



Personal Injury
Commission

Annual Review

2024 -2025



Acknowledgement of Country

The Personal Injury Commission acknowledges, respects and values Aboriginal peoples as the Traditional Custodians of the lands on which we live, walk and work. We pay our respects to Elders past and present. We recognise and remain committed to honouring Aboriginal and Torres Strait Islander peoples' unique cultural and spiritual relationships, and continuing connection to their lands, waters and seas. We acknowledge their history here on these lands and their rich contribution to our society.

We also acknowledge Aboriginal and Torres Strait Islander employees who are an integral part of our diverse workforce, and recognise the knowledge embedded forever in their custodianship of Country and cultures.

Front cover: The Commission is based at 1 Oxford St, Darlinghurst.





New South Wales

Personal Injury Commission

Office of the President

The Hon Jihad Dib, MP
Minister for Customer Service and Digital Government,
Minister for Emergency Services, and
Minister for Youth Justice
52 Martin Place
SYDNEY NSW 2000

Dear Minister

I am pleased to submit the 2025 Annual Review for the Personal Injury Commission of New South Wales.

This review covers the reporting period from 1 July 2024 through to 30 June 2025.

The review has been prepared in accordance with s 66 of the *Personal Injury Commission Act 2020* (NSW).

Following the tabling of the review in the Parliament, it will be made available for public access on the Commission's website at www.pi.nsw.gov.au.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Gerard Phillips', with a horizontal line underneath.

His Hon Judge G Phillips
President

Contents

1. The reporting year in review	6	8. The Commission's operations – section 66 requirements	42
President's report	6	Operational funds	42
Principal Registrar's report	9	Cost distribution methodology	43
A visit to the Commission from Japan	11	External audit outcomes	43
2. Achievements in the reporting year	12	Contributions by operational fund	43
3. The work of the Commission	16	Operating expenses and income related to each operational fund	44
Achieving outcomes for the injured people of NSW	16	Section 66(4)(a), (b) and (c) reporting obligations	45
The Commission's objectives	16	Section 66(4)(e) reporting obligations	46
Legislation administered	16	9. The Commission's performance	47
Relevant legislation	17	How performance is reported	47
Rules	17	Dispute applications registered, finalised and in progress	47
Procedural directions	17	Source of dispute applications	50
4. Delivering the Commission's Strategic Plan	18	Dispute types and outcomes	50
Our award-winning single digital platform	19	Appeals	53
Enhancing the Personal Injury Commission rules and procedural directions	20	Key performance indicators	54
Statutory Review of the <i>Personal Injury Commission Act 2020</i>	22	10. The law in focus	59
Accessible dispute resolution venues across NSW	23	The use of Generative Artificial Intelligence in the law	59
Strategic Plan 2025–28	24	Notable decisions	59
5. How the Commission delivers its services	26	<i>Allianz Australia Insurance Limited v The Estate of the Late Summer Abawi</i> [2024] NSWSC 1245	59
Our role	26	<i>AAI Limited t/as GIO v Evic</i> [2024] NSWSC 1272	61
Dispute resolution pathways	26	<i>Atwal v Insurance Australia Limited trading as NRMA Insurance (No 2)</i> [2025] NSWSC 350	62
How disputes are resolved	28	<i>Freeth v Volvo Group Australia Pty Ltd</i> [2025] NSWPIC 153	63
How the Commission ensures excellence in decision-making	29	<i>Noble v Petuha</i> [2025] NSWPICPD 5	65
6. How the Commission supports and engages tribunal users	31	<i>Haddad v The GEO Group Australia Pty Ltd</i> [2024] NSWCA 135	66
Communications	31	Vale the Hon. John O'Meally AM, RFD	68
Stakeholder engagement	31	Vale Allan Cowley	70
Annual Review	33		
7. The Commission's people	34		
Executive Leadership Team	34		
Organisational structure	35		
Members	36		
Merit reviewers, mediators and medical assessors	36		
Staff	38		
Supporting our people	39		

Appendices	71
Appendix A – Executive Leadership Team	71
Appendix B – Members	71
Appendix C – Merit reviewers	74
Appendix D – Mediators	74
Appendix E – Medical assessors	75
Appendix F – Rule Committee	80
Appendix G – Stakeholder Reference Group	81
Appendix H – CTP Insurer Reference Group	82
Appendix I – Medical Assessor Reference Group	83
Appendix J – Mediator Reference Group	84
Appendix K – Letter from the Hon. Jihad Dib MP	85
Appendix L – Staff profile	86
Appendix M – Senior executive profile	87
Appendix N – Work health and safety	88
Appendix O – Diversity and inclusion	90
Appendix P – Consultants	91
Appendix Q – About this review	91
Appendix R – KPMG independent auditor’s report	92
Appendix S – Cyber security attestation statement	97
Appendix T – Accessing the Commission’s information	100



1. The reporting year in review

President's report



Judge Gerard Phillips, President

In accordance with section 66 of the *Personal Injury Commission Act 2020* (Act), I present the Personal Injury Commission's (Commission) 2024–25 Annual Review. This Annual Review covers the statutory reporting period from 1 July 2024 to 30 June 2025.

Legislative reform

The year has been one of legislative change, both completed and in contemplation. For the first time in many years, the state of the workers compensation system has been a matter of much debate and publicity. At the time of writing this President's Report, the *Workers Compensation Legislation Amendment Bill 2025* (Bill) is before a Committee of the Upper House of State Parliament, with further hearings to take place. What is likely is that legislative change of some descript will take place during the next 12 months. But this has been the history of workers compensation over the past 99 years. The Commission and its legacy bodies have successfully implemented and applied numerous legislative changes over that period, and I have every confidence that we will do so again.

In September 2024, the *Police Amendment (Police Officer Support Scheme) Act 2024* (POSS Act) passed the State Parliament. The POSS Act replaces the former Police Blue Ribbon Support Scheme and is a workers compensation-like scheme designed to provide benefits to seriously injured officers, over and above their usual workers compensation entitlements. The responsibility for dispute resolution in this new scheme has been placed in the Commission. A new Commission division and Division Head has been established. All the foundational work to receive claims in this new division has been completed and we expect to see the first claims being filed in the next reporting period. I particularly thank the inaugural Division Head, Josephine Bamber, Principal Registrar, Marianne Christmann, and Managing Lawyer, Rosemary Sagvand for the monumental amount of establishment work they undertook to operationalise the POSS Act work in the Commission.

