



Ministry of
JUSTICE

The Draft Victims of Overseas Terrorism Compensation Scheme 2012



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Draft Scheme laid before Parliament under section 54(1) of the Crime and Security Act 2010 for approval by resolution of each House of Parliament

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The Victims of Overseas Terrorism Compensation Scheme 2012

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The Victims of Overseas Terrorism Compensation Scheme 2012

1. This Scheme (The Victims of Overseas Terrorism Compensation Scheme 2012) is made by the Secretary of State under section 47 of the Crime and Security Act 2010 having been approved by each House of Parliament.
2. This Scheme comes into force on whichever is the later of 30 September 2012 or the day after the end of the period of two weeks beginning with the day on which it is made.
3. Annex A relates to the interpretation of this Scheme.

Eligibility: injuries for which an award may be made

4. A person may be eligible for an award under this Scheme if they sustain a relevant injury which is directly attributable to their being a direct victim of a designated act.
5. A person may be eligible for an award if they sustain a relevant injury which is directly attributable to being present at and witnessing a designated act, or the immediate aftermath of a designated act, as a result of which a loved one sustained a relevant injury directly attributable to being a direct victim of a designated act. For these purposes, a "loved one" is a person with whom the applicant:
 - (a) at the time of the designated act had a close relationship of love and affection; and
 - (b) if the loved one is alive at the date of the application, continues to have such a relationship.
6. An award may be made in accordance with paragraphs 50 to 77 where a person who sustained a relevant injury directly attributable to a designated act subsequently dies.
7. A person must establish their case under this Scheme on the balance of probabilities.
8. A person may be eligible for an award under this Scheme whether or not the designated act to which their application relates resulted in the conviction of an assailant in any part of the United Kingdom or elsewhere.

9. Paragraphs 10 - 19 set out eligibility conditions.

Eligibility: nationality, etc

10. A person is eligible for an award under this Scheme only if on the first date of the designated act that person was:
- (a) a British citizen;
 - (b) a close relative of a British citizen;
 - (c) a national of a member state of the European Union or the European Economic Area;
 - (d) a national of Switzerland;
 - (e) a person who had the right to be in the United Kingdom by virtue of being a family member of a national of a member state of the European Union, the European Economic Area or of Switzerland;
 - (f) a member of the armed forces; or
 - (g) an accompanying close relative of a member of the armed forces.
11. For the purposes of paragraph 10(b) and (g), “close relative” and “accompanying close relative” have the meanings set out in paragraph 15.

Eligibility: residence, etc

12. A person is eligible for an award under this Scheme only if:
- (a) that person was ordinarily resident in the United Kingdom on, and for a period of at least three years immediately before, the first date of the designated act; or
 - (b) on the first date of the designated act, a condition in paragraph 13 was satisfied in relation to that person.
13. The conditions referred to in paragraphs 12(b) and 14 are that the person was:
- (a) a Crown servant ordinarily based in the United Kingdom but posted to any place outside the United Kingdom;
 - (b) a member of the armed forces; or
 - (c) an accompanying close relative of a person mentioned in sub-paragraph (a) or (b).

14. Any period during which a condition in paragraph 13 was satisfied will count as a period of ordinary residence in the United Kingdom for the purposes of paragraph 12(a).
15. (1) For the purposes of paragraphs 10(b) and (g) and 13(c), a person is a close relative of a British citizen, Crown servant or member of the armed forces if the person is living with them as part of the same household and is:
- (a) the spouse or civil partner of that citizen, Crown servant or member of the armed forces;
 - (b) the partner (other than a spouse or civil partner) of that citizen, Crown servant or member of the armed forces, having been their partner for a continuous period of two years immediately before the first date of the designated act;
 - (c) a child aged under 18 of that citizen, Crown servant or member of the armed forces, or of his or her spouse, civil partner or partner (as described in paragraph (b)); or
 - (d) a child of that citizen, Crown servant, or member of the armed forces who is financially or physically dependent on that person as a result of a physical or mental disability.
- (2) For the purposes of paragraph 10(g) and 13(c), a person is an accompanying close relative if they were a close relative of the member of the armed forces or Crown servant, as the case may be, and living with them outside the United Kingdom.
16. Where an application relates to a child who was less than 3 years old on the first date of the designated act, paragraph 12 will be satisfied in relation to that child if a person who has parental responsibility for them satisfies that paragraph.

Eligibility: other provisions

17. A person is eligible for an award under this Scheme only in relation to a relevant injury sustained in a designated act the first date of which occurred on or after the date of commencement of this Scheme.
18. Subject to the provision in paragraphs 102 - 127 (reconsideration, reopening, review and appeal) an award will not be made to a person in respect of a relevant

injury where that person has previously had an application determined under this Scheme in respect of that injury.

19. An award will not be made if an assailant may benefit from the award.

Grounds for withholding or reducing an award

20. An award will be withheld unless the applicant has cooperated as far as reasonably practicable in bringing the assailant to justice.
21. An award may be withheld or reduced where the applicant fails to take all reasonable steps to assist a claims officer or other body or person in relation to consideration of their application. Such failure includes repeated failure to respond to communications sent to the address given by the applicant.
22. An award may be withheld or reduced where the conduct of the applicant before, during or after the designated act giving rise to the relevant injury makes it inappropriate to make an award or a full award.
23. Annex B sets out the circumstances in which an award under this Scheme will be withheld or reduced because the applicant to whom an award would otherwise be made has unspent convictions.
24. An award may be withheld or reduced because the applicant's character, other than in relation to an unspent conviction referred to in paragraph 3 or 4 of Annex B, makes it inappropriate to make an award or a full award.
25. In addition to paragraphs 20 to 24, an award made in respect of a fatal relevant injury may be withheld or reduced if:
 - (a) the deceased's conduct before, during or after the designated act giving rise to their death, makes it inappropriate to make an award or a full award; or
 - (b) for exceptional reasons, the deceased's character on the date of their death, whether due to their unspent convictions or otherwise, makes it inappropriate to make an award or a full award.
26. A payment for which a person is eligible by virtue of paragraph 45(g), (h) or (i) (certain special expenses) will not be reduced under paragraphs 21 to 24 unless the

whole award for which that person is otherwise eligible is withheld under those paragraphs.

Types of payment

27. The types of payment which may be made under this Scheme are:
- (a) Injury payments (paragraphs 29 to 34);
 - (b) Loss of earnings payments (paragraphs 35 to 42);
 - (c) Special expenses payments (paragraphs 43 to 49);
 - (d) Bereavement payments (paragraphs 54 and 55);
 - (e) Child's payments (paragraphs 56 to 59);
 - (f) Dependency payments (paragraphs 60 to 67);
 - (g) Funeral payments (paragraphs 68 to 70);
 - (h) Certain other payments in fatal cases (paragraphs 71 to 77).
28. The maximum award which may be made under the to a person sustaining one or more relevant injuries directly attributable to a designated act, before any reduction under paragraphs 21 to 25, is £500,000.

Injury payments

29. A person is eligible for an injury payment under this Scheme if:
- (a) their relevant injury is described in the tariff at Annex C; or
 - (b) in any case falling within paragraph 33 (acceleration or exacerbation of an existing condition), their injury is described in that tariff and the value of the acceleration or exacerbation is at least £1,000.
30. The amount of an injury payment will be determined in accordance with the tariff in Annex C and paragraphs 31 to 34. The tariff shows:
- (a) in Part A, the amount payable in respect of physical and mental injuries;
 - (b) in Part B, the amount payable in respect of fatal injuries, sexual and physical abuse; and
 - (c) notes relating to the determination of the amount of an injury payment for certain injuries.

31. Where a person has sustained a mental injury as a result of a sexual assault, they will be entitled to an injury payment for whichever of the sexual assault or the mental injury would give rise to the highest payment under the tariff.
32. Where a person is eligible for an injury payment in respect of a relevant injury requiring an operation, no separate injury payment will be made in respect of scarring arising from that operation.
33. Where an applicant's relevant injury as described in the tariff includes the acceleration or exacerbation of an existing condition, an injury payment
- (a) will be paid only in relation to the degree of acceleration or exacerbation;
 - (b) will be calculated by reference to such relevant injuries described in the tariff as a claims officer considers appropriate; and
 - (c) will be reduced to zero, unless the amount calculated under sub-paragraph (b) is £1,000 or more.
34. (1) Where an application relates to more than one relevant injury, each of which would qualify for an injury payment under paragraph 29, the amount of the injury payment for which the applicant will be eligible is:
- (a) the full tariff amount for the relevant injury which gives rise to the highest payment;
 - (b) 30 per cent of the tariff amount for the relevant injury with an equal or second highest payment; and
 - (c) where there are three or more relevant injuries, 15 per cent of the tariff amount for the relevant injury with an equal or third highest payment.
- (2) When calculating the injury payment for which an applicant may be eligible, sub-paragraph (1) will be applied after paragraphs 31 to 33.

