

THE CRIMINAL INJURIES COMPENSATION SCHEME

The Secretary of State, in exercise of the powers conferred on him by sections 1 to 6 and 12 of the Criminal Injuries Compensation Act 1995 (c.53), hereby makes the attached Criminal Injuries Compensation Scheme, a draft thereof having been approved by both Houses of Parliament:

Home Office
12 December 1995

Michael Howard
One of Her Majesty's Principal Secretaries of State

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THE CRIMINAL INJURIES COMPENSATION SCHEME

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THE CRIMINAL INJURIES COMPENSATION SCHEME

1. This Scheme is made by the Secretary of State under the Criminal Injuries Compensation Act 1995. Applications received on or after 1 April 1996 for the payment of compensation to, or in respect of, persons who have sustained criminal injury will be considered under this Scheme.

Administration of the Scheme

2. Claims officers in the Criminal Injuries Compensation Authority (“the Authority”) will determine claims for compensation in accordance with this Scheme. Appeals against decisions taken on reviews under this Scheme will be determined by adjudicators. Persons appointed as adjudicators are appointed as members of the Criminal Injuries Compensation Appeals Panel (“the Panel “). The Secretary of State will appoint one of the adjudicators as Chairman of the Panel. The Secretary of State will also appoint persons as staff of the Panel to administer the provisions of this Scheme relating to the appeal system.

3. Claims officers will be responsible for deciding, in accordance with this Scheme, what awards (if any) should be made in individual cases, and how they should be paid. Their decisions will be open to review and thereafter to appeal to the Panel, in accordance with this Scheme. No decision, whether by a claims officer or the Panel, will be open to appeal to the Secretary of State.

4. The general working of this Scheme will be kept under review by the Secretary of State. The Accounting Officer(s) for the Authority and the Panel must each submit reports to the Secretary of State as soon as possible after the end of each financial year, dealing with the operation of this Scheme and the discharge of functions under it. The Accounting Officer(s) must each keep proper accounts and proper records in relation to those accounts, and must each prepare a statement of accounts in each financial year in a form directed by the Secretary of State. These statements of accounts must be submitted to the Secretary of State as soon as possible after the end of each financial year.

5. The Panel will advise the Secretary of State on matters on which he seeks its advice, as well as on such other matters and at such times as it considers appropriate. Any advice given by the Panel will be referred to by the Accounting Officer for the Panel in his annual report made under the preceding paragraph.

Eligibility to apply for compensation

6. Compensation may be paid in accordance with this Scheme:

- (a) to an applicant who has sustained a criminal injury on or after 1 August 1964;
- (b) where the victim of a criminal injury sustained on or after 1 August 1964 has since died, to an applicant who is a qualifying claimant for the purposes of paragraph 38 (compensation in fatal cases).

For the purposes of this Scheme, “applicant” means any person for whose benefit an application for compensation is made, even where it is made on his behalf by another person.

7. No compensation will be paid under this Scheme in the following circumstances:

- (a) where the applicant lodged a claim before 1 April 1996 for compensation in respect of the same criminal injury under any scheme for the compensation of the victims of violent crime in operation in Great Britain before that date; or
- (b) where the criminal injury was sustained before 1 October 1979 and the victim and the assailant were living together at the time as members of the same family.

8. For the purposes of this Scheme, “criminal injury” means one or more personal injuries as described in the following paragraph, being an injury sustained in Great Britain (see Note 1) and directly attributable to:

- (a) a crime of violence (including arson, fire-raising or an act of poisoning); or
- (b) an offence of trespass on a railway; or
- (c) the apprehension or attempted apprehension of an offender or a suspected offender, the prevention or attempted prevention of an offence, or the giving of help to any constable who is engaged in any such activity.

9. For the purposes of this Scheme, personal injury includes physical injury (including fatal injury), mental injury (that is, a medically recognised psychiatric or psychological illness) and disease (that is, a medically recognised illness or condition). Mental injury or disease may either result directly from the physical injury or occur without any physical injury, but compensation will not be payable for mental injury alone unless the applicant:

- (a) was put in reasonable fear of immediate physical harm to his own person; or
- (b) had a close relationship of love and affection with another person at the time when that person sustained physical (including fatal) injury directly attributable to conduct within paragraph 8(a), (b) or (c), and
 - (i) that relationship still subsists (unless the victim has since died), and
 - (ii) the applicant either witnessed and was present on the occasion when the other person sustained the injury, or was closely involved in its immediate aftermath; or
- (c) was the non-consenting victim of a sexual offence (which does not include a victim who consented in fact but was deemed in law not to have consented); or
- (d) being a person employed in the business of a railway, either witnessed and was present on the occasion when another person sustained physical (including fatal) injury directly attributable to an offence of trespass on a railway, or was closely involved in its immediate aftermath. Paragraph 12 below does not apply where mental injury is sustained as described in this sub-paragraph.

10. It is not necessary for the assailant to have been convicted of a criminal offence in connection with the injury. Moreover, even where the injury is attributable to conduct within paragraph 8(a) in respect of which the assailant cannot be convicted of an offence by reason of age, insanity or diplomatic immunity, the conduct may nevertheless be treated as constituting a criminal act.

11. A personal injury is not a criminal injury for the purposes of this Scheme where the injury is attributable to the use of a vehicle, except where the vehicle was used so as deliberately to inflict, or attempt to inflict, injury on any person.

12. Where an injury is sustained accidentally by a person who is engaged in:

- (a) any of the law-enforcement activities described in paragraph 8(c), or
- (b) any other activity directed to containing, limiting or remedying the consequences of a crime,

compensation will not be payable unless the person injured was, at the time he sustained the injury, taking an exceptional risk which was justified in all the circumstances.

Eligibility to receive compensation

13. A claims officer may withhold or reduce an award where he considers that:

- (a) the applicant failed to take, without delay, all reasonable steps to inform the police, or other body or person considered by the Authority to be appropriate for the purpose, of the circumstances giving rise to the injury; or
- (b) the applicant failed to co-operate with the police or other authority in attempting to bring the assailant to justice; or
- (c) the applicant has failed to give all reasonable assistance to the Authority or other body or person in connection with the application; or
- (d) the conduct of the applicant before, during or after the incident giving rise to the application makes it inappropriate that a full award or any award at all be made; or
- (e) the applicant's character as shown by his criminal convictions (excluding convictions spent under the Rehabilitation of Offenders Act 1974) or by evidence available to the claims officer makes it inappropriate that a full award or any award at all be made.

14. Where the victim has died since sustaining the injury (whether or not in consequence of it), the preceding paragraph will apply in relation both to the deceased and to any applicant.

15. A claims officer will make an award only where he is satisfied:

- (a) that there is no likelihood that an assailant would benefit if an award were made; or
- (b) where the applicant is under 18 years of age when the application is determined, that it would not be against his interest for an award to be made.

16. Where a case is not ruled out under paragraph 7(b) (injury sustained before 1 October 1979) but at the time when the injury was sustained, the victim and any assailant (whether or not that assailant actually inflicted the injury) were living in the same household as members of the same family, an award will be withheld unless:

- (a) the assailant has been prosecuted in connection with the offence, except where a claims officer considers that there are practical, technical or other good reasons why a prosecution has not been brought; and
- (b) in the case of violence between adults in the family, a claims officer is satisfied that the applicant and the assailant stopped living in the same household before the application was made and are unlikely to share the same household again.

For the purposes of this paragraph, a man and woman living together as husband and wife will be treated as members of the same family.

Consideration of applications

17. An application for compensation under this Scheme in respect of a criminal injury (“injury” hereafter in this Scheme) must be made in writing on a form obtainable from the Authority. It should be made as soon as possible after the incident giving rise to the injury and must be received by the Authority within two years of the date of the incident. A claims officer may waive this time limit where he considers that, by reason of the particular circumstances of the case, it is reasonable and in the interests of justice to do so.

18. It will be for the applicant to make out his case including, where appropriate:

- (a) making out his case for a waiver of the time limit in the preceding paragraph; and
- (b) satisfying the claims officer dealing with his application (including an officer reviewing a decision under paragraph 60) that an award should not be reconsidered, withheld or reduced under any provision of this Scheme.

Where an applicant is represented, the costs of representation will not be met by the Authority.

19. A claims officer may make such directions and arrangements for the conduct of an application, including the imposition of conditions, as he considers appropriate in all the circumstances. The standard of proof to be applied by a claims officer in all matters before him will be the balance of probabilities.

20. Where a claims officer considers that an examination of the injury is required before a decision can be reached, the Authority will make arrangements for such an examination by a duly qualified medical practitioner. Reasonable expenses incurred by the applicant in that connection will be met by the Authority.

