/planned to improve management of appeals process

- 10.32** The Appeals Office has stated that in order to improve the timeliness of the appeals process, it has undertaken a number of initiatives over recent years including
- improved liaison between the Department and the Appeals Office
 - additional training of appeals officers, and
 - management focus on the efficient provision of appeal files to and from appeals officers and the Appeals Office's administrative staff.
- 10.33** In addition, the Appeals Office has a 'clarification' procedure whereby certain cases are referred back to the Department if the Appeals Office believes the appellant did not understand the basis for the Department's decision. The clarification process is in place for five schemes.¹ In 2020, 696 appeals were dealt with as clarifications. Just under two thirds of these cases subsequently progressed as appeals to be determined by the Appeals Office. The remaining one third of cases that were dealt with by the clarification process are not counted as appeals unless and until they progress to a routine appeal or revision.
- 10.34** There are opportunities to enhance the efficiency of the appeals process. Appeals forwarded from the Department to the Appeals Office are paper based files. A business process review conducted in 2017 recommended an appeals modernisation project. Key functions to be provided by the project were document management, case management and the provision of management statistics. The project would enable the Appeals Office to access the Department's main claims IT system (BOMI) and reduce the volume of documentation that must be securely printed, transferred and subsequently shredded. However, as at end July 2021, there is no estimated date for the completion of the project.

¹ State pension (contributory), maternity benefit, paternity benefit, liable relatives and treatment benefit scheme. The Appeals Office stated that these schemes were targeted as the eligibility criteria are more defined than other schemes.

Quality assurance

- 10.35** In 2019 and 2020, over 20,000 appeals were finalised. The appeal outcome is determined either by a deciding officer in the Department or by an appeals officer in the Appeals Office.

Quality control of appeals officer decisions

- 10.36** The Appeals Office does not have a formal quality assurance process to review the quality of decisions. However, the Appeals Office has stated that
- A majority of the 42 appeals officers are experienced staff serving at assistant principal grade.
 - All decisions made by an appeals officer can be referred to the Chief Appeals Officer for review, either by the appellant or by the Department — 45 requests for review were received in 2020.¹
 - There is a formal training programme for appeals officers, which is led by professional trainers working with experienced appeals officers. The programme consists of a mix of e-learning, trainer delivered learning modules, mentoring and peer support.
 - A level 8 certified diploma for appeals officers has been developed with the National College of Ireland — over half of the serving appeals officers have completed this programme as of end July 2021.
 - The Appeals Office holds two conferences annually where appeals officers can discuss their work.

Quality control of deciding officer decisions

- 10.37** The Department has quality control procedures in place to review the decisions made by deciding officers most of whom are at clerical officer or executive officer grade. A sample of claims processed is examined by supervisors on a rolling basis to ensure that the Department's procedures have been followed correctly by the deciding officers, and that safeguards to ensure the accurate processing of claims were followed. These quality control procedures focus in particular on the work of less experienced staff, and on claims exceeding certain monetary thresholds.
- 10.38** The Department also has a Decisions Advisory Office (DAO) whose role is to support the scheme sections in the Department. The DAO provides advice in complex cases and detailed guidelines on decision-making and relevant legislative provisions across the organisation. The DAO is responsible for managing a central repository of up-to-date scheme and policy guidelines and an associated advice library.
- 10.39** Since the end of 2020, the DAO reports to the Chief Appeals Officer. The Department has stated this change in reporting lines is intended to strengthen the feedback loop from learnings during the appeals process into the Department's decision process and guidelines. Prior to this re-organisation, the DAO held quarterly meetings to get feedback from the Appeals Office with a view to ensuring that deciding officers are provided with the relevant guidance, advice and training to assist them in making decisions. Some of the issues addressed at these meetings have included

¹ Section 318 of the Social Welfare Consolidation Act 2005.

- setting up review groups in relation to specific schemes
- consulting with relevant stakeholders (internal and external) on legal issues for decision making and appeals processes
- examining decision letter templates to ensure sufficient information regarding the decision is provided
- communicating instances where there were lack of clarity in decision letters
- indicating that an incorrect interpretation of legislation has been made in decisions and
- highlighting that incomplete application forms had been accepted by the Department.