Loss of earnings payments

35. An applicant who is eligible for an injury payment will be eligible for a loss of earnings payment if the conditions in paragraph 36 are met.
36. (1) The first condition is that as a direct result of the relevant injury for which the applicant is eligible for an injury payment they have no or very limited capacity for paid work.
- (2) The second condition is that the applicant:

- (a) was in paid work on the first date of the designated act;
- (b) had been in regular paid work for a period of at least three years immediately before the first date of the designated act; or
- (c) had a good reason for not having been in regular paid work for the period mentioned in paragraph (b).

(3) For the purpose of this paragraph a person will be considered to have a good reason for not having been in regular paid work if, for example, they were unable to work because they were in full-time education, or by reason of their age or caring responsibilities.

37. The period to which a loss of earnings payment will relate begins on the first day of the 29th week in which the applicant satisfies the condition in paragraph 36(1).
38. The period to which a loss of earnings payment will relate ends on whichever is the earliest of:
- (a) the day on which the applicant no longer satisfies the condition in paragraph 36(1);
 - (b) the day on which the applicant will reach state pension age; or
 - (c) where the relevant injury has resulted in a life expectancy below the state pension age, the expected end of the applicant's life.
39. A loss of earnings payment may relate to earnings lost before an application is determined (past loss of earnings) and such loss after the determination (future loss of earnings).
40. A loss of earnings payment in respect of past loss of earnings will be calculated by multiplying:
- (a) the weekly rate, at the date of determination, of statutory sick pay under section 157 of the Social Security Contributions and Benefits Act 1992 or, where the applicant is ordinarily resident in Northern Ireland, section 153 of the Social Security Contributions and Benefits (Northern Ireland) Act 1992; by
 - (b) the number of weeks, treating part weeks as full weeks, during the period beginning with the day calculated in accordance with paragraph 37 and ending on the day the application is determined.

41. A loss of earnings payment in respect of future loss of earnings will be calculated by multiplying:
- (a) the weekly rate, at the date of determination, of statutory sick pay under section 157 of the Social Security Contributions and Benefits Act 1992 or, where the applicant is ordinarily resident in Northern Ireland section 153 of the Social Security Contributions and Benefits (Northern Ireland) Act 1992; by
 - (b) the number of weeks, treating part weeks as full weeks, during the period beginning on the day after the day on which the application is determined and ending on the day calculated in accordance with paragraph 38.
42. A loss of earnings payment made under paragraph 41 (future loss of earnings) will then be discounted in accordance with the Tables in Annex D, which set out:
- (a) multipliers to be applied to account for the accelerated receipt of payments (Table A);
 - (b) discount factors to be applied to a lump sum in respect of loss which starts at a future date (Table B); and
 - (c) assumptions in relation to life expectancy (Table C).

Special expenses payments

43. An applicant who is eligible for an injury payment will be eligible for a special expenses payment if, as a direct result of a relevant injury for which they are eligible for an injury payment, they have lost earnings or earning capacity, or been incapacitated to a similar extent, for more than 28 weeks.
44. A special expenses payment will only be made in relation to expenses of the types listed in paragraph 45:
- (a) which are necessarily incurred on or after the date of the injury by the applicant as a direct result of the relevant injury giving rise to the injury payment;
 - (b) for which provision, or similar provision, is not available free of charge to the applicant from another source; and
 - (c) the cost of which is reasonable.

45. A special expenses payment may be made only in respect of the following expenses:
- (a) the applicant's property or equipment, which was relied on by the applicant as a physical aid and which was lost or damaged as a result of the designated act giving rise to the relevant injury;
 - (b) costs (other than in respect of loss of earnings) arising from treatment for the relevant injury under the National Health Service or a state health service other than the National Health Service where those costs would also have arisen if the applicant were being treated under the National Health Service in England and Wales;
 - (c) special equipment;
 - (d) adaptation of the applicant's accommodation;
 - (e) the cost of care in connection with the applicant's bodily functions or meal preparation;
 - (f) the cost of supervising the applicant in order to avoid substantial danger to the applicant or another person;
 - (g) fees payable, in England and Wales, to the Court of Protection or the Public Guardian established under the Mental Capacity Act 2005; in Scotland, to the Public Guardian or to a sheriff court in respect of an application under the Adults with Incapacity (Scotland) Act 2000; or in Northern Ireland to the Office of Care and Protection established under section 68 of the Judicature (Northern Ireland) Act 1978;
 - (h) costs arising from the administration of the applicant's affairs due to their lack of mental capacity;
 - (i) the cost of setting up a trust following a claims officer's direction under paragraph 99.
46. (1) Where the need for special equipment is likely to continue, a claims officer will:
- (a) assess the cost of replacement, taking into account the number of likely replacements;
 - (b) deduct the amount for which the applicant's existing equipment could be sold on each occasion; and
 - (c) apply an appropriate discount factor in accordance with Table B of Annex D.
- (2) Where the need for any other special expenses of a type specified in paragraph 45 is likely to continue, a claims officer will assess the annual cost of the expense and apply the relevant Tables in Annex D.

47. A special expenses payment will be withheld or reduced to take account of the receipt of, or entitlement to, social security benefits in respect of the applicant's special expenses.
48. A special expenses payment will be withheld or reduced to take account of the receipt of, or entitlement to, an insurance payment in respect of the applicant's special expenses.
49. Any reduction under paragraph 47 or 48 will be the total amount of the benefits and insurance payments referred to, net of income tax. If the benefits or insurance payments are to be paid in the future, the amount of the reduction will be calculated as a lump sum, applying the relevant Tables in Annex D.

Payments in fatal cases

50. A qualifying relative of a person who has died as a direct result of sustaining a relevant injury directly attributable to a designated act may be eligible for:
 - (a) a bereavement payment (paragraphs 54 and 55);
 - (b) a child's payment (paragraphs 56-59) ;
 - (c) a dependency payment (paragraphs 60-67).
51. A qualifying relative of a person who has sustained a relevant injury directly attributable to a designated act but who has died otherwise than as a direct result of that injury may be eligible for an award in accordance with paragraphs 73 to 77.
52. A qualifying relative is a person who at the time of the deceased's death was:
 - (a) the spouse or civil partner of the deceased, who was living with the deceased in the same household;
 - (b) the partner of the deceased (other than a spouse or civil partner), who was living with them in the same household and had done so for a continuous period of at least two years immediately before the date of the death;
 - (c) a person who would satisfy sub-paragraph (a) or (b) but who did not live with the deceased because of either person's ill-health or infirmity;
 - (d) the spouse or civil partner, or a former spouse or civil partner, of the deceased who was financially dependent on the deceased;
 - (e) a parent of the deceased; or
 - (f) a child of the deceased.

53. The maximum award which may be made under this Scheme in relation to a fatal relevant injury, before any reduction under paragraphs 21 to 26, is £500,000. This maximum also includes any payment made to the deceased before their death in relation to the relevant injury as a result of which they have subsequently died.

Bereavement payments

54. A bereavement payment may be made to a qualifying relative who is not:
- (a) a former spouse or former civil partner of the deceased; or
 - (b) a person who is estranged from the deceased at the time of their death.
55. Where a claims officer is satisfied that more than one person may be eligible for a bereavement payment in respect of the deceased, the amount of each bereavement payment is £5,500. Otherwise, the amount of the bereavement payment is £11,000.

Child's payments

56. A child's payment may be made to a child of the deceased if that person was, at the time of the death of the deceased, under 18 years old and dependent on the deceased for parental services.
57. The period to which a child's payment will relate begins on the day of the death and ends on the day before the child's 18th birthday.
58. The amount of a child's payment is:
- (a) £2,000 for each year (pro rata for each part year) of the period to which the payment relates; and
 - (b) such additional amount in relation to any expenses suffered by the child as a direct result of the loss of parental services as a claims officer considers reasonable.
59. A child's payment shall be paid in a lump sum, applying the relevant Tables in Annex D to such part of the payment as relates to losses arising after the day on which the application is determined.

Dependency payments

60. A dependency payment may be made to a qualifying relative who at the time of the deceased's death was financially or physically dependent on the deceased. A qualifying relative was physically dependent on the deceased if the deceased was their main carer.
61. The period to which a dependency payment will relate begins on the day of the death.
62. (1) The period to which a dependency payment will relate ends on whichever is the earliest of:
- (a) in the case of a qualifying relative who is a child under the age of 18, the day before their 18th birthday;
 - (b) the day upon which the deceased would have reached state pension age;
 - (c) the date on which, before the designated act giving rise to their relevant injury, the deceased's life would have been expected to end in accordance with Table C of Annex D or other available medical evidence;
 - (d) the expected end of the qualifying relative's life; or
 - (e) the 50th anniversary of the day referred to in paragraph 61.
- (2) When calculating the amount of a dependency payment, no account will be taken of a qualifying relative's remarriage or new civil partnership, or their prospects of remarrying or entering into another civil partnership.
63. A payment in respect of financial dependency will be made if on the date of their death the conditions in paragraph 36(2) were satisfied in relation to the deceased and their main source of income was not social security benefits.
64. The dependency payment will be calculated by reference to each week in which one or more qualifying relatives is eligible for a dependency payment in accordance with paragraphs 61 and 62. The total amount payable in each of those weeks will be the weekly rate, at the date of determination, of statutory sick pay under section 157 of the Social Security Contributions and Benefits Act 1992 (or where the deceased was ordinarily resident in Northern Ireland, section 153 of the Social Security Contributions and Benefits (Northern Ireland) Act 1992). The weekly amount will be divided in equal shares between each qualifying relative who is

eligible in any week. A qualifying relative eligible for part of a week will be treated as if eligible for the whole of that week.

