



Personal Injuries Assessment Board

Strategic Plan 2012-2016

July 2012





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In July 2008, as part of a new brand identity project, the working name of the Board was changed from the Personal Injuries Assessment Board or PIAB to InjuriesBoard.ie. As a consequence, throughout this Report the organisation is referred to as InjuriesBoard.ie

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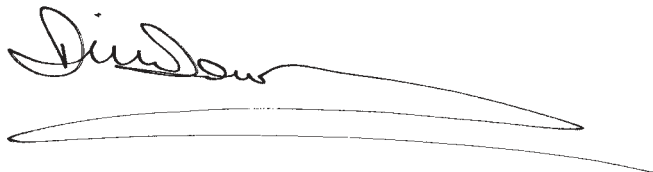
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Introduction by Chairperson

This is the second Strategic Plan prepared by the Board under the Personal Injuries Assessment Board Act 2003. During the timescale of this plan, we aim to build on the significant progress we have made under our previous plan.

The Board is committed to continuing to maintain and improve our low cost non-adversarial model which has fundamentally altered the way personal injury claims are handled in this country. Society has benefited from the Board's model and this has been achieved at no cost to the State. Accident victims have been compensated in a fair and transparent manner, insurance premiums have reduced for the benefit of consumers and business, and personal injury lists in our Courts have fallen dramatically. A significant culture change has been effected in the manner in which personal injury claims are handled. All of this has been achieved as a result of the hard work and enthusiasm of the staff and the Members of the Board.

This plan has been compiled following an ongoing consultation process with our key stakeholders to whom we are grateful for their contributions. Our governing Board has had a key role in devising the new plan and its implementation will be driven by the Board's Executive and staff. We look forward to building on our success and working with stakeholders and Government to deliver on the commitments outlined in the following pages.

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Dorothea Dowling

Chairperson

Introduction by Chief Executive

In 2004, the Personal Injuries Assessment Board [PIAB] was established to tackle increasing insurance premium rates arising from a costly adversarial approach to resolving personal injury claims.

Today, motor insurance premiums are 22% lower than a decade ago and a best in class claims assessment structure has been established that has reduced claims processing costs by 80% whilst maintaining the same level of awards as the Courts. This new non-adversarial model has delivered a more far-reaching range of benefits than ever anticipated. It has also given rise to a series of innovative processes that may have more broad based application across the public service in support of a public sector reform agenda.

From an operational perspective, claims are assessed five times faster and at a fraction of the processing costs attaching to litigation. The Courts have been freed up to focus on more pressing matters as the number of personal injury litigation cases has reduced. Advances in early intervention and facilitation processes provide a useful template for reform in other areas. Advances in outsourcing processes have underpinned the Board's ability to reduce its processing fees and repay the State our 'set up' costs consistent with our totally self-funding objective from the outset.

The Personal Injuries Assessment Board Act 2003 has proven to be robust yet capable of adjustment to ensure policy goals are met. In 2007, amending legislation was passed to discourage needless rejection of Board awards in pursuit of possible higher awards in Court. The Board has also had to contend with numerous judicial reviews, not least of which related to 21 cases run simultaneously challenging the manner in which the Board allows costs (typically legal fees). The Board vigorously defended these cases and, in so doing, has established important legal principles that positively impact our operations.

Following the O'Brien case (see Chapter 3), the Board now copies represented claimants with key communications to ensure transparency for all parties. A judgment in the Plewa and Giniewicz cases (see Chapter 3) removes the possibility of legal fees having to be paid in respect of all claims, an occurrence that would have impacted negatively on insurance premiums in Ireland. This stands in stark contrast to the UK where following numerous attempts at reform, legal fees are firmly embedded in the system and not surprisingly Motor insurance premiums are rising sharply.

At an operational level, the Board's Service Centre and its increasing commitment to online resources will see continuing improvements to what I see as an already robust customer service model. By outsourcing non core functions, the Board has been able to reduce operating costs as well as future personnel and pension obligations, whilst at the same time freeing up its own professional staff to leverage their legal, medical, actuarial and administrative expert skills in support of an ongoing programme of continuous improvement. The success of the outsourcing model depends on the careful management, training and quality assurance programmes overseen by the Board's own staff.

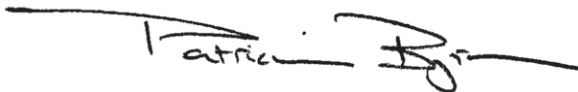
Chapter 1

By year end 2011, the Board had assessed over 50,000 claims and made awards of over €1 billion, resulting in direct savings of approximately €250 million with similar indirect savings from early settlements facilitated by the new model with its strict timelines and transparent administrative procedures. The Board has been fully self-funding since inception. Fee income is derived from a modest claimant fee and a respondent fee (€850), typically paid by Insurance companies who carry the risk for potentially negligent policyholders.

While the Board provides a number of services to its stakeholders the fee per case based model is dependent on respondents availing of the full assessment service. Early settlements facilitated by the Board's model avoid any fee. A key consideration is whether to move to a more equitable and sustainable fee model where charges are proportionate to the level of service provided, and accordingly the level of costs incurred. The objective for the Board is to ensure that the underlying self-funding model is sustainable and benefits all stakeholders.

It is clear that our mission will continue to be the independent facilitator for the delivery of compensation in a fair, prompt and transparent manner for the benefit of society. Key objectives will continue to include rigorous cost management, innovative application of technology and highly skilled staff to deliver a superior customer service; one that is accessible, accountable, transparent and efficient.

Implementation actions will include: training and performance management, stakeholder outreach and consultation, research and publication, and ongoing cost benefit analysis. Our plan is, as ever, consumer centred to ensure that policies, protocols and practices recognise the needs of individual claimants as well as public interest considerations. At this time, our plan also recognises that InjuriesBoard.ie does not operate in a vacuum and can contribute to and benefit from the wider public sector reform agenda.

A handwritten signature in black ink, appearing to read 'Patricia Byron', with a long horizontal line extending to the left and a stylized flourish to the right.

Patricia Byron

Chief Executive

Review of Performance to Date

Following the enactment of the Personal Injuries Assessment Board Act 2003, the Personal Injuries Assessment Board (now operating as InjuriesBoard.ie) was established on 13th April 2004. This chapter reviews the key features of the Board's work in the period 2005 to date, having particular regard to the two key strategic objectives of our existing Strategic Plan:

- To assess fairly and accurately the amount of compensation entitlement in personal injury claims within the remit of the Board in a timely manner
- To reduce administration costs associated with the assessment of personal injury claims within the remit of the Board.

Introduction

InjuriesBoard.ie is now an established fixture on the personal injuries landscape. The Board has successfully provided an alternative non-adversarial model for resolving personal injury claims. Since the Board reached full flow activity in 2007, it has delivered a consistent output either directly through awards made or indirectly through facilitating early resolution of claims. While the level of direct settlements between parties was not fully anticipated, it was clear from an early stage that a move to a non-adversarial model where parties engaged with each other at the outset of the process could bring additional benefits. One of these benefits was that parties had a mechanism to settle cases without a formal assessment and the published Book of Quantum was available as a guideline for the damages amounts due in compensation for a range of injuries.

The core function of the Board is to assess compensation in respect of personal injuries arising from Motor, Workplace and Public Place accidents. The Board has successfully delivered on its objectives, making an average of nearly 9,000 assessments per annum in the last 5 years and facilitating a similar number of early settlements. This reduces the overhead costs associated with delivering compensation from 46% to less than 9% in the case of formal awards and significantly speeds up the time to finalise personal injury claims.