I now turn to our remaining dispute work in the Motor Accidents Division. The State Insurance Regulatory Authority (SIRA) undertook the two-year review of the Act (the Review), which commenced in August 2022. The report arising from the Review, published in 2023, recommended that the motor accidents dispute model be examined with a view to improving its cost and efficiency. The current model is heavily reliant on expert medical assessments by a Commission medical assessor in the majority of claims. Often times Commission medical assessors and medical review panels are called upon to decide very modestly valued treatment and care disputes at great cost. This model also places great pressure on the Commission's medical assessors. This model is, as a result, slow and costly in practice.

To take pressure off the medical list, in the second quarter of 2025, the Commission implemented the Psychiatry Medical Review Panel Pilot in motor accidents matters. The Pilot is not a panacea for the challenge of medical assessments in motor accidents matters, the problem is a structural one which requires a legislative fix. However, pending action being taken by the Parliament, the Pilot is designed to try and speed up the passage of cases through the medical review panel process.

The Review's findings are now two years old, and the hope is that action will soon be taken to improve this dispute model, which is not working in the public interest.

Amending the Commission's rules

During the year the Commission undertook much consultation and enhancement of its rules. Rule 67, or what is colloquially known as the '500-page rule', commenced and already parties and our decision-makers are seeing the benefit. The material being relied upon in cases has been much more focused on the issues actually in dispute and the Commission is no longer holding quantities of personal information that is not required to decide the dispute. This rule is an aspect of our approach to cyber security, namely by holding the information we need and no more.

We have also consulted with the legal profession on changes to how s 145 recovery actions are conducted. These are recovery actions pursued by the Nominal Insurer against uninsured employers and while few in number, they are a significant logistical challenge for all involved. Pleasingly, there was agreement that this type of action needed to be accommodated differently in the rules.

We are also introducing rules about the use of Artificial Intelligence (AI) in Commission proceedings. These rules will be closely modelled on those introduced by the Chief Justice of NSW in late 2024, which significantly regulate the use of AI in proceedings. Importantly, the ban upon the use of AI by judicial officers will apply to all Commission decision-makers. AI in the courts and tribunals represents a protean challenge for all involved. At stake is the trust and confidence that citizens must have in the important function of deciding their disputes. Decision-makers, both judicial and administrative, must have confidence in the provenance of the evidence before them. This will be an ongoing issue for the administration of justice as the new technology continues to evolve.

100 years of workers compensation

Next year sees the occurrence of an important centenary. In 1926, the *Workers Compensation Act 1926* was passed by the State Parliament. This saw the movement of workers compensation disputes from the District Court of New South Wales into the newly formed Workers Compensation Commission. The new Commission was headed by a District Court Judge, Judge Ralph Perdriau, and first sat in Newcastle in August 1926. 2026 marks one hundred years of workers compensation disputes being heard and determined in a dedicated specialist court or tribunal. We will mark this centenary with a number of activities which will honour the years of dedicated service by many to the people of this state.

1. The reporting year in review (continued)

This year also sees a significant changing of guard in our members' ranks. Long-time Deputy President Elizabeth Wood, long-time principal member Josephine Bamber, senior member Kerry Haddock, general members John Isaksen, Catherine McDonald and Brett Batchelor are all either commencing well deserved retirements, or retirements from full-time work. Each member was a highly respected and experienced legal practitioner before embarking on significant public service as a Commission member. I cannot thank them enough for their dedication and the high quality of their work. They will be hard to replace and at the time this report was being finalised, recruitment actions were well underway.

On a sad note, Member Allan Cowley died in early 2025 after a battle with cancer. Allan was a real gentleman; he had provided long and dedicated service as an assessor at the Dispute Resolution Service after a career in private practice. He was one of our inaugural Commission members on foundation in 2021 and will be missed by the Commission and legal profession alike. In Chapter 10 of this Annual Review is a lovely obituary penned by his wife, Jill.

During the year we also lost one of the giants of the judiciary and personal injury law, Judge John O'Meally. John was a terrific fellow and Judge who left a great legacy in the law, especially his leadership in creating the Dust Diseases Tribunal. Presidential members Michael Snell and Paul Sweeney, both former barristers who appeared regularly in John's court, have completed a wonderful tribute to his life which appears in Chapter 10.

Additionally, the Commission was the beneficiary of some wonderful speakers at our ongoing education events. Rear Admiral Lee Goddard CSC, a former commander of the Royal Australian Navy's surface fleet, spoke to both the staff and members about high-performing teams, relating some compelling anecdotes of his experience leading young Australians. We also had former international rugby referee Wayne "Gus" Erikson speak to members about decision-making, especially in pressured situations.

During the year, the Attorney General asked us to release one of our members, the Hon. Lea Drake, to conduct an inquiry in the greyhound industry. Lea did this with great skill and commitment, and we look forward to her return to the Commission in the near future.

Finally, I record my thanks to the Executive Leadership Team, the Commission's staff, members, medical assessors, merit reviewers, and mediators. The Commission has not only heard and dealt with a significant workload but also carried out the various projects I have referred to above. It was another year of hard work and achievement in the service of the people of NSW.

Judge Gerard Phillips
President

Principal Registrar's report



Marianne Christmann,
Principal Registrar

As the Personal Injury Commission enters its fifth year of operations, I am proud to reflect on our continued growth and unwavering commitment to deliver outcomes for the injured people of NSW. Our members, mediators, merit reviewers, medical assessors, and staff have once again demonstrated exceptional dedication in achieving the Commission's purpose of making the path to quality justice for injured people clear, accessible, timely and cost-effective.

A year of strategic progress, strong performance and operational excellence

In the 2024–25 reporting period, the Commission achieved the final key milestones from its inaugural Strategic Plan 2022–25. This work improved our dispute resolution services, operational efficiency and digital infrastructure to cement the Commission as a modern, innovative tribunal. We launched our refreshed Strategic Plan 2025–28 which will confidently guide the Commission and all its people into the next phase of our lifecycle. Over 50 people leaders and key staff co-designed the new plan to ensure the Commission remains responsive, future-focused and well-positioned to meet the evolving needs of the injured people of NSW and all tribunal users.

Our performance remained solid during 2024–25. Notwithstanding further increases in filings, which peaked at 17,298 (another 4% increase), we continued to finalise more disputes than we received (17,869) to achieve a strong clearance rate of 103%. We also continued to improve dispute life cycles in almost all key areas, improving year on year for the last 3 years (see Chapter 9 for detailed performance data).

Agility in responding to legislative reform

The President outlined in his Report the evolving legislative landscape surrounding the Commission and noted the new jurisdiction conferred on the Commission by the *Police Amendment (Police Officer Support Scheme) Act 2024*. To implement this significant reform, the Commission created a new division, appointed an acting Division Head and put in place new financial and other operational arrangements so we could receive disputes under the scheme. Many decision-makers have also been appointed to more than one division to ensure we have expertise in handling disputes in each division and remain agile in responding to changed patterns in dispute filings.