65. The total amount of a qualifying relative's dependency payment in respect of financial dependency will be the aggregate of the amounts allocated to the qualifying relative under paragraph 64 for the whole period of their dependency.
66. The dependency payment will be made in a lump sum, applying the relevant Tables in Annex D to such part of the period to which the payment relates as occurs after the day on which the application is determined.
67. A payment in respect of physical dependency will be calculated as if it were a special expenses payment to the dependant for the cost of that dependant's care and supervision under paragraph 45(e) and (f). Paragraphs 46 to 49 apply to the calculation of the amount of that payment in the same way as they apply in respect of a person who has sustained a relevant injury.

Funeral payments

68. Where a person has died as a direct result of sustaining a relevant injury directly attributable to a designated act a funeral payment may be made in respect of their funeral expenses for the benefit of their estate.
69. Subject to paragraph 70 the amount of a funeral payment is £2,500.
70. A payment above £2,500 may be made in respect of funeral expenses reasonably incurred, up to a further £2,500.

Effect on a dependency payment or child's payment of a payment to the deceased before their death

71. Paragraph 72 applies in calculating the amount of a dependency payment or child's payment arising from dependency on a person who received an award under this Scheme and who has subsequently died as a result of the relevant injury giving rise to the award.

72. Where this paragraph applies:
- (a) where more than one person is eligible for a dependency payment or child's payment, the total amount of all such payments will be reduced by the amount of the payment made to the deceased in proportion between each recipient;
 - (b) where one person is eligible for such a payment, that payment will be reduced by the amount of the payment made to the deceased.

Payments resulting from a relevant injury where the victim dies of an unrelated cause before an award is made to them

73. A qualifying relative of a person who has sustained a relevant injury and who has died otherwise than as a direct result of that injury may be eligible for an award if on the date the deceased died:
- (a) the deceased was eligible for, but had not received, a final award under this Scheme; and
 - (b) the qualifying relative was financially dependent on the deceased.
74. An application under paragraph 73 must be made:
- (a) within two years after the date of the deceased's death; or
 - (b) if later, with supporting evidence which means that the application can be determined without further extensive enquiries by a claims officer.
75. A qualifying relative who is eligible for an award under paragraph 73 may receive a payment for:
- (a) the deceased's loss of earnings arising as a direct result of the relevant injury, assessed in accordance with paragraphs 35 to 40, except that no payment will be made in respect any loss from the date of the deceased's death; and
 - (b) special expenses incurred by the deceased as a direct result of the relevant injury up to the date of the deceased's death, assessed in accordance with paragraphs 43 to 45 and 47 to 49.
76. Any payment made under paragraph 73 will be reduced by the amount of any award paid to the deceased.

77. The total of any awards paid to the deceased and their qualifying relatives shall not exceed £500,000.

Effect of other payments on an award

78. (1) An award under this Scheme will be withheld or reduced if in respect of the relevant injury to which the award relates the applicant, whether in any part of the United Kingdom or elsewhere:
- (a) receives or is awarded criminal injuries compensation or a similar payment;
 - (b) receives an order for damages from a civil court;
 - (c) agrees the settlement of a damages claim; or
 - (d) receives a compensation order or offer made during criminal proceedings.
- (2) An award will be reduced by the amount of any payments listed in subparagraph (1), net of any benefits recoverable under the Social Security (Recovery of Benefits) Act 1997 or equivalent legislation (whether in any part of the United Kingdom or elsewhere).

Applications

79. An application for an award will be determined by a claims officer in the Authority in accordance with this Scheme.
80. Subject to paragraph 81, an application must be sent by the applicant so that it is received by the Authority as soon as reasonably practicable after the last date of the designated act and in any event within two years of that date.
81. (1) Where the applicant was a child under the age of 18 on the last date of the designated act giving rise to the relevant injury, the application must be sent by the applicant so that it is received by the Authority within the period ending on their 20th birthday.
- (2) An application will not be accepted under this paragraph unless a claims officer is satisfied that the evidence presented in support of the application means that it can be determined without further extensive enquiries by a claims officer.

82. A claims officer may extend the period referred to in paragraph 80 or 81 where the claims officer is satisfied that:
- (a) due to exceptional circumstances the applicant could not have applied earlier; and
 - (b) the evidence presented in support of the application means that it can be determined without further extensive enquiries by a claims officer.
83. A claims officer may give directions, impose conditions, and make such other investigations and arrangements in connection with an application as the claims officer considers appropriate.
84. An applicant must:
- (a) make their application on the form available from the Authority;
 - (b) comply with any direction made or condition imposed by a claims officer in relation to their application;
 - (c) inform the claims officer of any claim or proceedings that may give rise to an award or payment mentioned in paragraph 78 in respect of the relevant injury giving rise to the application, and the progress of the claim or proceedings;
 - (d) assist the claims officer, and other body or person, as far as reasonably practicable in relation to consideration of their application; and
 - (e) provide the claims officer with any change in their correspondence address as soon as reasonably practicable.
85. The applicant must provide such information in connection with their application as a claims officer may reasonably require, in particular:
- (a) evidence that the applicant satisfies the requirements of paragraphs 10 and 12 in relation to eligibility;
 - (b) medical evidence in relation to the relevant injury giving rise to the application;
 - (c) where the application includes a claim for a payment other than an injury payment, evidence in support of that part of the application; and
 - (d) such information as the applicant has, or which is reasonably available to them, in relation to their eligibility for a payment from any other source in relation to the relevant injury or other losses to which their application under this Scheme relates.

86. The Authority will not normally meet any costs incurred by the applicant in connection with an application. In particular, it will not meet the costs of legal or other representation incurred by the applicant.
87. The Authority will meet the reasonable cost of obtaining evidence incurred in connection with an application only where a claims officer is satisfied:
- (a) in relation to the medical evidence referred to in paragraph 85(b), that:
 - (i) the applicant cannot reasonably obtain that information, but the Authority can;
 - (ii) the applicant cannot afford to obtain it; or
 - (iii) the cost of obtaining it exceeds £50;
 - (b) in relation to such further medical or other evidence as the claims officer may reasonably require, that:
 - (i) such evidence is necessary for the proper consideration of the application; and
 - (ii) it would be reasonable in all the circumstances for the Authority to meet the cost of obtaining it.
88. The Authority will meet the cost of reasonable ancillary expenses incurred by the applicant in connection with obtaining medical or other evidence falling within paragraph 87.
89. Where an award is made, a claims officer may deduct from that award the following costs incurred in connection with the application:
- (a) where the Authority met the cost of the medical evidence referred to in paragraph 85(b), that cost up to the amount of £50; and
 - (b) any costs incurred by the Authority as a result of the applicant failing to attend a medical or other appointment without reasonable excuse.
90. An application may be withdrawn by the applicant at any time before a payment is made.

Deferring the determination of an application

91. A claims officer may defer determination of an application in whole or in part:
- (a) in exceptional cases, until the end of any criminal proceedings relating to the designated act which the claims officer is satisfied are material to the determination; or
 - (b) until the claims officer is satisfied that the applicant has taken all reasonable steps to obtain any social security benefits, insurance payments, damages or compensation to which the applicant may be entitled in respect of the same relevant injury.

Determination and payment

92. A claims officer will notify the applicant in writing of the determination of the application.
93. Where an applicant has been notified of the determination of their application in accordance with paragraph 92 and the applicant wishes to accept that determination, an award will not be made unless the applicant sends written notice of their acceptance of the determination so that the Authority receives it within 56 days after the date of the written notice of determination.
94. Where an applicant has been notified of the determination of their application in accordance with paragraph 92 and the applicant wishes to seek a review of that determination, the application for review must be sent so that it is received by the Authority within 56 days after the date of the written notice of determination.
95. A claims officer may extend the time limit in paragraph 93 or 94 for one further period of up to 56 days where:
- (a) an application to extend that time limit is made in writing, whether before or after expiry of the initial period; and
 - (b) due to exceptional circumstances, the applicant could not have complied with the time limit.
96. (1) Where an applicant has not given notice under paragraph 93 or 94 within the required period, or has failed to do so within the period of any extension granted

under paragraph 95, a claims officer may withdraw the determination, and no award will be made.

(2) A claims officer may not withdraw a determination under this paragraph before the end of the period of two years starting on the day after the day on which the relevant time limit expires.

