18. Financial Services Ombudsman and Data Protection Commissioner

By Joe Meade

I was appointed as Ireland’s third Data Protection Commissioner on 10 September 2000 and I exercised the Commissioner’s functions until 16 May 2005. I was then appointed as Ireland’s first statutory Financial Services Ombudsman. On 2 January 2010 I retired from the Ombudsman’s post having served over 42 years in the Irish and international public services. The current Data Protection Commissioner is Mr Billy Hawkes.

Both as Ombudsman and Commissioner naturally I had many contacts with the insurance industry. I acknowledge again the co-operation I received from the sector since 2000. I congratulate the Insurance Institute on its 125th anniversary, I value very much the positive training role undertaken by the Institute and I am confident it will continue to provide top class, suitable and professional training.

In this article I outline in general terms the main functions of the two statutory positions I was honoured and privileged to hold and to exercise their statutory functions.

The annual reports of the Commissioner contain selected case studies about complaints considered by the Commissioner and his decisions. These should help and inform individuals and organisations about the various and on occasions complex issues that arise.

DATA PROTECTION COMMISSIONER

Data Protection legislation aims to protect an individual’s human right to privacy in the area of personal data processing and is why the Office of the Data Protection Commissioner was established on 1 April 1989. Personal data protection applies to all...
our interactions with public and private sector organisation and thus applies to applications, purchases and transactions in state services, business and economic matters, in the social and medical areas, in the workplace and in the globalised technological arena. While personal data protection is not an absolute right, as it must be balanced with other rights and obligations, it fulfils an important safeguard for human society by ensuring that business and government operate in a fair and transparent manner when processing individuals’ personal data.

The Office is established under the 1988 Data Protection Act. The Data Protection Amendment Act, 2003, updated the legislation, implementing the provisions of EU Directive 95/46. The Acts set out the general principle that individuals should be in a position to control how data relating to them is used.

The Data Protection Commissioner accordingly is responsible for upholding the rights of individuals as set out in the Acts, and enforcing the obligations upon data controllers. The Commissioner is appointed by Government and is independent in the exercise of his or her functions. Individuals who feel their rights are being infringed can complain to the Commissioner, who will investigate the matter, and take whatever steps may be necessary to resolve it.

By its nature the insurance industry holds and processes vast amounts of personal data both in manual and computerised form. Much of this data will be highly personal and indeed sensitive in nature such as health information, personal financial details and family history as well as details on accidents, compensation, criminal convictions and fraud. Some of the information may have been collected inadvertently in an inappropriate manner. It therefore follows that the highest standard of data protection principles are applied by any person or organisation who deal in the insurance arena.

**Personal Data Definition**

“Personal Data” means data relating to a living individual who is or can be identified either from the data or from the data in conjunction with other information that is in, or is likely to come into, the possession of the data controller; The definition is a very broad one. In principle, it covers any information that relates to an identifiable, living individual. However, it needs to be borne in mind that data may become personal from information that could likely come into the possession of a data controller. There are different ways in which an individual can be considered ‘identifiable’. A person’s full name is an obvious likely identifier. But a person can also be identifiable from other information, including a combination of identification elements such as physical characteristics, pseudonyms occupation, address etc. The definition is also technology neutral. It does not matter how the personal data is stored – on paper, on an IT system, on a CCTV system etc.

**Individual’s Rights Under Data Protection Legislation**

An individual can:

- expect fair treatment from organisations in the way they obtain, keep, use and share your information
- demand to see a copy of all information about you kept by the organisation
- stop an organisation from using your details for direct marketing or making unsolicited tele marketing calls
- demand that inaccurate information about you be corrected
- demand that any information about you be deleted, if the organisation has no valid reason to hold it
- complain to the Data Protection Commissioner if you feel your data protection rights are being infringe
• sue an organisation through the courts if you have suffered damage through the mishandling of information about you

**Responsibilities of Data Controllers**
A data controller – a company or person who collects and uses personal data whether manually or electronically - must:

• obtain and process the information fairly
• keep it only for one or more specified, explicit and lawful purposes
• use and disclose it only in ways compatible with these purposes
• keep it safe and secure
• keep it accurate, complete and up-to-date
• ensure that it is adequate, relevant and not excessive
• retain it no longer than is necessary for the specified purpose or purposes
• give a copy of his/her personal data to any individual, on request

In addition data controllers must register every year with the Data Protection Commissioner and must keep the details of its registry entry updated if changes occur.

