*The information and data provided is for the first two years of the Commission, from 1 March 2021 to 1 March 2023.

Item	Data/Information requested	Personal Injury Commission response
1	Confirm central registry for divisions	The Personal Injury Commission (the Commission) central registry was established on 1 March 2021 when the Commission opened its doors and began providing dispute resolution services to injured people and tribunal users in NSW. The registry is led by a Principal Registrar and comprises 5 directorates: Registry and Dispute Services; Medical Services; Legal and Policy; Finance and Organisational Performance; and Digital Transformation. On 1 March 2023, there were 151 staff employed in the registry. Please see Annual Review 2021-22, pp 34 to 41 for further information.
2	Confirm whether the Commission has used the COAT Framework to conduct self-assessment of practices and processes. If so, what was the outcome of the assessment?	The Council of Australasian Tribunals' (COAT) Australian and New Zealand Tribunal Excellence Framework (June 2017) (Framework) has informed the structure and design, Rules, procedures and operations of the Commission. The Commission has a strong commitment to tribunal excellence and continuous improvement and performs well against the measures contained in the Framework. It is worth noting that the Commission's President Judge Philips is the NSW Convenor of COAT and is a member of the COAT National Executive, Ms Marie Johns Division Head Motor Accidents is on the NSW COAT Committee and our Members are active COAT members and participants in conferences and events. Commission's performance in the eight areas of tribunal excellence

practice of Motor Accidents Assessors both practising in the jurisdiction and being decision makers. Members in the Motor Accidents Division became fully independent decision-makers in the new tribunal. This mirrored the long standing position in the former Workers Compensation Commission.

2. Leadership and Effective Management - The Executive Leadership Team (ELT) is committed to the principle that: "Strong leadership within a tribunal requires the creation of a highly professional management group which is able to focus on innovation and continuous improvement as well as anticipate changes in society which may influence demands within the tribunal."

The ELT formally meets fortnightly and members frequently confer about issues of importance. The ELT is chaired by the President, and it is comprised of both Division Heads and the Principal Registrar.

- 3. Fair treatment The Commission's mission is to: "deliver just, quick, cost-effective outcomes for injured people, employers, and insurers, in a way that is responsive, timely, fair, consistent and of the highest quality, with as little formality as possible." The Commission is well respected for the quality of its decision making and low appeal rates and reports on this each year in its Annual Review. Please also see responses to items 16–19, 23–24.
- 4. Accessibility The Commission's Access Charter is aligned to the principles in the Framework. The Commission has also made significant inroads in its Venue Spaces Project (on-line dispute resolution events) improving access for all tribunal users across NSW. Please also see response to item 4.
- 5. **Professionalism and Integrity** The Commission has a mature and professional merit selection process for Members, Mediators and Medical

¹ Council of Australasian Tribunals' (COAT) Australian and New Zealand Tribunal Excellence Framework (June 2017), p 14.

² Annual Review 2021-2022, Strategic Plan, p 18.

Assessors, performance and quality assurance mechanisms in place and conducts annual appraisals for Members and Mediators. The Commission's appointment processes are guided by COAT's *Best Practice Guide to Tribunal Independence in Appointments*. These systems and processes will continue to mature in future years.

- 6. Accountability The Commission is committed to the objects of the *Personal Injury Commission Act 2020* (Act) and being open, transparent and accountable to the community it serves. It has a number of effective mechanisms to ensure accountability, including:
 - an effective complaints mechanism ensuring that the public's expectations of decision-makers and staff are met
 - regular stakeholder group meetings and community engagement
 - development of key performance indicators
 - reporting tribunal performance annually through an Annual Review.

Please also see responses to items 3, 7, 25 and 26 for further information.

7. Efficiency - The Commission is working to improve efficiency in its dispute resolution services, and openly acknowledges there is room for improvement. The Commission is still a young organisation and committed to continuous improvement. It has also had to contend with a significant backlog of Motor Accidents medical disputes caused by the COVID-19 pandemic. Please see Personal Injury Commission News Editions 41 and 45 which describe the great progress being made in resolving our medical backlogs.

Each Division also operates different dispute resolution models. The Workers Compensation dispute model is more efficient and cost effective than the Motor Accidents Model at this time.

8. Client Needs and Satisfaction - The Commission has a comprehensive stakeholder engagement program in place and will commence surveying tribunal

		users once the Commission has a more stable operating environment as noted above. The Commission plans to undertake a formal self-assessment in 2024 (its 4th year) once the Commission has stabilised its operations and cleared the pandemic-related medical dispute backlog.
	tive B: Ensure Commission is: (i) accidispute resolution	essible, professional and responsive, (ii) open and transparent, (iii) encourages
Item	Data/Information Sought	Personal Injury Commission response
3	What processes and mechanisms are in place that allow the Commission to obtain customer feedback and/or complaints and understand the customer experience.	The Commission is committed to reducing process trauma for injured people navigating the current disputes system and considers all tribunal users – injured people, employers, insurers, legal practitioners etc – in the design of its systems and procedures. The Commission has a wide variety of mechanisms in place to engage with its stakeholders and tribunal users to obtain their feedback. It has multiple standing reference groups and meets with stakeholders regularly to provide updates, consult on key issues, gather feedback and answer questions. Please also see response to item 7 on stakeholder engagement. Tribunal user feedback and engagement has been central in the design of the new Pathway single digital platform which will be rolled out end May/June 2023 for Motor Accidents and later in the year for Workers Compensation. Detailed user personas were developed to inform the design of the new platform and tribunal users have participated in showcase events and user acceptance testing so that their feedback could be incorporated into the development of the platform. The Commission has a formal Complaints Policy, systems and processes for managing complaints and examining what we can learn and improve on from the complaints received. The number and type of complaints received by the Commission are outlined in response to items 25 and 26. Informal feedback received through the Commission's various channels is also carefully considered and actioned.