97. A claims officer must send written notice of withdrawal under paragraph 96 to the applicant.
98. An award will normally be made in a lump sum, subject to any direction made by a claims officer under paragraph 99.
99. A claims officer may give directions, impose conditions and make such other arrangements as the claims officer considers appropriate in connection with the acceptance, payment or administration of an award, including for the purpose of:
 - (a) making one or more interim payment;
 - (b) establishing a trust to administer the award, on such terms or in accordance with such arrangements as the claims officer may specify;
 - (c) retaining the award until the applicant's 18th birthday;
 - (d) providing that an award is to consist in whole or in part of an annuity;
 - (e) requiring the appointment of a deputy or guardian;
 - (f) repaying the award in full or in part in the event that it is no longer required by the applicant, including by means of a trust on terms which provide for unused funds to revert to the Authority.
100. Any cost arising as a result of a direction, condition or arrangement under paragraph 99 will not be met by the Authority, unless an award includes a payment under paragraph 45(i) in which case only the cost arising in relation to that payment will be met.
101. Subject to a direction, condition or arrangement in connection with the award under paragraph 99, the entitlement to an award only arises on the date on which the Authority receives written notice of acceptance of the determination.

Reconsideration and repayment

102. A claims officer may reconsider a determination before final payment of an award, whether or not an interim payment has been made, where the claims officer becomes aware of evidence or a change in circumstances which, if known prior to the determination, would have affected whether an award was made or its amount.
103. (1) A claims officer may require repayment of all or part of an award where the claims officer is satisfied that evidence received after final payment has been made shows that the applicant:
- (a) has not cooperated as far as reasonably practicable in bringing the assailant to justice;
 - (b) has deliberately misled a claims officer in relation to a material aspect of their application; or
 - (c) has received a payment in respect of which a reduction could have been made under paragraph 47, 48 or 78.
- (2) The amount of a repayment under:
- (a) sub-paragraph (1)(a) or (b) will be the full amount of the payment made to the applicant; and
 - (b) sub-paragraph (1)(c) will be for the amount the applicant has received which could have been deducted from their award.
104. A claims officer will notify the applicant in writing of a decision to reconsider a determination or to require repayment under paragraph 102 or 103.
105. An applicant must make any representations about such a decision so that they are received by the Authority within 30 days after the date of the written notice under paragraph 104.
106. A claims officer will notify the applicant in writing of a final decision on reconsideration or repayment.

Further payment on re-opening of an application

107. A claims officer may re-open an application after a final award has been made, including when the award followed a direction by the Tribunal, in order to make an additional payment where a condition in paragraph 108 is satisfied.

108. The conditions referred to in paragraph 107 are:
- (a) a person who has accepted an award subsequently dies as a result of the relevant injury giving rise to the award; or
 - (b) there has been so material a change in the medical condition of the applicant that allowing the original determination to stand would give rise to an injustice to the applicant.
109. An application may only be re-opened under paragraph 107:
- (a) within two years after the date on which the Authority received the notice of acceptance of the determination, or of the date of the Tribunal's direction to make an award; or
 - (b) if later, with supporting evidence which means that the application can be determined without further extensive enquiries by a claims officer.

Review

110. An applicant may seek a review of:
- (a) a decision as to the determination of an award or its amount, including on re-opening under paragraph 107;
 - (b) a decision under paragraph 96 to withdraw a determination;
 - (c) a final decision notified under paragraph 106 on reconsideration of an award;
 - (d) a final decision notified under paragraph 106 to require repayment or partial repayment of an award;
 - (e) a decision not to extend a time limit under paragraph 82, 95 or 113;
 - (f) a decision in respect of medical evidence under paragraph 87(a) or a deduction under paragraph 89; and
 - (g) a decision not to re-open an application under paragraph 107.
111. An applicant may not seek a review of a decision made on review or appeal.
112. An application for a review must be made in writing and be accompanied by the grounds on which review is sought and any supporting evidence. It must be sent by the applicant so that it is received by the Authority within 56 days after the date of the written notice of decision to which the application relates.

113. A claims officer may extend the time limit in paragraph 112 for one further period of up to 56 days where:
- (a) an application to extend is made in writing, whether before or after expiry of the initial period; and
 - (b) due to exceptional circumstances the applicant could not have complied with the time limit.
114. A review will be conducted, and a decision on an application to extend time under paragraph 113 will be made, by a claims officer other than the claims officer who made the decision to which that application relates. The claims officer who conducts the review will not be bound by any previous decision made in connection with the application.
115. Unless paragraph 117 applies, the claims officer conducting the review must send the applicant written notice of the decision on a review.
116. Where the Authority does not receive a notice of appeal in respect of the review decision, a claims officer will proceed to determine the application in accordance with the review decision.
117. Where a claims officer decides on a review to re-open an application under paragraph 107, that officer will proceed to determine the application without sending written notice of the review decision.

Appeal

118. An applicant who is dissatisfied with a decision on a review, or a determination on re-opening under paragraph 117, may appeal to the Tribunal against that decision or determination in accordance with the rules of the Tribunal.
119. On receipt of a notice of appeal, a claims officer may:
- (a) decide that the review decision under appeal was made in error; and
 - (b) send written notice of a revised review decision to the applicant.
120. An applicant who receives a notice under paragraph 119 of a revised review decision must send written notice to the Authority and the Tribunal of:
- (a) acceptance of the revised review decision; or

- (b) rejection of that decision.
121. Where the Authority receives notice in accordance with paragraph 120(a), and a claims officer is satisfied that the applicant has withdrawn their appeal in accordance with the rules of the Tribunal, the application will be determined in accordance with the revised review decision.
122. Where the Tribunal allows an appeal against a decision on review under paragraph 110(a), (c), (d) or (f), it may make such direction as it considers appropriate for the determination of the application by a claims officer in accordance with this Scheme.
123. Where the Tribunal allows an appeal against a decision on review under paragraph 110(a), (c) or (d), it may direct that an interim payment is made to the applicant.
124. Where the Tribunal allows an appeal against a decision on review under paragraph 110(b), the applicant must notify the Authority within 56 days after the date of the appeal decision in which to notify the Authority that they either accept the determination or seek a review of that determination.
125. Where the Tribunal allows an appeal against a decision under paragraph 110(e) not to extend a time limit, the Authority will arrange for the application to be treated as if the time limit had been extended by a claims officer in accordance with this Scheme. In relation to a decision under paragraph 95 or 113, the applicant must notify the Authority within 56 days after the date of the appeal decision that they either accept the relevant determination or decision or seek a review.
126. Before the Tribunal may allow an appeal against a decision under paragraph 110(g) not to re-open a case, the Tribunal must be satisfied that the application can be determined without further extensive enquiries by a claims officer. Where the Tribunal allows such an appeal, the Authority will re-open the case.
127. Where the Tribunal is considering an appeal against a decision on a review under paragraph 110(a), (c) or (d), it may direct that an interim payment is made to the applicant.

128. Where the Tribunal is satisfied that an appeal against a decision on review under paragraph 110(a), (c) or (d) is frivolous or vexatious, it may reduce the amount of an award as it considers appropriate.

Scheme administration

129. The Secretary of State's arrangements for making payments under this Scheme include the designation of an organisation for the purpose of administering this Scheme known as the Criminal Injuries Compensation Authority ("the Authority").
130. The Chief Executive of the Authority must submit an annual report to the Secretary of State as soon as possible after the end of each financial year on the operation of this Scheme during that year.
131. The Chief Executive must keep proper accounts and proper records in relation to those accounts.
132. The Chief Executive must prepare a statement of accounts in each financial year in such form as the Secretary of State may direct.
133. The Chief Executive must submit the statement of accounts to the Secretary of State as soon as possible after the end of the financial year, or at such other time as the Secretary of State may direct.

Annexes

A. Interpretation

B. Previous Convictions

C. Tariff of Injuries

D. Multiplier Tables

Annex A: Interpretation

In this Scheme:

“applicant” means the person for whose benefit an application for an award is made;

“armed forces” means Her Majesty’s United Kingdom armed forces;

“assailant” means a person responsible for the relevant injury arising out of the designated act which is the subject of the application;

“the Authority” means the Criminal Injuries Compensation Authority;

“award” means the total payments, subject to any deductions, to which the applicant may be entitled;

“designated act” means an act designated under section 47 of the Crime and Security Act 2010 and a reference to the first date of the designated act means, where that act occurs over more than one day, the first day on which it occurs and a reference to the last date of the designated act means, where that act occurs over more than one day, the last day;

“final award” means an award which, but for the possibility of being re-opened in accordance with paragraph 107, disposes of the application;

“relevant injury” means an injury which appears in Part A or B of the tariff in Annex C;

“social security benefits” includes all state and local authority benefits or assistance, whether paid in whole or in part from the funds of any part of the United Kingdom or elsewhere;

“state pension age” means the state pension age in Great Britain or, if the applicant is ordinarily resident in Northern Ireland, the state pension age in Northern Ireland;
and

“the Tribunal” means the First-tier Tribunal established under the Tribunals, Courts and Enforcement Act 2007.

A reference in this Scheme to a child or parent of another person includes a reference to someone accepted as such by that other person.