1. The reporting year in review (continued)

We also remain poised and well prepared to respond to further legislative change should the *Workers Compensation Legislation Amendment Bill 2025* pass or other reforms emerge.

Pathway: advancing digital transformation

The crown jewel in our digital strategy, our award-winning digital platform, Pathway, made remarkable strides this year. In recognition of its innovation and impact, Pathway was honoured with the Department of Customer Service award for Excellence in Digital Delivery – a significant achievement that highlights the platform’s role in delivering an integrated and robust tribunal solution.

2024–25 saw the third and final phase of Pathway completed and the first full year that all tribunal users have engaged with us through the single digital platform. Throughout the year, we actively listened to user feedback and introduced a range of enhancements aimed at further harmonising processes across jurisdictions, improving functionality and strengthening cyber security.

Pathway continues to be a testament to our commitment to providing a seamless and cyber secure digital experience for all tribunal users (see Chapter 4 for more information about our Pathway and cyber security achievements for the reporting year).

Enhancing the effectiveness of the Commission’s rules

The Commission regularly reviews its rules and procedural directions to enhance their effectiveness and ensure the Commission can continue to resolve the real issues in proceedings justly, quickly, cost-effectively, and with as little formality as possible while reducing process trauma for injured people.

On 25 November 2024, we successfully implemented amendments to rule 67 of the Personal Injury Commission Rules 2021, introducing the 500-page limit for supporting documents in certain initiating applications and replies, requiring any party who wishes to lodge more than 500 pages to explain how those documents facilitate the just, quick, and cost-effective resolution of the real issues in the proceedings. This change reduced the amount of irrelevant material being put before the Commission in proceedings, aligning with the objects of the *Personal Injury Commission Act 2020*.

The Commission also continues to navigate an ever-evolving digital landscape with the increasing use of Generative Artificial Intelligence (Gen AI) in the law. The Rule Committee resolved to amend the rules to address the use of Gen AI in the Commission’s proceedings and other aspects of the rules that require amendment to enhance the effectiveness of our dispute resolution model (see also Chapter 4).

Modern, flexible access to our dispute resolution services

Achieving excellence and improving accessibility to our services remains a core strategic priority. In 2024–25, the Commission advanced its Dispute Resolution Venues Strategy by expanding its network of fit-for-purpose venues across NSW. In addition to in-person and hybrid hearings at our 1 Oxford Street, Darlinghurst base, we now host regional hearings and events through formal agreements with Local Court facilities and an extended pilot at the Service NSW centre in Dubbo, with plans underway to further broaden our regional footprint. 51% of our conferences and hearings were held virtually, allowing tribunal users to participate safely and conveniently from locations across the state.

Close to 7,600 medical assessments were conducted in 2024–25, with nearly a quarter (1,914) taking place in our seven state-of-the-art medical suites. These purpose-built facilities provide a high-quality environment for medical assessments and support both our medical assessors and injured people. The remaining assessments were delivered through medical assessors’ private consultation rooms or via secure online platforms, ensuring flexibility and continued access.

Strengthening connections with our stakeholders

In our second year implementing the Commission’s Stakeholder Engagement Framework, we deepened our commitment to purposeful engagement and authentic collaboration with the legal profession, insurers and self-insurers, claimant representatives, unions, and other key stakeholders.

Guided by the principles of transparency, responsiveness, and mutual respect, our engagement efforts matured. A key milestone was the revitalisation of our Medical Assessor

Reference Group in May, ensuring its membership reflects the diverse voices and expertise needed to inform our work and shape our future direction.

Our calendar was rich with activity, hosting a range of events for our stakeholders including forums, conferences, twilight seminars and briefings. These activities gave us the opportunity to listen, learn and build.

Our people

Continuing to grow a high-performing culture, prioritising our investment in building our people's capability and empowering our people to perform and excel, remained a focus for 2024–25.

Throughout the year, we delivered new and refreshed initiatives aimed at professional development, wellbeing and improving processes. We advanced our Mental Health and Wellbeing Framework, strengthened our Wellbeing Champions network and commenced work on our Vicarious Trauma Framework.

We launched our Workplace Presence policy to foster greater connection and collaboration by bringing people together. We delivered targeted education sessions and a broad range of conferences and events for all of our cohorts, including staff, members, mediators, merit reviewer and medical assessors.

We celebrated staff achievements through our recognition program and organised numerous events designed to strengthen team connection, including a visit from the Minister for Customer Service and Digital Government.

Looking ahead

As we head into 2025-26, the Commission remains agile, future-focused and responsive to meet the evolving needs of injured people, all tribunal users, and changes in the personal injury sector in NSW.

Finally, I would like to thank the President, my Division Head and Director colleagues, and all our people for their dedication, passion and support. Their collective efforts ensure the Commission remains well-positioned to deliver outstanding service to injured people across NSW in the years ahead.

Marianne Christmann
Principal Registrar

A visit to the Commission from Japan

On Wednesday 20 November 2024 Judge Phillips received a courtesy call from the Consulate-General's Office of Japan. Judge Phillips hosted Justice Katsuya Uga from the Supreme Court of Japan, Judge Yotaro Oda from the Sendai High Court and Judge Hirofumi Higashi who was on exchange to the University of Sydney from the Sendai District Court. The courtesy call was one of the few courts or tribunals that the Justice and Judges made, also making a call to the Supreme Court of New South Wales.

Judge Phillips and Justice Uga discussed the differences between the Australian and Japanese justice systems, the operations of the Personal Injury Commission, exchanged gifts and undertook a tour of our venue including the Presidents Court.



Justice Uga, Supreme Court of Japan, and Judge Phillips, President Personal Injury Commission.



Judge Phillips hosted Justice Uga from the Supreme Court of Japan, Judge Oda from the Sendai High Court and Judge Higashi from the Sendai District Court.

