



Ministry
of Justice

Five steps to using the online Official Injury Claim Service

www.officialinjuryclaim.org.uk



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Table of Contents

Introduction	2
Official Injury Claim (OIC).....	2
Can I use OIC?.....	2
Stage 1: Information	3
Getting started.....	3
Stage 2: Investigation	3
Liability.....	3
Stage 3: Medical Evidence	4
Medical reports.....	4
Amending a report.....	4
Stage 4: Negotiation	5
What can I claim for?.....	5
Additional costs and losses.....	6
Stage 5: Settlement	7
Agreeing a settlement.....	7
Waiting out your prognosis.....	7
Resolving a dispute.....	7
Going to Court.....	8
Additional support	8
Ready to make a claim?	9
Additional information	9
Glossary	9

Introduction

Official Injury Claim (OIC)

The OIC is a service supporting individuals to make their own personal injury claim following a road traffic accident in England and Wales. The service is run by the Motor Insurers' Bureau on behalf of the Ministry of Justice.

The OIC service can be used by individuals to make and settle their own personal injury claim, where that claim is related to a road traffic accident and is valued at £5,000 or less. If you think your injury claim is worth more than £5,000 you should seek independent legal advice before continuing.

If you believe your claim is worth up to £5,000 you should read this guide which will walk you through the 5 main steps to making a personal injury claim using OIC. You can choose to make a claim yourself or with the help of a lawyer or other claims professional.

Can I use the OIC service and what does it do for me?

In most cases, you will be eligible to use the service if you have suffered minor injuries such as whiplash, muscle damage, cuts, bruises or minor fractures following a road traffic accident which wasn't your fault. If you believe your injuries were caused by your accident, you can use the OIC service to make a straightforward, easy and secure claim for compensation.

Your **injuries** need to be valued up to £5,000 (around 90% of minor injuries from road traffic accidents are) and the **total value** of your claim must not exceed £10,000. The OIC service and its accompanying guidance will help you to estimate your claim's value. More information on how to do this is provided during **Stage two** of the process.

Do use the OIC service to make a claim if:

- you are over 18 and have been involved in an accident you believe wasn't your fault in England or Wales; and
- you were the driver or passenger of the car or other motor vehicle.

Don't use the OIC service to make a claim if:

- your claim for your injury is over £5,000;
- the total value of your claim is more than £10,000 (this includes claiming back any additional costs for things like medical treatment, a replacement car whilst yours is off the road or being repaired;
- you can't identify the at-fault driver or you are a pedestrian, cyclist, horse rider or motorcyclist.

In these circumstances, you should seek independent legal advice, the costs of which you may be able to claim back.



Five steps to using the online Official Injury Claim Service

The service is **free to use** and has been designed so that you can progress your own claim and obtain compensation with or without legal advice or support. Please refer to the glossary at the end of this guide for more information on some of the common terms you may encounter when reading this document or using the OIC service.

Stage 1: Information

Getting started with making a claim

Your first step will be to provide OIC with the details of the accident and your injury. This will normally take between 20 and 30 minutes.

You will need some specific pieces of information to hand including your National Insurance number and, if possible, the registration numbers of any vehicles involved in the accident. It is also helpful to have any police reports to hand if you have them. The more evidence provided about the accident at the beginning, the better. More on this can be found in the 'Guide to making a claim' www.officialinjuryclaim.org.uk/media/1141/guide-to-making-a-claim-version-20-april-2021.pdf.

You will also be asked about any injuries that you believe are related to your accident. Rest assured, you don't need any specialist knowledge, as you will be guided through identifying your injury and the service will help you contact a medical expert to examine you and provide a medical report.

If you have other evidence to support your claim (such as dashcam footage) you will also be able to upload this, as well as any information you have about any financial costs or losses. Information about adding additional costs and losses can be found at **Stage 4**.

Stage 2: Investigation

Liability and what to expect

The OIC service can be used to agree liability.

If a person is liable for your injury, it means they're at fault. If liability is admitted, you will then be able to claim damages for your injury. If liability is denied, they are saying they are not at fault. If you disagree you can challenge the decision via the OIC service, or you may choose to leave and pursue your claim through the Small Claims Court.

It is important to know who was at fault for the accident; this is known as **agreeing liability**.

Statement of Truth

In order to submit your claim, you will be asked to sign a **Statement of Truth** to confirm that you believe the facts stated in your claim are true and accurate. This is very important. Proceedings for contempt of court may be brought against anyone who makes a false statement in a document verified by a **Statement of Truth**.

The other party may be fully liable (it was entirely their fault), or partly liable (for example where both drivers were equally at fault, or to varying degrees). This will be discussed between the relevant insurance companies.