Annex B: Previous Convictions

1. This Annex sets out the circumstances in which an award under this Scheme will be withheld or reduced because the applicant to whom an award would otherwise be made has unspent convictions.
2. Paragraphs 3 to 6 do not apply to a spent conviction. “Conviction”, “service disciplinary proceedings”, and “sentence” have the same meaning as under the Rehabilitation of Offenders Act 1974, and whether a conviction is spent, or a sentence is excluded from rehabilitation, will be determined in accordance with that Act.
3. An award will not be made to an applicant who on the date of their application has a conviction for an offence which resulted in:
 - (a) a sentence excluded from rehabilitation;
 - (b) a custodial sentence;
 - (c) a sentence of service detention;
 - (d) removal from Her Majesty’s service;
 - (e) a community order;
 - (f) a youth rehabilitation order; or
 - (g) a sentence equivalent to a sentence under sub-paragraphs (a) to (f) imposed under the law of Northern Ireland or a member state of the European Union, or such a sentence properly imposed under the law of a country outside the European Union.
4. An award will be withheld or reduced where, on the date of their application, the applicant has a conviction for an offence in respect of which a sentence other than a sentence specified in paragraph 3 was imposed unless there are exceptional reasons not to withhold or reduce it.
5. Paragraph 4 does not apply to a conviction for which the only penalty imposed was one or more of an endorsement, penalty points or a fine under Schedule 2 to the Road Traffic Offenders Act 1988.
6. Paragraphs 3 and 4 do not apply in relation to a sentence under the law of a country outside the United Kingdom for conduct which on the date of conviction did not constitute a criminal offence under the law of any part of the United Kingdom.

7. Paragraphs 2 to 6 also apply in relation to an applicant who after the date of application but before the date of its final determination is convicted of an offence which is not immediately spent.

8. In this Annex:

“community order” means:

- (a) a community payback order under section 227A of the Criminal Procedure (Scotland) Act 1995;
- (b) a community order under section 177 of the Criminal Justice Act 2003;
- (c) a service community order or overseas community order under the Armed Forces Act 2006; or
- (d) any order of a kind which, on the date this Scheme is made, has been superseded (whether directly or indirectly) by an order mentioned in subparagraph (a), (b) or (c);

“custodial sentence” means:

- (a) a sentence of imprisonment;
- (b) a sentence of detention in a young offender institution, or, in Scotland, a young offenders institution;
- (c) a sentence of Borstal training;
- (d) a sentence of youth custody;
- (e) a sentence of corrective training;
- (f) a sentence of detention under section 205 or 208 of the Criminal Procedure (Scotland) Act 1995;
- (g) a sentence of detention under section 91 of the Powers of Criminal Courts (Sentencing) Act 2000 or section 209 of the Armed Forces Act 2006;
- (h) a detention and training order under section 100 of the Powers of Criminal Courts (Sentencing) Act 2000 or an order under section 211 of the Armed Forces Act 2006; or
- (i) any sentence of a kind which, on the date this Scheme is made, has been superseded (whether directly or indirectly) by a sentence mentioned in subparagraph (f), (g) or (h);

“removal from Her Majesty’s service” means a sentence of dismissal with disgrace from Her Majesty’s service, a sentence of dismissal from Her Majesty’s service or a sentence of cashiering or discharge with ignominy;

“sentence of imprisonment” includes a sentence of penal servitude;

“sentence of service detention” means:

- (a) a sentence of service detention (within the meaning given by section 374 of the Armed Forces Act 2006), or a sentence of detention corresponding to such a sentence, in respect of a conviction in service disciplinary proceedings; or
- (b) any sentence of a kind which, on the date this Scheme is made, has been superseded (whether directly or indirectly) by a sentence mentioned in subparagraph (a);

“youth rehabilitation order” means:

- (a) a youth rehabilitation order under Part 1 of the Criminal Justice and Immigration Act 2008; or
- (b) any order of a kind which, on the date this Scheme is made, has been superseded (whether directly or indirectly) by a youth rehabilitation order.

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TARIFF OF INJURIES – PART A: PHYSICAL AND MENTAL INJURIES

Description of injury	Level	Standard Amount £
<u>GENERAL</u>		
<u>Burns</u>		
Affecting multiple areas of body covering over 25% of total skin, with significant scarring	A14	33,000
<p><i>Note [1]: For other burn injuries see under individual parts of the body.</i></p> <p><i>“Moderate” describes:</i></p> <ul style="list-style-type: none"> - first or second degree burns covering no more than 25% of the affected area in adults, or no more than 20% in children; or - third degree burns covering no more than 10% of the affected area in either adults or children. <p><i>“Severe” describes:</i></p> <ul style="list-style-type: none"> - first or second degree burns covering more than 25% of the affected area in adults, or more than 20% in children; - third degree burns covering more than 10% of the affected area in either adults or children; or - fourth degree burns. 		
<u>Major paralysis (other than as a result of brain damage)</u>		
Hemiplegia (impairment in motor or sensory function of one half of body)		
- mild	A13	27,000
- moderate	A16	55,000
- severe	A18	110,000
Paraplegia (impairment in motor or sensory function of the lower extremities)		
- minimal	A13	27,000
- moderate but substantially incomplete	A18	110,000
- substantially complete	A19	175,000
Quadraplegia/tetraplegia (impairment in motor or sensory function of upper and lower extremities)		
- substantially incomplete injury to both upper and lower limb levels	A15	44,000
- substantially incomplete to upper limb level but complete to lower limb level	A19	175,000
- substantially complete to both upper and lower limb levels	A20	250,000
<u>Medically recognised illness or condition (excluding minor and mental injury)</u>		
Moderately disabling disorder where the symptoms and disability		

persist for 28 weeks or more from the incident or date of onset			
	- lasting 28 weeks or more		
	- not permanent	A2	1,500
	- permanent	A7	6,200
Seriously disabling disorder where the symptoms and disability persist for 13 weeks or more from the incident or date of onset			
	- lasting 13 weeks or more up to 28 weeks	A4	2,400
	- lasting 28 weeks or more		
	- not permanent	A7	6,200
	- permanent	A12	22,000
<u>Mental injury</u>			
<i>Note [2]: "Mental injury" does not include temporary mental anxiety and similar temporary conditions.</i>			
<i>A mental injury is disabling if it has a substantial adverse effect on a person's ability to carry out normal day-to-day activities for the time specified (e.g. impaired work or school performance or effects on social relationships or sexual dysfunction).</i>			
Disabling mental injury, confirmed by diagnosis or prognosis of psychiatrist or clinical psychologist:			
	- lasting 6 weeks or more up to 28 weeks	A1	1,000
	- lasting 28 weeks or more up to 2 years	A4	2,400
	- lasting 2 years or more up to 5 years	A7	6,200
	- lasting 5 years or more but not permanent	A9	13,500
Permanent mental injury, confirmed by diagnosis or prognosis of psychiatrist or clinical psychologist:			
	- moderately disabling	A11	19,000
	- seriously disabling	A13	27,000
<u>Peripheral sensory nerve damage</u>			
	- permanent disability		
	- significant loss (eg loss of sensation in large area of leg)	A2	1,500
	- serious loss (eg loss of sensation of hand)	A7	6,200
<u>Peripheral motor nerve damage not otherwise compensated for</u>			
	- permanent disability		
	- minor (e.g. paralysis or equivalent functional loss of finger or toe)	A1	1,000
	- significant (e.g. paralysis or equivalent loss of handgrip or foot movement)	A7	6,200

HEAD & NECK

Burns (causing more than minor disfigurement)

Head			
	- moderate	A4	2,400
	- severe	A10	16,500
Face			
	- moderate	A5	3,500
	- severe	A13	27,000
Neck			
	- moderate	A4	2,400
	- severe	A10	16,500

Scarring

Head			
	- significant disfigurement	A2	1,500
	- serious disfigurement	A5	3,500
Face			
	- significant disfigurement	A4	2,400
	- serious disfigurement	A8	11,000
Neck			
	- significant disfigurement	A2	1,500
	- serious disfigurement	A6	4,600

Brain Damage

Note [3]: A brain injury can cause physical or mental damage, resulting in, for example, loss of muscle or nerve control, loss of balance, incontinence, or impairment of concentration, memory, motivation or personality. It can also commonly cause epilepsy, to a greater or lesser extent. Where the cause of any injury is brain damage there will not be additional awards for separate injuries but the seriousness of the combined effects will be measured together.