		As noted above, the Commission will commence surveying tribunal users once the Commission has stabilised.
4	Information on the development, implementation and effectiveness of the Commission's Access Charter.	The Commission's Access Charter was developed in preparation for the commencement of the Commission on 1 March 2021 having regard to the objects of the Act. The Charter's intent was to meet the needs of tribunal users and was an amalgamation of previous policies that existed within the two legacy organisations (the former Workers Compensation Commission (WCC) and SIRA's Dispute Resolution Service (DRS)).
		It is important to note that the Commission came into existence during the height of the COVID-19 pandemic which led to rapid changes in service delivery and how services were accessed by tribunal users. The Commission's digital platforms and portals were enhanced to allow for a dispute to progress from filing to finalisation entirely digitally. Dispute resolution events could also be dealt with entirely on-line, except for physical medical examinations which were paused for a total period of 9-10 months during the pandemic following public health orders. The Commission's digital transformation over its first two years in operation resulted in an overall increase in accessibility for all tribunal users and these principles were embedded into the Commission's strategic objectives and ongoing service delivery.
		Implementation and Effectiveness In order to assess the effectiveness of the Commission's Access Charter, it is necessary to address each of its five components: 1. Information and Communication 2. Self-represented parties 3. Service to regional and rural communities 4. Culturally and linguistically diverse people 5. People with disabilities

1. Information and communication

The Commission will provide clients with clear and easy access to information about the Commission and the progress of their case.

The Commission has several ways in which tribunal users are provided with clear and easy access to information about the Commission and their individual matters. Some of these activities are:

- The Commission's website contains easy to access information about the Commission, its dispute pathways and processes. The Commission's upcoming website project will refresh the Commission's website's content, including adding explainer videos and enhancing its accessibility features
- The Commission regularly publishes helpful information on the Commission and changes in Rules and procedures in the *Personal Injury Commission* News
- Regular and informative information is provided to a party's legal representative or, in the case of a self-represented party, directly with that self-represented person throughout the duration of the dispute
- Members and decision-makers use simple language in their communications with the parties during proceedings
- In order to ensure that decisions are consistent and of a high standard in accordance with its statutory obligations, the Commission has developed a Style Guide which Members use to ensure that all decisions are consistent in style and approach. For example, it encourages the use of plain accessible and simple English, the choice of words appropriate to the reader, and the avoidance of legalisms and Latin
- Large print formats of publications and documents are available upon request, while all of the Commission's written decisions utilise line spacing which is in accordance with accessibility guidelines
- The Commission sends SMS messages to injured claimants and workers who are required to attend medical assessments as an informative tool

2. Self-represented Parties

The Commission recognises its responsibility to parties who choose not to be represented by a lawyer or agent, and in particular self-represented workers and claimants.

Self-represented parties comprise of 0.1% and 3% of total disputes across workers compensation and motor accidents disputes respectively. While there is a low level of self-representation, the Commission ensures that self-represented parties understand the dispute process through the following mechanisms:

- Providing self-represented parties with information about where to obtain legal representation and assistance
- Explaining the filing requirements and procedures of commencing proceedings with the Commission
- Assigning a senior staff member to case manage a dispute involving a selfrepresented claimant or worker and support the person through the disputes process
- Providing additional communication via phone and email to explain a dispute resolution process prior to the event
- Members explaining the conference or hearing process and the impact of any decision in plain English directly or through an interpreter
- Members having a statutory obligation to use their best efforts to assist the parties to resolve a dispute and ensure the self-represented party has the opportunity to resolve or litigate the claim
- Clearly explaining appeal or review rights to a self-represented party.

3. Service to regional and rural communities

The Commission is committed to high levels of service throughout New South Wales.

The Commission is dedicated to providing its services to the people of New South Wales, regardless of where they are located. The Commission takes seriously its obligation to ensure that it is accessible to everyone by providing virtual or hybrid channels or holding dispute resolution events physically within the regions. Some of the key initiatives the Commission undertakes include:

- Providing digital channels to access its services and where dispute applications can be lodged and managed. This will be further enhanced through Pathway, the Commission's new single digital case management platform
- Undertaking the Commission's Venue Spaces Project, where a single digital platform, Microsoft Office Teams (MS Teams), was adopted for all dispute resolution proceedings (except physical medical examinations). This ensured that regional and rural users could access the Commission during the pandemic and beyond, reducing the need for travel and its associated costs.
- The Commission's premises was fit out with AVL technology in its hearing rooms and Members' chambers, to allow them to continue to hear matters via MS Teams
- Recently recommencing in-person dispute resolution events in the regions, with hearings being held in Byron Bay and Newcastle. The Commission will also establish a small network of regional venues to conduct in-person dispute resolution events across the State
- A cohort of 11 Members and 9 Mediators are based in regional areas to facilitate the delivery of regional services. Furthermore, 72 Medical Assessors service regional NSW, including 31 Medical Assessors who conduct physical assessments in regional areas and 41 psychiatric Medical Assessors who complete psychiatric assessments via video conference to anywhere in NSW, with 7 of those conducting assessments physically in regional areas
- The Commission commenced a pilot of a fit-for-purpose space within the Dubbo Service NSW Centre on 1 March 2023 to conduct hybrid dispute resolution events
- The Commission's intention is to expand upon this work through the creation of several such spaces in partnership with Service NSW. Please see Edition 44 of the Personal Injury Commission News for more information.
- Regularly engaging with the Law Society of NSW, Regional Law Society Presidents and NSW Bar Association and addressing legal forums, such as

the UNSW Personal Injury Intensive, COAT Conferences, and Legalwise Seminars to promote its regional venue spaces strategy and services.