2. Achievements in the reporting year

Applications	Dispute resolution activity	Dispute resolution outcomes
 <p>17,298</p> <p>dispute applications registered</p>	 <p>7,594</p> <p>medical assessments held</p>	 <p>94%</p> <p>of workers compensation disputes resolved without formal determination</p>
 <p>17,869</p> <p>dispute applications finalised</p>	 <p>1,676</p> <p>medical panel conferences held</p>	 <p>95%</p> <p>of motor accident damages disputes resolved without formal determination</p>
	 <p>6,534</p> <p>preliminary conferences held</p>	 <p>68%</p> <p>of work injury damages cases which proceeded to mediation were settled</p>
	 <p>2,314</p> <p>conciliation conferences/ arbitration hearings held</p>	
	 <p>165</p> <p>assessment conferences held</p>	
	 <p>1,983</p> <p>mediation conferences held</p>	

Published decisions



92

Presidential decisions published



697

member and merit reviewer decisions published



3

merit review panel decisions published



906

medical appeal panel and medical review panel decisions published

Service



20,816

calls to 1800 PIC NSW enquiry line assisted



15,972

emails to help@pi.nsw.gov.au enquiry inbox assisted



6,820

support tickets addressed for Pathway users

Communications and engagement



50

editions of the *Legal Bulletin* published



15

reference group meetings held with Commission stakeholders



16

editions of *Personal Injury Commission News* published

2. Achievements in the reporting year (continued)

One Commission One Vision	Our Users	Our Services
<ul style="list-style-type: none"> ✓ Launched the Commission’s refreshed Strategic Plan 2025–28, so it remains future-focused and meets the needs of injured people of NSW and all tribunal users 	<ul style="list-style-type: none"> ✓ Our Pathway platform proudly took home the Department of Customer Service Award for Excellence in Digital Delivery 	<ul style="list-style-type: none"> ✓ Held 4,462 assessment conferences, conciliations/arbitrations, and mediations
<ul style="list-style-type: none"> ✓ Completed Pathway with the launch of Phase 3, that supported the amendments to rule 67 including the 500-page limit and harmonised dispute resolution processes across divisions 	<ul style="list-style-type: none"> ✓ Resolved the Commission’s stance on Artificial Intelligence (AI), in line with the Supreme Court guidelines, to provide tribunal users with confidence in the integrity of its decisions 	<ul style="list-style-type: none"> ✓ Conducted close to 7,600 medical assessments in the Commission’s medical suites, medical assessors’ private suites, and virtually for most psychiatric appointments
<ul style="list-style-type: none"> ✓ Brought our people together for a range of events with special guests including the Minister for Customer Service and Digital Government, the Hon. Jihad Dib MP 	<ul style="list-style-type: none"> ✓ Delivered a comprehensive briefing program for our stakeholders regarding the amendments to rule 67, including the 500-page limit 	<ul style="list-style-type: none"> ✓ Launched the Digital Hub for Pathway users to make it easier to access support
<ul style="list-style-type: none"> ✓ Hosted a courtesy call from the Consulate-General’s Office of Japan on 20 November 2024 to discuss the Australian and Japanese justice systems 	<ul style="list-style-type: none"> ✓ Delivered speeches to key stakeholders on the Commission’s work, including on the new Police Officer Support Scheme 	<ul style="list-style-type: none"> ✓ Strengthened the Pathway Portal and myPathway defences by introducing multi-factor authentication (MFA) and enhanced measures to detect and handle compromised passwords

Our People

- ✓ Undertook a program of recruitment and succession planning to boost the Commission's decision-making capacity, which included:
 - » the appointment of an additional acting Deputy President
 - » appointments to the Police Officer Support Scheme Division including a Division Head (acting), members and medical assessors
 - » the appointment of two full-time members and additional sessional members across one or more divisions
 - » the appointment of seven mediators in the Workers Compensation Division
 - » 157 medical assessors reappointed by 1 March 2025 for a new three-year term

- ✓ Provided additional security measures, security awareness and de-escalation training to help keep our people and all tribunal users safe

- ✓ Continued our commitment to train our people leaders to improve performance and efficiency

- ✓ Recognised the contributions and efforts of our people through a dedicated recognition program

Our Performance

- ✓ Achieved a key priority in reducing the COVID-19 induced backlog in motor accidents medical assessment matters from 4,658 matters in 2022 down to seven at the end of the reporting year

- ✓ Maintained a strong clearance rate of 103%, finalising more disputes than we received, notwithstanding increased filings

- ✓ Completed the formal review of the Commission's original Key Performance Indicators

- ✓ Commenced the Psychiatry Medical Review Panel Pilot in March 2025 with the intention to reduce waiting times in the MRP lifecycle

3. The work of the Commission

Achieving outcomes for the injured people of NSW

The Personal Injury Commission is an independent statutory tribunal within the justice system of NSW. It commenced operations on 1 March 2021. The Commission's primary function is to resolve disputes between people injured in motor accidents or workplaces, and employers and insurers in NSW.

On 27 September 2024, the Commission's jurisdiction was expanded to include police officers injured in the course of their duties as part of the Police Officer Support Scheme which replaces the Police Blue Ribbon Insurance Scheme. With a focus on injury prevention, rehabilitation and supporting officers to return to work, wherever possible, the scheme provides eligible officers who are injured on duty and in receipt of weekly workers compensation with supplementary support payments for up to seven years, with the possibility of extension for up to an additional three years in cases of catastrophic or exceptional injuries. The Commission has new powers to determine disputes in relation to decisions made under the new scheme, including hearing and determining applications regarding disputes of decisions made under the regulation. To undertake this work, the Police Officer Support Scheme Division has been established through amendments to the *Personal Injury Commission Act 2020* and is headed by a Division Head appointed by the Attorney General.

The Commission is committed to resolving disputes justly and efficiently in the shortest timeframe possible and works with all parties (injured persons, insurers and employers, where relevant) to discuss ways of achieving this.

In cases where the parties are not able to reach their own resolution, the Commission will decide the dispute. If a party is not satisfied with a decision of the Commission, they may seek an appeal or review.

The Commission's objectives

The Commission's objectives, as set out in the *Personal Injury Commission Act 2020*, are:

- a) to establish an independent Personal Injury Commission of New South Wales to deal with certain matters under the workers compensation legislation, motor accidents legislation and legislation providing for the police officer support scheme and provide a central registry for that purpose,
- b) to ensure the Commission –
 - i) is accessible, professional and responsive to the needs of all of its users, and
 - ii) is open and transparent about its processes, and
 - iii) encourages early dispute resolution,
- c) to enable the Commission to resolve the real issues in proceedings justly, quickly, cost-effectively and with as little formality as possible,
- d) to ensure that the decisions of the Commission are timely, fair, consistent and of a high quality,
- e) to promote public confidence in the decision-making of the Commission and in the conduct of its members,
- f) to ensure that the Commission –
 - i) publicises and disseminates information concerning its processes, and
 - ii) establishes effective liaison and communication with interested parties concerning its processes and the role of the Commission,
- g) to make appropriate use of the knowledge and experience of members and other decision-makers.”

Legislation administered

The Minister for Customer Service and Digital Government was responsible for the administration of the *Personal Injury Commission Act 2020* in the reporting year.

The Attorney General is responsible for appointing the Commission's members under the *Personal Injury Commission Act 2020*.



Left to right: Glenn Capel, Workers Compensation Division Head, Marianne Christmann, Principal Registrar, Judge Gerard Phillips, President, Janet Wagstaff, Director Legal and Policy, the Hon. Jihad Dib MP, Minister for Customer Service and Digital Government, Marie Johns, Motor Accidents Division Head, Josephine Bamber, Police Officer Support Scheme A/Division Head.