The Department stated that, notwithstanding the change in reporting lines, the DAO unit has continued, and will continue, to hold regular review meetings with appeals office staff to ensure feedback and learnings are documented and actioned appropriately. The Department also stated that meetings have been held on a more frequent basis as issues arise since the reporting structure has changed.

- 10.40** The DAO also uses these meetings with the Appeals Office staff to provide its own feedback about the appeals process. Concerns raised in the past with the Appeals Office include matters such as: wording used in appeal decisions that affected the Department's ability to pursue a debt; and the inconsistent approach taken by appeals officers in relation to the type of evidence required to prove residency status and interpretation of legislation.
- 10.41** From time to time, the DAO issues case study bulletins for deciding officers. However, the last DAO bulletin was issued in April 2018. Previous bulletins were drafted as a result of a Department/Appeals Office project examining jobseeker's allowance decisions in order to identify the issues that led to appeals and/or reviews of decisions. The project involved examining a number of files relating to the assessment of means.
- 10.42** The Appeals Office publishes an annual report detailing its activities and related outcomes each year. However, the Department does not include any analysis of appeal rates or decision refusal rates within its schemes in its annual report. Such analysis could help the Department increase its awareness of trends within each scheme in terms of the rate of appeal, and assist it in identifying the schemes that potentially require extra focus in terms of quality assurance and staff training.

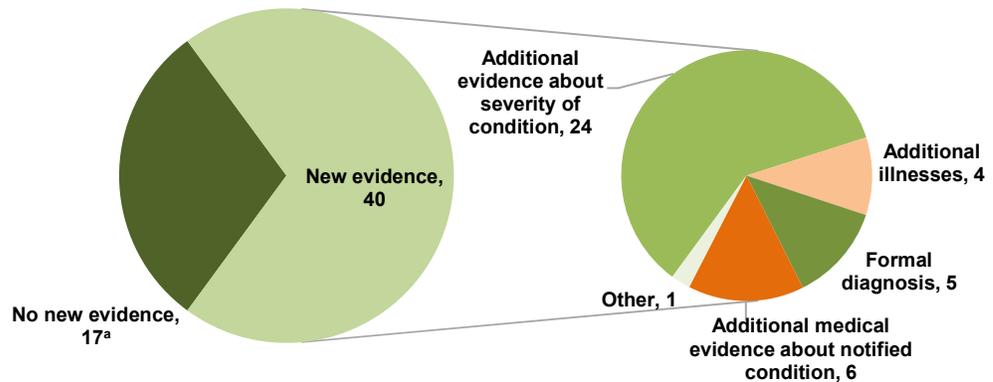
Appeal outcomes

- 10.43** The Department has stated that schemes requiring medical or social and care needs assessments are more likely to be successfully appealed because new or supplementary information is often provided by claimants at the appeal stage. The Department has stated that it has been taking steps to make claimants more aware of the type of medical, social and care needs evidence required. In this regard, the Department consults with representative groups, involving them in the design of claim forms, information guides and overall processes.¹
- 10.44** For the sample of 75 appeals cases that were examined, 57 had a successful outcome from the appellants' perspective — 20 were revised decisions made by the Department and 37 were Appeals Office decisions. The examination team analysed the documented reasons for the 57 successful appeals.

¹ For example, in respect of domiciliary care allowance, a full scheme review was completed in 2013, with input from non-governmental organisations (NGOs) and GPs (IMO). More recently, application forms and guidelines in disability allowance have been reviewed with input from NGOs. A new disability allowance application form is in the process of being rolled out.

10.45 Figure 10.5 shows the breakdown of the reasons for the 57 successful appeals. In 40 (70%) of the appeals upheld, significant additional information was provided by the appellants. In the remaining 17 cases (30%), no significant additional information had been provided by the appellants.

Figure 10.5 Analysis of reasons for successful appeals examined



Source: Office of the Comptroller and Auditor General

Note: a Two of the cases with no new evidence were appeals for the backdating of payments.

10.46 In four of the successful cases, information was obtained during the appeal that referenced an additional illness that was not considered in the original decision (e.g. a person was not awarded an invalidity pension on the basis of a repetitive strain injury, but later emphasised in their appeal that they also suffered from chronic back pain that prevented them from working).