4. Culturally and linguistically diverse people

The Commission is conscious of the impact of cultural diversity on participation in proceedings, and how cultural factors impact on the way in which parties view the legal process.

The Commission is conscious of and takes into consideration the needs of culturally and linguistically diverse people. Some of the steps taken by the Commission are:

- Having a diverse workforce with 23.5% of staff having a CALD background.
- The provision of interpreters free of charge for parties that require interpreter services. The Commission has used interpreters on 4,292 occasions across different dispute resolution event types
- Approving appropriate requests for certain medical assessors pursuant to injured parties' cultural/religious preferences. For example, providing samesex medical assessors
- Ensuring staff and decision makers are culturally sensitive in their handling of disputes

5. People with disabilities

The Commission will endeavour to provide appropriate facilities to enable parties with a disability to participate fully in any proceedings.

The Commission has ensured that accessibility standards have been met or exceeded in its physical premises, and also provides services through its digital channels to allow persons with disabilities to access its services and operations. Some of the key activities undertaken in this space are:

- Ensuring that all accessibility standards were met in the fit-out of the Commission's new offices, medical suites and hearing rooms.
- Placing the injured person at the centre of the design process for the configuration of the Commission's medical suites. There are accessible features including extra wide corridors, a wheelchair-accessible bathroom

		 and large medical suites to enable a support person to attend a medical assessment. Conducting dispute resolution events online via MS Teams, limiting the need for injured people to travel Re-designing the Commission's website to ensure that accessibility is enhanced (planned for 2023-24) Online examinations with the Commission's psychiatrists. This was a necessity during COVID but has proven to be successful so it has been maintained.
5	What outcome data is the Commission capturing on the outcome of disputes? What information will the Commission publish with regard to dispute outcomes and within what timeframes? If no data is being captured yet, what data would the Commission consider capturing and when would this be published?	The Commission captures a complex range of outcome data, including overall outcomes that identify how each dispute is finalised, e.g. Determined (Decision issued), Settled, Withdrawn or Dismissed. Other outcome data is dispute and scheme specific. For example, in motor accident medical disputes, data is captured regarding the degree of whole person impairment (WPI) for threshold injury disputes, and the degree of WPI for each injury. This level of data is not captured for medical disputes in workers compensation. The Commission has published high-level annual data regarding Motor Accidents Damages Assessment outcomes, Workers Compensation Form 2 outcomes, and Work Injury Damages outcomes in its last two Annual Reviews. Please also see pp. 50-52 of the Annual Review 2021-22.
		 The Commission intends to continue to publish this data each year, and to also report on its Key Performance Indicators (KPIs) in its next Annual Review. This will capture the following outcome data: The proportion of WC Applications for Mediation which proceed to mediation being settled The proportion of WC Applications to Resolve a Dispute settled by the Commission The proportion of MA Damages Assessment disputes settled by the Commission

		 The proportion of WC Member Decisions revoked on appeal The proportion of MA Medical Assessor Decisions revoked on review The proportion of WC Medical Assessor Decisions revoked on appeal
6	Does the Commission use Dispute Resolution Officers to try and resolve disputes before assessment? Are there any other mechanisms in place to help the parties come to agreement without need for assessment?	The role of a Dispute Resolution Officer (DRO) does not exist in the Personal Injury Commission nor did it exist in the previous CTP dispute services, being the Claims Assessment Resolution Service (CARS) and Medical Assessment Service (MAS). The DRO role was introduced in the former DRS as it was considered necessary in order to navigate the many changes arising as a result of the commencement of the <i>Motor Accident Injuries Act 2017</i> (MAI Act). These included the introduction of a hybrid scheme of statutory benefits disputes while retaining common law damages. In addition, the MAI Act introduced a significant increase in the number of dispute types to be determined by the DRS noting that under the <i>Motor Accidents Compensation Act 1999</i> (MAC Act) there are two types of damages disputes and three types of medical assessment disputes. At the time the MAI Act was introduced, in addition to damages assessments, an additional 47 dispute types were added.
		The DRO therefore played an important role in assisting DRS users in identifying the relevant dispute type including defining the issues in dispute prior to the allocation of the matter to a DRS decision-maker. They did not provide an alternative dispute resolution mechanism.
		The structure and viability of the roles within the DRS underwent a review prior to the establishment of the Personal Injury Commission (as did the Workers Compensation Commission) and it was determined that the role of a DRO was no longer necessary within the Personal Injury Commission as an independent tribunal, consisting of Members and other decision makers (Mediators, Merit reviewers and Medical Assessors).
		The mechanisms in place in the Commission to assist parties in coming to an early resolution of their disputes vary within each Division. The Commission largely

adopted the existing procedures in place over both the Motor Accidents and Workers Compensation schemes, with the view of eventual harmonisation. It is to be noted that the enabling legislation in both workers compensation and motor accidents was not amended by the Act. The respective dispute models remained unchanged.

In the Workers Compensation Division, the bulk of the Commission's disputes regarding weekly compensation, medical expenses and/or lump sum compensation or benefits (Form 2/2D) are first allocated to a Member for a Preliminary Conference (or Expedited Assessment for smaller claims for weekly compensation or medical expenses). The Preliminary Conference is also scheduled in Motor Accidents Damages Assessments, and some merit review and miscellaneous claims matters. The Preliminary Conference is a quick and effective first step to bringing parties together to engage in resolution of their dispute, where the Member uses skills to help the parties to identify the real issues in the dispute, explore settlement options and outcomes, and attempt to find a solution acceptable to all parties. Many of the Commission's matters can settle after the Preliminary Conference. It should be noted that Motor Accident Damages matters, where appropriate, can require more than one Preliminary Conference.