21. A Guide to the operation of this Scheme will be published by the Authority. In addition to explaining the procedures for dealing with applications, the Guide will set out, where appropriate, the criteria by which decisions will normally be reached.

Types and limits of compensation

22. Subject to the other provisions of this Scheme, the compensation payable under an award will be:

- (a) a standard amount of compensation determined by reference to the nature of the injury in accordance with paragraphs 25-29;

- (b) where the applicant has lost earnings or earning capacity for longer than 28 weeks as a direct consequence of the injury (other than injury leading to his death), an additional amount in respect of such loss of earnings, calculated in accordance with paragraphs 30-34;
- (c) where the applicant has lost earnings or earning capacity for longer than 28 weeks as a direct consequence of the injury (other than injury leading to his death) or, if not normally employed, is incapacitated to a similar extent, an additional amount in respect of any special expenses, calculated in accordance with paragraphs 35-36;
- (d) where the victim has died in consequence of the injury, the amount or amounts calculated in accordance with paragraphs 37-43;
- (e) where the victim has died otherwise than in consequence of the injury, a supplementary amount calculated in accordance with paragraph 44.

23. The total maximum amount payable in respect of the same injury will not exceed £500,000. For these purposes, where the victim has died in consequence of the injury, any application made by the victim before his death and any application made by any qualifying claimant or claimants after his death will be regarded as being in respect of the same injury.

24. The injury must be sufficiently serious to qualify for an award equal at least to the minimum amount payable under this Scheme in accordance with paragraph 25.

Standard amount of compensation

25. The standard amount of compensation will be the amount shown in respect of the relevant description of injury in the Tariff appended to this Scheme, which sets out:

- (a) a scale of fixed levels of compensation; and
- (b) the level and corresponding amount of compensation for each description of injury.

Level 1 represents the minimum amount payable under this Scheme, and Level 25 represents the maximum amount payable for any single description of injury. Where the injury has the effect of accelerating or exacerbating a pre-existing condition, the compensation awarded will reflect only the degree of acceleration or exacerbation.

26. Minor multiple injuries will be compensated in accordance with Note 1 to the Tariff. The standard amount of compensation for more serious but separate multiple injuries will be calculated as:

- (a) the Tariff amount for the highest-rated description of injury; plus
- (b) 10 per cent of the Tariff amount for the second highest-rated description of injury; plus, where there are three or more injuries,
- (c) 5 per cent of the Tariff amount for the third highest-rated description of injury.

27. Where a woman has become pregnant as a result of rape and an award is made to her in respect of non-consensual vaginal intercourse, an additional amount will be payable equal to Level 10 of the Tariff in respect of each child born alive which she intends to keep.

28. Where the Authority considers that any description of injury for which no provision is made in the Tariff is sufficiently serious to qualify for at least the minimum amount payable under this Scheme, it will, following consultation with the Panel, refer the injury to the Secretary of State. In doing so the Authority will recommend to the Secretary of State both the inclusion of that description of injury in the Tariff and also the amount of compensation for which it should qualify. Any such consultation with the Panel or reference to the Secretary of State must not refer to the circumstances of any individual application for compensation under this Scheme other than the relevant medical reports.

29. Where an application for compensation is made in respect of an injury for which no provision is made in the Tariff and the Authority decides to refer the injury to the Secretary of State under the preceding paragraph, an interim award may be made of up to half the amount of compensation for which it is recommended that such description of injury should qualify if subsequently included in the Tariff. No part of such an interim award will be recoverable if the injury is not subsequently included in the Tariff or, if included, qualifies for less compensation than the interim award paid.

Compensation for loss of earnings

30. Where the applicant has lost earnings or earning capacity for longer than 28 weeks as a direct consequence of the injury (other than injury leading to his death), no compensation in respect of loss of earnings or earning capacity will be payable for the first 28 weeks of loss. The period of loss for which compensation may be payable will begin 28 weeks after the date of commencement of the applicant's incapacity for work and continue for such period as a claims officer may determine.

31. For a period of loss ending before or continuing to the time the claim is assessed, the net loss of earnings or earning capacity will be calculated on the basis of:

- (a) the applicant's emoluments (being any profit or gain accruing from an office or employment) at the time of the injury and what those emoluments would have been during the period of loss; and
- (b) any emoluments which have become payable to the applicant in respect of the whole or part of the period of loss, whether or not as a result of the injury; and
- (c) any changes in the applicant's pension rights; and
- (d) in accordance with paragraphs 45-47 (reductions to take account of other payments), any social security benefits, insurance payments and pension which have become payable to the applicant during the period of loss; and
- (e) any other pension which has become payable to the applicant during the period of loss, whether or not as a result of the injury.

32. Where, at the time the claim is assessed, a claims officer considers that the applicant is likely to suffer continuing loss of earnings or earning capacity, an annual rate of net loss (the multiplicand) or, where appropriate, more than one such rate will be calculated on the basis of:

- (a) the current rate of net loss calculated in accordance with the preceding paragraph; and
- (b) such future rate or rates of net loss (including changes in the applicant's pension rights) as the claims officer may determine; and
- (c) the claims officer's assessment of the applicant's future earning capacity; and
- (d) in accordance with paragraphs 45-47 (reductions to take account of other payments), any social security benefits, insurance payments and pension which will become payable to the applicant in future; and
- (e) any other pension which will become payable to the applicant in future, whether or not as a result of the injury.

The compensation payable in respect of such continuing loss will be a lump sum which is the product of that multiplicand and an appropriate multiplier. The summary table given in Note 3 illustrates the multipliers applicable to various periods of future loss to allow for the accelerated receipt of compensation. In selecting the multiplier, the claims officer may refer to the Actuarial Tables for use in Personal Injury and Fatal Accident Cases published by the Government Actuary's Department, and take account of any factors and contingencies which appear to him to be relevant.

33. Where a claims officer considers that the approach in the preceding paragraph is impracticable, the compensation payable in respect of continuing loss of earnings or earning capacity will be such other lump sum as he may determine.

34. Any rate of net loss of earnings or earning capacity (before any reduction in accordance with this Scheme) which is to be taken into account in calculating any compensation payable under paragraphs 30-33 must not exceed one and a half times the gross average industrial earnings at the time of assessment according to the latest figures published by the Department of Education and Employment.

Compensation for special expenses

35. Where the applicant has lost earnings or earning capacity for longer than 28 weeks as a direct consequence of the injury (other than injury leading to his death), or, if not normally employed, is incapacitated to a similar extent, additional compensation may be payable in respect of any special expenses incurred by the applicant from the date of the injury for:

- (a) loss of or damage to property or equipment belonging to the applicant on which he relied as a physical aid, where the loss or damage was a direct consequence of the injury;
- (b) costs (other than by way of loss of earnings or earning capacity) associated with National Health Service treatment for the injury;
- (c) the cost of private health treatment for the injury, but only where a claims officer considers that, in all the circumstances, both the private treatment and its cost are reasonable;
- (d) the reasonable cost, to the extent that it falls to the applicant, of
 - (i) special equipment, and/or
 - (ii) adaptations to the applicant's accommodation, and/or
 - (iii) care, whether in a residential establishment or at home, which are not provided or available free of charge from the National Health Service, local authorities or any other agency, provided that a claims officer considers such expense to be necessary as a direct consequence of the injury.

In the case of (d)(iii), the expense of unpaid care provided at home by a relative or friend of the victim will be compensated by assessing the carer's loss of earnings or earning capacity and/or additional personal and living expenses, as calculated on such basis as a claims officer considers appropriate in all the circumstances. Where the foregoing method of assessment is considered by the claims officer not to be relevant in all the circumstances, the compensation payable will be such sum as he may determine having regard to the level of care provided.

36. Where, at the time the claim is assessed, a claims officer is satisfied that the need for any of the special expenses mentioned in the preceding paragraph is likely to continue, he will determine the annual cost and select an appropriate multiplier in accordance with paragraph 32 (future loss of earnings), taking account of any other factors and contingencies which appear to him to be relevant.

Compensation in fatal cases

37. Where the victim has died in consequence of the injury, no compensation other than funeral expenses will be payable for the benefit of his estate. Such expenses will, subject to the application of paragraph 13 in relation to the actions, conduct and character of the deceased, be payable up to an amount considered reasonable by a claims officer, even where the person bearing the cost of the funeral is otherwise ineligible to claim under this Scheme.

38. Where the victim has died since sustaining the injury, compensation may be payable, subject to paragraph 14 (actions, conduct and character), to any claimant (a "qualifying claimant") who at the time of the deceased's death was:

- (a) the spouse of the deceased, being only, for these purposes:
 - (i) a person who was living with the deceased as husband and wife in the same household immediately before the date of death and who, if not formally married to him, had been so living throughout the two years before that date, or
 - (ii) a spouse or former spouse of the deceased who was financially supported by him immediately before the date of death; or
- (b) a parent of the deceased, whether or not the natural parent, provided that he was accepted by the deceased as a parent of his family; or
- (c) a child of the deceased, whether or not the natural child, provided that he was accepted by the deceased as a child of his family or was dependent on him.