**Role of the Data Protection Commissioner’s Office**
The role of the Office is in three key areas really:

• Ombudsman : resolution of disputes between individuals and data controllers or processors
• Enforcer: compliance by data controllers and processors
• Educational : Promoting data protection rights and good practice

In its ombudsman role, the focus is on achieving mediated solutions, where possible. Complaints offer a useful insight into the concerns of people, thereby helping to guide the educational activities of the Office. As a general observation most data controllers recognise the need to respect the privacy of individuals. Data protection legislation is based on certain core principles and gives a wide degree of discretion as to how these principles should be applied in particular circumstances. Generally, breaches of data protection legislation are unintentional and the majority of data controllers are happy to correct any practices that contravene the legislation. For the majority of compliant data controllers, the Commissioner’s approach is one of helping them to achieve better respect for privacy by offering targeted guidance. For the minority who wilfully or carelesslessly infringe people’s privacy rights, the Commissioner’s approach is to use the full extent of his powers to achieve quick correction of such behaviour.

The educational role of the Office is a broad one. It encompasses everything from public information campaigns, targeted advice to particular companies, or private discussions with Government agencies on new legislative proposals. Trying to build privacy protection into policy proposals at an early stage is another vital part of the Office’s work. The Commissioner, working with government agencies and commercial bodies at an early stage means that privacy protection can be part of the solution and not – as it is sometimes presented – a barrier to progress.

**Powers of the Commissioner**
In exercising these functions, the Commissioner is assigned certain important powers under the Data Protection Acts, 1988 and 2003, and under the Electronic
Communications Regulations, S.I. 535 of 2003, as amended by SI 526 of 2008. In summary these provide for:

- Investigations by the Commissioner
- Obtaining information
- Enforcing compliance with the Act
- The Commissioner’s power to prohibit overseas transfer of data
- Powers of “authorised officers” to enter and examine premises
- Appeals to the Court against the Commissioner’s powers or decisions
- Prosecution of offences

**Access to Personal Information**

This is the one area where lots of complaints are made to the Commissioner. The main provisions are:

- Right to know and obtain personal data –

  As an individual you have a right to find out, free of charge, if a person (an individual or an organisation) holds information about you. You also have a right to be given a description of the information and to be told the purpose(s) for holding your information. You must make the request in writing. The person or organisation must send you the information within 21 days. You also have a right to get a copy of your personal information. This applies to all types of information – for example, written details about you held electronically or on paper, photographs and CCTV images. You are also entitled to know where the information was obtained, how it has been used and if it has been passed on to anyone else. All you need do is write to the person or organisation holding the information. You need not quote the Data Protection Acts, but it is a good idea to do so. You should also include any additional details that would help to locate your information – for example, a customer account number or staff number. You may be asked for evidence of your identity. This is to make sure that personal information is not given to the wrong person. When requesting some types of record, such as credit history or Garda records, it may also be useful to provide a list of previous addresses, previous names and your date of birth. You may be asked to pay a fee, but this cannot exceed €6.35. Once you have made your request, and paid any appropriate fee, you must be given the information within 40 days (most organisations manage to reply much sooner).

- Exceptions to the right of access –

  There are a number of circumstances in which your right to see your personal records can be limited. This is necessary in order to strike a balance between the rights of the individual, on the one hand, and some important needs of civil society, on the other hand. For example, a criminal suspect does not have a right to see the information held about him by An Garda Síochána where that would impede a criminal investigation. Similarly, you do not have a right to see communications between a lawyer and his or her client, where that communication would be subject to legal privilege in court. The right of access to medical data and social workers’ data is also restricted in some very limited circumstances, where the health and mental well-being of the individual might be affected by obtaining access to the data. Your right to obtain access to examination results, information given in confidence or to see information relating to other people is also curtailed.
• Refusal to respond to an access request –

If an organisation does not comply with a valid access request that you have made, it is open to you to make a complaint to the Commissioner. Before doing so it is recommended that you contact the organisation in question to establish the circumstances and to indicate your intention to complain to Commissioner. They may be in a position to apologise and correct the problem there and then. If you are not satisfied with their response, or if you do not receive a response, at that point you should make a formal complaint to the Commissioner’s office. The Commissioner will then investigate and decide on the matter. A decision by the Commissioner is binding on both parties subject to appeal to the Circuit Court.