In Workers Compensation disputes, if a matter is not resolved at Preliminary Conference, the parties will meet again on a date set by the Member for a mandatory Conciliation (see Part 5, Sch 3, Clause 6 of the Act) and/or proceed to a determination by Arbitration if it cannot resolve. There is no legislated requirement for a Conciliation process in Motor Accident matters. Rather, during the course of the Damages Assessment conference, the Member will provide the parties with an opportunity to explore settlement of the matter.

The main point of difference is that Motor Accidents medical disputes (including treatment and care, whole person impairment and threshold disputes) require a mandatory referral to a Medical Assessor for medical assessment without an opportunity for parties to engage in early alternative dispute resolution facilitated

		by a Member, either by way of Preliminary Conference or Conciliation. In the Workers Compensation Division medical disputes regarding the reasonable necessity of medical treatment or service (and in some cases, permanent impairment disputes), are first allocated to a Member who attempts resolution by way of Preliminary Conference and/or Conciliation, and may also proceed to determination of the dispute, without the mandatory requirement for a medical assessment conducted by a Medical Assessor. In these matters, the Member is provided with an option to refer the matter to a Medical Assessor if needed. The proposed <i>Personal Injury Commission Bill 2022</i> intended to deploy further alternative dispute resolution methods in Motor Accidents disputes through the introduction of methods including mandatory conciliation and mediation, to assist parties to reach an agreement while waiting for a medical assessment, and to facilitate the Commission's objectives of early, quick and cost-effective dispute resolution. This was particularly relevant for medical disputes impacted by delays caused by the COVID-19 pandemic during extended periods in which medical assessments were suspended.
7	Information on publication and / or communication methods updating relevant parties on policies and procedures (in addition to the PIC News)	The Commission proactively fosters open and effective communication with its stakeholders and tribunal users, providing substantial engagement, education and support regarding its policies and procedures, especially with respect to changes or updates, through a variety of mechanisms (in addition to its regular publication of the Personal Injury Commission News). These mechanisms include:
		Stakeholder Reference Groups The Commission has multiple standing reference groups with representatives of its key stakeholder cohorts and meets with them regularly to provide updates on changes to Rules, policies and procedures, consult on key issues and seek feedback. The reference groups are: • Stakeholder Reference Group - representatives from the insurance industry and legal profession peak bodies, unions, the State Insurance Regulatory Authority and icare.

- CTP (compulsory third party) Insurer Reference Group representatives from multiple CTP motor accident insurance companies, their legal representatives, and the insurance industry peak body.
- Medical Assessor Reference Group representatives from the Commission's Medical Assessor panel.
- Mediator Reference Group representatives from the Commission's cohort of Mediators.

Regular engagement with peak bodies and key stakeholders

The Commission meets regularly with peak bodies and key stakeholders to keep them informed about key Commission developments and changes to Rules, procedures and services and to consult with them on key issues affecting them. This includes engagement with:

- Law Society of NSW
- NSW Bar Association
- Insurance Council of Australia
- State Insurance Regulatory Authority
- Independent Review Office
- icare
- Department of Customer Service

The President regularly meets with the Presidents of the Law Society and Bar Association about matters affecting the Commission and the members.

Speeches and presentations

The Commission's President and Division Heads undertake numerous public speaking engagements to educate and inform stakeholders about the Commission, its enabling legislation, decisions, Rules, and key developments. In the last 2 years, this has included:

- Regular speaking engagements at National and NSW COAT Conferences
- Delivering annual presentations/papers for Legalwise

- Speaking engagements with law firms on Commission Practice and Procedure
- Mediators' engagement in radio program "Mediation Today" regarding the Commission's alternative dispute resolution and teaching roles (university and high school)
- Delivering an annual 'Personal Injury Commission Update" at UNSW's Personal Injury Law Intensive
- Accepting invitations for ad hoc speaking engagements, such as the annual IRO Conference, Self-Insurer's AGM, the NSW BAR Association, and the Law Society's upcoming Specialist Accreditation Conference

Copies of some of the President's public speaking engagements, can be found on our website, here.

Website and publications

The Commission's website provides news updates and houses the Commission's legislation, Rules, Procedural Directions and practice updates and other information relevant to stakeholders and tribunal users.

The Personal Injury Commission News has a wide circulation and users spend on average 5 minutes reading the publication. The Commission also publishes a weekly Legal Bulletin and Appeal Summaries to keep stakeholders abreast of recent decisions, while the full content of its decisions are published on public legal databases Austlii and Jade, as well as Lexis Nexis which is a subscription service.

Targeted email communications

Targeted email communications are sent to Commission stakeholders and tribunal users as required, advising of key changes or updates they need to take note of and how they can seek further information and assistance.

		Targeted training for stakeholders Training as required to educate stakeholders and tribunal users on new or changing processes and procedures, such as training for all users on how to use the Commission's soon to launch, new single digital platform, Pathway.
8	Has the Commission undertaken any analysis, or does the Commission have any mechanism in place, to understand how rural and remote communities are accessing the Commission? For example, a postcode analysis.	The Commission has undertaken a detailed analysis of rural and regional dispute applications. As part of the Commission's Venue Spaces Project, the Commission engaged an external consultant in May 2022 to assist with the development of a regional strategy. This included a postcode analysis and heat map which reflected where the Commission's regional and rural claimants and workers originated from based on the address recorded on an application at the time of lodgement. This early work identified several higher density dispute areas aligned to regional populations and hubs where regional in-person venues could be located, such as Newcastle. Further work is being undertaken in this area to establish a small regional network of in-person venues. It is anticipated that Pathway, the Commission's new single digital platform will better facilitate analysis of regional and rural disputes data. Additionally, at the Registration and Listing phase of disputes, Commission staff identify regional filings and, where appropriate, assign the matter to a regionally based presiding officer. These mechanisms support the Commission's strategic objective of providing its services to regional and rural communities.
9	Available data on WC Form 11C (application for mediation) proceeding to mediation that are settled by the Commission.	In the first two years of the Commission's operation (1 March 2021 to 1 March 2023), an average of 71% of Applications for Mediation of a Work Injury Damages claim (WC Form 11C) which proceeded to a mediation (facilitated by a Commission mediator) settled, meeting the Commission's target KPI of 70%. This 71% settlement rate is broken down by financial year, as follows:

