



Internal Dispute Resolution Procedure

Should you disagree with a decision made by the Fire & Rescue Service (FRS) or administrators of the Firefighters' Pension Scheme (FPS) in relation to your benefits, there is a two stage complaints process in place known as the **Internal Dispute Resolution Procedure (IDRP)**. You can make a complaint under the IDRP if you are a:

- **Prospective member** wishing to join the FPS 2015 (Wales) (FPS 2015), or a
- **Firefighter** contributing to the FPS 1992 / FPS 2007 (Wales) or FPS 2015 (Wales), or a
- **Deferred Firefighter** who has left the FRS, but your benefits remain in the FPS, or a
- **Pensioner member**, who is currently in receipt of a pension benefit from the FPS (which includes a widow, widower or surviving dependent, or non-dependent, of a deceased member of the FPS).

When making your complaint, you can choose someone else to represent your case - a friend, relative, solicitor or union representative for example.

Stage 1: Formal Complaint

You should complain in writing to whoever you think is at fault, either the FRS or the Administrator of the scheme, by completing the application form within **6 months** of the problem arising. The facts of your case will be examined along with the scheme regulations, and any other legislation which is relevant. You should receive a written reply within **2 months** of receiving your particulars. Confirmation of the decision will be presented, or alternatively reasons will be given for the delay in providing the outcome.

For complaints against the FRS, please complete the application form and return to:

Mr. Craig Flannery, Chief Fire Officer, Mid & West Wales Fire & Rescue Service, Service Headquarters, Lime Grove Avenue, Carmarthen, SA31 1SP

For complaints against the Administrator of the Scheme, please complete the application form and return to:

**The Pensions Manager
Dyfed Pension Fund
County Hall
Carmarthen
SA31 1JP**

Stage 2: Further Appeal

If you are unhappy with the Stage 1 decision, you have **6 months** to appeal to a Stage 2 referee appointed by the Pension Fund. You must make your Stage 2 appeal in writing, which should be accompanied by the Stage 1 decision.

You can also go straight to Stage 2, if:

- You have gone through Stage 1 and haven't had a reply within **3 months** of making your appeal; or
- You have gone through Stage 1 and haven't received a decision within **a month** of the date you were told you would receive it.

The Stage 2 referee should reply to you within **2 months** of receiving your complaint.

For all Stage 2 appeals please complete the attached application form and return to:

**Clerk to the Fire & Rescue Service
Mid & West Wales Fire & Rescue Service
Service Headquarters
Lime Grove Avenue
Carmarthen
SA31 1SP**

Further Assistance

1) The Pensions Ombudsman (TPO)

You have the right to refer your complaint to The Pensions Ombudsman (TPO) free of charge.

TPO deals with complaints and disputes which concern the administration and/or management of occupational and personal pension schemes.

Contact with TPO about a complaint needs to be made within **3 years** of when the event(s) you are complaining about happened – or, if later, within **3 years** of when you first knew about it (or ought to have known about it). There is discretion for those time limits to be extended.

The Pensions Ombudsman can be contacted at:

10 South Colonnade, Canary Wharf, London, E14 4PU

Tel: **0800 917 4487**

Email: **enquiries@pensions-ombudsman.org.uk**

Website: **www.pensions-ombudsman.org.uk**

2) The Pensions Advisory Service (TPAS)

If you have general requests for information or guidance concerning your pension arrangements contact:

The Pensions Advisory Service (TPAS), 120 Holborn, London, EC1N 2TD

Tel: **0800 011 3797**

Website: **www.pensionsadvisoryservice.org.uk/**

3) The Pensions Regulator (TPR)

The Pensions Regulator (TPR) is a pensions watchdog which makes sure schemes are run properly and protects members against fraud. Anyone who is worried about a scheme can report to TPR.

TPR's contact details are follows.

Address: **TPR, Napier House, Trafalgar Place, Brighton, BN1 4DW**

Tel: **0345 600 0707**

Website: **www.thepensionsregulator.gov.uk/**



IDRP Application Form

Stage 1 Application

(To be completed by the Complainant or Personal Representative)

Complainant Details		(Please complete in BLOCK capitals)	
Full Name:		Date of Birth:	
Payroll Number:		N.I. Number:	
Address:			
Employing Authority:	Post Code:		

Language Preference		(Please TICK the appropriate box to indicate your election)		
As a member of the Fire Pension Scheme, I wish to receive ALL future correspondence in:				
WELSH		ENGLISH		BILINGUAL

Complete below if you are Representing the Complainant				
Full Name:				
Relationship to Complainant:				
Address for Correspondence:				
	Post Code:			

Statement of Application

Please give a statement of the nature of the disagreement overleaf, with sufficient details to show why you are aggrieved. If necessary, continue details on an additional page and attach to the application form together with any supporting documents.

Please provide your statement below.

Please continue with your statement below.

Complainant Declaration (Stage 1)

- 1) I wish to apply for a decision to be made, under section 50 of the Pensions Act 1995, in respect of the disagreement set out in this application.
- 2) I understand that an application may not be made where, in respect of a disagreement:
 - A notice of appeal has been issued under Rule H3 of the Firefighters' Pension Scheme (FPS) 1992, Part 8, Paragraph 5 of the FPS 2007 (Wales) or Part 6, rule 3 of the Firefighters' Compensation Scheme (Wales) Order 2007 (appeal to a board of medical referees against a decision on an issue of a medical nature), or Regulation 173 FPS 2015 (Wales), or
 - Proceedings in respect of this dispute have begun in any court or tribunal, or
 - The Pensions Ombudsman has commenced an investigation into a complaint, or a dispute referred to him.
- 3) The nature of the disagreement is set out in the attached page(s).

Complainant Signature:		Date:	
PRINT NAME:			
Signature of Representative:		Date:	
PRINT NAME:			