Audits
Section 10 of the Data Protection Acts provides that:

“The Commissioner may carry out or cause to be carried out such investigations as he or she considers appropriate in order to ensure compliance with the provisions of this Act and the Electronic Communications networks and Services Regulations of 2003 and to identify any contravention thereof”

These investigations usually take the form of audits of selected organisations. A number of such audits are carried out each year. The aim of an audit is to identify any issues of concern about the way the organisation deals with personal data and to recommend solutions. An organisation selected for audit is usually given a number of weeks notice of the audit but a surprise audit may arise in exceptional circumstances. It may be asked to provide in advance a written report on its data protection practices. The audit normally includes one or more on-site visits by an audit team from the Office. During these visits, the team will meet with selected staff of the organisation. They will also usually inspect electronic and manual records. At the end of the audit, the team prepares a report which typically includes a set of recommendations. The organisation audited is given an opportunity to comment on this before it is finalised. The Office follows up whether its recommendations have been implemented.

Audit guidance was published by the Commissioner in January 2009 to assist organisations selected for audit by his Office. This guidance also provides organisations holding personal data with a simple and clear basis to conduct a self-assessment of their compliance with their obligations under Data Protection legislation.

Codes of Practice
Applying the rules and principles of data protection to any business activities is often a matter of common sense. However, for some businesses and professions, interpreting and applying data protection law is not so straightforward, and sometimes requires a fine appreciation of the ethical norms and standards, and the traditional expectations of good practice, associated with that sector. For that reason, the legislation provides that representative trade associations should have a direct input into the establishment of data protection standards within their sector.

Section 13 of the Act provides that the Data Protection Commissioner –

“shall encourage trade associations and other bodies representing categories of data controllers to prepare codes of practice to be complied with by those categories in dealing with personal data.”
If the Commissioner agrees that such a code provides adequate data protection for individuals, he will formally approve it and encourage its use in the sector concerned. The Commissioner may also draw up such a code of practice on his own initiative. The standards laid down in such a code should help organisations to apply the data protection principles to the particular situations that they face in their sector.

In August 2008 a Code of Practice for the Insurance Industry was published. In his 2008 Annual Report the Commissioner stated:

In August, I approved and published a Data Protection Code of Practice for the Insurance Sector under Section 13 of the Data Protection Acts. The Code was prepared against a backdrop of significant public concern arising from media reports which emerged in 2006. These reports claimed that personal information held by An Garda Síochána and by the Department of Social & Family Affairs was being routinely accessed by private investigators acting on behalf of insurance companies. The claims were confirmed during subsequent investigations of insurance companies by my Office. The Code is an important element of my Office’s response to those issues.

While the Code was the subject of extensive discussion with the Irish Insurance Federation (IIF) and individual insurance companies, it did not, unfortunately, prove possible for the IIF to agree to all of the terms of the Code on behalf of its members. However, I firmly believe that the approved Code provides a clear framework for insurance companies to process their customer data in accordance with the Data Protection Acts. It will also act as an assessment tool for the examination of any complaints received by my Office in relation to the handling of personal data within the insurance sector.

The Data Protection Acts provide for the preparation of sector-specific codes of practice that facilitate a better understanding of the requirements of the Acts as they apply to a particular sector. This Code clarifies how data protection rules apply specifically in the insurance sector, making it simpler for the sector to meet its obligations in relation to the processing of personal information. The insurance sector holds extensive personal data, some of it extremely sensitive, on a large part of the population. I hope and expect that the publication of the Code will result in improvements in data protection compliance in the insurance sector. Such improvements will benefit both the sector and the consumer. Since it was published in August, I am happy to say that my Office has received regular queries from insurance companies regarding the Code and how it applies to their organisation. I am encouraged that the provisions of the Code are actually being implemented to the benefit of the sector and consumers alike.

I also expect that the Code will help consumers to understand how their personal data is used in the insurance sector and what standards they should expect in this regard. I should also mention that An Garda Síochána carried out an extensive investigation in relation to the allegations that personal data held by it were being accessed and made available to insurance companies.

General
Further detailed information on all aspects of Data Protection can be obtained on the Commissioner's website at http://www.dataprotection.ie
FINANCIAL SERVICES OMBUDSMAN

Background
An Ombudsman is an independent and impartial means of resolving certain disputes outside of the courts. There are both public sector and private sector Ombudsmen worldwide who look into and try to resolve matters after a complaint has been initially made to a business or state body and the complainant is not happy with the outcome. While an Ombudsman is an alternative dispute resolution to having to go to the Courts to resolve a problem a person can always go to the Courts if it so desires.

