

Application for an Independent Review of Discretionary Support

Useful information when considering applying for an Independent Review of Discretionary Support

The Office of the Discretionary Support Commissioner (ODSC) was established to deliver independent reviews of decisions made by Discretionary Support.

You have a right to an Independent Review when you have had a decision about your Discretionary Support application and:

- that decision has been reviewed by the Discretionary Support Review Officer; and
- you are still not satisfied with the outcome.

How and when to ask for an Independent Review by the ODSC

An Independent Review must be requested within 28 days from the date on the review decision letter from. The Discretionary Support Inspector can allow more time if there are special reasons.

An application for an Independent Review must be made in writing. You should say why you want the review and the request must be signed.

A representative can act on your behalf.

What the review involves

The independent Inspector will look carefully at:

- the reasons you give for your application; and
- how the decision was made

The Inspector will then usually contact you or your representative by telephone to get more information.

The Inspector will decide if:

- the Discretionary Support decision was reached correctly; and
- whether it was the right one in all the circumstances of the case

If there is anything wrong with the decision, the Inspector can change it. The Inspector will give reasons for whatever he or she decides.

Application Form

PERSONAL DETAILS

Your full name:

National Insurance number:

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Claim ID number

(you can get this from the decision letter
Discretionary Support sent you)

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Address:

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..... Postcode:

Telephone number:

Email:.....

Do you have a representative?

Do you have a representative who will deal with your case on your behalf?

No (The Inspector will send the decision on your case to you)

Yes (The Inspector will send the decision on your case to you and your representative).

If yes, please provide your representative's contact detail:

Name:

Address:

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..... Postcode:

Telephone number:

Email:.....

Why do you want a review?

Please use the space below to let the Inspector know why you disagree with the decision of the Reviewing Officer.

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You must sign and date the application before it can be processed

Your signature: Date

Please send this form to:

FREEPOST ODSC

You do not need a stamp.

If you prefer, you can post or take this application to a Jobs & Benefits / Social Security Office

To contact us

email: **admin.odsc@nissa.gsi.gov.uk**

Website: **www.odscni.org.uk**

Freephone: **0800 028 3074**

Textphone: **0800 012 1430**

Freepost: **Freepost ODSC**