Where the victim has died in consequence of the injury, compensation may be payable to a qualifying claimant under paragraphs 39-42 (standard amount of compensation, dependency, and loss of parent). Where the victim has died otherwise than in consequence of the injury, compensation may be payable to a qualifying claimant only under paragraph 44 (supplementary compensation).

39. In cases where there is only one qualifying claimant, the standard amount of compensation will be Level 13 of the Tariff. Where there is more than one qualifying claimant, the standard amount of compensation for each claimant will be Level 10 of the Tariff. A former spouse of the deceased is not a qualifying claimant for the purposes of this paragraph.

40. Additional compensation calculated in accordance with the following paragraph may be payable to a qualifying claimant where a claims officer is satisfied that the claimant was financially dependent on the deceased. A dependency will not be established where the deceased's only normal income was from:

- (a) United Kingdom social security benefits; or
- (b) social security benefits or similar payments from the funds of other countries.

41. The amount of compensation payable in respect of dependency will be calculated on a basis similar to paragraphs 31-34 (loss of earnings). The period of loss will begin from the date of the deceased's death and continue for such period as a claims officer may determine, with no account being taken, where the qualifying claimant was formally married to the deceased, of remarriage or prospects of remarriage. In assessing the dependency, the claims officer will take account of the qualifying claimant's income and emoluments (being any profit or gain accruing from an office or employment), if any. Where the deceased had been living in the same household as the qualifying claimant before his death, the claims officer will, in calculating the multiplicand, make such proportional reduction as he considers appropriate to take account of the deceased's own personal and living expenses.

42. Where a qualifying claimant was under 18 years of age at the time of the deceased's death and was dependent on him for parental services, the following additional compensation may also be payable:

- (a) a payment for loss of that parent's services at an annual rate of Level 5 of the Tariff; and
- (b) such other payments as a claims officer considers reasonable to meet other resultant losses.

Each of these payments will be multiplied by an appropriate multiplier selected by a claims officer in accordance with paragraph 32 (future loss of earnings), taking account of the period remaining before the qualifying claimant reaches age 18 and of any other factors and contingencies which appear to the claims officer to be relevant.

43. Application may be made under paragraphs 37-42 (compensation in fatal cases) even where an award had been made to the victim in respect of the same injury before his death. Any such application will be subject to the conditions set out in paragraphs 56-57 for the re-opening of cases, and any compensation payable to the qualifying claimant or claimants, except payments made under paragraphs 37 and 39 (funeral expenses and standard amount of compensation), will be reduced by the amount paid to the victim. The amounts payable to the victim and the qualifying claimant or claimants will not in total exceed £500,000.

44. Where a victim who would have qualified for additional compensation under paragraph 22(b) (loss of earnings) and/or paragraph 22(c) (special expenses) has died, otherwise than in consequence of the injury, before such compensation was awarded, supplementary compensation under this paragraph may be payable to a qualifying claimant who was financially dependent on the deceased within the terms of paragraph 40 (dependency), whether or not a relevant application was made by the victim before his death. Payment may be made in accordance with paragraph 31 in respect of the victim's loss of earnings (except for the first 28 weeks of such loss) and in accordance with paragraph 35 in respect of any special expenses incurred by the victim before his death. The amounts payable to the victim and the qualifying claimant or claimants will not in total exceed £500,000.

Effect on awards of other payments

45. All awards payable under this Scheme, except those payable under paragraphs 25, 27, 39 and 42(a) (Tariff-based amounts of compensation), will be subject to a reduction to take account of social security benefits or insurance payments made by way of compensation for the same contingency. The reduction will be applied to those categories or periods of loss or need for which additional or supplementary compensation is payable, including compensation calculated on the basis of a multiplicand or annual cost. The amount of the reduction will be the full value of any relevant payment which the applicant has received, or to which he has any present or future entitlement, by way of:

- (a) United Kingdom social security benefits;
- (b) social security benefits or similar payments from the funds of other countries;
- (c) payments under insurance arrangements, including, where a claim is made under paragraphs 35(c) and (d) and 36 (special expenses), insurance personally effected, paid for and maintained by the personal income of the victim or, in the case of a person under 18 years of age, by his parent. Insurance so personally effected will otherwise be disregarded.

In assessing the value of any such benefits and payments, account may be taken of any income tax liability likely to reduce their value.

46. Where, in the opinion of a claims officer, an applicant may be eligible for any of the benefits and payments mentioned in the preceding paragraph, an award may be withheld until the applicant has taken such steps as the claims officer considers reasonable to claim them.

47. Where the victim is alive, any compensation payable under paragraphs 30-34 (loss of earnings) will be reduced to take account of any pension accruing as a result of the injury. Where the victim has died in consequence of the injury, any compensation payable under paragraphs 40-41 (dependency) will similarly be reduced to take account of any pension payable, as a result of the victim's death, for the benefit of the applicant. Where such pensions are taxable, one half of their value will be deducted, but they will otherwise be deducted in full (where, for example, a lump sum payment not subject to income tax is made). For the purposes of this paragraph, "pension" means any payment payable as a result of the injury or death in pursuance of pension or any other rights connected with the victim's employment, and includes any gratuity of that kind and similar benefits payable under insurance policies paid for by the victim's employers. Pension rights accruing solely as a result of payments by the victim or a dependant will be disregarded.

48. An award payable under this Scheme will be reduced by the full value of any payment in respect of the same injury which the applicant has received by way of:

- (a) any criminal injury compensation award made under or pursuant to arrangements in force at the relevant time in Northern Ireland;
- (b) any compensation award or similar payment from the funds of other countries;
- (c) any award where:
 - (i) a civil court has made an order for the payment of damages;
 - (ii) a claim for damages and/or compensation has been settled on terms providing for the payment of money;
 - (iii) payment of compensation has been ordered by a criminal court in respect of personal injuries.

In the case of (a) or (b), the reduction will also include the full value of any payment to which the applicant has any present or future entitlement.

49. Where a person in whose favour an award under this Scheme is made subsequently receives any other payment in respect of the same injury in any of the circumstances mentioned in the preceding paragraph, but the award made under this Scheme was not reduced accordingly, he will be required to repay the Authority in full up to the amount of the other payment.

Determination of applications and payment of awards

50. An application for compensation under this Scheme will be determined by a claims officer, and written notification of the decision will be sent to the applicant or his representative. The claims officer may make such directions and arrangements, including the imposition of conditions, in connection with the acceptance, settlement, payment, repayment and/or administration of an award as he considers appropriate in all the circumstances. Subject to any such arrangements, including the special procedures in paragraph 52 (purchase of annuities), and to paragraphs 53-55 (reconsideration of decisions), title to an award offered will be vested in the applicant when the Authority has received notification in writing that he accepts the award.

51. Compensation will normally be paid as a single lump sum, but one or more interim payments may be made where a claims officer considers this appropriate. Once an award has been paid to an applicant or his representative, the following paragraph does not apply.

52. Where prior agreement is reached between the Authority and the applicant or his representative, an award may consist in whole or in part of an annuity or annuities, purchased for the benefit of the applicant or to be held on trust for his benefit. Once that agreement is reached, the Authority will take the instructions of the applicant or his representative as to which annuity or annuities should be purchased. Any expenses incurred will be met from the award.

Reconsideration of decisions

53. A decision made by a claims officer (other than a decision made in accordance with a direction by adjudicators on determining an appeal under paragraph 77) may be reconsidered at any time before actual payment of a final award where there is new evidence or a change in circumstances. In particular, the fact that an interim payment has been made does not preclude a claims officer from reconsidering issues of eligibility for an award.

54. Where an applicant has already been sent written notification of the decision on his application, he will be sent written notice that the decision is to be reconsidered, and any representations which he sends to the Authority within 30 days of the date of such notice will be taken into account in reconsidering the decision. Whether or not any such representations are made, the applicant will be sent written notification of the outcome of the reconsideration, and where the original decision is not confirmed, such notification will include the revised decision.

55. Where a decision to make an award has been made by a claims officer in accordance with a direction by adjudicators on determining an appeal under paragraph 77, but before the award has been paid the claims officer considers that there is new evidence or a change in circumstances which justifies reconsidering whether the award should be withheld or the amount of compensation reduced, the Authority will refer the case to the Panel for rehearing under paragraph 82.