		 01.03.2021 to 30.06.2021 - Mediation conferences were held in 627 matters, of which 429 (73%) settled 01.07.2021 to 30.06.2022 - Mediation conferences were held in 1,621 matters, of which 1,127 (70%) settled 01.07.2022 to 28.02.2023 - Mediation conferences were held in 990 matters, of which 694 (70%) settled
10	Available data on WC Form 2/2D (application to resolve a dispute) that are settled by the Commission.	In the first two years of the Commission's operation (1 March 2021 to 1 March 2023), the Commission has settled an average of 37% of all Applications to Resolve a Dispute and Applications to Resolve a Claim for Death of a Worker (WC Form 2/2D*), meeting the Commission's target KPI of 35%. This 37% settlement rate is broken down by financial year, as follows: • 01.03.2021 to 30.06.2021 – Out of 1,866 WC Form 2/2D's finalised, 619 (33%) settled • 01.07.2021 to 30.06.2022 – Out of 4,890 WC Form 2/2D's finalised, 1,904 (39%) settled • 01.07.2022 to 28.02.2023 – Out of 3,810 WC Form 2/2D's finalised, 1,351 (35%) settled The Commission has observed that less matters are resolving overall. This may stem from insurers maintaining their positions regarding a dispute and wanting a formal determination. *This measure is provided in respect of all Form 2/2D's including those which do not proceed to a Member to facilitate settlement, such as single disputes about the level of permanent impairment which proceed straight to a Medical Assessor (which equates to approximately 36% of all WC Form 2's).
11	Available data on motor accident settlement approvals for Damages	The Commission does not have a function of settling "settlement approvals" for Damages Assessments. The Commission's function is to approve, reject or vary the proposed settlement of a claim for damages in matters where the claimant is self-

	Assessment disputes that are settled by the Commission.	represented (s 6.23(2)(b) of the Motor Accident Injuries Act 2017). Of the 127 proposed settlements that were determined by a Member within the first two years of the Commission's operations (1 March 2021 to 1 March 2023), 115 (90%) were approved, 7 (6%) were varied and approved, and 5 (4%) were not approved. In regard to Damages Assessments disputes which are settled by the Commission, in the first two years of the Commission's operation (1 March 2021 to 1 March 2023), the Commission has settled an average of 70% of all Damages Assessment Disputes, exceeding its target KPI of 60%. This 70% settlement rate is broken down by financial year, as follows: • 01.03.2021 to 30.06.2021 - Out of 462 Damages Assessment disputes finalised, 301 (65%) settled • 01.07.2021 to 30.06.2022 - Out of 1,580 Damages Assessment disputes finalised, 1,143 (72%) settled • 01.07.2022 to 28.02.2023 - Out of 1,162 Damages Assessment disputes finalised, 814 (70%) settled
12	Available data KPI - Form 2/2D (application to resolve a dispute) with a listing with a Member within 28 days of registration is more than 90%.	 In the first two years of the Commission's operations, approximately 66% of Form 2/2D (Applications to Resolve a Dispute and Applications to Resolve a Dispute about the Death of a Worker) proceeded to a listing with a Member within 28 days of registration, which is below the Commission's KPI of 90%. In the Workers Compensation Division, registration is the date an application is reviewed and accepted on the Workers Compensation portal, Comcase. This 66% rate is broken down by financial year, as follows: 01.03.2021 to 30.06.2021 - 85% of Form 2/2D's were listed before a Member within 28 days of registration 01.07.2021 to 30.06.2022 - 76% of Form 2/2D's were listed before a Member within 28 days of registration

		 01.07.2022 to 28.02.2023 - 42% of Form 2/2D's were listed before a Member within 28 days of registration (note, this 42% rate is expected to increase over the full financial year of 2022/2023, as the period of 1.07.2022 - 28.02.2023 includes annual periods of fluctuation during the Christmas/New Year break) We expect that this rate is reflective of the steady annual increase in filings of Form 2/2D's and more matters running to determination (thus more limited Member availability). For example, comparing the 2019 and 2022 calendar years, there has been a 16% increase in Form 2/2D filings. No explanation for this increase has been forthcoming from various stakeholder groups. It is also our more recent experience that workers compensation insurers are contesting more matters, both at first instance and on appeal. At the establishment of the Commission, the existing Principal Members were dually appointed to Motor Accidents and commenced engaging in that work rather than solely Workers Compensation. The Commission has since recruited six new sessional Members to the Workers Compensation Division, which will enable us to work toward meeting our target KPI of listing 90% of Form 2/2D's before a Member within 28 days of registration.
		ive resolutions with as little formality as possible
Item	Data/Information Sought	Personal Injury Commission response
13	Damages Assessment disputes with a listing with a Member within 28 days of registration is more than 90%.	The Commission's policy of listing an applicable Motor Accidents dispute application before a Member for a preliminary conference within 28 days came into effect on 31 January 2022. ³ This was to harmonise our listing practices across both Divisions of the Commission, ensure Motor Accidents matters were listed before a Member in a timely way and be open and transparent with tribunal users about our