Minor head injury

	Brain injury, if any, minimal (e.g. one or more of concussion, impairment of balance or headaches)		
	- lasting 28 weeks or more	A2	1,500
	- permanent	A7	6,200

Minor brain damage

	Good recovery, able to socialise and return to work but persisting problems with concentration, memory, disinhibition of mood affecting lifestyle, leisure activities, future work prospects		
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	- slight and short lived (less than 6 months)	A7	6,200
	- moderate and medium term (6 months up to 2 years)	A10	16,500
	- significant and long lasting (2 years or more)	A12	22,000
Moderate brain damage			
	Some dependence on others, intellectual deficit, personality change, ability to work reduced, some effect on the senses		
	- slight	A13	27,000
	- moderate	A16	55,000
	- significant	A17	82,000
Moderately severe brain damage			
	Serious disablement of physical or mental faculties requiring substantial dependence on professional or other care, with marked impairment of intellect and personality, abnormal behaviour and poor communication		
Very serious brain injury			
	Severe physical limitation, significant effect on the senses with little insight or significant reduction in life expectancy. Little or no meaningful response to the environment, little or no language function, double incontinence and need for full-time or all day and some night nursing care		
<i>Note [4]: Applications otherwise within level A20 fall into level A19 if life expectancy is greatly reduced or there is little or no insight due to persistent vegetative state.</i>			
	No useful physical movement, significant effect on the senses and with some degree of insight. Little or no meaningful response to the environment, little or no language function, double incontinence and need for full-time nursing care		
<u>Epilepsy - continuing disability</u>			
	- well controlled on medication	A7	6,200
	- partially controlled on medication	A9	13,500
	- uncontrolled despite medication	A15	44,000
<u>Ear</u>			
Deafness			
	- permanent partial deafness (remaining hearing socially useful, with hearing aid if necessary)		
	- one ear	A3	1,800
	- both ears	A7	6,200
	- permanent total deafness		
	- one ear	A10	16,500

	- in only hearing ear	A14	33,000
	- both ears	A15	44,000
Loss of ear			
	- partial loss of ear(s)	A4	2,400
	- loss of ear	A8	11,000
	- loss of both ears	A11	19,000
Perforated ear drum			
	- both ears	A1	1,000
Tinnitus (ringing noise in ear(s))			
	- lasting 13 weeks or more	A2	1,500
	- permanent		
	- other than very severe	A7	6,200
	- very severe	A10	16,500
Vestibular damage (causing giddiness)			
	- lasting 28 weeks or more - recovery expected	A2	1,500
	- permanent	A7	6,200
<u>Eye</u>			
Blow out or other fracture of orbital bone cavity containing eyeball			
	- no operation	A2	1,500
	- requiring operation	A4	2,400
Permanent blurred or double vision			
	- slight	A4	2,400
	- moderate	A7	6,200
	- serious	A9	13,500
Cataracts			
	- one eye		
	- requiring operation	A2	1,500
	- permanent (inoperable or operation unsuccessful)	A7	6,200
	- both eyes		
	- requiring operation	A7	6,200
	- permanent (inoperable or operation unsuccessful)	A11	19,000
Permanent loss of visual field			

	- slight	A1	1,000
	- moderate	A5	3,500
	- serious	A15	44,000
Dislocation of lens			
	- one eye	A5	3,500
	- both eyes	A9	13,500
Glaucoma			
		A1	1,000
Hyphaema requiring operation			
	- both eyes	A1	1,000
Loss of eye			
	- one eye	A13	27,000
	- both eyes	A18	110,000
Loss of sight			
	- one eye	A12	22,000
	- one eye, where the sight in the uninjured eye cannot be corrected to better than 6/36	A14	33,000
	- one eye, where the uninjured eye is already totally blind	A17	82,000
	- both eyes	A18	110,000
Partial loss of vision when corrected by glasses or contact lenses or other means (e.g. laser surgery)			
	- better than 6/12	A1	1,000
	- 6/12	A6	4,600
	- 6/18	A7	6,200
	- 6/24	A9	13,500
	- 6/36	A10	16,500
	- 6/60	A11	19,000
	- substantial loss of vision (both eyes) at least 6/36 in each eye or worse	A16	55,000
Residual central floater(s) affecting vision		A2	1,500
Retina			
	- damage not involving detachment		
	- one eye	A1	1,000
	- both eyes	A5	3,500
	- detached		
	- one eye	A5	3,500
	- both eyes	A9	13,500
Significant penetrating injury			

	- one eye	A1	1,000
	- both eyes	A6	4,600
Traumatic angle recession		A1	1,000
<u>Face</u>			
Permanent clicking jaw		A5	3,500
Dislocated jaw - continuing significant disability		A5	3,500
Fractured ethmoid - operation required		A4	2,400
Fractured zygoma (malar/cheek bone)			
	- no operation - continuing significant disability	A4	2,400
	- operation required		
	- substantial recovery	A1	1,000
	- continuing significant disability	A5	3,500
Fractured jaw bone (one or more of mandible/maxilla)			
	- no operation		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
	- operation required		
	- substantial recovery	A3	1,800
	- continuing significant disability	A7	6,200
Multiple fractures to face (e.g. Le Fort fractures types 2 & 3)		A8	11,000
Numbness or loss of feeling			
	- permanent		
	- moderate (e.g. cheek, forehead)	A2	1,500
	- severe (e.g. lip interfering with function)	A4	2,400
<u>Neck</u>			
Strained neck or whiplash injury			
	- disabling		
	- for more than 13 weeks	A1	1,000
	- seriously disabling		
	- not permanent	A5	3,500
	- permanent	A8	11,000

<u>Nose</u>			
Loss of smell or taste			
	- partial loss of smell or taste, or both	A5	3,500
	- total		
	- loss of smell or taste	A8	11,000
	- loss of smell and taste	A10	16,500
Partial loss of nose (at least 10%)		A4	2,400
<u>Skull</u>			
Fracture			
	- simple		
	- no operation	A1	1,000
	- requiring operation	A5	3,500
	- depressed		
	- no operation	A4	2,400
	- requiring operation	A6	4,600
<u>Teeth</u>			
Damage to:			
	- one or more front teeth requiring crown(s)	A1	1,000
Fractures to one or more teeth requiring apicectomy (surgery to gum to reach root - root resection)		A3	1,800
Loss of:			
	- crowns	A1	1,000
	- front teeth (incisor or canine)		
	- one front tooth	A2	1,500
	- two or three front teeth	A4	2,400
	- four or more front teeth	A5	3,500
	- teeth other than front		
	- two or more teeth	A2	1,500
<u>Tongue</u>			
Impaired speech (other than slight impairment)			
	- moderate	A5	3,500
	- serious	A8	11,000
	- severe	A11	19,000

Loss of speech - permanent	A14	33,000
Loss of tongue	A15	44,000
<u>UPPER LIMBS</u>		
<u>Burns</u>		
Moderate (excluding minor burns)	A4	2,400
Severe	A8	11,000
<u>Scarring</u>		
Significant disfigurement	A1	1,000
Serious disfigurement	A5	3,500
<u>Arm</u>		
Loss of:		
- one non-dominant arm	A14	33,000
- one dominant arm	A16	55,000
- one arm where there is no remaining arm or hand with any useful function	A17	82,000
- both arms	A18	110,000
Paralysis of or equivalent loss of function of:		
- one non-dominant arm	A13	27,000
- one dominant arm	A15	44,000
- total loss of function of one arm where there is no remaining arm or hand with any useful function	A17	82,000
- both arms	A17	82,000
<u>Elbow</u>		
Dislocated or fractured		
- one elbow		
- substantial recovery	A2	1,500
- continuing significant disability	A7	6,200
- both elbows		
- substantial recovery	A7	6,200
- continuing significant disability	A8	11,000
<u>Finger and Thumb</u>		
Fracture or dislocation of:		

	- thumb		
	- one hand		
	- continuing significant disability	A4	2,400
	- both hands		
	- substantial recovery	A5	3,500
	- continuing significant disability	A7	6,200
	- index finger		
	- one hand		
	- continuing significant disability	A3	1,800
	- both hands		
	- substantial recovery	A4	2,400
	- continuing significant disability	A6	4,600
	- one finger other than index finger		
	- both hands		
	- continuing significant disability	A4	2,400
	- two or more fingers other than index finger		
	- one hand		
	- continuing significant disability	A1	1,000
	- both hands		
	- substantial recovery	A2	1,500
	- continuing significant disability	A6	4,600
Loss of:			
	- finger other than index finger	A5	3,500
	- two or more fingers	A8	11,000
	- index finger	A7	6,200
	- both index fingers	A10	16,500
	- thumb	A10	16,500
	- both thumbs	A16	55,000
Partial loss of:			
	- finger other than thumb or index finger	A1	1,000
	- two or more fingers other than index finger or thumb	A5	3,500
	- thumb or index finger	A4	2,400
	- thumb or index finger - both hands	A7	6,200
	- thumb and index finger - one hand	A7	6,200
	- thumb and index finger - both hands	A10	16,500

<u>Hand</u>			
Fractured hand			
	- one hand		
	- continuing significant disability	A5	3,500
	- both hands		
	- substantial recovery	A3	1,800
	- continuing significant disability	A7	6,200
Loss of, or equivalent loss of function of:			
	- one non-dominant hand	A14	33,000
	- one dominant hand	A16	55,000
	- loss of, or total loss of function of one hand where there is no remaining hand or arm with any useful function	A17	82,000
	- both hands	A18	110,000
Permanently & seriously impaired grip			
	- one hand	A7	6,200
	- both hands	A10	16,500
<u>Humerus (upper arm bone)</u>			
Fractured			
	- one arm		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
	- both arms		
	- substantial recovery	A7	6,200
	- continuing significant disability	A8	11,000
<u>Radius (a forearm bone)</u>			
Fractured			
	- one arm		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
	- both arms		
	- substantial recovery	A7	6,200
	- continuing significant disability	A8	11,000