There were voluntary ombudsman schemes in Ireland both for the credit institutions and the insurance sector since the early 1990s. These schemes were run and financed by the credit institutions and insurance industries. Pauline Marrinan Quinn and Caroline Gill both served as Insurance Ombudsmen. The Insurance Ombudsman of Ireland scheme commenced in 1992 but all sectors of the insurance industry were not part of it. It was felt in the late 1990s, as part of the proposed overall enhanced regulatory framework for the financial services sector including the establishment of the Financial Regulator that a statutory Ombudsman scheme with enhanced powers was more appropriate and necessary for all providers of financial services – see 1999 Report of the Working Group on Financial Services commonly known as the McDowell report.

Financial Services Ombudsman
The position of the Financial Services Ombudsman was accordingly established on a statutory basis on 1 April 2005 and is enshrined in legislation-the Central Bank and Financial Services Authority of Ireland Act 2004 –section 16 and schedules 6 and 7. It is completely separate from and independent of the Financial Regulator, has a completely different role to the Regulator and is funded by statutory levies on the financial service sector. The current Financial Services Ombudsman is Mr William Prasifka (since March 2010).

While the existing voluntary ombudsman schemes for the credit institutions and insurance industry were subsumed into the Ombudsman’s role from 1 April 2005 the remit of this new statutory Ombudsman was expanded significantly from their roles. The Financial Services Ombudsman can investigate complaints – and propose remedies – in an impartial and independent manner, from individual customers and small businesses who have unresolved complaints from financial service providers who are either regulated by the Financial Regulator or under the 1995 Consumer Credit Act. Its remit now covers complaints against:

- Banks
- Building Societies
- Insurance Companies
- Credit Unions
- Mortgage, insurance and other credit intermediaries
- Stockbrokers
- Pawnbrokers
- Money-lenders
- Bureau de Change
- Hire purchase providers
- Leasing companies and credit sales companies
- Health insurance companies
- Retail Credit Firms and Home Conversion Firms
What Can the Financial Services Ombudsman do?
The Ombudsman can remedy a matter complained of or its consequences and can also award compensation up to €250,000 where a complaint is upheld. Unlike the former voluntary ombudsman schemes for the credit institutions and insurance industry decisions by the Financial Services Ombudsman are binding on both parties subject only to an appeal by either the complainant or the financial service provider to the High Court – in the former voluntary schemes the decision was binding on the provider but not on the complainant while the provider had no right of appeal. In summary in addition to rectifying matters – e.g. by paying a life policy or refunding an investment etc – the Ombudsman may also make compensation awards up to €250,000. The Ombudsman’s role is therefore a quasi judicial one and whether a complaint can be upheld or not will be determined on the basis of evidence furnished, examined and reviewed.

Context to Financial Services Ombudsman’s Role
Consumers will, and are, entitled to complain. Financial Service Providers will, and do, make mistakes. Against that background, matters that have not been resolved are referred to the Ombudsman. While the Ombudsman only receives a small percentage of complaints relative to the total numbers of financial transactions undertaken how these are handled by Financial Service Providers are what ultimately matters. The Ombudsman does not uphold every complaint as he is an independent and impartial arbiter of unresolved disputes and not a consumer champion or an advocate though his decisions do lead to improvements for consumers. He publishes selected Case Studies and complaints trends generally every six months on his website to enlighten everyone as to what type of cases he deals with and what lessons can and must be learned.

What Complaints Can Be Dealt With?
All personal customers, limited companies with a turnover of €3,000,000 or less, unincorporated bodies, charities, clubs, partnerships, trusts etc. can complain to the Ombudsman. A complainant must first have availed of the financial service provider’s internal complaints procedure. Where a person or body has followed the internal complaints procedures of its financial service provider and is not satisfied the Financial Services Ombudsman may investigate a complaint about:

- The provision of a financial service
- An offer to provide a financial service
- Failure to provide a particular financial service that has been requested.

The Financial Services Ombudsman may not investigate a matter which:

- Is or has been the subject of legal proceedings before a court or tribunal
- Occurred more than six years before the complaint is made
- Is within the jurisdiction of the Pensions Ombudsman

A complaint may not be investigated by the Ombudsman if in his opinion:

- It is vexatious or frivolous or not in good faith
- The subject matter is trivial or does not relate directly to the customer
- Other redress means are available
The service provided by the Financial Services Ombudsman is free of charge to a complainant. If a complainant engages legal or any other professional assistance to handle its complaint, any costs incurred, legal or otherwise, are entirely the complainant’s responsibility and its written authorization is required if it wishes to be represented by a third party.