Maintaining the delivery of this cost effective and efficient service must remain at the centre of the Board's activities over the next five years. The need for the services provided by the Board, are as great now as they were when the agency was first established.

There is a general consensus that the core mandate of the Board to fairly and accurately assess personal injury claims at a low administration cost is still the most relevant objective and of primary importance. Accordingly, while initiatives which could reduce timelines or costs will continue to be pursued, there should be relatively minor changes to the Vision, Mission and current strategic objectives.

A key challenge for the future is for the Board to build on its success and seek to improve its key performance indicators through even more efficient and effective processes. In addition, as the Board has matured as an organisation, as its systems have been developed and as its capacity to deliver a non-adversarial outcome to personal injury claims is widely acknowledged and recognised, opportunities may arise to broaden the remit of the Board to include claims areas which are currently still subject to costly litigation e.g. medical negligence cases. While decisions relating to the remit of the Board rest in the hands of policymakers and legislators, the Board will play its part in assisting these decision makers as required. These drivers are reflected in the suggested new Vision, Mission and Strategic Objectives set out later in this document.

The successful outcome of the Section 44* judicial reviews concluded a challenge in relation to legal costs not being allowed by the Board, some 21 individual cases arising in quick succession. The High Court decision is important as it upheld, in every respect, the manner in which the Board was exercising its discretion in relation to costs under Section 44 on a case by case basis. It showed that the underpinning legislation was robust and facilitated the operation of a low cost, non-adversarial method of delivering compensation to accident victims in a timely fashion.

** Section 44 of the Personal Injuries Assessment Board Act 2003 gives the Board the power to include in an award an amount in respect of fees or expenses reasonably and necessarily incurred by a claimant in complying with the provisions of the Act.*

Application volumes

From May 2004, the Board commenced dealing with Employer's Liability claims and extended to Motor and Public Liability claims from the end of July 2004. Immediately prior to the establishment of the Board, a significant volume of pre-existing claims were rushed into the litigation system to avoid the new process. For this reason, it took approximately two years for new claims to start working through the new non-adversarial system operated by the Board. In the initial years of the Board, application volumes rose rapidly but this was followed by a significant slowing down in the rate of increase after 2007.

Since the Board reached full flow activity in 2007, there has been a marginal increase in claims volumes each year. The profile of applications between Motor (ML), Employer's Liability (EL) and Public Liability (PL) has remained relatively consistent over the past five year period but with a decline in EL claims from 2008 being the most significant recent trend. Table 1 in Appendix 2 details the numbers of claims received under each of the categories of applications from 2006 to end 2011. While volumes increased by over 11% in 2007, the rate of increase has slowed down to just over 2.5% in 2011, indicating an overall stabilisation in claims volumes.

Personal Injury Awards Volumes

An Award is the value of compensation payable to an injured party when a respondent consents to an assessment. Compensation includes General Damages for pain and suffering caused by the injury both to date and into the future. An Award may also include Special Damages for financial loss both to date and into the future e.g. loss of wages, cost of medical care etc. Awards data in this report relate to the total value of an Award and do not differentiate between General and Special Damages.

Damages are assessed using The Book of Quantum which is a guide to compensation levels in Ireland (available at www.injuriesboard.ie). Under the terms of the Civil Liability & Courts Act 2004, the law also requires the Judiciary to have "regard to the Book of Quantum". This means that where some cases are released by the Board to the Courts, the same level of awards apply to similar injuries even if it is necessary for disputes relating to legal issues (i.e. liability) to be addressed in an adversarial oral hearing. As anticipated, such legal disputes arise in approximately one-third of personal injury cases. The Board's administration process has removed two-thirds of all other Motor, Workplace and Public Liability cases from an unnecessarily lengthy litigation process with its attendant costs for all parties involved. This is directly in line with the target set for the Board, historical data establishing that about one third of claims would not be suitable for 'assessment only' administration there being legal disputes on liability or other issues arising.

The first awards were made by the Board in 2005. The number of awards rose significantly in 2006 and the new process reached 'steady state' in 2007. Since then, award numbers remained fairly static with an average of 8,500-9,000 awards delivered each year.

In addition to formal assessment awards, it is apparent that a similar volume of cases are settled directly between parties as a result of the Board bringing parties together at the outset through our Service Centre (which is open 8am-8pm). The overall effect is that the number of cases which commence litigation has dropped from circa 33,000 per annum in the 5 years prior to the establishment of the Board to approximately 14,000 in recent years. The aim of removing a significant number of cases from the litigation system has thus been achieved. Of the remaining cases where litigation is still initiated, less than 10% proceed to a full oral hearing. It is unclear at this stage why the balance, of over 90% of such cases, proceeds to institute litigation. It is hoped that when settlement data becomes available from the insurance industry that this will be clarified.

Table 2 in Appendix 2 details the number of awards the Board has made on an annual basis from 2005 to the end of 2011. Since the Board reached full flow activity in 2007, volumes were relatively stable averaging approximately 8,500 per annum until 2011. Productivity achievements facilitated a significant increase in awards made in 2011 to 9,833. In planning for the next 5 years, the Board anticipates a requirement to assess in the region of 10,000 cases per annum based on accident rates in this country and indications from claims trending.

Comparison with the Courts

Table 3 in Appendix 2 details the number of awards made in the 5 years of 2006 to 2010 with the corresponding amounts of compensation awarded totalling nearly €1 billion overall. The amounts awarded by the Courts throughout the country during the same period totalled approximately €320 million. Compared to the cumulative total of 39,649 awards by InjuriesBoard.ie (IB), the number of awards by the Courts over the same period was 6,177. It is expected that over the coming years this pattern will be maintained with the Board assessing significantly more cases than the Courts, the latter focusing on cases where legal issues or disputes arise.

Award Values/Ranges

Table 4 in Appendix 2 gives a breakdown of awards made in 2011 by value band and claim category. From the outset, the breakdown by claim category has been consistent, with approximately 70% of awards relating to Motor, and Employer's Liability yielding the lowest claims volumes. An analysis of awards by value band shows that the vast majority of cases are under €38,000 in value. This is consistent with cases heard in the Courts where the vast majority are in the Circuit Court (where the jurisdictional limit is €38,000). This is indicative of the fact that the greatest volumes of claims are low to medium in value with maximum severity injuries being, thankfully, an infrequent occurrence. This is also consistent with historical patterns. It is expected that this pattern will continue in the coming years.

Figure 1 in Appendix 2 outlines the highest and lowest award made by the Board to date. The highest award was €829,444 with the lowest award of €50. This gives an indication of the range of cases dealt with by the Board ranging from low to very high severity. In looking ahead, the Board will develop its systems and capabilities to ensure it can assess the least and most severe of cases, there being no cap on the level of damages awards that the Board can make.

Delivery Costs/Savings

Prior to the establishment of the Board, the overhead cost of delivering compensation to an accident victim was estimated at 46% on top of the actual compensation amount. When the Board was established it reduced the costs to less than 8%. While delivery costs increased marginally from 2007, driven by increased claimant costs (medical/Section 44 costs) and an increased respondent fee, they are likely to reduce on foot of the significant reduction of the respondent fee from €1,050 to €850 effective from 1st February 2011. The reduction in our processing fee results from reduced overheads including wage deflation, better supplier terms and service rates.

Figure 2 in Appendix 2 shows the movement in delivery costs since 2007. Overall, there has been very little fluctuation with costs maintained in the 7% to 9% bracket. This compares favourably to litigation where, back in 2004, the Motor Insurance Advisory Board (MIAB) report found overhead costs to be a 46% overhead but are now more likely to be in the range of 50%-60%. As the reduced respondent fee begins to impact in 2012, the delivery costs will fall further again compared to the previous system.