Re-opening of cases

56. A decision made by a claims officer and accepted by the applicant, or a decision made by the Panel, will normally be regarded as final. The claims officer may, however, subsequently re-open a case where there has been such a material change in the victim's medical condition that injustice would occur if the original assessment of compensation were allowed to stand, or where he has since died in consequence of the injury.

57. A case will not be re-opened more than two years after the date of the final decision unless the claims officer is satisfied, on the basis of evidence presented in support of the application to re-open the case, that the renewed application can be considered without a need for further extensive enquiries.

Review of decisions

58. An applicant may seek a review of any decision under this Scheme by a claims officer:

- (a) not to waive the time limit in paragraph 17 (application for compensation) or paragraph 59 (application for review); or
- (b) not to re-open a case under paragraphs 56-57; or
- (c) to withhold an award, including such decision made on reconsideration of an award under paragraphs 53-54; or
- (d) to make an award, including a decision to make a reduced award whether or not on reconsideration of an award under paragraphs 53-54; or
- (e) to seek repayment of an award under paragraph 49.

An applicant may not, however, seek the review of any such decision where the decision was itself made on a review under paragraph 60 and either the applicant did not appeal against it or the appeal was not referred for determination on an oral hearing, or where the decision was made in accordance with a direction by adjudicators on determining an appeal under paragraph 77.

59. An application for the review of a decision by a claims officer must be made in writing to the Authority and must be supported by reasons together with any relevant additional information. It must be received by the Authority within 90 days of the date of the decision to be reviewed, but this time limit may, in exceptional circumstances, be waived where a claims officer more senior than the one who made the original decision considers that:

- (a) any extension requested by the applicant within the 90 days is based on good reasons; or
- (b) it would be in the interests of justice to do so.

60. All applications for review will be considered by a claims officer more senior than any claims officer who has previously dealt with the case. The officer conducting the review will reach his decision in accordance with the provisions of this Scheme applying to the original application, and he will not be bound by any earlier decision either as to the eligibility of the applicant for an award or as to the amount of an award. The applicant will be sent written notification of the outcome of the review, giving reasons for the review decision, and the Authority will, unless it receives notice of an appeal, ensure that a determination of the original application is made in accordance with the review decision.

Appeals against review decisions

61. An applicant who is dissatisfied with a decision taken on a review under paragraph 60 may appeal against the decision by giving written notice of appeal to the Panel on a form obtainable from the Authority. Such notice of appeal must be supported by reasons for the appeal together with any relevant additional material which the appellant wishes to submit, and must be received by the Panel within 30 days of the date of the review decision. The Panel will send to the Authority a copy of the notice of appeal and supporting reasons which it receives and of any other material submitted by the appellant. Where the applicant is represented for the purposes of the appeal, the costs of representation will not be met by the Authority or the Panel.

62. A member of the staff of the Panel may, in exceptional circumstances, waive the time limit in the preceding paragraph where he considers that:

- (a) any extension requested by the appellant within the 30 days is based on good reasons; or
- (b) it would be in the interests of justice to do so.

Where, on considering a request to waive the time limit, a member of the staff of the Panel does not waive it, he will refer the request to the Chairman of the Panel or to another adjudicator nominated by the Chairman to decide requests for waiver, and a decision by the adjudicator concerned not to waive the time limit will be final. Written notification of the outcome of the waiver request will be sent to the appellant and to the Authority, giving reasons for the decision where the time limit is not waived.

63. Where the Panel receives notice of an appeal against a review decision relating to a decision mentioned in paragraph 58(a) or (b), the appeal will be dealt with in accordance with paragraphs 66-68 (appeals concerning time limits and re-opening of cases). Where the Panel receives notice of an appeal against a review decision relating to a decision mentioned in paragraph 58(c), (d) or (e), the appeal will be dealt with in accordance with paragraphs 69-71 (appeals concerning awards) and may under those provisions be referred for an oral hearing in accordance with paragraphs 72-78. The Panel may publish information in connection with individual appeals, but such information must not identify any appellant or other person appearing at an oral hearing or referred to during an appeal, or enable identification to be made of any such person.

64. The standard of proof to be applied by the Panel in all matters before it will be the balance of probabilities. It will be for the appellant to make out his case including, where appropriate:

- (a) making out his case for a waiver of the time limit in paragraph 61 (time limit for appeals); and
- (b) satisfying the adjudicator or adjudicators responsible for determining his appeal that an award should not be reconsidered, withheld or reduced under any provision of this Scheme. Subject to paragraph 78 (determination of appeal in appellant's absence), the adjudicator or adjudicators concerned must ensure, before determining an appeal, that the appellant has had an opportunity to submit representations on any evidence or other material submitted by or on behalf of the Authority.

65. The Panel may make such arrangements for the inspection of the injury as it considers appropriate. Reasonable expenses incurred by the appellant in that connection will be met by the Panel.

Appeals concerning time limits and re-opening of cases

66. The Chairman of the Panel or another adjudicator nominated by him will determine any appeal against a decision taken on a review:

- (a) not to waive the time limit in paragraph 17 (application for compensation) or paragraph 59 (application for review); or
- (b) not to re-open a case under paragraphs 56-57.

Where the appeal concerns a decision not to re-open a case and the application for re-opening was made more than two years after the date of the final decision, the adjudicator must be satisfied that the renewed application can be considered without a need for further extensive enquiries by the Authority.

67. In determining an appeal under the preceding paragraph, the adjudicator will allow the appeal where he considers it appropriate to do so. Where he dismisses the appeal, his decision will be final. Written notification of the outcome of the appeal, giving reasons for the decision, will be sent to the appellant and to the Authority.

68. Where the adjudicator allows an appeal in accordance with the preceding paragraph, he will direct the Authority:

- (a) in a case where the appeal was against a decision not to waive the time limit in paragraph 17, to arrange for the application for compensation to be dealt with under this Scheme as if the time limit had been waived by a claims officer;
- (b) in a case where the appeal was against a decision not to waive the time limit in paragraph 59, to conduct a review under paragraph 60;
- (c) in a case where the appeal was against a decision not to re-open a case, to re-open the case under paragraphs 56-57.

Appeals concerning awards

69. A member of the staff of the Panel may refer for an oral hearing in accordance with paragraphs 72-78 any appeal against a decision taken on a review:

- (a) to withhold an award, including such decision made on reconsideration of an award under paragraphs 53-54; or
- (b) to make an award, including a decision to make a reduced award whether or not on reconsideration of an award under paragraphs 53-54; or
- (c) to seek repayment of an award under paragraph 49.

A request for an oral hearing in such cases may also be made by the Authority.

70. Where a member of the staff of the Panel does not refer an appeal for an oral hearing under the preceding paragraph, he will refer it to an adjudicator. The adjudicator will refer the appeal for determination on an oral hearing in accordance with paragraphs 72-78 where, on the evidence available to him, he considers:

- (a) in a case where the review decision was to withhold an award on the ground that the injury was not sufficiently serious to qualify for an award equal to at least the minimum amount payable under this Scheme, that an award in accordance with this Scheme could have been made; or
- (b) in any other case, that there is a dispute as to the material facts or conclusions upon which the review decision was based and that a different decision in accordance with this Scheme could have been made.

He may also refer the appeal for determination on an oral hearing in accordance with paragraphs 72-78 where he considers that the appeal cannot be determined on the basis of the material before him or that for any other reason an oral hearing would be desirable.

71. Where an appeal is not referred under paragraphs 69 or 70 for an oral hearing, the adjudicator's dismissal of the appeal will be final and the decision taken on the review will stand. Written notification of the dismissal of the appeal, giving reasons for the decision, will be sent to the appellant and to the Authority.

Oral hearing of appeals

72. Where an appeal is referred for determination on an oral hearing, the hearing will take place before at least two adjudicators. Where the referral was made by an adjudicator under paragraph 70, that adjudicator will not take part in the hearing. Subject to the provisions of this Scheme, the procedure to be followed for any particular appeal will be a matter for the adjudicators hearing the appeal.

73. Written notice of the date proposed for the oral hearing will normally be sent to the appellant and the Authority at least 21 days beforehand. Any documents to be submitted to the adjudicators for the purposes of the hearing by the appellant, or by or on behalf of the Authority, will be made available at the hearing, if not before, to the Authority or the appellant respectively.

74. It will be open to the appellant to bring a friend or legal adviser to assist in presenting his case at the hearing, but the costs of representation will not be met by the Authority or the Panel. The adjudicators may, however, direct the Panel to meet reasonable expenses incurred by the appellant and any person who attends to give evidence at the hearing.

75. The procedure at hearings will be as informal as is consistent with the proper determination of appeals. The adjudicators will not be bound by any rules of evidence which may prevent a court from admitting any document or other matter or statement in evidence. The appellant, the claims officer presenting the appeal and the adjudicators may call witnesses to give evidence and may cross-examine them.