Relevant legislation

- *Personal Injury Commission Act 2020*
- Personal Injury Commission Regulation 2020
- Personal Injury Commission Rules 2021
- *Motor Accidents Compensation Act 1999*
- Motor Accidents Compensation Regulation 2020
- *Motor Accident Injuries Act 2017*
- Motor Accident Injuries Regulation 2017
- *Workers Compensation Act 1987*
- *Workplace Injury Management and Workers Compensation Act 1998*
- Workers Compensation Regulation 2016
- *Police Act 1990*
- Police Regulation 2015

Rules

The Commission's rules are made by its Rule Committee, established under s 19 of the *Personal Injury Commission Act 2020*. The rules are a statutory instrument, disallowable only by the Parliament.

Procedural directions

Procedural directions provide information on specific issues and complement the relevant legislation. The President of the Commission may give directions relating to the practice and procedures to be followed in proceedings before the Commission, or before medical assessors or medical reviewers. These directions must be complied with by members, medical assessors, merit reviewers, and the parties to proceedings, including their representatives and agents. Key changes to the Commission's rules and procedural directions from the reporting year are outlined in Chapter 4 of this Review.

All rules, procedural directions and links to the *Personal Injury Commission Act 2020* and enabling legislation are available on the Commission's website:

pi.nsw.gov.au/home/rules-and-procedural-directions

4. Delivering the Commission's Strategic Plan



Commission staff provided input on how their roles connect and contribute to the refreshed strategic plan.

The Personal Injury Commission's work is guided by its Strategic Plan – the vision, mission, purpose and values that are aligned to the Commission's legislated objects, as well as its strategic priorities. Together they create a vital, foundational pillar that defines what the Commission is, what it stands for, and where it is heading.

In 2024–25, the Commission built on its strong progress from previous years and delivered several key final priorities from its inaugural Strategic Plan 2022–25. This work has resulted in improvements to the Commission's dispute resolution services, operational efficiency, and digital infrastructure that cement the Commission as a modern, innovative tribunal.

This chapter reports on the successful completion of one of the Commission's highest priorities since establishment – Pathway, the Commission's single digital platform – and the efforts to maintain a safe and cyber secure digital environment. This chapter also highlights the significant work undertaken during the year to enhance the Commission's rules and procedural directions which will better enable the Commission to deliver on its statutory mandate

to resolve the real issues in proceedings justly, quickly, cost effectively, and with as little formality as possible.

This chapter provides updates on the Commission's Dispute Resolution Venues Strategy and response to the *Report on the outcome of the two-year Statutory Review of the Personal Injury Commission Act 2020*. Other important deliverables in the Plan are reported throughout this Annual Review.

Importantly this year, the Commission also completed its new refreshed Strategic Plan which will confidently guide the Commission and all its people into the next phase of its lifecycle. While the Commission's vision, mission, purpose, and values remain unchanged, the evolving external landscape encompassing legislative reform, technological advancements, and emerging operational and

tribunal user needs, continue to compel us forward to adapt and be agile as a tribunal. The Commission's Strategic Plan 2025–28 (pages 24–25) will ensure the Commission remains responsive, future-focused, and well-positioned to meet the evolving needs of the injured people of NSW and all tribunal users.

Our award-winning single digital platform

Strategic Priority: Our Users – create a seamless digital journey for injured people and tribunal users through a single digital platform, engaging all users in the digital transformation journey and never compromising operational excellence

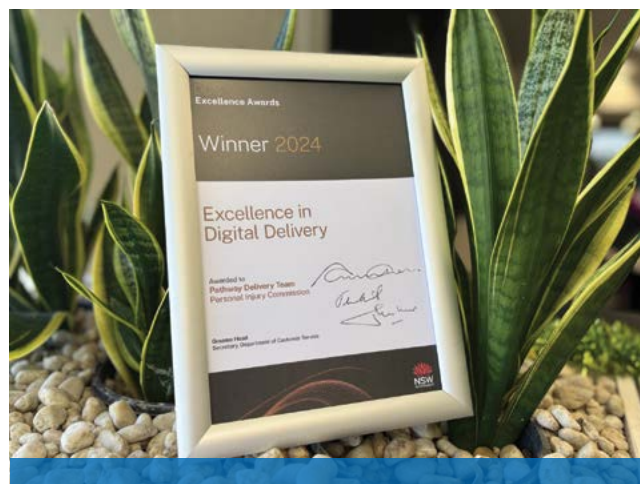
Strategic Priority: Our Services – digital needs of the Commission are successfully delivered with strong cyber security measures

The Commission's single digital platform, Pathway, is the crown jewel in the Commission's digital strategy. In previous years, the Commission completed significant work to bring all tribunal users, decision-makers, and staff onto the single digital platform ensuring a seamless digital journey that supports all users. This important project had three key phases, with the third and final phase successfully completed in the 2024–25 reporting period. As at 30 June 2025, there were more than 7,900 users registered to use Pathway.

In November 2024, the Commission proudly took home the Department of Customer Service Award for Excellence in Digital Delivery for the Pathway platform project. This award recognised the Commission's work to improve the digital experience of all tribunal users and celebrated the achievement of one of the Commission's highest strategic priorities since establishment.

Harmonising and streamlining dispute resolution processes in the final phase of Pathway

Phase 3 of Pathway launched enhancements to the platform in November 2024 that further harmonised operations across divisions and ensured the Commission's Registry was positioned as the virtual front door for all tribunal users. These enhancements included adding new harmonised forms, and forms that were previously only available offline, onto the Pathway platform to create a streamlined and consistent digital experience for



The Commission was awarded the Department of Customer Service Award for Excellence in Digital Delivery for the Pathway platform project.

tribunal users. At the same time, the Commission launched platform enhancements that enabled the new 500-page rule, new processes for additional document applications and other amendments to rule 67 that are detailed in the section below. These enhancements were designed to ensure the lodgment process for applicants and respondents was as easy as possible.

Throughout the reporting period, the Commission continued to collect user feedback and make enhancements to Pathway to fine-tune the user experience. This included improvements to email notifications and tweaks to some of its application and reply forms. Intuitive check-buttons and simplified questions were also added to Form P01 Application to Lodge Additional Documents to provide greater clarity and streamline lodgment. By reducing ambiguity, standardising submissions, and enabling quicker decision-making, the Commission is delivering on its vision to deliver quality, timely, innovative and cost-effective justice for injured people in NSW.

To ensure Pathway users can seamlessly access digital support, the Commission also launched a brand-new way for raising digital support requests. The PIC Digital Hub has streamlined support processes and enabled the Commission's support team to respond more efficiently and effectively to user needs. Since launch in March 2025 to 30 June 2025, the PIC Digital Hub successfully responded to 786 requests for digital support.