<u>Shoulder</u>			
Dislocated			
	- one shoulder		
	- continuing significant disability	A5	3,500
	- both shoulders		
	- substantial recovery	A3	1,800
	- continuing significant disability	A7	6,200
Frozen			
	- one shoulder		
	- continuing significant disability	A5	3,500
	- both shoulders		
	- substantial recovery	A2	1,500
	- continuing significant disability	A7	6,200
<u>Damage to one or more of tendon, ligament or cartilage</u>			
Minor damage			
	- one arm		
	- continuing significant disability	A1	1,000
	- both arms		
	- continuing significant disability	A4	2,400
Moderate damage			
	- one arm		
	- continuing significant disability	A4	2,400
	- both arms		
	- substantial recovery	A4	2,400
	- continuing significant disability	A7	6,200
Severely damaged			
	- one arm		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
	- both arms		
	- substantial recovery	A6	4,600
	- continuing significant disability	A8	11,000

<u>Ulna (a forearm bone)</u>			
Fractured			
	- one arm		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
	- both arms		
	- substantial recovery	A7	6,200
	- continuing significant disability	A8	11,000
<u>Wrist</u>			
Fractured - colles type or equivalent fracture or displacement of distal radius			
	- one wrist		
	- substantial recovery	A4	2,400
	- continuing significant disability	A7	6,200
	- both wrists		
	- substantial recovery	A7	6,200
	- continuing significant disability	A8	11,000
Fractured or dislocated - including scaphoid fracture			
	- one wrist		
	- substantial recovery	A4	2,400
	- continuing significant disability	A7	6,200
	- both wrists		
	- substantial recovery	A7	6,200
	- continuing significant disability	A8	11,000
Sprained			
	- one wrist		
	- disabling for 13 weeks or more	A1	1,000
	- both wrists		
	- disabling for 13 weeks or more	A3	1,800
<u>TORSO</u>			
<u>Burns</u>			
Moderate (excluding minor burns)		A4	2,400
Severe		A8	11,000

<u>Scarring</u>		
Significant disfigurement	A1	1,000
Serious disfigurement	A5	3,500
<u>Abdomen</u>		
Injury requiring laparotomy - including no repair or repair of one organ	A3	1,800
Injury requiring laparotomy or laparoscopy		
- including repair of two organs	A5	3,500
- including repair of three or more organs	A7	6,200
Laparotomy with one or more of colostomy, ileostomy or ureterostomy lasting 14 weeks or more but not permanent	A5	3,500
Laparotomy with one or more of permanent colostomy, ileostomy or ureterostomy	A9	13,500
<u>Back</u>		
Fracture of vertebra		
- one vertebra		
- substantial recovery	A1	1,000
- continuing significant disability	A5	3,500
- more than one vertebra		
- substantial recovery	A4	2,400
- continuing significant disability	A7	6,200
Prolapsed intervertebral disc(s)		
- seriously disabling		
- not permanent	A5	3,500
- permanent	A7	6,200
Ruptured intervertebral disc(s) - requiring surgical removal	A8	11,000
Strained		
- disabling		
- for 13 weeks or more	A1	1,000
- seriously disabling		
- not permanent	A5	3,500
- permanent	A8	11,000
<u>Chest</u>		
Injury requiring thoracotomy	A7	6,200
Injury requiring thoracotomy with removal or extensive repair of one	A10	16,500

or more organs		
<u>Clavicle (collar bone)</u>		
Fractured		
- one clavicle		
- continuing significant disability	A4	2,400
- two clavicles		
- substantial recovery	A4	2,400
- continuing significant disability	A6	4,600
<u>Coccyx (tail bone)</u>		
Fractured	A1	1,000
<u>Genitalia</u>		
Injury requiring medical treatment		
- permanent damage		
- moderate	A5	3,500
- severe	A8	11,000
Loss of fertility	A16	55,000
<u>Hernia</u>		
- hernia	A3	1,800
- hernias	A5	3,500
<u>Kidney</u>		
Loss of kidney	A8	11,000
Serious and permanent damage to, or loss of, both or only functioning kidney	A16	55,000
<u>Lung</u>		
Punctured		
- one lung	A2	1,500
- both lungs	A6	4,600
Collapsed		
- one lung	A3	1,800
- both lungs	A7	6,200
Permanent and disabling damage to lungs from smoke or chemical	A8	11,000

inhalation		
<u>Pancreas</u>		
Loss of pancreas	A10	16,500
<u>Pelvis</u>		
Fractured		
- substantial recovery	A4	2,400
- continuing significant disability	A8	11,000
<u>Scapula (shoulder blade)</u>		
Fractured		
- one scapula		
- substantial recovery	A1	1,000
- continuing significant disability	A4	2,400
- both scapulas		
- substantial recovery	A4	2,400
- continuing significant disability	A6	4,600
<u>Spleen</u>		
Loss of spleen	A8	11,000
<u>Sternum (breast bone)</u>		
Fractured		
- substantial recovery	A1	1,000
- continuing significant disability	A5	3,500
LOWER LIMBS		
<u>Burns</u>		
Moderate (excluding minor burns)	A4	2,400
Severe	A8	11,000
<u>Scarring</u>		
Significant disfigurement	A1	1,000
Serious disfigurement	A5	3,500

<u>Ankle</u>			
Fractured or dislocated			
	- one ankle		
	- substantial recovery	A4	2,400
	- continuing significant disability	A8	11,000
	- both ankles		
	- substantial recovery	A7	6,200
	- continuing significant disability	A10	16,500
Sprained			
	- one ankle		
	- disabling for more than 13 weeks	A1	1,000
	- both ankles		
	- disabling for 13 weeks or more	A3	1,800
<u>Femur (thigh bone)</u>			
Fractured			
	- one leg		
	- substantial recovery	A3	1,800
	- continuing significant disability	A6	4,600
	- both legs		
	- substantial recovery	A5	3,500
	- continuing significant disability	A8	11,000
<u>Fibula (slender bone from knee to ankle)</u>			
Fractured			
	- one leg		
	- substantial recovery	A1	1,000
	- continuing significant disability	A3	1,800
	- both legs		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
<u>Foot</u>			
Fractured metatarsal bones			
	- one foot		

	- substantial recovery	A1	1,000
	- continuing significant disability	A3	1,800
	- both feet		
	- substantial recovery	A2	1,500
	- continuing significant disability	A5	3,500
Fractured tarsal bones			
	- one foot		
	- substantial recovery	A2	1,500
	- continuing significant disability	A7	6,200
	- both feet		
	- substantial recovery	A5	3,500
	- continuing significant disability	A9	13,500
Heel			
Fractured heel bone			
	- one foot		
	- substantial recovery	A2	1,500
	- continuing significant disability	A7	6,200
	- both feet		
	- substantial recovery	A5	3,500
	- continuing significant disability	A9	13,500
Hip			
Fractured or dislocated			
	- one hip		
	- substantial recovery	A4	2,400
	- continuing significant disability	A8	11,000
	- both hips		
	- substantial recovery	A7	6,200
	- continuing significant disability	A10	16,500
Knee			
Patella (knee cap)			
Dislocated			
	- one knee		

	- continuing significant disability	A5	3,500
	- both knees		
	- substantial recovery	A1	1,000
	- continuing significant disability	A7	6,200
Fractured			
	- one knee		
	- substantial recovery	A1	1,000
	- continuing significant disability	A5	3,500
	- both knees		
	- substantial recovery	A4	2,400
	- continuing significant disability	A7	6,200
removal of			
	- one knee	A3	1,800
	- both knees	A5	3,500
<u>Leg</u>			
Loss of			
	- one leg		
	- below knee	A14	33,000
	- above knee	A15	44,000
	- loss of, or total loss of function of one leg where there is no remaining leg with useful function	A17	82,000
	- both legs, whether below or above knee	A18	110,000
	Paralysis of leg (see also major paralysis {paraplegia})	A13	27,000
<u>Damage to one or more of tendon, ligament or cartilage</u>			
Minor damage			
	- one leg		
	- continuing significant disability	A2	1,500
	- both legs		
	- continuing significant disability	A5	3,500
Moderate damage			
	- one leg		
	- continuing significant disability	A5	3,500
	- both legs		
	- substantial recovery	A4	2,400

	- continuing significant disability	A8	11,000
Severe damage			
	- one leg		
	- substantial recovery	A2	1,500
	- continuing significant disability	A7	6,200
	- both legs		
	- substantial recovery	A6	4,600
	- continuing significant disability	A10	16,500
<u>Tibia (shin bone)</u>			
Fractured			
	- one leg		
	- substantial recovery	A3	1,800
	- continuing significant disability	A6	4,600
	- both legs		
	- substantial recovery	A5	3,500
	- continuing significant disability	A8	11,000
<u>Toe</u>			
Fractured			
	- great toe		
	- one foot		
	- substantial recovery	A1	1,000
	- continuing significant disability	A7	6,200
	- both feet		
	- substantial recovery	A3	1,800
	- continuing significant disability	A9	13,500
	- two or more toes		
	- one foot		
	- continuing significant disability	A1	1,000
	- both feet		
	- continuing significant disability	A4	2,400
Loss of:			
	- great toe	A7	6,200
	- both great toes	A9	13,500

	- two or more toes (other than great toe)	A4	2,400
Partial loss of:			
	- great toe	A1	1,000
	- both great toes	A5	3,500