76. Hearings will take place in private. The Panel may, however, subject to the consent of the appellant, give permission for the hearing to be attended by observers such as representatives of the press, radio and television. Any such permission will be subject to written undertakings being given:

- (a) that the identity of the appellant and of any other persons appearing at the hearing or referred to during the appeal will be kept confidential and will not be disclosed in any account of the proceedings which is broadcast or in any way published; and
- (b) that no material will be disclosed or in any other way published from which those identities could be discovered.

77. Where the adjudicators adjourn the hearing, they may direct that an interim payment be made. On determining the appeal, the adjudicators will, where necessary, take such direction as they think fit as to the decision to be made by a claims officer on the application for compensation, but any such direction must be in accordance with the relevant provisions of this Scheme. Where they are of the opinion that the appeal was frivolous or vexatious, the adjudicators may reduce the amount of compensation to be awarded by such amount as they consider appropriate. The appellant and the Authority will be informed of the adjudicators' determination of the appeal and the reasons for it, normally at the end of the hearing, but otherwise by written notification as soon as is practicable thereafter.

78. Where an appellant who fails to attend a hearing gives no reasonable excuse for his non-attendance, the adjudicators may determine the appeal in his absence.

Rehearing of appeals

79. Where an appeal is determined in the appellant's absence, he may apply to the Panel in writing for his appeal to be reheard, giving the reasons for his non-attendance. Any such application must be received by the Panel within 30 days of the date of notification to the appellant of the outcome of the hearing which he failed to attend. The Panel will send a copy of the application to the Authority.

80. A member of the staff of the Panel may waive the time limit in the preceding paragraph where he considers that it would be in the interests of justice to do so. Where he does not waive the time limit, he will refer the application to the Chairman of the Panel or to another adjudicator nominated by the Chairman to decide such applications, and a decision by the adjudicator concerned not to waive the time limit will be final. Written notification of the waiver decision will be sent to the appellant and to the Authority, giving reasons for the decision where the time limit is not waived.

81. Where a member of the staff of the Panel considers that there are good reasons for an appeal to be reheard, he will refer it for a rehearing. Where he does not refer it for a rehearing, he will refer the application to the Chairman of the Panel or to another adjudicator nominated by the Chairman to decide such applications, and a decision by the adjudicator concerned not to rehear the appeal will be final. Written notification of the decision on the application for a rehearing will be sent to the appellant and to the Authority, giving reasons for the decision where the application is refused.

82. Where an appeal is to be reheard, the adjudicators who determined the appeal originally will not take part in the rehearing, and paragraphs 64 (onus on appellant), 65 (inspection of injury), and 72-78 (oral hearings) will apply.

Implementation and transitional provisions

83. The provisions of this Scheme come into force on 1 April 1996. All applications for compensation received by the Criminal Injuries Compensation Board (“the Board”) on or after that date will be passed to the Authority to be dealt with under this Scheme.

84. Subject to paragraphs 85-87, applications for compensation received by the Board before 1 April 1996 will be dealt with according to the provisions of the non-statutory Scheme which came into operation on 1 February 1990 (“the old Scheme”), which includes the earlier Schemes mentioned therein insofar as they continue to have effect immediately before 1 April 1996 by virtue of the old Scheme or corresponding provisions in an earlier Scheme.

85. The Board will cease to exist on such date (“the transfer date”) as the Secretary of State may direct. Immediately before the transfer date, the Board will transfer to the Authority all its records of current and past applications.

86. On and after the transfer date, applications required by paragraph 84 to be dealt with according to the provisions of the old Scheme will be so dealt with by the Authority, and:

- (a) any decision authorised under the old Scheme to be made by a Single Member of the Board may be made by a single legally qualified member of the Panel appointed for the purposes of this Scheme;
- (b) any decision authorised under the old Scheme to be made by at least two Members of the Board may be made by at least two legally qualified members of the Panel;
- (c) any decision authorised under the old Scheme to be made by the Chairman of the Board may be made by the Chairman of the Panel.

In this paragraph “legally qualified” means qualified to practise as a solicitor in any part of Great Britain, or as a barrister in England and Wales, or as an advocate in Scotland.

87. On and after the transfer date, any application to re-open a case under paragraph 13 of the old Scheme (or any corresponding provision in any of the earlier Schemes) must be addressed to the Authority, which will deal with it according to the provisions of the old Scheme, applying paragraphs 84 and 86 above as appropriate.

Notes to the Scheme

(see paragraph 8)

Note 1 Definition of Great Britain

- (a) For the purposes of paragraph 8 of this Scheme, an injury is sustained in Great Britain where it is sustained:
 - (i) on a British aircraft, hovercraft or ship (see Note 2); or
 - (ii) on, under or above an installation in a designated area within the meaning of section 1(7) of the Continental Shelf Act 1964 or any waters within 500 metres of such an installation; or
 - (iii) in a lighthouse off the coast of Great Britain.
- (b) For the purposes of paragraph 8 of this Scheme—
 - (i) an injury is sustained in Great Britain where it is sustained in that part of the Channel Tunnel system incorporated into England under section 10 of the Channel Tunnel Act 1987. However, if such an injury is sustained or caused by a non-UK officer acting in the exercise of his functions under the 1993 Order no compensation shall be payable under this Scheme; and

- (ii) any injury caused in the following circumstances shall be treated for the purposes of any application for compensation under this Scheme as if the circumstances giving rise to the claim had occurred in Great Britain-
- (a) an injury sustained by a UK officer acting in the exercise of his functions within French territory under the provisions of the 1993 Order; or
 - (b) an injury caused by a UK officer acting in the exercise of those functions within French territory, other than an injury to any non-UK officer acting in the exercise of his functions.

In this Note “the 1993 Order” means the Channel Tunnel (International Arrangements) Order 1993 (SI 1993/1813) and “officer” has the same meaning as in that Order.

Note 2 Definition of British craft

In Note 1 above:

- (a) “British aircraft” means a British controlled aircraft within the meaning of section 92 of the Civil Aviation Act 1982 (application of criminal law to aircraft), or one of Her Majesty’s aircraft;
- (b) “British hovercraft” means a British controlled hovercraft within the meaning of that section (as applied in relation to hovercraft by virtue of provision made under the Hovercraft Act 1968), or one of Her Majesty’s hovercraft; and
- (c) “British ship” means any vessel used in navigation which is owned wholly by persons of the following descriptions, namely:
 - (i) British citizens, or
 - (ii) bodies corporate incorporated under the law of some part of, and having their principal place of business in, the United Kingdom, or
 - (iii) Scottish partnerships, or one of Her Majesty’s ships.

The references in this Note to Her Majesty’s aircraft, hovercraft or ships are references to aircraft, hovercraft or ships which belong to, or are exclusively used in the service of, Her Majesty in right of the government of the United Kingdom.

Note 3 Illustrative Multipliers

(see paragraph 32)

<i>Years of Loss</i>	<i>Multiplier</i>	<i>Years of Loss</i>	<i>Multiplier</i>
5	5	15	10.5
6	5.5	16	11
7	6	17	11.5
8	7	18	12
9	7.5	19	12.5
10	8	20	13
11	8.5	25	15
12	9	30	16
13	9.5	35	17
14	10	40	18

CRIMINAL INJURIES COMPENSATION SCHEME

Levels of compensation

Level 1	£1,000
Level 2	£1,250
Level 3	£1,500
Level 4	£1,750
Level 5	£2,000
Level 6	£2,500
Level 7	£3,000
Level 8	£3,500
Level 9	£4,000
Level 10	£5,000
Level 11	£6,000
Level 12	£7,500
Level 13	£10,000
Level 14	£12,500
Level 15	£15,000
Level 16	£17,500
Level 17	£20,000
Level 18	£25,000
Level 19	£30,000
Level 20	£40,000
Level 21	£50,000
Level 22	£75,000
Level 23	£100,000
Level 24	£175,000
Level 25	£250,000

TARIFF OF INJURIES

Description of Injury	Levels	Standard Amount £
Bodily functions: hemiplegia (paralysis of one side of the body)	21	50,000
Bodily functions: paraplegia (paralysis of the lower limbs)	24	175,000
Bodily functions: quadriplegia/tetraplegia (paralysis of all 4 limbs)	25	250,000
Brain damage: moderate impairment of social/intellectual functions	15	15,000
Brain damage: serious impairment of social/intellectual functions	20	40,000
Brain damage: permanent - extremely serious (no effective control of functions)	25	250,000
Burns: multiple first degree covering at least 25% of body (For other burn injuries see under individual parts of the body)	19	30,000
Death of viable foetus	10	5,000
Epilepsy: serious exacerbation of pre-existing condition	10	5,000
Epilepsy: fully controlled	12	7,500
Epilepsy: partially controlled	14	12,500
Epilepsy: uncontrolled	20	40,000
Fatal injury - one qualifying claimant	13	10,000
Fatal injury - each qualifying claimant if more than one	10	5,000