4. Delivering the Commission’s Strategic Plan (continued)

Upholding strong cyber security measures

Maintaining the security of the Pathway platform to protect the private and sensitive data of tribunal users is of paramount importance to the Commission. Due to the ever-evolving digital landscape that the Commission operates in, it continues to monitor and respond with agility to new and emerging cyber threats.

In 2024–25, the Commission refreshed its cyber security strategy and released a range of enhancements to further strengthen the cyber security posture of Pathway. This included implementation of a compromised password reset feature to alert users if their password has appeared in known data breaches, prompting them to reset it immediately to prevent unauthorised access and maintain security. Staggered rollout of multi-factor authentication with an authenticator app commenced in May 2025 to provide an extra safeguard for account holders and minimise the risk of bad actors gaining access to the platform.

The Commission regularly engages with Pathway users, stakeholders, staff and decision-makers on the importance of cyber security and safeguarding the sensitive and private data it holds. The Commission remains steadfast in its commitment to staying ahead of cyber threats and will continue to make security enhancements to the Pathway platform and work with tribunal users to keep the Commission’s data secure.

Looking ahead

A wide range of significant Pathway milestones were successfully achieved in the reporting period that have enhanced the experience, efficiency and security of the platform. The Commission has planned a further range of enhancements for 2025–26 to continuously improve the experience for all tribunal users and continue to strengthen its cyber security.

Enhancing the Personal Injury Commission rules and procedural directions

Strategic Priority: Our Services – deliver integrated and efficient tribunal services which are responsive to all our users

As part of the Commission’s commitment to continuous improvement, it regularly reviews its rules and procedural directions to determine

ways to enhance the effectiveness of its dispute resolution model. This ensures the Commission can continue to resolve the real issues in proceedings justly, quickly, cost-effectively, and with as little formality as possible while reducing process trauma for injured people.

Personal Injury Commission Rule Committee

The Commission’s Rule Committee, established under s 19(1) of the *Personal Injury Commission Act 2020* (Act), is responsible for conducting regular reviews of, and making amendments to, the Personal Injury Commission Rules 2021, where necessary, to ensure the objects of the Act are achieved.

The Rule Committee is comprised of the Commission’s President and Division Heads, representatives from the legal profession peak bodies, medical industry, unions, employer groups, the State Insurance Regulatory Authority and NSW Police Force. Rule Committee membership as at 30 June 2025 is shown in Appendix F.

Amendments to rule 67 and the 500-page limit

Following extensive engagement with key stakeholders in 2023–24 and a significant education campaign, the Commission enacted amendments to rule 67 of the Personal Injury Commission Rules 2021 and Procedural Direction PIC 3, a new Procedural Direction PIC 12 and consequential amendments to other procedural directions on 25 November 2024.

These provisions introduced a new 500-page limit on supporting material lodged with initiating applications and replies for certain dispute types. Additionally, the amendments to rule 67 require all documents submitted to the Commission in support of applications or replies to be lodged as a single, indexed and paginated bundle sorted by document category.

Since November 2025, for dispute types subject to the 500-page limit, any tribunal user who wishes to submit more than 500 pages of supporting material must lodge an Application to Lodge Additional Documents on Pathway that shows how the procedural requirements of the new rule 67 have been met, and how the additional documents are “necessary to facilitate the just, quick and cost-effective resolution of the real issues in the proceedings” as contemplated in

the guiding principle, s 42 of the Act. Where the Commission receives a supporting document bundle for initiating applications or replies that is greater than 500 pages or is not compliant with the requirements of the amended rule 67, it is rejected by the Commission Registry.

Rule 67C(2) has streamlined the introduction of additional documents during applicable medical assessment proceedings by allowing them to be automatically introduced on one occasion when certain criteria are met, including agreement by both parties.

By focusing the parties' attention on the matters that are truly in dispute, these amendments help the Commission to meet its statutory mandate to resolve the real issues in proceedings justly, quickly, cost effectively and with as little formality as possible. The rule amendments have enhanced the efficiency of the resolution of dispute proceedings by reducing the volume of unnecessary material, including documents irrelevant to the real issues in proceedings and document duplicates. This will continue to benefit injured claimants and workers by reducing process trauma.

Since launch, the Commission has been pleased to observe substantial compliance with the 500-page rule, with less than 1% of relevant applications and replies rejected by the Commission Registry. The Commission thanks all practitioners for their engagement with these important reforms through educational resources and a series of online briefings.

Responding to the rise of Generative Artificial Intelligence

As highlighted by the President in his Report (page 6), the Commission continues to navigate an ever-evolving digital landscape with the increasing use of Generative Artificial Intelligence (Gen AI) in the law. In February 2025, the President directed all Commission decision-makers to comply with the NSW Supreme Court's Judicial Guidelines and reminded them that AI tools used by parties are prohibited during all Commission hearings and events.

On 24 February 2025, the Rule Committee resolved in a majority vote that the Personal Injury Commission Rules 2021 should be amended due to the passage of amendments made to the Uniform Civil Procedure Rules 2005 (UCPR) to address the use of Gen AI in legal proceedings. Closely

following the approach of the Supreme Court, the Commission will soon issue amended rules and a new procedural direction addressing the use of AI in Commission proceedings and the preparation of evidence used in cases.

Consistency in approach to the use of Gen AI within the law is of critical importance to the maintenance of public confidence in the justice system (see also Chapter 10 article, The use of Generative Artificial Intelligence in the law).

Upcoming amendments to the Personal Injury Commission Rules

Looking forward, other important resolutions to be implemented in 2025–26 include amendments to support the establishment of the Police Officer Support Scheme Division, clarify the meaning of an 'appropriate decision-maker' for the purposes of rule 67, and harmonise the test for an extension of time under rule 133A for Motor Accidents medical review panel applications with the test for Workers Compensation medical appeals under s 327(5) of the *Workplace Injury Management and Workers Compensation Act 1998*. Details are available on the Commission's [website](#).

In early 2025, the Rule Committee also discussed potential rules for proceedings that involve recovery actions under s 145 of the *Workers Compensation Act 1987*. These proceedings are often complex and lengthy due to the involvement of an uninsured entity which is not privy to the workers compensation claim subject of the recovery action before the Commission, until the proceedings commence. The President has liaised with various external stakeholders, including the Law Society and NSW Bar Association in this regard, and at a future Rule Committee meeting, the Committee will consider potential rules that will address the various procedural issues arising in these proceedings.

When the rule amendments regarding the use of AI are enacted in 2025–26, the Commission will make amendments to the relevant procedural directions and issue a new procedural direction.