Cost savings as a Result of Awards

In 2011, InjuriesBoard.ie delivered the current level of compensation at a delivery cost of 8.8% against 46% under the old litigation system prior to the Board's establishment. The delivery costs at InjuriesBoard.ie are not based on a percentage of the amount of the award but are predominantly fixed fees for claimants (€45) and respondents (€850). As previously reported in our Annual Report, data available from compensation schemes which are still outside the remit of the Board suggest that the associated litigation fees and outlay remain a matter of considerable concern for consumers and for the competitiveness of Irish business. It appears that many personal injury cases, processed outside the Board's non-adversarial system, attract litigation overheads significantly in excess of the 46% average which was identified in the 2004 report of the Motor Insurance Advisory Board.

Table 5 in Appendix 2 details the volume of accepted awards for the years 2007-2011. The acceptance rate has been reasonably consistent over the past 4 years with an average of approximately 5,500 accepted awards each year. The table also sets out the overall value of the accepted awards – averaging approximately €110m to €120m each year. The value of compensation is affected by the mix of claims as to whether they are Motor, Public Liability, or Employer's Liability and also by the severity of injuries within each of these categories.

For the purposes of calculating direct savings, we only take into account those awards which are accepted by both the claimant and the respondent. This approach, therefore, is a most conservative calculation of the beneficial impact of the Board as we do not accrue credit for all the cases where we facilitate direct settlement at the early stage of our process through our Service Centre facility, nor any credit for cases which also exit during or directly after our process, when a resolution is reached between the parties with the benefit of information provided by the Board without proceeding to a Court hearing.

Indisputably, significant additional savings arise in relation to these cases which we facilitate under the new system and which under the old system would all have had proceedings initiated. Our timelines and Service Centre offering drives clarity, supports earlier resolution and identifies cases which do not need to go forward to our full awards process. In essence, the process creates an environment where claimants and respondents can assist themselves and reach an early resolution without a formal award. It is estimated that annually up to 8,000 cases are resolved between parties following initial contact with the Board's Service Centre which facilitates improved communication between the key stakeholders. Comprehensive data on the level of such settlements remains unavailable from the Insurance industry in the format required for a full analysis.

Table 6 in Appendix 2 shows the actual InjuriesBoard.ie delivery costs since 2007 (which were €10.86m in 2011) and compares each year to the estimated overhead cost of delivering the same award value under the previous litigation system (46%) i.e. €56.45m in 2011. The resultant savings are shown in the bottom row of the table. Direct InjuriesBoard.ie savings in 2011 were €45.59m. Annual savings between 2007 and 2011 have been between €40 million and €50 million. By adding savings of approximately €30m in 2005 and 2006 combined, the overall savings figure achieved reached over €250m by end 2011. This, however, is only a fraction of the overall savings which cannot be accurately calculated until data is received from the Insurance industry.

Timelines

The Personal Injuries Assessment Board Act 2003 requires the Board to complete its assessment of damages within 9 months of the respondent consenting to the claim, with some permitted exceptions. Over the entire period of its operations, the Board has consistently met and exceeded this requirement. The average time from consent to award has consistently averaged less than 7 months. For comparative purposes, it would have taken on average 36 months under the previous litigation system to deliver an award prior to the Board's establishment. Approximately 93% of cases were assessed within the 9 month timeframe with the balance assessed in accordance with the permitted exceptions contained within the Act.

This Chapter focuses on a number of developments that have occurred in the wider personal injury environment since the establishment of the Board and assesses the potential impact in terms of developing strategies over the next 5 years.

Legal Developments

The Board was established under the terms of the Personal Injuries Assessment Board Act 2003. A number of significant legal developments have occurred since then.

Personal Injuries Assessment Board (Amendment) Act 2007

The Personal Injuries Assessment Board (Amendment) Act 2007 was introduced by the Minister for Enterprise, Trade and Employment. The Board had noted an increasing number of cases where assessments, which were accepted by respondents but in our view unnecessarily declined by claimants, were concluded at the same compensation figure after initiation of legal proceedings but with additional avoidable legal costs being incurred. In such circumstances, the Amendment Act provides that where a claimant does not receive more than the amount of the original InjuriesBoard.ie award in subsequent proceedings, he/she will not recover their legal costs and risks being held responsible for costs incurred by the respondent/defendant. The Amendment Act also provides that legal costs incurred in dealing with the InjuriesBoard.ie process are not recoverable in the litigation process.

Challenges

In the period 2005-2010, a number of judicial reviews were initiated against the Board. Two cases resulted in significant judgements which impacted on the operations of the Board.

O'Brien & Law Society

In January 2005 the High Court gave Judgement in a case brought by a claimant (Declan O'Brien) who challenged the new Board's practice of writing directly to claimants and copying the correspondence to their solicitors. The Board appealed this decision to the Supreme Court and Judgement was delivered on 19th December 2008.

The Supreme Court upheld the decision of the High Court but clarified that correspondence with claimants was allowed. The Court held that the Board is entitled, in the management of its business, to keep a claimant informed of the progress of their claim. The Court said that the Board was entitled to inform a claimant by, for example, sending to him a copy of any letter sent to his solicitor at the same time as sending that letter. This keeps claimants informed, is consistent with the Board's policy and is within its statutory functions. The Board welcomed this clarification from the Supreme Court and is now copying claimants at key stages of the process.

Chapter 3

There was also a welcome acknowledgement of the place PIAB takes as an established State agency and as reflected in the following quotation from a passage in the Macken J Judgement in the Supreme Court –

“a public policy which aims to reduce legal and associated costs arising in court proceedings, and which has as its basis, inter alia, the aim of disposing of claims for personal injuries in a simple straightforward manner, which may also enable a claimant to apply for and benefit from the statutory assessment scheme without legal representation if he/she desires, is a perfectly proper and acceptable public policy aim, and an appropriate basis for a legislative scheme of the type under review here.”

Plewa and Giniewicz

In October 2010, the High Court ruled on two judicial reviews taken by two Polish claimants, who had their claims for Damages assessed by the Board. Both claimants had accepted the Board's award but challenged the Board's refusal to allow all the legal costs claimed by their solicitor. Among the reasons put forward for why fees should be payable were that the claimants were foreign nationals, they did not have Law Degrees nor were they a qualified Barrister or Solicitor. The two cases heard were the 'lead' cases of more than twenty other similar cases also involving individual non-Irish nationals but all represented by one legal firm.

The Judgment found in favour of the Board on all counts, rejecting claims that it acted unreasonably or breached fair procedures. The ruling removed the possibility of high levels of unnecessary costs being introduced into the new system and/or of legal fees being paid in all cases brought to the Board. The Judgement clarifies that claimants who opt to use a solicitor must pay their own legal costs from the injury compensation awarded by the Board, unless the Board discerns a need for legal assistance/costs on specific cases.

Prior to the establishment of the Board, litigation costs associated with claims amounted to 46% on top of the Damages paid by respondents or their insurers. In addition, claimants often paid further solicitor/own client fees to their own representatives. Since the establishment of InjuriesBoard.ie, on average cases resolved by the Board involve a delivery cost of around 8% which is payable by respondents.

Conclusion

The general conclusion to be drawn as a result of the amending legislation and the significant challenges is that the legislation underpinning the operation of the Board has proven to be robust. Like any new legislation it is reasonable to expect that some amendments would be required and that certain aspects could be challenged. The 2007 Amendment Act provided a solution to a potential problem that was not envisaged at the outset. The significant judgements referred to earlier have meant that the Board has had to adapt its processes but has fundamentally delivered on its core objectives. The outcome of the Plewa and Giniewicz cases has provided the Board with absolute clarity in relation to its role in assessing claims and allowing costs that are reasonably and necessarily incurred if required to comply with the legislation. The Board can now look forward to continuing to assess cases without a need for further amending legislation. The Board will continue to apply the legislation which facilitates the assessment of compensation to the benefit of the main stakeholders who are claimants and respondents.