Head: burns: minor	3	1,500
Head: burns: moderate	9	4,000
Head: burns: severe	13	10,000
Head: ear: fractured mastoid	1	1,000
Head: ear: temporary partial deafness - lasting 6 to 13 weeks	1	1,000
Head: ear: temporary partial deafness - lasting more than 13 weeks	3	1,500
Head: ear: partial deafness - one ear {remaining hearing socially useful	8	3,500
Head: ear: partial deafness - both ears {with hearing aid if necessary	12	7,500
Head: ear: total deafness - one ear	15	15,000
Head: ear: total deafness - both ears	20	40,000
Head: ear: partial loss of ear(s)	9	4,000
Head: ear: loss of ear	13	10,000
Head: ear: loss of both ears	16	17,500
Head: ear: perforated ear drum	4	1,750
Head: ear: perforated ear drums - both ears	6	2,500
Head: ear: tinnitus (ringing noise in ears) - lasting 6 to 13 weeks	1	1,000
Head: ear: tinnitus - lasting more than 13 weeks	7	3,000
Head: ear: tinnitus - permanent - moderate	12	7,500
Head: ear: tinnitus - permanent - very serious	15	15,000
Head: ear: vestibular damage (giddiness) - lasting 6 to 28 weeks	3	1,500
Head: ear: vestibular damage - lasting over 28 weeks - recovery expected	7	3,000
Head: ear: vestibular damage - permanent	12	7,500
Head: eye: blow out or other fracture of orbital bone cavity containing eyeball - no operation	7	3,000
Head: eye: blow out or other fracture of orbital bone cavity containing eyeball - requiring operation	9	4,000
Head: eye: blurred or double vision - lasting 6 to 13 weeks	1	1,000
Head: eye: blurred or double vision - lasting more than 13 weeks	4	1,750
Head: eye: blurred or double vision - permanent	12	7,500
Head: eye: cataracts one eye - requiring operation	7	3,000
Head: eye: cataracts both eyes - requiring operation	12	7,500
Head: eye: cataracts one eye - permanent/inoperable	12	7,500
Head: eye: cataracts both eyes - permanent/inoperable	16	17,500
Head: eye: corneal abrasions	5	2,000
Head: eye: damage to iris resulting in hyphaema (bleeding in ocular chamber)	6	2,500
Head: eye: damage to irises resulting in hyphaema	11	6,000
Head: eye: damage to retina - not involving detachment	6	2,500
Head: eye: damage to retinas - not involving detachment	10	5,000
Head: eye: detached retina	10	5,000
Head: eye: detached retinas	14	12,500
Head: eye: degeneration of optic nerve	5	2,000
Head: eye: degeneration of optic nerves	10	5,000
Head: eye: dislocation of lens	10	5,000
Head: eye: dislocation of lenses	14	12,500
Head: eye: glaucoma	6	2,500
Head: eye: residual floaters	10	5,000
Head: eye: traumatic angle recession of eye	6	2,500

Head: eye: significant penetrating injury - one eye	6	2,500
Head: eye: significant penetrating injury - both eyes	11	6,000
Head: eye: loss of one eye	18	25,000
Head: eye: loss of both eyes	23	100,000
Head: eye: loss of sight of one eye	17	20,000
Head: eye: loss of sight of both eyes	22	75,000
Head: eye: partial loss of vision - 6/9	12	7,500
Head: eye: partial loss of vision - 6/12	13	10,000
Head: eye: partial loss of vision - 6/24	14	12,500
Head: eye: partial loss of vision - 6/36	15	15,000
Head: eye: partial loss of vision - 6/60	16	17,500
Head: face: burns - minor	5	2,000
Head: face: burns - moderate	10	5,000
Head: face: burns - severe	18	25,000
Head: face: scarring - minor disfigurement	3	1,500
Head: face: scarring - significant disfigurement	8	3,500
Head: face: scarring - serious disfigurement	12	7,500
Head: facial: dislocated jaw	5	2,000
Head: facial: temporary clicking jaw - lasting 6 to 13 weeks	1	1,000
Head: facial: temporary clicking jaw - lasting more than 13 weeks	3	1,500
Head: facial: permanently clicking jaw	10	5,000
Head: facial: fractured ethmoid (bone forming bridge of nose and orbit of eye) - no operation	5	2,000
Head: facial: fractured ethmoid - operation required	9	4,000
Head: facial: fractured malar and/or zygomatic (cheek bones)	5	2,000
Head: facial: fractured mandible and/or maxilla (jaw bones) - no operation - full recovery	7	3,000
Head: facial: fractured mandible and/or maxilla - no operation - continuing disability	10	5,000
Head: facial: fractured mandible and/or maxilla - operation required - full recovery	8	3,500
Head: facial: fractured mandible and/or maxilla - operation required - continuing disability	12	7,500
Head: facial: multiple fractures to face	13	10,000
Head: facial: temporary numbness/loss of feeling, lasting 6 to 13 weeks	1	1,000
Head: facial: temporary numbness/loss of feeling lasting more than 13 weeks - recovery expected	3	1,500
Head: facial: permanent numbness/loss of feeling	9	4,000
Head: nose: deviated nasal septum	1	1,000
Head: nose: deviated nasal septum requiring septoplastomy	5	2,000
Head: nose: undisplaced fracture of nasal bones	1	1,000
Head: nose: displaced fracture of nasal bones	3	1,500
Head: nose: displaced fracture of nasal bones requiring manipulation	5	2,000
Head: nose: displaced fracture of nasal bones requiring rhinoplasty	5	2,000
Head: nose: displaced fracture of nasal bones requiring turbinectomy	5	2,000
Head: nose: partial loss - at least 10%	9	4,000
Head: nose: loss of smell and/or taste - partial	10	5,000
Head: nose: loss of smell or taste	13	10,000

Head: nose: loss of smell and taste	15	15,000
Head: scarring - visible, minor disfigurement	3	1,500
Head: scarring - significant disfigurement	7	3,000
Head: scarring - serious disfigurement	10	5,000
Head: skull: balance impaired - lasting 6 to 28 weeks	3	1,500
Head: skull: balance impaired - lasting over 28 weeks - recovery expected	7	3,000
Head: skull: balance impaired - permanent	12	7,500
Head: skull: concussion - lasting at least one week	3	1,500
Head: skull: simple fracture - no operation	6	2,500
Head: skull: depressed fracture - no operation	9	4,000
Head: skull: depressed fracture - requiring operation	11	6,000
Head: skull: subdural or extra dural haematoma - treated conservatively	9	4,000
Head: skull: subdural or extra dural haematoma - requiring evacuation	12	7,500
Head: skull: post traumatic epileptic fits - full recovery	5	2,000
Head: skull: brain haemorrhage - full recovery	9	4,000
Head: skull: brain haemorrhage - residual minor impairment of social/intellectual functions	12	7,500
Head: skull: stroke - full recovery	10	5,000
Head: teeth: fractured/chipped tooth/teeth requiring treatment	1	1,000
Head: teeth: chipped front teeth requiring crown	1	1,000
Head: teeth: fractured tooth/teeth requiring crown	1	1,000
Head: teeth: fractured tooth/teeth requiring apicectomy (surgery to gum to reach root - root resection)	5	2,000
Head: teeth: damage to tooth/teeth requiring root-canal treatment	1	1,000
Head: teeth: loss of crowns	2	1,250
Head: teeth: loss of one front tooth	3	1,500
Head: teeth: loss of two or three front teeth	5	3,000
Head: teeth: loss of four or more front teeth	7	3,000
Head: teeth: loss of one tooth other than front	1	1,000
Head: teeth: loss of two or more teeth other than front	3	1,500
Head: teeth: slackening of teeth requiring dental treatment	1	1,000
Head: tongue: impaired speech - slight	5	2,000
Head: tongue: impaired speech - moderate	10	5,000
Head: tongue: impaired speech - serious	13	10,000
Head: tongue: impaired speech - severe	16	17,500
Head: tongue: loss of speech - permanent	19	30,000
Head: tongue: loss of tongue	20	40,000
Lower limbs: burns - minor	3	1,500
Lower limbs: burns - moderate	9	4,000
Lower limbs: burns - severe	13	10,000
Lower limbs: fractured or dislocated ankle - full recovery	7	3,000
Lower limbs: fractured or dislocated ankle - continuing disability	10	5,000
Lower limbs: fractured or dislocated ankles - full recovery	12	7,500
Lower limbs: fractured or dislocated ankles - continuing disability	13	10,000
Lower limbs: fractured femur (thigh bone) - full recovery	7	3,000
Lower limbs: fractured femur - continuing disability	10	5,000