The Commission will continue to amend its rules and procedural directions as required to enhance the effectiveness of its dispute resolution model and to meet the needs of evolving external landscape.

4. Delivering the Commission's Strategic Plan (continued)

Statutory Review of the *Personal Injury Commission Act 2020*

The Commission has continued to make significant progress in its response to the *Report on the outcome of the two-year Statutory Review of the Personal Injury Commission Act 2020* (the Review). Released in August 2023 by the State Insurance Regulatory Authority (SIRA), the report found that the objects and terms of the Act generally remain appropriate to achieve its policy objectives.

Decision publication

The Review found that s 58 (Publication of decisions) and the Commission's rules seek to strike a balance between the interests of injured people, the appropriate protection of privacy and the public interest in open justice. While the Review recommended no amendment, it suggested that the Commission review how it informs parties about these provisions.

The Commission's decision publication policy, available on the Commission's website (pi.nsw.gov.au/decisions), outlines the ability to apply for parts of a decision to be de-identified or redacted in line with the terms of rule 132(4) of the Personal Injury Commission Rules 2021 and encourages early applications for de-identification and redaction.

In the reporting period, the Commission continued to actively promote the policy with legal practitioners and other stakeholders through the *Personal Injury Commission News*, stakeholder meetings, speeches, and other presentations and will continue to do so on an ongoing basis.

In June 2025, the Commission also published a Presidential decision, *Rotella v AAI Ltd t/as AAMI* [2025] NSWPCPD 49 which provides helpful guidance on the considerations to be applied in relation to s 58 and rule 132 in the context of an application to redact or de-identify a medical review panel certificate.

Data publication

The *Personal Injury Commission News* and Annual Review are the primary channels through which the Commission publishes data on its operational performance. The Commission has found that this approach to data publication aligns to that of other courts and tribunals.

This year, the Commission reviewed opportunities to build on its approach to data publication using the enhanced reporting capabilities from its single digital platform Pathway. In 2025–26, the Commission will commence publication of quarterly performance dashboards on its website and will continue to keep its stakeholders informed as this work progresses.

Stakeholder engagement

The Commission has continued to implement its Stakeholder Engagement Framework and regularly engage with its legal, insurer and medical stakeholders. This engagement occurs through regular reference group meetings, various stakeholder meetings and the *Personal Injury Commission News*. Detailed information on how the Commission engages with tribunal users and key stakeholders can be found in Chapter 6.

To further enhance engagement with injured claimants and workers who do not regularly deal with the Commission and be responsive to the needs of tribunal users, the Commission has commenced a refresh of its website. The refresh aims to improve the functionality and user experience of the website and better align it to the new branding guidelines for NSW courts and tribunals issued by the Premier's Department.

Accessible dispute resolution venues across NSW

Strategic Priority: Our Users – create fit for purpose venues to ensure accessibility and a quality experience for all users

The Commission prides itself in having a wide variety of safe, fit-for-purpose venues for dispute resolution events to enable disputes to be dealt with justly, quickly, and as cost-effectively as possible.

As a modern, digital tribunal, the Commission is committed to making its dispute resolution services accessible to all users, irrespective of their location, physical ability, cultural background or language spoken. Through the Dispute Resolution Venues Strategy, the Commission is actively expanding its network of fit-for-purpose venues for dispute resolution events across NSW.

The Dispute Resolution Venues Strategy aims to enable opportunities for dispute resolution events to take place in-person, virtually or as hybrid events. In the reporting year, the Commission undertook, 4,462 assessment conferences, conciliations/arbitrations and mediations. Of these events, 49% were conducted in-person or as a hybrid event and 51% were wholly virtual.

In-person and hybrid events are conducted from the Commission's offices in Sydney and within the regions. The Commission's offices contain 14 hearing rooms including three large court rooms, all of which include purpose-built audio-visual equipment and soundproofing for privacy. The hearing rooms have been designed for accessibility and security and can accommodate the needs of injured people.

The Commission's Sydney office contains seven fully furnished medical suites to provide modern consultation rooms for medical assessments. To ensure accessibility across NSW, medical assessments can also be conducted in medical assessors' private rooms.

Virtual and hybrid Commission events are conducted over Microsoft Teams and participants can join from anywhere provided they have a secure internet connection and access to Teams. All members' chambers are equipped to serve as virtual hearing rooms. Some medical assessments, such as psychiatric assessments, may also be conducted virtually.

In the reporting year, there were 30 in-person events conducted in the regions, including at Newcastle Local Court and Port Macquarie Local Court. The Commission continued its successful partnership with Service NSW to provide a dedicated, secure, soundproof room at the Dubbo Service NSW facility to allow injured people and other tribunal users to join Commission events virtually, at no cost. By providing this additional regional venue, the Commission aims to reduce barriers to participation in Commission events, such as a lack of computer equipment, reliable secure digital connectivity, privacy, and distance that are of particular importance in regional NSW. The Commission continues to actively investigate other sites in regional NSW for dedicated virtual event spaces.

The Commission will arrange language services for medical assessments and other formal dispute resolution events upon request and at no cost to tribunal users. More information about how the Commission makes its services accessible to all parties is available in the Personal Injury Commission Access Charter on the Commission's website:

pi.nsw.gov.au/resources/policy/access-charter

Looking forward, the Commission will continue to explore new and refined venue options for dispute resolution events to ensure we can continue to resolve the real issues in proceedings justly, quickly, cost-effectively, and with as little formality as possible, while reducing process trauma for injured people.

4. Delivering the Commission’s Strategic Plan (continued)

Strategic Plan 2025–28

Strategic Plan

The Why

Vision

To lead the way in delivering quality, timely, innovative, and cost-effective justice for personal injury disputes

Purpose

To make the path to quality justice clear, accessible, timely and cost-effective

Guided by:

One Commission – One Vision

Strategic Priorities

1

Create and deliver high quality and adaptive, ‘fit for purpose’ solutions for every area of the Commission’s legislative responsibility

- 1.1 Build respect and trust in the Commission for our independence, the quality, durability and timeliness of our decisions and excellence in dispute resolution
- 1.2 To meet and exceed the Commission’s published key performance indicators for our Workers Compensation, Motor Accidents and Police Officer Support Scheme Divisions
- 1.3 Optimise organisational performance, including timely and accurate performance and financial reporting against each of the operational funds
- 1.4 Act responsively and adaptively to new areas of legislative responsibility that may fall into the Commission’s remit in the future, engaging with tribunal users to co-create tailored solutions when required

2

Deliver excellence in tribunal user experience

- 2.1 Proactive and responsive to the needs of tribunal users, maintaining regular, respectful and meaningful engagement with them
- 2.2 Reduce process trauma for vulnerable injured people navigating the current disputes systems and consider all users – injured people, employers, insurers, legal practitioners – in the design of systems and procedures
- 2.3 Deliver a safe and cyber secure digital journey for injured people and tribunal users through ‘Pahtway’ our single digital platform, effective AI protocols and enhancing all our digital services to ensure operational excellence, and an enhanced user experience
- 2.4 Deliver safe, secure and fit for purpose venues across NSW – both physical and virtual – for all our dispute resolution events to ensure accessibility and a quality experience for all users

Values

We take seriously our commitment to act ethically, with integrity and in the public interest, and embrace the NSW Government core values of:

Integrity

Trust

Service

Accountability

2025–28

Mission

To deliver just, quick, cost-effective outcomes for injured people, employers, and insurers, in a way that is responsive, timely, fair, consistent and of the highest quality, with a little formality as possible

We put injured people at the centre of everything we do.