If the at-fault insurer (usually the other driver's insurer) only admits partial liability, you can challenge this and propose a different share of liability. For example, they may say they were only 25% at fault, but you may disagree and can respond by saying you think they were 50% at fault instead. You can do this up to 3 times on OIC, and the service will guide you through this process. Once liability is admitted in full or in part, you can then move to **Stage 3**. If you cannot agree, you might choose to start court action; more on this later.

Stage 3: Medical Evidence

Medical reports

If you have a whiplash injury, medical evidence is needed to back up your claim.

Stage 3 begins once liability is admitted in full or in part. At this stage, you will get in touch with a medical report provider who will undertake an examination of your injuries. OIC will take you through this process and you will be asked several questions about your preferences, for example where you would like the medical examination to take place. You will then select your medical report provider from an approved list provided by the service.

The report produced by the expert will provide both a diagnosis covering the nature of your injuries and a prognosis covering your expected recovery time. Once the report is complete, the expert will upload it to the OIC system for you to review.

Amending a report

You cannot change your expert's medical report, but you should check for any factual errors or whether anything important has been missed.

The report will only be sent to the insurer for consideration once you have reviewed it and confirmed you are content to continue.

Medical Report Providers:

There are two types of medical report provider you can select:

Direct Medical Expert (DME) - this is a qualified medical expert, usually a GP or a physiotherapist, who you will contact and communicate with. The DME will organise your appointment with you, deal with any queries, examine you and produce your medical report.

Medical Reporting Organisation (MRO) – an independent organisation that will instruct a qualified medical expert to examine you and produce a medical report on your behalf. The MRO will help you in organising an appointment and deal with any queries about the medical report you might have.

In most cases, only one medical report will be needed, but there might be times when a further report is needed. This might be because the first expert recommends it or if more time is required to confirm an accurate prognosis.

If a second report is needed it will usually be recommended in your first report by the medical expert, and the at-fault insurer will be told. The at-fault insurer can help by arranging and paying for this report on your behalf. However, you can also choose to obtain this additional report yourself and not involve the insurer. If you decide to do this then you will have to pay for the report yourself, although you can claim this cost back as part of the negotiation process.

Stage 4: Negotiation

What can I claim for?

The final value of your claim should not be more than £10,000 and will depend on both the damages for your injury and any other additional losses you have suffered as a result of the accident or injury. Additional losses can include loss of earnings or travel costs for attending medical appointments.

Compensation for your injury is known as damages for pain, suffering and loss of amenity (PSLA) and can be referred to as 'general damages'. PSLA damages are available for:

- **Whiplash only injuries** - if you have only suffered a whiplash injury (or injuries) to your neck, back or shoulder, this will be valued using a whiplash-only tariff. This is a pre-set amount of damages that can be awarded, depending on the type and length of the injury suffered. Details of the amounts payable are here: www.legislation.gov.uk/uksi/2021/642/regulation/2/made
- **Mixed injuries** - are where you have suffered a whiplash injury along with a non-whiplash injury or injuries to another part of your body, such as a broken finger. In these circumstances, the tariff will apply to the whiplash injury only, and your other injuries will need to be valued separately. Information on how to do this can be found in the more detailed 'Guide to making a claim' here: www.officialinjuryclaim.org.uk/resources

Exceptional circumstances

Where you have a whiplash injury or whiplash injury with a minor psychological injury and you feel these are exceptional, you may be entitled to an uplift of up to 20% of the tariff sum.

You should explain why you think your injury or the circumstances around your injury are exceptional to your medical expert, who will comment on the issue.

The at-fault insurer and/or court may or may not agree your injury/injuries qualify as exceptional and this might require additional conversations.

- **Non-whiplash injuries** – If your injuries do not include a whiplash injury then the tariff (above) does not apply to you. You should still use the OIC service to make your claim, but your injuries will need to be valued separately. Information on how to do this can be found in the more detailed OIC ‘Guide to making a claim’ booklet.



For additional help in valuing a claim, relevant helpful extracts from the ‘Judicial College Guidelines for the Assessment of General Damages in Personal Injury Cases’ have been included in the appendix of the OIC ‘Guide to making a claim’.

This is a book used by lawyers and judges to help assess the value of a claim which has suggested compensation levels for a range of injuries. The amounts included in this publication are only guidelines and the full circumstances of the accident should be considered when assessing the value of your injuries.