Insurance Premium Rates

The Board was established as a key strand of the Government's Insurance Reform Programme. In the early years of the millennium, insurance costs had reached an untenable level in Ireland. Businesses and consumers were adversely affected to an unacceptable level. The key motivation for the establishment of the Board was to reduce litigation overhead costs associated with delivering personal injury compensation while also ensuring that injured parties were paid sooner. This litigation overhead which was estimated to be running at 46% on top of the compensation itself was seen as a key driver in the cost of insurance, especially for compulsory motor insurance in Ireland. The high cost arose as a result of the absence of an alternative to entering into a costly and time consuming litigation environment, which attracted significant legal fees as well as other experts' fees and outlays. The establishment of the Board removed nearly two thirds of cases from unnecessary litigation and brought them into a low cost resolution model as targeted. Most importantly, this also resulted in the welcome earlier delivery of compensation entitlements to injured parties which assists speedier recovery with all the attendant benefits acknowledged by rehabilitation experts. Also, as part of that Insurance Reform Programme, parallel reforms were introduced to the litigation system with high penalties for exaggerated or misleading personal injury claims as set out in the Civil Liability & Courts Act 2004.

The impact of the Board's operation was quickly apparent. Data from the Central Statistics Office (CSO) indicates that motor premiums fell steadily following the establishment of InjuriesBoard.ie until the end of 2008 when some upward movement returned. However, premiums are still some 30% lower than they were before the Board was established. Latest data from the CSO shows the rise in motor insurance costs over the years 2009, 2010 and 2011 – see Table 7 and Figure 3 in Appendix 2 of this report. The rationale for such recent premium increases is not self-evident as the Board's processing costs have been maintained since inception until more recently reduced so there has been no significant increase in the delivery costs nor award levels associated with personal injuries cases that the Board has assessed. It is also noteworthy that the Insurance industry has historically cited personal injury claims as the key cost driver of premium levels.

It is quite clear that the operation of the Board has applied significant downward pressure on insurance premiums. Over the next 5 years the Board will continue to run its operation with the aim of maintaining and where possible reducing its overall costs. The more cases that can be removed from litigation the greater the overall positive impact on delivery costs savings. The Board will continue to align its strategies to support this objective.

Court Statistics for Personal Injury Claims

Prior to the establishment of InjuriesBoard.ie approximately 33,000 personal injury claims were initiated in the courts system (High and Circuit Courts) every single year, attracting high legal costs and taking an average of three years to finalise. Litigation figure volumes are now down to just over 14,000 cases.

To avoid the new non-adversarial process introduced with the establishment of the InjuriesBoard.ie, there was a rush of all potential claims into the litigation system. As a result, there was a substantial fall in cases initiated in the High Court in 2004 from 15,000 to 750 in 2005. As the Board became fully operational, there has been an anticipated increase in cases initiated in the courts, as relevant claims e.g. dispute cases, began to be released by the Board for adjudication in the courts. That timing aspect led to a temporary rise which was accelerated in 2006 and 2007 and has levelled off as expected since 2008.

It was never envisaged that InjuriesBoard.ie would remove **all** cases from the courts. The PIAB legislation envisages a range of circumstances in which claims are released by the Board to the Courts e.g.

- where the respondent does not consent to an InjuriesBoard.ie assessment being commenced (if liability was in dispute)
- where because of the nature of the injury, the Board does not believe it can make an assessment within the nine month timeframe required by the Act
- where the injury sustained is wholly or predominantly psychological.

The legislation, and subsequent amendments to it, also outlines cases that the Board does not deal with e.g.

- where the type of liability is currently outside the remit of the Board e.g. Medical Negligence
- where matters of international law and treaties are involved, such as Marine and Aviation accidents.

Now that the establishment of the Board has fully impacted the litigation system, there is a very significant fall in the volume of cases initiated by way of litigation which are now approximately 14,000 cases as against c. 33,000 summonses annually in the period 2001-2003, directly prior to the Board's establishment.

While the benefits of the Board's model are apparent in terms of the removal of cases from litigation, what is not so apparent is the positive impact this has had on the Courts system in general. The removal of nearly 20,000 cases a year from litigation has positively impacted the Courts resources and has contributed to the earlier trials now available in many criminal and commercial cases. This is particularly valuable in these times of public sector reform where we are required to achieve more with fewer resources.

While it was envisaged that the Board would remove two-thirds of cases from litigation the question arises as to whether such cases all need litigation to reach a satisfactory solution. While many cases do involve legal dispute and some require court adjudication, some of the cases released by the Board to litigation do so as they are outside the remit of the Board. While it is ultimately a matter for policymakers and legislators to decide what is within the Board's remit, the Board will assist these decision makers as required. It was originally envisaged at the time of the establishment of the Interim PIAB in October 2002, that medical negligence cases which did not involve legal issues would be assessed by the Board, but the then ongoing negotiations for the establishment of an enterprise wide indemnity system for doctors and hospitals resulted in what was to be a temporary exclusion in the legislation drafted in 2003.

Stakeholder Consultation

In the latter half of 2010 and early 2011, the Board engaged in a series of consultations with key stakeholders, including management and staff, to discuss the progress made since 2004 and any issues which merited attention in the context of this Strategic Plan. The groups with whom meetings were held are listed at Appendix 1 to this report. These included respondent and consumer representatives, business and trade union interests as well as experts in safety and medical matters together with a number of other state agencies.

There was widespread acknowledgement from stakeholders that the Board has fulfilled the mandate given to it in the Personal Injuries Assessment Board Act 2003. Respondent, business and consumer groups believed that the Board had made a significant contribution to tackling the costs associated with the resolution of personal injury claims and in turn this had impacted positively on insurance premium rates.

In general commentary on the claims environment, most stakeholders believed that the volume of claims arising had generally stabilised and that the 'surge' in personal injury claims, which some had anticipated in light of the economic recession, had not materialised. They also commented that legal costs were still an issue for those cases where litigation was issued even where there was no need for such cases to proceed to full oral hearings.

There were mixed views on the desirability of the Board investing resources in improving awareness and understanding of its role, with respondent and consumer groups in favour, but vested legal groups indicating that sufficient awareness had been achieved. Some stakeholders expressed the wish to see the Board's non-adversarial and cost effective model extended to other areas where appropriate.

Funding Model

As a State Body, the Board's self-imposed, self-funding model is unique. Whilst the legislation underpinning the establishment of the Board permits State grants, InjuriesBoard.ie successfully opted to develop a self-funding model and has done so since opening in 2004. This is quite apart from the initial start up funding grant of €6.9m (now repaid in full to the State in December 2011). Income required for day-to-day running costs continues to be generated by charging a fee on:

- the respondent when they consent to the Board's process (currently €850)
- the claimant when they submit their application (currently €45) which is recovered in most cases as part of the award.

The main source of income is the respondent fee which accounts for 90% of funds.

Unlike other self-funded or partly funded state bodies, the Board's income is not by way of a tax or a levy on the service provided. The respondent charge (currently €850) is for those respondents who opt for the Board to assess a case rather than incur a significantly higher cost by letting the particular claim enter litigation. The respondent benefits by paying a lower overhead amount and this amount in turns funds the Board's operations.