³ See <u>Personal Injury Commission News, Edition 26</u>

		practice and KPI. Prior to this time, a performance measure did not exist for a first listing for Motor Accidents dispute applications (including in the former DRS). The current average percentage for listing a Damages Assessment dispute before a Member in 28 days is 51% for the period 01/02/2022 to 01/03/2023. Since the introduction of this practice and strong focus on performance measures in the Commission, the Commission has seen a steady increase towards its target KPI of 90%. It will continue to focus on its performance to meet this target.
14	Information on timeliness for merit review assessments and claims assessments. Whether this is something that can be included in the Commission's KPIs?	The Commission's data on Merit Review determinations and Miscellaneous Claims assessments is still in its early stages. There are several challenges in reporting timeline data related to the relatively small sample size of these two dispute categories (average of approximately 12 and 10 matters filed per month respectively) compared to dispute data overall (14,000 to 15,000 dispute applications overall) and caused by the data quality issues that exist in the current Motor Accidents Portal. The Commission's new Pathway single case management system should address the data quality issues for these dispute types. The Commission will refine the performance measures we include in our KPI's as the Commission matures and may consider the inclusion of data on Merit Review determinations and Miscellaneous Claims assessments if this is feasible. Please also see responses to items 27, 28 and 29 below.
15	Any other information on how the Commission supports self-representation in both divisions, beyond the published Access Charter.	The Commission supports its self-represented litigants as outlined in its Access Charter and as detailed at item 4.

Objec	bjective D: Ensure timely, fair, consistent,	
Item	Data/Information Sought	Personal Injury Commission's response
16	Information on how Commission policies/ procedures ensure quality control of decisions to assist with consistency. This may include quality assurance audits, how the Commission ensures consistency of approach by assessors, timeliness and any continuous improvement/ training for assessors.	The Commission and its decision-makers share in the vision "to lead the way in delivering quality, timely, innovative and cost effective justice for personal injury disputes" and are committed to continuous improvement. The Commission has mature and robust procedures and practices in place to ensure the quality, consistency and timeliness of decisions by its decision-makers. This is achieved through the following mechanisms: Induction and mentoring New Members and Medical Assessors receive comprehensive induction training when they commence with the Commission to ensure they understand the nature of their decision-making role and the standards and expectations around decision-writing in the Commission. Each new decision-maker is paired with an experienced decision-maker to provide advice and guidance in decision-making in their first few months in the Commission (noting decision-makers are always independent in their decision-making). For example, upon appointment as a Medical Assessor, all Assessors are allocated an experienced mentor as part of the onboarding program which also includes completion of 6 online modules. Extranets, manuals and tools Members have access to a wide variety of tools and materials that provide guidance regarding key subjects and case law in the workers compensation and motor accidents jurisdictions (e.g. Members Manual for Workers Compensation, Draft Manual in progress for Motor Accidents). Standalone Member and Medical Assessor Extranets also contain the latest case law, templates, guidelines, training modules and videos, papers and presentations for easy access by decision-makers.

⁴ Annual Review, Strategic Plan, p 18.

Quality control mechanisms

Members are required to comply with the Commission's Style Guide so that decisions are unform in their format. Templates are also used for consistency. All decisions are proofread to ensure compliance with the Style Guide and templates and to pick up any obvious administrative errors.

There are also templates for medical decisions. All first instance medical assessment certificates are reviewed against a checklist by Commission staff with identified errors being sent back to the Medical Assessor for correction.

Analysis of appeal outcomes

The key measure of the quality and durability of the Commission's decisions is reflected in the low appeal rate for its decisions. Please see responses to items 17-24 which deal specifically with appeal, revocation rates and appeals to high courts.

Outcomes of appeals to higher courts are carefully examined by the Commission and shared with relevant decision-makers more broadly to ensure quality decision-making outcomes are maintained. Where an appeal of a first instance medical assessment certificate is upheld by a Medical Appeal or Review Panel, the outcome is shared with the relevant first instance Medical Assessor for their information.

Any trends or systemic issues emerging in appeal decisions are also fed into the relevant professional development programs for decision-makers.

Conferences and training

The Commission holds annual conferences, training, briefing sessions and other meetings for its Members and Medical Assessors where case law, trends and key information is shared with decision-makers to enhance the quality and consistency of their decision-making.

		KPIs and timeliness The Commission has KPIs for Members and Medical Assessors relating to the timeliness of their decisions. Members and Medical Assessors are expected to issue their decisions within 21 and 14 days respectively from the final event or assessment. This is closely monitored by the Commission and late decisions are actively managed with the respective decision-maker and through adjustments to the allocation process. Continuous improvement As the Commission matures, it will also explore other mechanisms to enhance its quality assurance systems and procedures.
Objec	tive E: to promote public confidence	in the decision-making of the Commission and in the conduct of its members
Item	Data/Information Sought	Personal Injury Commission response
17	The "Appeal Rate" (the % of medical decisions with a review application lodged) is less than 20% in motor accidents.	In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the "appeal rate" of medical decisions in the Motor Accidents Division is approximately 22% (i.e. approximately 22% of medical decisions result in a Medical Review Panel application being lodged).
		This 22% "appeal rate" is made up as follows:
		 01.03.2021 to 30.06.2021 - 21% of medical decisions resulted in a medical review application being lodged 01.07.2021 to 30.06.2022 - 23% of medical decisions resulted in a medical review application being lodged 01.07.2022 to 28.02.2023 - 21% of medical decisions resulted in a medical review application being lodged
		The Commission is tracking toward its target KPI. It is taking steps to prepare for a steady increase in the lodgement of Medical Review Applications, which will reflect the increasing number of medical assessments taking place following the