10.47 In five successful appeal cases (four of which involved decisions by the Appeals Office), evidence that confirmed a suspected but unconfirmed diagnosis had not been available at the time of the initial refusal by the deciding officer e.g. a child whose parents were applying for a domiciliary care allowance received a specialist diagnosis of autism after the original decision.

10.48 In the remaining 31 cases, significant additional evidence was provided in relation to the original decision. Examples of this evidence included new documentation from experts and the evidence adduced by the appeals officers at the oral hearings, including oral testimony given by the appellant.

- In 24 cases, additional evidence was provided by the appellants to explain that their medical conditions were more severe, or impacted more adversely on their ability to work, than was apparent in their initial applications.
- In six cases, claimants' appeals were allowed after they submitted additional information that augmented the evidence supplied in the initial application. In some of these cases, such information could have been supplied in the first instance e.g. consultant reports, MRI scans.
- In one case, new financial evidence was supplied by the claimant who was appealing a decision to refuse a payment due to their spouse's means.

- 10.49** In respect of 26% (15 cases) of successfully appealed sample cases, no material additional information was recorded as having been provided.¹ Because evaluation and judgement is involved, it is inevitable that some differences may arise when deciding on a person's ability to work, or the level of care needed for a child. However, it was not clear in the cases examined why the appeals had been successful, when the original claims had not. The Department noted that appeals officers consider cases on a *de novo* basis rather than determining whether a deciding officer's decision is or is not correct.

Conclusions and recommendations

- 10.50** The Department issued approximately two million decisions in 2020 in respect of claims for income support and other benefits. This included decisions on new applications, reviews and maintenance decisions on existing claims in payment.
- 10.51** The Department has stated that the overall rate of appeal was around 1.3% for 2020. While the number of appeal cases is low, the impact of an appeal on the circumstances of the individual appellants (and on any dependents they may have) may be very significant. Ensuring that the social welfare appeal process is fair, transparent and efficient is therefore very important.
- 10.52** Although the Appeals Office is set up as part of the Department, it is statutorily independent in the exercise of its functions, and reports separately from the Department on its activity and performance.
- 10.53** Deciding officers are required to provide a reason to claimants who are refused a social protection payment. Of the sample appeal cases from three schemes examined for the purpose of this examination, while all decisions set out a reason for the decision that was made, it was notable that the information provided in respect of domiciliary care allowance decisions is more detailed than for other schemes.

Recommendation 10.1

The Department should review its current procedures so as to ensure that all claimants are informed clearly of the reason(s) for refusal of claims. This would allow claimants to make a better informed decision in relation to appeal.

Response from Accounting Officer

Agreed.

Existing guidelines are currently under review by the Decisions Advisory Office (DAO) and will be re-issued to all deciding officers/designated persons in due course.

The DAO has also published guidelines (last revised in July 2019) called *Reasons for Decisions*. These set out the principles for reasoned decisions in line with court rulings to assist deciding officers on providing full details of the reasons for decisions. The Department is currently reviewing all such guidelines.

- 10.54** In 2020, the majority of appeal cases were decided on the basis of summary reviews of case documentation. The percentage of appeal cases where oral hearings were held was significantly lower than in 2019. The Department has stated that due to the Covid-19 pandemic, in-person/oral appeal hearings were suspended in March 2020 and online hearings came into operation in October 2020.

¹ This excludes two cases relating to backdating of payments in respect of claims allowed by deciding officers. The Department has stated that an appeal for backdating of a claim would not necessarily involve new evidence, medical or otherwise, just justification as to why the Department should backdate the claim.

- 10.55** Oral hearings allow appellants the opportunity to put their cases in-person. The decision to grant an oral hearing rests solely with the appeals officer. The Appeals Office does not have written procedures for appeals officers outlining when an oral hearing should be held.

Recommendation 10.2

Written guidelines for appeals officers should be prepared that clearly establish the circumstances that usually result in an oral hearing being held. These guidelines should be published on the Appeals Office's website and made available to the public.

Response from Accounting Officer

Agreed.

However, under law, the decision on whether or not to hold an oral hearing is the responsibility of individual appeals officers. This will also be reviewed.

- 10.56** There were improvements in the timeliness of disposal of appeals in 2020 but it still took about 16.5 weeks to finalise cases that went to the Appeals Office. Between 2016 and 2019, the average time to resolve an appeal ranged from 20.5 to 25.1 weeks. The current system is largely paper based and there appear to be opportunities to improve timeliness through more effective use of ICT and case management systems.
- 10.57** A business process review conducted in 2017 recommended an appeals modernisation project but as at end July 2021, the project had not commenced.