The current model has consistently delivered to date with the fee income generated being sufficient to cover operational expenses along with providing a prudent level of reserves in line with an appropriate financial policy as required for good corporate governance.

A key factor which requires consideration when considering the Board's funding strategy for the next five years is whether to move to an even more equitable payment for the service model which will not rely on consent to the full assessment process to generate fees.

As insurance companies enhance their early settlement programmes there is a possibility that the current funding model will no longer be as robust as heretofore. In this context, the Board needs to consider how it can more equitably spread the cost of the model across all users of its service, especially respondents and insurance companies. While two thirds of cases being settled/resolved/assessed is a measure of the Board's success to date, the corollary is that the Board does not earn any respondent fee on early direct settlements and yet costs are incurred with both the Service Centre and Assessment Centre involved in early assessment and facilitation services provided.

The long term sustainability of the current model will be reviewed in this context and alternative funding options considered.

Key Drivers of New Plan

InjuriesBoard.ie is now an established fixture on the personal injuries landscape. The earlier chapters demonstrate the success of the Board in providing an alternative, and on the international front, unique, non-adversarial model for resolving personal injury claims while awarding the existing level of compensation.

Since its inception, the Board's underpinning legislation has proven to be robust. The success of the model is evident in the reduction in the numbers of cases now requiring litigation. As envisaged approximately two thirds of cases have been taken out of the litigation system. The reduction in costs achieved by the Board is evident in reduced insurance premiums for motorists and business owners.

Since the Board reached its full flow activity in 2007, the Board has delivered a consistent output either directly through awards made or indirectly through facilitating early direct resolution of claims. By continuously evolving, seeking greater efficiencies and improving our processes we have delivered a cost effective and efficient service. Maintaining the delivery of this service must remain at the centre of Board activity over the next five years. In simple terms, the need for the services provided by the Board is as great now as it was when the Board was first contemplated.

A major challenge for the next five years is for the Board to build on its successes and seek to improve its key performance indicators through even more efficient and effective processes. In addition, as the Board has matured as an organisation, as its systems have been developed and as its capacity to deliver a non-adversarial outcome to personal injury claims is widely acknowledged and recognised, opportunities may arise to broaden the remit of the Board to include claims which are currently still subject to costly litigation and involve unnecessary delays for innocent injured parties.

These drivers are reflected in the new Vision, Mission and Strategic Objectives set out in the following pages.

Vision

The Vision provides an overarching framework to guide InjuriesBoard.ie's actions, values and culture, and individual behaviours. It reflects the potential to develop the Board's mandate.

InjuriesBoard.ie will continue to promote a positive claims culture in Ireland through advancing a fair and non-adversarial approach in the resolution of personal injury cases.

Mission

The Mission Statement represents the long-term vision of what the organisation is seeking to achieve.

To facilitate the delivery of compensation in a fair, prompt and transparent manner for the benefit of society overall.

Strategic Objectives

Strategic Objective 1

To assess fairly and accurately the amount of compensation entitlement in personal injury claims within the remit of InjuriesBoard.ie in a timely manner.

Strategic Objective 2

To promote the lowest possible administration costs associated with the resolution of personal injury claims.

Strategic Objective 3

To promote a culture of innovation and excellence, fostering an efficient, flexible organisation with motivated and skilled staff and maximising the positive impact of technology.

Strategic Objective 4

To promote and advance a superior customer service, focussed on making information about our service accessible to all, supported by a transparent and accessible claims assessment process and a cost effective organisation.

Strategic Objective 5

To continue to contribute positively to the changing personal injury claims resolution environment in Ireland through greater use of the Board's non adversarial model.

Actions to Achieve Strategic Objectives

Arising from the Strategic Objectives set out above, a number of actions will be implemented by the Board. The following pages provide a detailed rationale for the specified actions to be followed.

Objective 1

To assess fairly and accurately the amount of compensation entitlement in personal injury claims within the remit of InjuriesBoard.ie in a timely manner.

Assessing compensation in a fair and accurate manner is one of the key aspects of the work of the Board. In order to do this, the Board must continually examine the various procedures involved to ensure they support the achievement of this objective. The following specific strategic actions arise:

- Continually improve and document the assessment processes and procedures to ensure fair and accurate assessment of compensation
- Pursue measures which identify and categorise claims thus supporting the assessment process
- Introduce Quality Assurance Programme improvements which support fair and accurate assessment in a timely manner.

To achieve this key objective the Board is reliant on highly specialised trained staff, supported by an outsourced Service Centre, efficient technological systems and various panels of independent experts all contributing to the assessment process. The following specific strategic actions arise:

- Through appropriate training and development, ensure the technical competence of expert assessment staff
- Review the role of the Service Centre in the context of the assessment process
- Utilise technology to support the assessment process
- Independent medical panel review and development – introduce further initiatives to ensure medical reports support the assessment process efficiently.

Currently the Board assesses cases within its remit where a respondent has consented to this process. In addition, many cases are settled directly between parties as a result of the Board's process bringing claimant and respondent together at an early stage. The potential for assessing further cases within the Board's remit arises and in this regard a number of specific strategic actions can be identified.

- Examine cases within the Board's remit which do not proceed through the full assessment process and which could be better serviced by the Board
- Collect and analyse data e.g. court/settlement awards or data in relation to the reasons cases are not consented to/accepted.

Objective 2

To promote the lowest possible administration costs associated with the resolution of personal injury claims.

The advent of the Board has led to a very significant reduction in the overhead costs associated with processing personal injuries claims. To maintain its self-funding status, the Board's fees reflect the overall cost of running the organisation. The current model, however, is dependent on a certain proportion of consents by respondents. In such cases, the Board proceeds to assess the claim. However, the Board also handles a significant number of claims where papers are submitted and contact is made with both parties. In many of these cases a settlement is achieved between parties as a result of facilitation by the Board. The Board does not receive a fee for this service because the claims do not proceed to a formal assessment. Accordingly, the Board needs to examine more equitable payment for services which do not rely solely on consent to recover fees.

In order to keep the administrative costs competitive, the Board will undertake a number of Strategic Actions as follows:

- Review of all services provided in terms of value for money and deliverables for stakeholders
- Advance the reduction of all third party costs
- Develop internal efficiencies in systems and processes which contribute to reductions in administration costs
- Examine potential alternative and/or additional funding options including fees for actual services provided including 'split fees' which would involve charging different amounts for distinct parts of the overall service
- Examine the potential for further outsourcing of non-core activities – concentrating on areas where returns are of greatest value
- In view of the current employment moratorium, review the Board's policy in relation to resourcing which has included a combination of employing permanent and pensionable staff, employing fixed term contractors and temporary staff, occasionally outsourcing of non-core high volume activities, and restricted use of consultants for specific projects. Any new model should allow the Board to manage fluctuating work volumes while maintaining low costs
- Carry out a cost benefit analysis of the Board's model when further settlement data becomes available.

Objective 3

To promote a culture of innovation and excellence, fostering an efficient, flexible organisation with motivated and skilled staff and maximising the positive impact of technology.

It is the intention of the Board to continue to apply best practice across the organisation with a view to delivering an efficient and effective service to all customers and ultimate beneficiaries, which encompasses society in general. Specifically, we will undertake a number of Strategic Actions in terms of Human Resources, Technology, Financial Management and Risk & Control.