**Procedures for Dealing With Complaints to the Ombudsman**

**General**
There should be a formalized complaints handling process in place in every financial service provider which is easy to access. All staff should be aware of it. A senior management person should be responsible for ensuring that the complaints handling process works in a fair and proper manner. A liaison officer to deal with the Ombudsman should also exist.

**Final Response from the Financial Service Provider**
Upon receiving written notification of the complaint from the Ombudsman and a request for a Final Response from the Complainant, the Provider has 25 working days in which to try to resolve the complaint by its internal complaint procedures. If at the end of the twenty five working days, a resolution has not been attained, a Final Response letter must be issued to the Complainant by the nominated member of senior management. (If the Provider requires more time to review the complaint, for example if it requires the Complainant to undergo a medical examination, the Ombudsman must be notified of same).

The Final Response letter must:

- Contain a detailed account of the dispute at hand
- Address all issues outlined in Complainant’s Complaint Form
- Quote the applicable loan contract terms/policy conditions/terms of business etc
- Give details of any redress offered to the Complainant by the Provider
- State that it is the Final Response of the Provider for the purpose of referring the matter to the Financial Services Ombudsman’s Bureau
- Advise the Complainant that he/she has 15 working days from the date of said Final Response to refer the matter to the Financial Services Ombudsman’s Bureau for investigation

**Lodging a complaint**
When a complainant contacts the Financial Services Ombudsman’s office it will be sent a Complaint Form. This should be completed, signed and returned to the office within 14 days and accompanied by any letters, or documents which have been sent to and/or received from the Financial Services Provider (Provider) and any other documents that it feels should be put before the Ombudsman in handling the complaint. A complainant’s written authorisation is required if it wishes to be represented by a third party.

When the Complaint Form is received by the Ombudsman’s office it is assessed to determine whether the complaint falls within the remit of the Ombudsman or whether it should be investigated. It may be necessary to request further information from the complainant at this point. If the matter is deemed to be outside the remit of the Ombudsman or a decision is made not to investigate it the complainant will be informed as to why it cannot be investigated.
If the complaint is deemed to be within the remit of the Ombudsman, the complainant will be advised to write to a nominated member of senior management in the Provider concerned stating the complaint as concisely as possible, asking the designated member of senior management to give the matter his/her attention and to issue a Final Response letter. A copy of the complaint form and attachments will on that date be also sent to the Provider. A Final Response letter must be issued when the complaint has been reviewed by the nominated member in the Provider. This letter outlines the Provider’s position in relation to the matter in dispute and must be issued within 25 working days. If the complainant is not satisfied with the explanation or response made by the Provider, it must submit the Final Response letter to this office within 15 working days of the Provider issuing same.

Mediation
When the Complaint Form and the Final Response letter issued by the Provider, has been received the Ombudsman will assess the complaint and the option of mediation will be offered to both parties by the Ombudsman as a means of resolving the matter. If mediation is not availed of or is unsuccessful then a formal investigation of the complaint by the Ombudsman will begin.

Investigation
In the course of investigation the Provider will be required to answer a series of questions posed by the Ombudsman and to submit any material and make any submissions which the Provider sees as being desirable to put before the Ombudsman or which the Ombudsman requires to see, to enable the Ombudsman to investigate and adjudicate upon the complaint. This must be done within 20 working days. These responses and documents will be copied to the complainant who will be given 10 working days to submit any observations. Any observations from the complainant will be copied to the Provider who will be given 5 working days to submit any further observations. It should be noted that any medical data will only be copied to the complainant’s nominated medical professional.

All the circumstances surrounding the complaint will then be examined. Further information or supporting documentation may be requested from both parties. Every case is judged on its individual merits. The time taken to investigate a dispute depends on the complexity of the individual case as well as outside factors, such as the availability of relevant material. In general, the aim is to complete the investigation within 20 working days. However, for certain cases supplementary information will be necessary which may cause the 20 working days to be extended.

After reviewing the evidence the Ombudsman will consider whether an oral hearing is necessary. If an oral hearing is held then the oral evidence given under oath at that hearing will be reviewed together with the documentary evidence and a Finding will be issued to both parties. Where an oral hearing is not deemed to be necessary a Finding will issue to both parties after all the evidence has been reviewed in full.