Additional costs and losses

Other types of loss can be added to your claim as part of the settlement process on the OIC system. These include:

- **Other accident-related damages (also known as ‘special damages’)** – is used to refer to compensation to cover the financial losses and expenses directly incurred as a result of your accident or any associated injuries. Examples include the cost of any early medical treatment or for the loss of any earnings due to time off work following the accident. A claim for ‘special damages’ needs to be accompanied by evidence of loss, such as a receipt or invoices for physiotherapy treatment, and you will need to upload this evidence onto the OIC Service. These are sometimes referred to as ‘other protocol damages’.
- **Non-protocol vehicle costs** - are losses incurred by a company or organisation that has assisted/helped following the accident. For example, your insurer might have paid your repair costs, or you may have received a replacement hire car to use whilst your own is off the road. This process is usually dealt with separately from your injury claim.

Non-Protocol Vehicle Costs

These costs are generally paid for by the at-fault insurer, but you should check this, as in some cases you may have to pay for them yourself. If this part of your claim is not resolved by the time your injury claim is settled, the OIC service and supporting guidance provide further information on how to progress it.

Stage 5: Settlement

Agreeing a settlement

Once you have completed all the steps to set your claim in motion, the insurer has 20 business days to make you an offer. When you log back on to the OIC service, you will then be able to see the offer and you can decide on your next steps.

You can decide whether to:

- accept the offer;
- dispute the offer; or
- wait out the prognosis for your injury.

Waiting out your prognosis

You may wish to wait out the prognosis period included in your medical report. This means that you would like to wait to see if you do recover within the time period provided by the medical expert who produced your report. This will give you extra time to decide whether the report is accurate. You can then accept the report and continue with your claim, or seek a further report if symptoms persist.

Waiting out your prognosis can provide you with additional information, but it can also mean a delay in reaching a settlement. Once you accept the offer, your claim will be closed and cannot be reopened. The insurer will then contact you to arrange payment.

Resolving a dispute

If you do not accept the offer from the at-fault insurer, you must confirm which part of it you disagree with. You can then either:

- return the claim to the insurer who may update their offer (it will be possible to upload additional evidence if needed);
- suggest a different offer, known as a counteroffer (only 3 counteroffers in total can be made);
- if the insurer's offer is lower than expected as you may have not supplied enough evidence, you can upload any further relevant evidence (such as receipts) to show that a higher offer should be made; or
- where an agreement cannot be reached, you may wish to start court proceedings.

Going to Court

If you cannot agree certain aspects of your claim with the insurer, it may be that matters are settled via the courts. If you go to court, you will have to pay for this. Information is available about how much it will cost you here: <https://www.gov.uk/court-fees-what-they-are>

If you need to pay any court fees you can seek to recover this cost from the insurer if you win your case. You may qualify to have your court fees reduced or waived, depending on your financial circumstances.

Going to Court

The OIC should enable you to settle your claim without the need for court action. However, if you can't agree liability, settlement or have a different dispute with the at-fault insurer over the facts of the accident or claim, matters may need to go to court. In some situations, the court will decide the issue, and you can return to the OIC service to complete your claim. In other circumstances your claim may remain in and be resolved by the court.

The service also provides information for anyone who does need to go to court. If you exit the system OIC will create a 'court pack' and populate the appropriate 'claim form' with all your information from the system. This will enable you to start the court process if needed. If you do go to court, you will usually have to pay for this. Information about the fees can be found here: <https://www.gov.uk/court-fees-what-they-are>.

If you need to pay any court fees you can seek to recover this cost from the insurer if you win your case. You may qualify to have your court fees reduced or waived, depending on your financial circumstances.

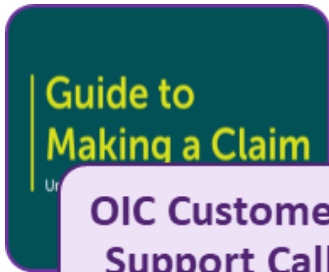
Additional Support

The service has been built to be as easy to use as possible and you don't need to understand legal terms and processes to make your claim. The system will guide you through the process, but additional help and support is available if you need it.


There is a comprehensive 'Guide to making a claim' available that can provide further help whenever needed. You should only need to refer to this document if you need further help on a particular part of the process. There is no need for you to download or read it unless you need help on a specific issue. The guide can be found here: at <https://www.officialinjuryclaim.org.uk/resources>

There is also a dedicated service centre to provide additional (non-legal) support with both using the service and with translation queries where needed. The call centre staff can also help claimants who are unable to use the online system through use of an alternative paper-based version of the process. OIC does not provide legal advice but will direct you to where this can be obtained if needed.

You can contact the OIC Portal Service centre on **0800 118 1631**, operators will be available to provide support from 09:00-17:00hrs on weekdays, excluding bank holidays.