		suspension of assessments between 2021 - 2022 in response to the COVID-19 pandemic. This data covers appeals in both the 1999 and 2017 Motor Accidents schemes. Since 1 March 2021, all motor accidents panels have had a Member on the panel (previously comprised of three doctors) and the legal accuracy of medical appeal decisions has increased significantly.
18	The "Appeal rate" (% of appealable Member decisions with an appeal) in workers compensation.	In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the "appeal rate" of Member decisions in the Workers Compensation Division is approximately 19% (i.e. approximately 19% of Member decisions are appealed to a Presidential Member).
		 This 19% "appeal rate" is made up as follows: 01.03.2021 to 30.06.2021 - 15% of Member decisions were appealed 01.07.2021 to 30.06.2022 - 19% of Member decisions were appealed 01.07.2022 to 28.02.2023 - 21% of Member decisions were appealed The Commission is meeting its target KPI of less than 20% of all Member decisions being appealed.
19	The "Appeal rate" (% of appealable Medical certificates with an appeal) in workers compensation.	In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the "appeal rate" of Medical Certificates in the Workers Compensation Division is approximately 16% (i.e. approximately 16% of Medical Certificates have been appealed to a Medical Assessment Panel). This 16% "appeal rate" is made up as follows:
		 01.03.2021 to 30.06.2021 - 15% of Member decisions were appealed 01.07.2021 to 30.06.2022 - 16% of Member decisions were appealed 01.07.2022 to 28.02.2023 - 17% of Member decisions were appealed

		The Commission is meeting its target KPI of less than 20% of all medical decisions being appealed.
20	The "Revocation Rate" (the % of medical decisions revoked on review in motor accidents).	In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the "revocation rate" of medical decisions in the Motor Accidents Division following a Medical Review Panel is approximately 5% (i.e. approximately 5% of all motor accidents medical decisions which are issued, are revoked).
		This 5% "revocation rate" is made up as follows:
		 01.03.2021 to 30.06.2021 - 8% of medical decisions were revoked 01.07.2021 to 30.06.2022 - 4% of medical decisions were revoked 01.07.2022 to 28.02.2023 - 6% of medical decisions were revoked
		The Commission is meeting its target KPI of less than 10% of all medical decisions being revoked.
21	The "Revocation rate" (% of appealable Member decisions revoked on appeal) in workers compensation.	In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the "revocation rate" of workers compensation Member decisions following appeal is approximately 4% (i.e. approximately 4% of all Member decisions which are issued, are revoked on appeal).
		This 4% "revocation rate" is made up as follows:
		 01.03.2021 to 30.06.2021 - 4% of Member decisions were revoked 01.07.2021 to 30.06.2022 - 4% of Member decisions were revoked 01.07.2022 to 28.02.2023 - 4% of Member decisions were revoked
		The Commission is meeting its target KPI of less than 10% of Member decisions being revoked.

22	The "Revocation rate" (% of appealable Medical certificates revoked on appeal) in workers compensation.	In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the "revocation rate" of medical certificates following a Medical Assessment Panel is approximately 6% (i.e. approximately 6% of all workers compensation medical certificates issued are revoked). This 6% "revocation rate" is made up as follows: • 01.03.2021 to 30.06.2021 - 6% of medical decisions were revoked • 01.07.2021 to 30.06.2022 - 6% of medical decisions were revoked • 01.07.2022 to 28.02.2023 - 7% of medical decisions were revoked The Commission is meeting its target KPI of less than 10% of Medical Certificates being revoked.
23	The "Appeal Rate" of decisions to a higher Court.	'Appeals' of Member or other decision-maker decisions that proceed to a higher Court comprise judicial reviews that proceed to the Supreme Court and appeals from Presidential decisions that proceed to the Court of Appeal. In the first two years of the Commission's operations (1 March 2021 to 1 March 2023), the numbers of decisions 'appealed' are as follows: • 71 applications for judicial review of decision maker decisions ⁵ to the Supreme Court • 10 appeals of Presidential decisions made to the Court of Appeal A full analysis of 'appeal' rates has not been possible in the time frame for this response and will appear in the 2022-23 Annual Review (as in the previous years).
24	The % of decisions set aside by a higher Court.	The number of decisions set aside in the first two years of the Commission's operations (1 March 2021 to 1 March 2023) are as follows: • 45 judicial reviews of decision maker decisions ended with the original decision being set aside

⁵ Decision maker includes both legally qualified and medical decision makers.

		1 Court of Appeal decision set aside the original Presidential decision
		Similarly, as noted above, the revocation rates will appear in the 2022-23 Annual Review (as in the previous years).
25	Data on number of complaints received by the Commission.	The total number of written complaints received by the Commission for the period 1 March 2021 to 1 March 2023 was 149.
26	Data/information on the type of complaints received by the Commission.	The type of written complaints received by the Commission are contained in the table below based on the categories recorded in the Commission's Complaints and Correspondence Register.
		The largest category of complaints received in the 2 year period were in medical services and largely generated by the delays in medical disputes caused by the COVID-19 pandemic which has been extensively documented in the Commission's publications. The majority of those complaints related to delays in scheduling appointments or rescheduling cancelled appointments due to the pandemic but there were also concerns about our service level and lack of responsiveness due to work volumes during that period.
		Complaints regarding Members and Medical Assessors were the second largest category and often involved dissatisfaction with a decision or the way in which a medical assessment may have been undertaken.
		The number of written complaints about the Motor Accidents Portal appears low at face value given the challenges the Commission experienced with the Portal. It is important to note that feedback regarding Portal functionality and accessibility was often referenced in other written complaints or correspondence that raised multiple concerns and were not recorded individually. Verbal feedback and requests for assistance were also managed through the Motor Accident Digital Support Helpline and these figures are not captured in the formal written