- Continue to review organisational structures on an ongoing basis
- Introduce a Performance Management System that enables more effective employee performance
- Promote employee well-being through a safe and healthy working environment
- Through Training & Development, including e-learning, maintain the competence of staff to ensure they deliver high levels of service
- Co-operate and share our experience/expertise in the development of in-house and out-house Shared Services with Government departments and other agencies
- Implement Public Sector reform initiatives
- Ensure through the internal communications framework that key information is shared thus enabling more effective performance
- Utilise technology to develop efficiencies e.g. claims management system, online efficiencies through the website, financial/payments systems
- Review our server/network infrastructure
- Ensure continuation of a strong sustainable financial model
- Develop and further exploit existing financial structures, policies and procedures
- Ensure that appropriate audit structures are always in place and follow up recommendations arising from audit reviews
- Ensure systems and processes are in place to identify and manage risk
- Comply with the Code of Practice for the Governance of State Bodies and be a compliant organisation.

Objective 4

To promote and advance a superior customer service, focussed on making information about our service accessible to all, supported by a transparent and accessible claims assessment process and a cost effective organisation.

As an organisation, the Board seeks to deliver a high level of customer service to all our customers. In this regard, we will implement a number of specific Strategic Actions as follows:

- We will review and streamline all our processes to make them more accessible
- We will communicate effectively and appropriately by:
 - Presenting information in an accessible format
 - Optimising technology including our website
 - Making information more easily understood by the public
 - Making our correspondence more appropriate and easily understood
 - Seeking feedback from customers on quality of information
- We will develop/refine our customer complaints procedure
- We will engage and interact with key stakeholders with a view to improving services provided
- We will carry out Research including customer surveys
- We will review, implement and audit performance against our published Customer Charter.

We recognise that the needs of our customers are many and varied. In this regard:

- We will provide special supports for identifiable vulnerable claimants
- Using technology, we will provide web based options for interacting with the organisation
- We will ensure our policies, and the reasons for the decisions we make, are transparent
- We will ensure all personal data is securely protected and maintained, particularly sensitive personal data.

Objective 5

To continue to contribute positively to the changing personal injury claims resolution environment in Ireland through greater use of the Board's non adversarial model.

The advent of the Board's non-adversarial model has led to a fundamental change in how personal injuries claims are handled in Ireland. In addition to the compensation directly awarded by the Board, there is a significant change in culture with many cases settling directly between parties without the need for either an InjuriesBoard.ie assessment or a protracted litigation system engagement. Arising from this, there are further opportunities to exploit the benefits of the model operated so successfully by the Board.

There are other areas that might benefit from a change in how their systems currently operate. A number of personal injury categories are outside the Board's remit e.g. medical negligence. How such cases are administered is ultimately a matter for policy makers and legislators. However, the Board does have a valuable role to play in advocating beneficial changes. In this regard, it will pursue a number of specific strategic actions which will place us in a position to assist policy makers and Government as they make informed decisions. These Strategic Actions are as follows:

- Consult & engage with existing and new stakeholders
- Maximise the outputs available from existing and new user group forums
- Carry out research into areas where the opportunities to use a non-adversarial model might arise to the benefit of all parties
- Gather and produce relevant data relating to our role in the assessment of personal injury compensation
- Present case to policy makers and stakeholders for investment in non-adversarial model demonstrating its benefits to society
- Ensure policymakers are aware of the benefits which the Board's model can bring to existing areas outside the Board's remit or to new redress schemes the Government may approve in the future. In the current environment, to highlight the significant cost savings achievable for the state
- Make proposals (which may require legislation) to the Minister with the aim of increasing the use of non-adversarial models
- Co-operate with other agencies who have a role in accident/injury prevention and claims related resolution systems.

Outcomes/KPI's

The achievement of the Board's core objectives and related Strategic Actions is measured both through operational and strategic Key Performance Indicators (KPI's). These performance indicators enable the Board to monitor progress in delivering on its strategic objectives. In evaluating its performance in delivering the strategy, the Board will place an emphasis on the following desired outcomes over the period 2012-2016 with the relevant strategic KPI shown beside it:

Outcome	KPI
Provision of a non-adversarial personal injury resolution model that: <ul style="list-style-type: none"> ■ is faster than litigation ■ is more cost effective than litigation ■ makes awards at the same levels as litigation 	All claims assessed within statutory timeframes. Delivery costs maintained at current levels (i.e. 9% or less of compensation amount). Award levels maintained compared to litigation. Second cost benefit analysis complete by mid-2013 subject to data availability. Review of financial model complete by mid-2013.
Increased access to the services/information provided by the Board	Increases in key measurements of awareness levels of the Board and its services as measured independently. Increases in key measurements of comprehension levels of the services the Board provides as measured independently. Increase in engagement levels with the Board by electronic means.
Availability of statistical information on personal injuries and accident profiles	Increase in data availability to those authorities involved in accident prevention, and the general public.

Organisational Structure

The following section outlines the organisational structure of InjuriesBoard.ie. InjuriesBoard.ie is led by a Board of Directors (detailed below).

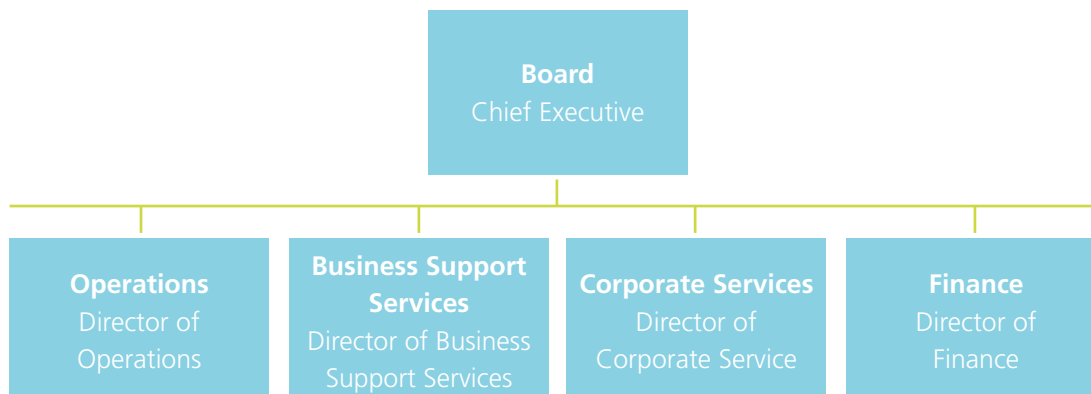
The Board is appointed by the Minister for Jobs, Enterprise and Innovation and consists of a Chairperson, the Chief Executive and 9 ordinary members of which 5 are nominated by external bodies or designated under legislation. The Board is responsible for formulating InjuriesBoard.ie policies and the execution of other fiduciary duties.

Full list of Board members*

Name	Position
Dorothea Dowling	Non-Executive Chairperson
Joe O'Toole	Vice Chairperson and Irish Congress of Trade Unions (ICTU) nominee
Patricia Byron	Chief Executive
Martin Naughton	ICTU nominee
Tom Noonan	Irish Business & Employers Federation (IBEC) nominee
Jerry Fitzpatrick	Irish Insurance Federation (IIF) nominee
Ann Fitzgerald	Chief Executive, National Consumer Agency
Bernard Sheridan	Director of Consumer Protection, Central Bank
Breda Power	Assistant Secretary, Department of Jobs, Enterprise & Innovation
Stephen Watkins	Secretary to the Board

* Board Membership as at 30th June 2012. There are currently 2 vacancies on the Board.

Organisational Structure Diagram



Executive Management Team

Chief Executive Patricia Byron is a member of the Board. She also leads the Executive Management Team which includes:

- Bernadette King – Director of Finance
- Helen Moran – Director of Business Support Services
- Maurice Priestley – Director of Operations
- Stephen Watkins – Director of Corporate Services

The Chief Executive is responsible for the executive functions of InjuriesBoard.ie and is supported by a management team, statutory assessors and expert support staff. At the end of 2011, InjuriesBoard.ie employed 69 staff in Tallaght, Dublin 24. In addition, the Board has an outsourced Service Centre providing ancillary back office support and a helpline from 8am to 8pm weekdays.