TARIFF OF INJURIES – PART B: SEXUAL AND PHYSICAL ABUSE AND OTHER PAYMENTS

<u>Description of injury</u>	Level	Standard Amount £
<u>Fatal injury</u>		
Single qualifying relative	B9	11,000
Multiple qualifying relatives	B6	5,500
<u>Physical abuse of adults</u>		
<p><i>Note [5]: Where a person has sustained a number of injuries as part of a pattern of abuse, payment will normally be made to reflect the pattern of abuse, based on the most serious injuries in the pattern, rather than each separate injury. An exception may be made where a single injury sustained as part of the pattern of abuse would give rise to a higher tariff payment than that for the abuse, in which case the higher payment may be made instead of the award for the pattern of abuse.</i></p> <p><i>Whether injuries have arisen as part of a pattern of abuse will be assessed by reference to all the circumstances, including whether there was one or more assailants (and whether they acted together), the nature of the injuries and incidents, and the period in which they occurred.</i></p>		
<u>Serious abuse</u>		
- intermittent physical assaults resulting in an accumulation of healed wounds, burns or scalds, but with no appreciable disfigurement	B3	2,000
<u>Severe abuse</u>		
- pattern of repetitive violence resulting in minor disfigurement	B6	5,500
Persistent pattern of severe abuse over a period more than 3 years	B8	8,200
<u>Physical abuse of children</u>		
<i>Note [5] applies to physical abuse of children</i>		
<u>Minor abuse</u>		
- isolated or intermittent assault(s) resulting in weals, hair pulled from the scalp etc	B1	1000
<u>Serious abuse</u>		
- intermittent physical assaults resulting in an accumulation of healed wounds, burns or scalds, but with no appreciable disfigurement	B3	2,000
<u>Severe abuse</u>		
- persistent pattern of repetitive violence resulting in:		

	- moderate multiple injuries (e.g. bruising and minor fractures) or minor disfigurement	B6	5,500
	- significant multiple injuries	B8	8,200
	- severe multiple injuries	B10	13,500

Sexual offence where victim is any age (if not already compensated as a child)

Note [6]: Where a person has been the victim as part of a pattern of abuse of a number of sexual assaults which would otherwise qualify for separate payments, payment will normally be made for the pattern of abuse, based on the most serious incidents in the pattern, rather than for each separate incident.

An exception may be made where a single incident which occurred as part of the pattern of abuse would give rise to a higher tariff payment than that for the abuse, in which case the higher payment may be made instead of the award for the pattern of abuse.

Whether incidents are a part of a pattern of abuse will be assessed by reference to all the circumstances, including whether there was one or more assailants (and whether they acted together), the nature of the injuries and incidents, and the period in which they occurred.

Sexual assault			
	- minor - non-penetrative sexual physical act(s) over clothing	B1	1,000
	- serious - non-penetrative sexual physical act(s) under clothing	B3	2,000
	- severe - non-penile penetrative or oral-genital act(s)	B4	3,300
	- pattern of repetitive frequent severe abuse (whether by one or more attackers) over a period		
	- up to 3 years	B7	6,600
	- 3 years or more	B8	8,200
	- resulting in serious internal bodily injuries	B12	22,000
	- resulting in permanently disabling mental illness confirmed by psychiatric prognosis		
	- moderate mental illness	B12	22,000
	- severe mental illness	B13	27,000
Non-consensual penile penetration of one or more of vagina, anus or mouth			
	- by one attacker	B9	11,000
	- by two or more attackers	B10	13,500
	- resulting in serious internal bodily injuries	B12	22,000
	- resulting in permanently disabling mental illness confirmed by psychiatric prognosis		
	- moderate mental illness	B12	22,000
	- severe mental illness	B13	27,000
	- resulting in serious internal bodily injury with		

	permanent disabling mental illness confirmed by psychiatric prognosis		
	- moderate mental illness	B14	33,000
	- severe mental illness	B15	44,000
	- pattern of repetitive incidents (whether by one or more attackers) over a period		
	- up to 3 years	B11	16,500
	- 3 years or more	B12	22,000
<u>Sexual offence where victim is a child (under age of 18 at time of, or commencement of, offence) or an adult who by reason of mental incapacity is incapable of giving consent</u>			
<i>Note [6] applies where the victim is a child or an adult unable to give consent.</i>			
Sexual assault			
	- minor - non-penetrative sexual physical act(s) over clothing	B1	1,000
	- minor - non-penetrative frequent sexual physical act(s) over clothing	B2	1,500
	- serious - non-penetrative sexual physical act(s) under clothing	B3	2,000
	- serious - pattern of repetitive non-penetrative sexual physical acts under clothing	B4	3,300
Sexual assault			
	- one or more of non-penile penetrative or oral genital act(s)		
	- one incident	B4	3,300
	- two or more isolated incidents	B5	4,400
	- pattern of repetitive, frequent incidents		
	- over a period up to 3 years	B7	6,600
	- over a period of 3 years or more	B8	8,200
	- resulting in serious internal bodily injuries	B12	22,000
	- resulting in permanently disabling mental illness confirmed by psychiatric prognosis		
	- moderate mental illness	B12	22,000
	- severe mental illness	B13	27,000
Non-consensual penile penetration of one or more of vagina, anus or mouth			
	- one incident	B9	11,000
	- one incident involving two or more attackers	B10	13,500
	- repeated incidents over a period		
	- up to 3 years	B11	16,500

	- 3 years or more	B12	22,000
	- resulting in serious internal bodily injuries	B12	22,000
	- resulting in permanently disabling mental illness confirmed by psychiatric prognosis		
	- moderate mental illness	B12	22,000
	- severe mental illness	B13	27,000
	- resulting in serious internal bodily injury with permanent disabling mental illness confirmed by psychiatric prognosis		
	- moderate mental illness	B14	33,000
	- severe mental illness	B15	44,000
Other payments			
Where a person has sustained any of the following as a direct result of their being the victim of a sexual offence, an additional payment will be made. These payments will not be subject to the multiple injury formula at paragraph 37 of this Scheme.			
	Pregnancy	B6	5,500
	Sexually transmitted infection other than HIV, Hepatitis B or Hepatitis C		
	- substantial recovery	B6	5,500
	- permanent disability	B9	11,000
	Infection with one or more of HIV, Hepatitis B or Hepatitis C (sustained as a result of any crime of violence). This payment is not subject to the multiple injury formula.	B12	22,000
	Loss of foetus (sustained as a result of any crime of violence). This payment is not subject to the multiple injury formula.	B6	5,500

Annex D: Multiplier Tables

	Table A - Multipliers to be applied to account for the accelerated receipt of compensation	Table B - Discount factors to be applied to a lump sum in respect of loss which starts at a future date
Years of loss	Multiplier	Discount factor
1	0.9878	0.9756
2	1.9514	0.9518
3	2.8916	0.9286
4	3.8088	0.9060
5	4.7037	0.8839
6	5.5767	0.8623
7	6.4284	0.8413
8	7.2594	0.8207
9	8.0701	0.8007
10	8.8610	0.7812
11	9.6326	0.7621
12	10.3855	0.7436
13	11.1199	0.7254
14	11.8364	0.7077
15	12.5355	0.6905
16	13.2175	0.6736
17	13.8829	0.6572
18	14.5320	0.6412
19	15.1654	0.6255
20	15.7832	0.6103
21	16.3860	0.5954
22	16.9741	0.5809
23	17.5479	0.5667
24	18.1076	0.5529
25	18.6537	0.5394
26	19.1865	0.5262
27	19.7063	0.5134
28	20.2134	0.5009
29	20.7082	0.4887
30	21.1908	0.4767
31	21.6617	0.4651
32	22.1212	0.4538
33	22.5694	0.4427
34	23.0067	0.4319
35	23.4333	0.4214
36	23.8495	0.4111
37	24.2556	0.4011
38	24.6517	0.3913
39	25.0382	0.3817
40	25.4153	0.3724
41	25.7831	0.3633
42	26.1420	0.3545
43	26.4922	0.3458
44	26.8338	0.3374
45	27.1671	0.3292
46	27.4922	0.3211
47	27.8094	0.3133

48	28.1189	0.3057
49	28.4208	0.2982
50	28.7154	0.2909
51	29.0028	0.2838
52	29.2831	0.2769
53	29.5567	0.2702
54	29.8235	0.2636
55	30.0839	0.2572
56	30.3379	0.2509
57	30.5857	0.2448
58	30.8274	0.2388
59	31.0633	0.2330
60	31.2934	0.2273

Table C- Assumptions in relation to life expectancy

Age last birthday at date of determination or, in fatal case, death	Life expectancy	
	Male	Female
0- 5	91	94
6- 8	90	94
9- 11	90	93
12- 16	89	93
17- 19	89	92
20- 24	88	92
25- 27	88	91
28- 33	87	91
34- 39	87	90
40- 44	86	90
45- 63	86	89
64- 68	87	89
69- 70	87	90
71- 74	88	90
75	89	90
76- 77	89	91
78- 79	90	91
80	90	92
81- 83	91	92
84- 85	92	93
86- 87	93	94
88	94	94
89	95	95
90	95	96
91	96	96
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