Lower limbs: fractured femur - both legs - full recovery	12	7,500
Lower limbs: fractured femur - both legs - continuing disability	13	10,000
Lower limbs: fractured fibula (slender bone from knee to ankle) - full recovery	7	3,000
Lower limbs: fractured fibula - continuing disability	10	5,000
Lower limbs: fractured fibula - both legs - full recovery	12	7,500
Lower limbs: fractured fibula - both legs - continuing disability	13	10,000
Lower limbs: fractured great toe	6	2,500
Lower limbs: fractured great toe - both feet	10	5,000
Lower limbs: fractured phalanges (toes)	3	1,500
Lower limbs: fractured heel bone - full recovery	6	2,500
Lower limbs: fractured heel bone - continuing disability	10	5,000
Lower limbs: fractured heel bone - both feet - full recovery	10	5,000
Lower limbs: fractured heel bone - both feet - continuing disability	13	10,000
Lower limbs: fractured patella (knee cap) - full recovery	12	7,500
Lower limbs: fractured patella - continuing disability	13	10,000
Lower limbs: fractured patella - both legs - full recovery	15	15,000
Lower limbs: fractured patella - both legs - continuing disability	17	20,000
Lower limbs: dislocated patella - one leg - full recovery	1	1,000
Lower limbs: dislocated patella - one leg - continuing disability	10	5,000
Lower limbs: dislocated patella - both legs - full recovery	5	2,000
Lower limbs: dislocated patella - both legs - continuing disability	16	17,500
Lower limbs: arthroscopy (investigative surgery/repair to knees) - no fracture	5	2,000
Lower limbs: fractured metatarsal bones - full recovery	6	2,500
Lower limbs: fractured metatarsal bones - continuing disability	12	7,500
Lower limbs: fractured metatarsal bones - both feet - full recovery	10	5,000
Lower limbs: fractured metatarsal bones - both feet - continuing disability	15	15,000
Lower limbs: fractured tarsal bones - full recovery	6	2,500
Lower limbs: fractured tarsal bones - continuing disability	12	7,500
Lower limbs: fractured tarsal bones - both feet - full recovery	10	5,000
Lower limbs: fractured tarsal bones - both feet - continuing disability	15	15,000
Lower limbs: fractured tibia (shin bone) - full recovery	7	3,000
Lower limbs: fractured tibia - continuing disability	10	5,000
Lower limbs: fractured tibia - both legs - full recovery	12	7,500
Lower limbs: fractured tibia - both legs - continuing disability	13	10,000
Lower limbs: paralysis of leg	18	25,000
Lower limbs: loss of leg below knee	19	30,000
Lower limbs: loss of leg above knee	20	40,000
Lower limbs: loss of both legs	23	100,000
Lower limbs: minor damage to tendon(s)/ligament(s) - full recovery	1	1,000
Lower limbs: minor damage to tendon(s)/ligament(s) - both legs - full recovery	5	2,000
Lower limbs: minor damage to tendon(s)/ligament(s) - continuing disability	7	3,000
Lower limbs: minor damage to tendon(s)/ligament(s) - both legs - continuing disability	10	5,000
Lower limbs: moderate damage to tendon(s)/ligament(s) - full recovery	5	2,000
Lower limbs: moderate damage to tendon(s)/ligament(s) - both legs - full recovery	9	4,000
Lower limbs: moderate damage to tendon(s)/ligament(s) - continuing disability	10	5,000
Lower limbs: moderate damage to tendon(s)/ligament(s) - both legs - continuing disability	13	10,000

Lower limbs: severe damage to tendon(s)/ligament(s) - full recovery	7	3,000
Lower limbs: severe damage to tendon(s)/ligament(s) - both legs - full recovery	11	6,000
Lower limbs: severe damage to tendon(s)/ligament(s) - continuing disability	12	7,500
Lower limbs: severe damage to tendon(s)/ligament(s) - both legs - continuing disability	15	15,000
Lower limbs: scarring - minor disfigurement	2	1,250
Lower limbs: scarring - significant disfigurement	4	1,750
Lower limbs: scarring - serious disfigurement	10	5,000
Lower limbs: sprained ankle - disabling for at least 6 to 13 weeks	1	1,000
Lower limbs: sprained ankle - disabling for more than 13 weeks	6	2,500
Lower limbs: sprained ankle - both feet - disabling for at least 6 to 13 weeks	5	2,000
Lower limbs: sprained ankle - both feet - disabling for more than 13 weeks	8	3,500
Medically recognised illness/condition (not psychiatric or psychological)		
Moderately disabling disorder where the symptoms and disability persist for more than 6 weeks from the incident/date of onset		
lasting 6 to 13 weeks	1	1,000
lasting up to 28 weeks	5	2,000
lasting over 28 weeks - not permanent	7	3,000
permanent disability	12	7,500
Significantly disabling disorder where the symptoms and disability persist for more than 6 weeks from the incident/date of onset		
lasting 6 to 13 weeks	1	1,000
lasting up to 28 weeks	9	4,000
lasting over 28 weeks - not permanent	12	7,500
permanent disability	17	20,000
Minor injuries: multiple (see notes)	1	1,000
Neck: burns - minor	3	1,500
Neck: burns - moderate	9	4,000
Neck: burns - severe	13	10,000
Neck: scarring - minor disfigurement	3	1,500
Neck: scarring - significant disfigurement	7	3,000
Neck: scarring - serious disfigurement	9	4,000
Neck: strained neck - disabling for 6 to 13 weeks	1	1,000
Neck: strained neck - disabling for more than 13 weeks	4	1,750
Neck: strained neck - seriously disabling - not permanent	10	5,000
Neck: strained neck - seriously disabling - permanent	13	10,000
Neck: whiplash injury - effects lasting 6 to 13 weeks	1	1,000
Neck: whiplash injury - effects lasting more than 13 weeks	4	1,750
Neck: whiplash injury - seriously disabling - not permanent	10	5,000
Neck: whiplash injury - seriously disabling - permanent	13	10,000
Neck: fractured hyoid (bone in windpipe)	1	1,000
Peripheral sensory nerve damage - lasting more than 13 weeks - recovery expected	1	1,000

Peripheral sensory nerve damage - permanent disability - significant loss (eg loss of sensation in large area of leg)	7	3,000
Peripheral sensory nerve damage - permanent disability - serious (eg loss of sensation of hand)	12	7,500
Physical abuse of children (where individual injuries do not otherwise qualify)		
Minor abuse - isolated or intermittent assault(s) beyond ordinary chastisement resulting in bruising, weals, hair pulled from scalp etc.	1	1,000
Serious abuse - intermittent physical assaults resulting in an accumulation of healed wounds, burns or scalds, but with no appreciable disfigurement	5	2,000
Severe abuse - pattern of systematic violence against the child resulting in minor disfigurement	7	3,000
Persistent pattern of severe abuse over a period exceeding 3 years	11	6,000
Sexual abuse of children (not otherwise covered by sexual assault)		
Minor isolated incidents - non-penetrative indecent acts	1	1,000
Pattern of serious abuse - repetitive, frequent non-penetrative indecent acts	5	2,000
Pattern of severe abuse - repetitive, frequent indecent acts involving digital or other non-penile penetration and/or oral-genital contact	7	3,000
Pattern of severe abuse over a period exceeding 3 years	11	6,000
Repeated non-consensual vaginal and/or anal intercourse over a period up to 3 years	13	10,000
Repeated non-consensual vaginal and/or anal intercourse over a period exceeding 3 years	16	17,500
Sexual assault (single incident - victim any age)		
Minor indecent assault - non-penetrative indecent physical act over clothing	1	1,000
Serious indecent assault - non-penetrative indecent act under clothing	5	2,000
Severe indecent assault - indecent act involving digital, or other non-penile penetration, and/or oral-genital contact	7	3,000
Non-consensual vaginal and/or anal intercourse	12	7,500
Non-consensual vaginal and/or anal intercourse by two or more attackers	13	10,000
Non-consensual vaginal and/or anal intercourse with other serious bodily injuries	16	17,500
Shock (see notes as well)		
Disabling, but temporary mental anxiety, medically verified	1	1,000
Disabling mental disorder, confirmed by psychiatric diagnosis:		
lasting up to 28 weeks	6	2,500
lasting over 28 weeks to one year	9	4,000
lasting over one year but not permanent	12	7,500
Permanently disabling mental disorder confirmed by psychiatric prognosis	17	20,000
Torso: back: fracture of vertebra - full recovery	6	2,500
Torso: back: fracture of vertebra - continuing disability	10	5,000
Torso: back: fracture of more than one vertebra - full recovery	9	4,000
Torso: back: fracture of more than one vertebra - continuing disability	12	7,500
Torso: back: prolapsed intervertebral disc(s) - seriously disabling - not permanent	10	5,000
Torso: back: prolapsed intervertebral disc(s) - seriously disabling - permanent	12	7,500