Guide to
Making a Claim



OIC Customer
Support Call
Centre

0800 118 1631

Ready to make a claim?

Then visit the OIC website to get started (www.officialinjuryclaim.org.uk). The service is free, independent and does not profit from your claim. You will get support on the steps you need to take to make and settle your claim, when you need it, and your personal data will never be sold.

Additional information

Further helpful information, including frequently asked questions, can be found on the Gov.UK website here: <https://www.gov.uk/government/publications/whiplash-reform-programme-information-and-faq>

Glossary of Terms

The following glossary covers commonly used terms and phrases you may encounter when using the OIC service:

Term:	Explanation:
At-fault Insurer	This term is used to describe the insurance company representing the person at-fault for the accident. The OIC system may also refer to them as the 'compensator'.
Claimant	If, following an accident, you make a personal injury claim for compensation you will be known as the "claimant". The claimant and the defendant are also known as the "parties" to the case.
Compensation for Pain Suffering and Loss of Amenity (PSLA)	PSLA is the legal term for the type of damages awarded to a claimant to compensate them for physical and psychological injuries. This includes the impact these can have on their work and/or leisure activities. Compensation for PSLA is also called general damages.
Compensation paid via the Whiplash Tariff	The whiplash injury tariff is a pre-set amount of damages that can be awarded, depending on the type of injury suffered and how long it is expected to last.

Five steps to using the online Official Injury Claim Service

Compensator	The compensator is usually the insurance company who represent the driver who you consider to be at-fault for a motor vehicle accident. They are also known as the 'at-fault insurer'.
Contempt of Court	Contempt of Court occurs when a party is found to have disobeyed, disrespected or misled the court. Examples include disobeying court orders/making false statements in documents (including online forms) without honest belief in its truth verified by a statement of truth. A contempt finding can result in a fine/seized assets or imprisonment.
Credit Repair/Hire	Credit hire/repair is the situation where a third-party organisation has repaired your vehicle or supplied a replacement hire car on credit terms (i.e. for no upfront cost). The provider will usually claim back the costs from the at-fault insurer. However, under a credit agreement if the provider is unable to recover the cost from the at-fault insurer the claimant is still liable for paying the bill.
Defendant	The person you consider to be at fault for the accident and are making your claim against will be the "defendant". The claimant and the defendant are also known as the "parties" to the case.
Liability	Liability is used to identify who is at fault for a road traffic accident. Liability can be: <ul style="list-style-type: none">• admitted in full (taking full responsibility);• admitted in part (accepting some of responsibility) or• denied (accepting no responsibility).
Medical report	A medical report is an independent and impartial assessment of your injuries. It is prepared by an accredited medical expert following an examination and will include an estimated recovery time (known as a prognosis) and details of any recommended treatment. Your medical report can be used in court in support of a claim.
Medical Reporting Organisation	An independent organisation that will appoint an accredited medical expert to examine you and produce a medical report on your behalf.
Mixed Injuries	A 'mixed injury' claim is a claim for damages for both a whiplash injury and other physical injuries such as bruising, abrasions, cuts, sprains or strains. Compensation in this type of claim includes fixed damages for the whiplash injury and negotiated general damages for the other injuries.

Five steps to using the online Official Injury Claim Service

Rehabilitation Following an accident rehabilitation can help injured individuals to recover or adjust to the circumstances they find themselves in. Depending on the nature of the injury, rehabilitation can help improve mobility and activity levels and reduce the time an injured party needs to receive medical treatment.

Road Traffic Accident A road traffic accident is an accident resulting in injury to any person, arising from the use of a motor vehicle on a road or other public place in England and Wales.

Other accident-related damages or 'special damages' 'Special damages' is a term used to refer to compensation to cover the financial losses and expenses related to your accident or any associated injuries. Examples include the cost of early medical treatment or for loss of earnings due to time off work following the accident. A claim for 'special damages' needs to be proven by some type of evidence of the loss.

Statement of Truth A statement of truth confirms the facts stated by the claimant in a document (including an online form) are true. It must be signed by the party, their litigation friend or legal representative.

Unrepresented Claimant People who represent themselves through the claims process and who do not have a lawyer or other professional helping them are known as 'unrepresented claimants' in the OIC process. If the claim goes to court, they can also be called 'litigants-in-person'.

Whiplash Whiplash is a soft tissue injury to the neck, back or shoulder as defined in Part 1 of the Civil Liability Act 2018¹. Whiplash is usually caused by sudden movement of the head, for example in a road traffic accident or a slip or fall.

¹ <https://www.legislation.gov.uk/ukpga/2018/29/part/1/crossheading/whiplash-injuries/enacted>



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