Stakeholders Consulted

Bar Council
Construction Industry Federation
Consumers Association of Ireland
Courts Service
Health & Safety Authority
Irish Brokers Association
Vhi Healthcare
Irish Business Employers Confederation
Irish Congress of Trade Unions
Irish Insurance Federation
Law Society of Ireland
National Consumer Agency
Road Safety Authority
Self Insured Task Force
Small Firms Association
State Claims Agency

In addition, stakeholder consultations take part on an ongoing basis with medical organisations, consumer groups, legal representative bodies, employers, employees, educational institutions, Government Departments and relevant agencies.

Statistical Information

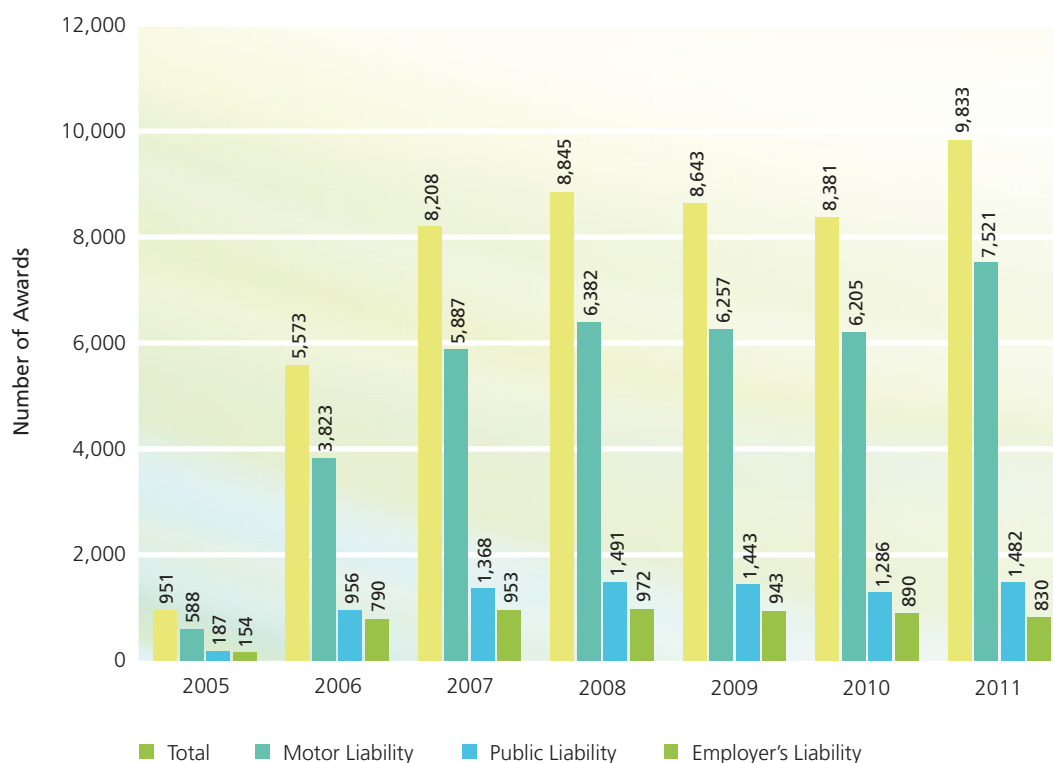
Table 1 – Personal Injury Applications received by the Board

	Total	ML	PL	EL
2006	20,926	11,590	5,554	3,782
2007	23,345	13,060	6,050	4,235
2008	24,722	14,012	6,320	4,390
2009	25,919	15,079	6,721	4,119
2010	26,964	15,971	7,251	3,742
2011	27,669	16,351	7,452	3,866

ML – Motor Liability PL – Public Liability EL – Employer's Liability

This table shows the numbers of claims received under each of the categories of applications from 2006 to end 2011. While volumes increased by over 11% in 2007 the rate of increase has slowed down to just over 2.5% in 2011, indicating an overall stabilisation in claims volumes.

Table 2 – Personal Injury Awards



The table above shows the number of awards the Board has made on an annual basis from 2005 to the end of 2011. Since the Board reached full flow activity in 2007 volumes were relatively stable averaging approximately 8,500 per annum until 2011. Productivity achievements in 2011 facilitated a significant increase in awards to 9,833.

Table 3 – Awards Volumes and Values by year 2006-2010

	IB Awards	Value*	HC Awards	Value*	CC Awards	Value*
2006	5,573	€115m	173	€23m	1,102	€15m
2007	8,208	€181m	133	€22m	968	€14m
2008	8,845	€217m	124	€51m	966	€13m
2009	8,643	€200m	408	€73m	931	€12m
2010	8,380	€187m	392	€86m	980	€12m
Total	39,649	€900m	1,230	€254m	4,947	€66m

* figures rounded

The table above shows the number of awards made in the 5 years of 2006 to 2010 with the corresponding amounts of compensation awarded totalling nearly €1 billion overall. The amounts awarded by the Courts throughout the country during the same period totalled approximately €320 million (*reference Court Services Annual Reports 2006-2010*). Compared to the cumulative total of 39,649 awards by InjuriesBoard.ie (IB) the number of awards by the Courts over the same period was 1,230 in the High Court (HC) and 4,947 in the Circuit Court (CC) i.e. a total of 6,177 (*reference Court Services Annual Reports 2006-2010*). It is expected that over the coming years this pattern will be maintained.

Table 4 – Breakdown of Total No. of Awards in 2011 (by Value and Claim Category)

Average Value Category (€'s)	Motor Liability	Employer's Liability	Public Liability	Total
<20k	5,215	376	798	6,389
20-38k	1,754	322	497	2,573
38-100k	500	123	185	808
>100k	52	9	2	63
All	7,521	830	1,482	9,833

The table above gives a breakdown of awards made in 2011 by value band and claim category. From the outset, the breakdown by claim category has been consistent with approximately 70% of awards relating to Motor, with Employer's Liability yielding the lowest claims volumes. An analysis of awards by value band shows that the vast majority of cases are under €38,000 in value. This is consistent with cases heard in the Courts where the vast majority are in the Circuit Court (where the jurisdictional limit is €38,000). This is indicative of the fact that the greatest volumes of claims are low to medium in value with maximum severity injuries being, thankfully, an infrequent occurrence. This is also consistent with historical patterns.

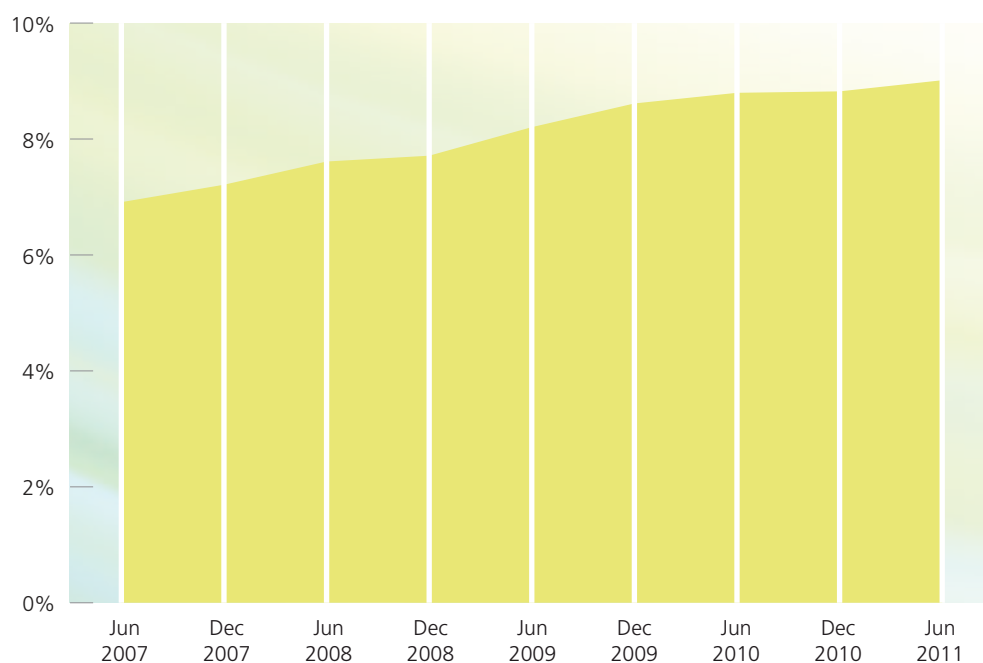
Figure 1 – Highest/Lowest Awards made to date



* Note: This Award was made in 2011.