Torso: back: ruptured intervertebral disc(s) requiring surgical removal	13	10,000
Torso: back: strained back - disabling for 6 to 13 weeks	1	1,000
Torso: back: strained back - disabling for more than 13 weeks	6	2,500
Torso: back: strained back - seriously disabling - not permanent	10	5,000
Torso: back: strained back - seriously disabling - permanent	12	7,500
Torso: burns - minor	3	1,500
Torso: burns - moderate	9	4,000
Torso: burns - severe	13	10,000
Torso: punctured lung	7	3,000
Torso: two punctured lungs	11	6,000
Torso: collapsed lung	8	3,500
Torso: two collapsed lungs	12	7,500
Torso: permanent and disabling damage to lungs from smoke inhalation	10	5,000
Torso: loss of spleen	9	4,000
Torso: damage to testes	4	1,750
Torso: dislocated acromio clavicular joint	5	2,000
Torso: dislocated hip - full recovery	4	1,750
Torso: dislocated hip - continuing disability	12	7,500
Torso: fractured hip	12	7,500
Torso: dislocated shoulder - full recovery	4	1,750
Torso: dislocated shoulder - continuing disability	10	5,000
Torso: fractured rib	1	1,000
Torso: fractured rib(s) - two or more	3	1,500
Torso: fractured clavicle (collar bone)	5	2,000
Torso: two fractured clavicles	10	5,000
Torso: fractured coccyx (tail bone)	6	2,500
Torso: fractured pelvis	12	7,500
Torso: fractured scapula (shoulder blade)	6	2,500
Torso: two fractured scapula	11	6,000
Torso: fractured sternum (breast bone)	6	2,500
Torso: frozen shoulder	8	3,500
Torso: hernia	8	3,500
Torso: hernias	11	6,000
Torso: injury requiring laparotomy	8	3,500
Torso: injury requiring laparotomy, including removal or repair of multiple organs	17	20,000
Torso: injury requiring thoracotomy	12	7,500
Torso: injury to genitalia requiring medical treatment - no permanent damage	4	1,750
Torso: injury to genitalia requiring medical treatment - permanent damage	10	5,000
Torso: loss of fertility	21	50,000
Torso: loss of kidney	17	20,000
Torso: loss of testicle	10	5,000
Torso: scarring - minor disfigurement	2	1,250
Torso: scarring - significant disfigurement	6	2,500
Torso: scarring - serious disfigurement	10	5,000
Upper limbs: burns - minor	3	1,500
Upper limbs: burns - moderate	9	4,000
Upper limbs: burns - severe	13	10,000

Upper limbs: dislocated/fractured elbow - full recovery	7	3,000
Upper limbs: dislocated/fractured elbow - continuing disability	12	7,500
Upper limbs: two dislocated/fractured elbows - full recovery	12	7,500
Upper limbs: two dislocated/fractured elbows - continuing disability	13	10,000
Upper limbs: dislocated finger(s) or thumb - one hand - full recovery	2	1,250
Upper limbs: dislocated finger(s) or thumb - one hand - continuing disability	6	2,500
Upper limbs: dislocated finger(s) or thumb - both hands - full recovery	7	3,000
Upper limbs: dislocated finger(s) or thumb - both hands - continuing disability	12	7,500
Upper limbs: fractured finger(s) or thumb - one hand - full recovery	3	1,500
Upper limbs: fractured finger(s) or thumb - one hand - continuing disability	8	3,500
Upper limbs: fractured finger(s) or thumb - both hands - full recovery	9	4,000
Upper limbs: fractured finger(s) or thumb - both hands - continuing disability	12	7,500
Upper limbs: fractured hand - full recovery	5	2,000
Upper limbs: fractured hand - continuing disability	10	5,000
Upper limbs: two fractured hands - full recovery	8	3,500
Upper limbs: two fractured hands - continuing disability	12	7,500
Upper limbs: fractured humerus (upper arm bone) - full recovery	7	3,000
Upper limbs: fractured humerus - continuing disability	10	5,000
Upper limbs: fractured humerus - both arms - full recovery	12	7,500
Upper limbs: fractured humerus - both arms - continuing disability	13	10,000
Upper limbs: fractured radius (smaller forearm bone) - full recovery	7	3,000
Upper limbs: fractured radius - continuing disability	10	5,000
Upper limbs: fractured radius - both arms - full recovery	12	7,500
Upper limbs: fractured radius - both arms - continuing disability	13	10,000
Upper limbs: fractured ulna (inner forearm bone) - full recovery	7	3,000
Upper limbs: fractured ulna - continuing disability	10	5,000
Upper limbs: fractured ulna - both arms - full recovery	12	7,500
Upper limbs: fractured ulna - both arms - continuing disability	13	10,000
Upper limbs: fractured or dislocated wrist - including scaphoid fracture - full recovery	7	3,000
Upper limbs: fractured or dislocated wrist - including scaphoid fracture - continuing disability	11	6,000
Upper limbs: two fractured or dislocated wrists - including scaphoid fracture - full recovery	11	6,000
Upper limbs: two fractured or dislocated wrists - including scaphoid fracture - continuing disability	13	10,000
Upper limbs: fractured wrist - colles type - full recovery	9	4,000
Upper limbs: fractured wrist - colles type - continuing disability	12	7,500
Upper limbs: two fractured wrists - colles type - full recovery	12	7,500
Upper limbs: two fractured wrists - colles type - continuing disability	13	10,000
Upper limbs: partial loss of finger other than thumb/index - one joint	6	2,500
Upper limbs: partial loss of thumb or index finger - one joint	9	4,000
Upper limbs: loss of one finger other than index	10	5,000
Upper limbs: loss of index finger	12	7,500
Upper limbs: loss of two or more fingers	13	10,000
Upper limbs: loss of thumb	15	15,000
Upper limbs: loss of hand	20	40,000
Upper limbs: loss of both hands	23	100,000
Upper limbs: loss of arm	20	40,000
Upper limbs: loss of both arms	23	100,000

Upper limbs: paralysis of arm	19	30,000
Upper limbs: paralysis of both arms	22	75,000
Upper limbs: permanently & seriously impaired grip - one arm	12	7,500
Upper limbs: permanently & seriously impaired grip - both arms	15	15,000
Upper limbs: scarring - minor disfigurement	2	1,250
Upper limbs: scarring - significant disfigurement	6	2,500
Upper limbs: scarring - serious disfigurement	9	4,000
Upper limbs: minor damage to tendon(s)/ligament(s) - full recovery	1	1,000
Upper limbs: minor damage to tendon(s)/ligament(s) - continuing disability	7	3,000
Upper limbs: moderate damage to tendon(s)/ligament(s) - full recovery	5	2,000
Upper limbs: moderate damage to tendon(s)/ligament(s) - continuing disability	10	5,000
Upper limbs: severely damaged tendon(s)/ligament(s) - full recovery	7	3,000
Upper limbs: severely damaged tendon(s)/ligament(s) - continuing disability	12	7,500
Upper limbs: sprained wrist - disabling for 6 to 13 weeks	1	1,000
Upper limbs: sprained wrist - disabling for more than 13 weeks	3	1,500
Upper limbs: two sprained wrists - disabling for 6 to 13 weeks	5	2,000
Upper limbs: two sprained wrists - disabling for more than 13 weeks	7	3,000

Notes to the Tariff

1. Minor multiple injuries will only qualify for compensation where the applicant has sustained at least three separate injuries of the type illustrated below, at least one of which must still have had significant residual effects six weeks after the incident. The injuries must also have necessitated at least two visits to or by a medical practitioner within that six-week period. Examples of qualifying injuries are:

- (a) grazing, cuts, lacerations (no permanent scarring)
- (b) severe and widespread bruising
- (c) severe soft tissue injury (no permanent disability)
- (d) black eye(s)
- (e) bloody nose
- (f) hair pulled from scalp
- (g) loss of fingernail

2. Shock or 'nervous shock' may be taken to include conditions attributed to post-traumatic stress disorder, depression and similar generic terms covering:

(a) such psychological symptoms as anxiety, tension, insomnia, irritability, loss of confidence, agoraphobia and pre-occupation with thoughts of guilt or self-harm; and

(b) related physical symptoms such as alopecia, asthma, eczema, enuresis and psoriasis. Disability in this context will include impaired work (or school) performance, significant adverse effects on social relationships and sexual dysfunction.