Recommendation 10.3

The Department and the Appeals Office should progress as a matter of priority the appeals modernisation project. This should include the setting of a timeframe for the completion of the project.

Response from Accounting Officer

Agreed.

The finalisation of the project and the implementation of a new appeals system is a priority for the Appeals Office and for the Department. The review carried out in 2017 was a preliminary piece of work which has usefully informed the development and progress of the appeals modernisation project. This is an extensive and multi-faceted project which is much more detailed and complex than the review. Very significant work has been undertaken on the project and a request for tender to procure the required technical resources is currently being finalised.

- 10.58** Analysis of a sample of successful appeals showed that in 26% of cases, no material new evidence had been supplied.
- 10.59** In 70% of the successful appeals examined, material new evidence had been supplied. In one fifth of these cases, the new evidence pointed towards an additional illness or confirmed a previously suspected diagnosis. However, in the remaining cases, the additional information provided augmented information provided at the application stage.

- 10.60** While it is open for appellants to submit new or additional evidence, in many of the successful cases examined, when making the initial application, the claimants could have set out more clearly how the conditions disclosed impacted, for example, on their ability to work or on the time and resources needed to care for a dependent, or have included all relevant medical documentation and medical history in their original applications which would have avoided the need for an appeal.

Recommendation 10.4

The Department should carry out periodic reviews of successfully appealed cases where no new or additional material information was provided. These reviews could assist the Department in learning from the cases determined by appeals officers and in improving the quality of decisions made by its deciding officers in determining claims.

Response from Accounting Officer

Agreed.

Towards this end, the Department has recently moved the Decisions Advisory Office (DAO) to report to the Chief Appeals Officer. The purpose of this change in reporting line is to strengthen the feedback loop from the Appeals Office into the Department's decision making process to help ensure that deciding officers learn from the determinations of appeals officers. The DAO will have access to and will monitor successfully appealed decisions and will arrange for periodic reviews between the appeals officers and relevant scheme areas to take the learnings from these appeal cases.

Recommendation 10.5

The Department should examine the application process and related guidance for those schemes which are medically or social and care needs assessed in order to ensure claimants are able to supply all necessary information to assess eligibility when they are making a claim.

Response from Accounting Officer

Agreed.

The Department and medical scheme areas have taken steps to try and tackle this issue.

One initiative is a redesign of the application forms which is ongoing in the disability allowance and invalidity schemes area and is nearing completion. New application forms for disability allowance and for invalidity pension will be introduced before the end of 2021. Part of the redesign that is underway includes clearly highlighting the information that needs to be submitted with the application in order to expedite the claim process. The relevant scheme owners have involved the various representative and advocacy groups, via the Disability Consultative Forum, in the redesign process to try and ensure that the revised version is as customer friendly as possible.

The Department has also asked the representative and advocacy groups to advise their customer facing staff/advocates to let customers know that they should include all data/documents supporting their claim at original application stage. This will help to ensure that more claims can be decided correctly on first examination and not require review and/or appeal.

The Department invites and welcomes the ongoing involvement of non-governmental organisations and advocacy groups in process and form design at any point at which it implements changes to processes, such as when it is developing a new IT system. The Department actively involves representative groups in its effort to encourage all applicants to provide as much information as possible at the time of making their claim.

- 10.61** The Department has quality control procedures to review decisions made by deciding officers as one of its control mechanisms. In contrast, there is no formal quality assurance system in place to review the quality and consistency of decisions by appeals officers.

Recommendation 10.6

The Appeals Office should consider establishing a quality assurance system in order to aid consistency in decision making and to identify the training needs of appeals officers.