Finding
The Finding of the Financial Services Ombudsman is legally binding on both parties, subject only to appeal by either party to the High Court. A party has 21 calendar days from the date of the Financial Services Ombudsman’s Finding in which to appeal to the High Court.

Statistics
Since its inception in April 2005 some 25,000 complaints were received by the Ombudsman’s office up to 31 December 2009 – 15,000 of these complaints were
insurance related matters. At least €60m has been made good to consumers as a result of the Ombudsman’s overall work. The cumulative knock on effect of findings by the Ombudsman in getting other matters resolved without referral to the Ombudsman is a further major benefit of the Office. Complaints were resolved in complainants’ favour in 62% of cases.

**Significant Findings by Ombudsman**

A small sample of complaints findings by the Ombudsman in the insurance area is now outlined solely to give an indication of matters considered. In the following instances the complaints were upheld:

- €850,000 of an 86 year old bachelor’s farm sale proceeds were invested in 6 year fixed term insurance bonds with the balance of €350,000 invested in a demand deposit account and €150,000 in a current account in case there was a rainy day following advice from an insurance company’s advisor. He previously barely had a cent to his name. He died shortly after the investments were made but his estate would suffer major shortfall if administered then. The Ombudsman ruled that the shortfall be made good there and then. Other complaints received about investments missold to elderly people led the Ombudsman to believe that many financial institutions expected us all to live well past our 100th birthday and expected the elderly or their estates not to have to draw down the investment for at least six years. The Ombudsman was pleased that his actions have led to the financial services industry overall being more conscious of its role in this sensitive area.

- An insurance agent bullied and then drove a vulnerable farmer living alone 12 miles to an ATM cash point to secure the sale of a €1,500 unsuitable health insurance product while another agent stayed behind in the house. He had already given them €800 which he had in the house. The Ombudsman condemned the actions, had premiums of €1,520 returned, awarded €1,500 in compensation and got a formal apology from the company concerned.

- The Ombudsman did not agree when an insurance company tried to renege on a €325,000 payout to a seriously injured person by using spurious arguments to justify its view that the person could look after himself. An insurance broker who saw a soft touch in a retired teacher got her to invest €250,000 she had borrowed in a totally unsuitable geared property fund but the Ombudsman ordered the broker to refund the amount. In another case an insurance company tried to redefine what blindness meant so as not to pay out income protection money but the Ombudsman condemned its actions and ordered the company to pay.

- €22,000 travel insurance cancellation claim upheld.

- An unsuitable €10,000 investment was sold by a door-to-door insurance agent to an unemployed single mother with two children. She had taken the money out of the Credit Union as she was led to believe that she was getting a better product. However after two months it had significantly dropped in value. She got her money back when the Ombudsman intervened.

- Mis-selling of Payment Protection Insurance in the building industry, overcharging of insurance premiums for non smokers and delays in effecting policy reviews were discovered.

- A €200,000 award was made to a former professional rugby player who could not play professional rugby after an injury but tried to play amateur rugby. The Ombudsman was satisfied that it would not be fair for the former player to suffer financial loss for a serious lapse on the part of the Insurance Company, the IRFU.
and its insurance advisors to clearly define what they thought was covered by the policy.

The Ombudsman however rejected the following complaints:

- €800,000 death benefit claim for non disclosure of a terminal illness while non payment of €625,000 life assurance death benefit was correct for failure to disclose significant medical history
- While significant increased premiums were necessary after life assurance policy reviews the companies concerned acted correctly
- A claim for lost money when the person left her hand bag on a plane seat when she disembarked in Spain for a two week holiday
- Lost valuables when a person went on holidays to Thailand – a stolen property and cash claim was not credible given that a lady came to the room!!!

Refusal to Cooperate with Ombudsman

The Ombudsman has extensive legal powers to require any financial services provider to provide information including the power to require employees to provide information under oath. If necessary the Ombudsman can enter premises of providers and demand the production of documents etc. In the case of non compliance e.g. not paying an award of compensation made by the Ombudsman or not supplying information, the Ombudsman can seek a Court Order. Anyone who obstructs the Ombudsman commits an offence and is liable to a fine of up to €2,000, imprisonment for three months or both.

Further Information

The annual reports of the Ombudsman contain advice and guidance as well as case studies published. These should help and inform individuals and organisations about the various and on occasions complex issues that arise.

Further detailed information on all aspects of Financial Services Ombudsman’s role can be obtained on the Ombudsman’s website at http://www.financialombudsman.ie