		Category of complaint and definition	Number
		Medical services: delays in scheduling, rescheduling medical appointments caused by COVID-19 pandemic, quality and timeliness of services, lack of responsiveness, medical assessor availability (often in high use specialities)	74
		Medical Assessors: conduct/behaviour, timeliness of decisions	29
		Members: conduct/behaviour, timeliness of decisions	29
		Policy, processes, and procedures: lodging an application, privacy and disclosure, legal representative's concerns about procedures, requirements for medical assessment documentation	7
		Other: complaints with multiple , miscellaneous issues, insurers behaviour	4
		Motor accidents portal: portal functionality and accessibility	6
		Total	149
_	taran da antara da a	ublicises and disseminates information (ii) establishes effecti	ive liaison and
	unication with interested parties		
Item	Data/Information Sought	Personal Injury Commission response	
27	How often will be Commission be reviewing / updating KPIs. Are there any plans to expand KPIs to address additional areas of performance? How were the KPIs	The Commission's KPIs were developed in early 2022 and pull Commission's website on 24 June 2022, to take effect from 1 The KPI's were developed by analysing the Commission's dat range of dispute types with a view of developing relevant and which could be measured consistently across both the Worke	July 2022 [see <u>her</u> a across a broad d meaningful KPIs

	developed and what is the processes for reviewing the appropriateness of the KPIs?	Motor Accidents Divisions. Each legacy organisation (the former Dispute Resolution Service and the Workers Compensation Commission) had their own dispute types, resolution pathways, and various measures/indicators of performance. The current KPIs and dispute types against which they are measured reflect 80% of the workload across both Divisions, allowing performance visibility across the majority of the Commission's disputes. In developing the KPIs, the Commission sought feedback from the Law Society of NSW, NSW Bar Association, CTP Insurers Reference Group, State Insurance Regulatory Authority, Independent Review Office and icare. It is important to note that the KPIs will be reported on for the first time in the Commission's 2022-23 Annual Review. The Commission will review the KPIs as it matures and stabilises its dispute services and operations, refining and expanding upon the performance measures over time.
28	Information on whether the Commission could publish data on current disputes before the Commission to assist claimants in understanding how long their dispute may take? Would the Commission be able to publish data on the time from lodgement to finalisation by dispute type?	The Commission will publish data on the "Lifecyle" of disputes in its next Annual Review, which will assist tribunal users in understanding how long a dispute may take to finalise in the Commission. The Commission has an average lifecycle KPI of 120 days for Motor Accidents medical disputes and damages disputes and Workers Compensation Form 2 matters (application to resolve a dispute). It will also report the percentage of disputes dealt with in 3, 6, 9 and 12 months (without an appeal). As noted at item 27, the Commission will refine and expand upon the performance measures it reports on over time. At this time, it would be challenging for the Commission to publish data on the time from lodgement to finalisation by dispute type as there are a significant number of individual dispute types at present (e.g. up to 60). The feasibility of the Commission publishing data on each dispute type would need to be considered.
29	Information on whether the Commission can publish data on	As noted at item 14, 27 and 28, the Commission will refine the performance measures we report on in our KPI's as the Commission matures and may consider

	merit review decisions, outcomes, appeals.	the inclusion of data on merit review decisions. Whilst data is not currently reported for merit reviews, the Commission publishes all decision details of Merit Review matters and appeals pursuant to s 58 of the Act.
		ne knowledge and experience of members and other decision-makers.
Item	Data/Information Sought	Personal Injury Commission response
30	Information/data on how the Commission makes appropriate use of the knowledge and experience of members and other decision makers for both their colleagues and the public. For example, if the Commission publishes any educational pieces or do seminars.	A key strategic priority for the Commission is "to embrace innovation, excellence in dispute resolution and thought leadership in personal injury law".6 The Commission publishes papers and decisions in key areas of personal injury law and dispute resolution, presents and leads public discussions in key fora. As outlined at item 7, the President, Division Heads and Principal Registrar engage in regular reference groups and briefings with key external stakeholders where they share updates on the Commission's practice and procedure, key decisions and legislative reform. The President, Division Heads, and Members regularly take part in speaking engagements where they share their knowledge and experience with stakeholders through the delivery of presentations and published papers discussing key areas of personal injury law and decision making. Copies of some of the President's published public speaking engagements, can be found on our website, here. The Commission also publishes a weekly Legal Bulletin and monthly Appeal Summaries to keep the public abreast of the Commission's decisions, including those issued by higher courts following appeal. The Commission's decisions are made available on legal databases within 7 days of issuing, including Austlii, Jade and Lexis Nexis. Furthermore, significant decisions which shape jurisprudence in motor accidents or workers compensation law are summarised in the Commission's Annual Review each year.

⁶ Annual Review 2021/2022, Strategic Plan, p 18.

	 Internally, the Commission has a strong focus on its people and professional development which is demonstrated in the following ways: The Commission holds annual full-day conferences for Members, Mediators and Medical Assessors, during which internal and external speakers (such as judicial officers) deliver presentations on relevant areas of decision making, personal injury law and alternative dispute resolution and decision-makers actively share their knowledge and expertise with each other The Commission hosts a series of "Twilight Seminars" at our 1 Oxford Street premises for Members and legal staff every two months, where a presentation is delivered by the President and another speaker (such as another Member or judicial officer), on topical issues relevant to the role of a decision maker, and recent authority Delegate decision makers (legal staff) attend in-person "Shared Learning Lunches" hosted by Members of the Commission who deliver educative presentations on various aspects of decision making The Members and Medical Assessors access a standalone extranet page, containing relevant legal and decision-making resources The Division Heads hold regular virtual Member meetings to discuss recent decisions, legislative amendments, and share knowledge on practice and procedure Similarly, regular Medical Assessor briefing sessions and meetings are held for Medical Assessors where Medical Assessors and Members share information on case law, trends and decision-making
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