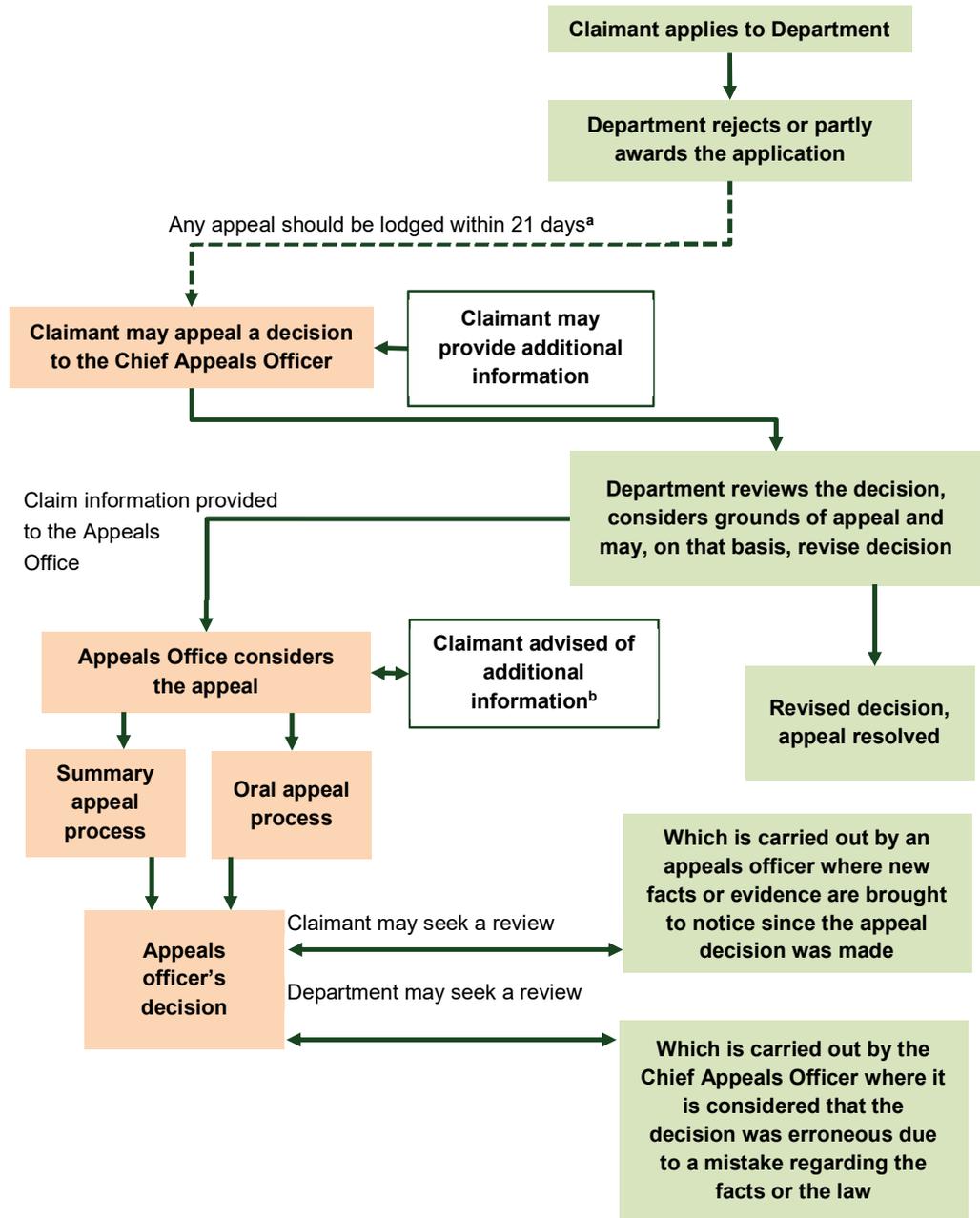
Response from Accounting Officer

Agreed.

However, it should not be taken that the Appeals Office does not invest in ensuring the quality of its decisions. Appeals officers are experienced senior officers of the Department (primarily assistant principal grade) and are provided with extensive training and mentoring. Conferences and workshops are also held for appeals officers to share best practice and learning.

The Social Welfare Consolidation Act 2005 provides opportunities for appellants who are unhappy with the outcome of appeals to seek a review of the decision by an appeals officer (section 317 of the Act) or the Chief Appeals Officer (section 318). The Appeals Office will further consider how quality assurance measures can be developed and implemented to support appeals officers and improve the service generally.

Annex 10A Overview of appeal process



Source: Office of the Comptroller and Auditor General

- Notes:
- a A claimant may withdraw an appeal at any stage in the process.
 - b In cases where there are multiple parties (e.g. insurability of employment) information supplied by one party may be shared with another interested party.