The graph above outlines the highest and lowest award made by the Board **to date**.

Figure 2 – Delivery Costs on Accepted Awards



The graph above shows the movement in delivery costs since 2007. Overall, there has been very little fluctuation with costs maintained in the 7% to 9% bracket. This compares favourably to litigation where, back in the 2004 MIAB report litigation overheads were found to be 46% but are now more likely to be in the range of 50%-60%.

Table 5 – Total Number and Value of InjuriesBoard.ie Accepted Award

	2007	2008	2009	2010	2011
No. of Accepted Awards	5000	5670	5387	5038	5875
Total Value of Accepted Awards	€102m	€131.34m	€118.2m	€108.24m	€122.71m

The table 5 above sets out the volume of accepted awards for the years 2007-2011. The acceptance rate has been reasonably consistent over the past 4 years with an average of approximately 5,500 accepted awards each year. The table also sets out the overall value of the accepted awards – averaging approximately €110m to €120m each year. The value of compensation is affected by the mix of claims as to whether they are Motor, Public Liability, or Employer's Liability and also by the severity of injuries within each of these categories.

Table 6 – InjuriesBoard.ie Delivery Costs and Estimated Cost Saving

	2007	2008	2009	2010	2011
Total InjuriesBoard.ie Delivery Costs	€7.4m	€10.19m	€10.3m	€9.52m	€10.86m
Comparable Litigation Costs	€47.15m	€60.41m	€54.4m	€49.79m	€56.45m
Actual Savings	€39.75m	€50.22m	€44.1m	€40.27m	€45.59m

(InjuriesBoard.ie Vs. Litigation System)

The table above shows the actual InjuriesBoard.ie delivery costs since 2007 (which were €10.86m in 2011) and compares each year to the estimated overhead cost of delivering the same award value under the previous litigation system (46%) i.e. €56.45m in 2011. The resultant savings are shown in the bottom row of the table. Direct InjuriesBoard.ie savings in 2011 were €45.59m. This, however, is only a fraction of the overall savings which cannot be accurately calculated until data is received from the Insurance industry in the required format to calculate the savings on the claims resolved through the Board's early intervention/Service Centre facilitation.

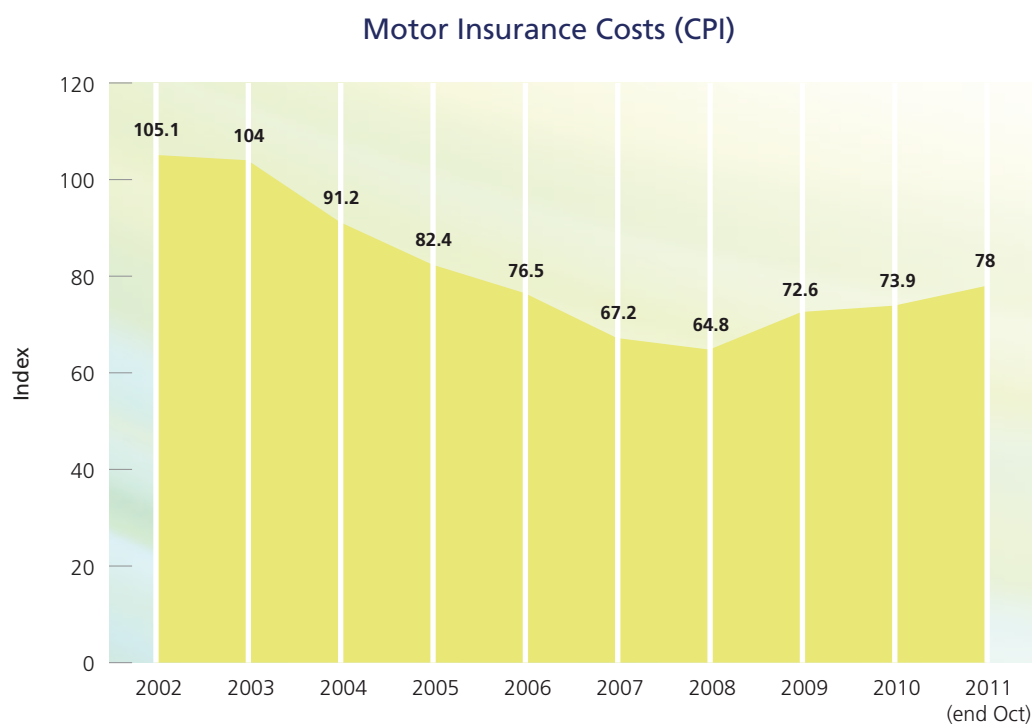
In addition savings of €4.32m were achieved in 2005 and €26.13m in 2006 yielding an overall figure of over €250m to end 2011.

Table 7 – Monthly CPI for Motor Car Insurance (2002-2011)

Consumer Price Index – Mid-December 2001 Based Series

YEAR	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	ANNUAL
2002	99.7	99.6	103.0	108.7	108.2	106.3	104.6	106.2	106.2	106.5	106.2	106.2	105.1
2003	105.9	107.2	108.0	108.0	107.6	107.6	107.2	106.1	102.7	97.9	94.9	94.5	104.0
2004	94.1	94.2	93.6	93.6	93.5	92.0	92.7	92.8	87.2	87.3	87.1	86.4	91.2
2005	86.2	85.7	84.2	82.4	82.4	82.5	81.5	81.5	81.5	81.8	79.8	79.8	82.4
2006	78.2	78.3	78.5	78.5	78.3	78.3	77.2	77.2	74.0	74.0	74.0	71.2	76.5
2007	70.9	70.5	70.3	66.1	66.1	66.3	66.7	66.3	66.7	65.8	65.8	64.4	67.2
2008	64.0	64.1	64.2	64.2	64.6	64.6	65.0	65.1	65.1	65.0	65.5	66.0	64.8
2009	68.3	69.4	71.2	72.5	72.6	73.3	73.8	74.6	74.7	74.4	74.1	72.7	72.6
2010	73.3	74.6	71.8	72.4	72.4	72.8	73.4	74.2	74.0	74.9	75.6	77.3	73.9
2011	75.5	76.3	76.3	77.3	77.9	78.8	79.0	78.2	78.0	78.0	77.9	77.9	77.6

Figure 3 – Monthly CPI for Motor Car Insurance (2002-2011)



Notes



Service Centre Open:

Monday to Friday, 8am to 8pm

Lo-Call RoI 1890 829 121

From NI and UK 0870 876 8121

P.O. Box 8, Clonakilty, Co. Cork

www.injuriesboard.ie