We work as one 'whole of Commission' team, with one unified vision, where all our people contribute to the just, timely and cost-effective resolution of personal injury disputes.

3

Enhance performance and service delivery through excellence in design, technology and innovation

- 3.1** Deliver excellence in dispute resolution services and thought leadership in personal injury law, with strong foundations to grow and respond to future needs
- 3.2** Deliver efficient, whole of Commission tribunal services which are responsive to tribunal users and harmonise rules, systems and procedures wherever possible, maintaining specialisation when needed
- 3.3** Adapt, evolve and enhance our rules and legal instruments to our changing world and deliver high quality legal services and advice
- 3.4** Transform our medical dispute resolution services through the innovative use of our medical suites and process redesign

4

Our team, our people

- 4.1** Operate as an aligned leadership team united in their endeavour to achieve the Commission's purpose and empower and support our people to be a high performing team
- 4.2** Attract and retain a highly capable specialist workforce and foster an engaged, inclusive work culture which rewards excellence, public service and Commission values
- 4.3** Ensure all our people benefit from the Commission's investment in professional and skills development along with a focus on wellbeing to create a dynamic environment for our people to thrive
- 4.4** Undertake workforce planning to promote a diverse and talented workforce, ensuring we sustain a high-performance work culture and excellence in service delivery

Our own values adhere to those values and define the essential behaviours we uphold at the Personal Injury Commission:

People

Independence

Continuous improvement

5. How the Commission delivers its services

Our role

The Commission assists parties to resolve disputes between people who are injured in motor accidents or workplaces, and employers and insurers in NSW. On 27 September 2024, the Commission's jurisdiction was expanded to include police officers injured in the course of their duties as part of the new Police Officer Support Scheme. It is mandated under the *Personal Injury Commission Act 2020* that members use their 'best endeavours' to encourage the early resolution of disputes and resolve the real issues in proceedings justly, quickly, cost-effectively and with as little formality as possible.

Dispute resolution pathways

The Commission deals with a wide range of disputes every day. Disputes lodged with the Commission will follow slightly different pathways depending on the scheme and legislation under which they are lodged, as outlined below. The Commission will continue work to harmonise these pathways in future years, acknowledging the current differences in enabling legislation.

Workers compensation

Workers compensation disputes are triaged according to the type of claim, the amount of compensation, and/or the intended remedy. There are four main dispute pathways:

Expedited assessments – Disputes for past 10 weeks and future 12 weeks of weekly compensation benefits, past medical expenses incurred up to \$11,080.20 (as at 30 June 2025), injury management disputes and disputes regarding work capacity decisions are fast-tracked to a preliminary conference before a delegate of the President or a member. If the parties are unable to resolve the dispute, the delegate or member will determine the issues and make an interim direction.

Legal disputes – Disputes for weekly compensation exceeding 12 weeks, past and future medical and related expenses exceeding \$11,080.20 (as at 30 June 2025) and all other compensation types are heard by a member and are usually resolved by informal conciliation conferences conducted by an audio-visual link. If a dispute cannot be resolved by conciliation, the member will hold a formal arbitration hearing by an audio-visual link, in person or by a combination of these. The member will decide whether a claim for workers compensation benefits should be paid, whether a party is liable to

pay the claim, and the quantum of any entitlement. The decision will be made orally or in writing.

Medical disputes – Medical disputes in respect of the degree of permanent impairment resulting from an injury are usually referred to a Commission-appointed medical assessor for assessment. In some instances where there is a liability dispute regarding the injury, a claim is referred to a member for conciliation and/or determination. Medical disputes in respect of past and future medical expenses are usually referred to a member for conciliation and/or determination.

Work injury damages disputes – Mediation of work injury damages disputes by a Commission-appointed mediator is mandatory before an injured worker can commence court proceedings. The mediator must use their 'best endeavours' to bring the worker, employer and insurer to agreement. If the parties are unable to reach an agreement at mediation, the injured worker may then commence court proceedings. The Commission is also responsible for resolving pre-trial disputes relating to thresholds for entitlement to work injury damages, defective pre-filing statements, directions for access to information and premises, and pre-filing strike-out applications.

Appeals

A party to a dispute may lodge an appeal against a member's decision. An appeal is limited to the determination of whether the member's decision is affected by an error of fact, law, or discretion and to the correction of any such error. The appeal is referred to the President, Deputy President or Acting Deputy President of the Commission for determination. A party may also appeal against a medical assessment of permanent impairment. If the President's delegate is satisfied on the face of the application and submissions that a ground of appeal has been made out, the matter is referred for determination to a medical appeal panel, consisting of a member and two medical assessors.

Police Officer Support Scheme

The dispute resolution model for the Police Officer Support Scheme mirrors the current workers compensation model as far as practicable, to reduce process trauma for officers who also have a workers compensation dispute before the Commission.

When an application is lodged for a Police Officer Support Scheme dispute, the Commission will check if there is an associated workers compensation

dispute. All members appointed to the Police Officer Support Scheme Division are dually appointed to the Workers Compensation Division. Where a dispute comes before both divisions, the Commission will streamline them to ensure they are allocated to the same dual member at the same time, who either resolves the dispute or issues a single decision.

The matter will be listed with a member who will review all material lodged ahead of a preliminary conference with all parties to the dispute. If required, the member will also refer the injured officer for a medical assessment with one of the Commission's medical assessors. Conciliation will be used as a first step to resolving disputes, meaning the Commission will work collaboratively with parties to try to assist them to reach an agreement without a formal determination. However, where an agreement cannot be reached, a member will decide the dispute.

If any party is dissatisfied with the outcome of the dispute, a request can be made for an appeal before a Presidential member of the Commission. A party who considers there is an error in the decision can file an appeal before a Presidential member of the Commission.

Motor accidents

Motor accident dispute pathways are dependent on the scheme and legislation under which the application is lodged, namely the *Motor Accidents Compensation Act 1999* (1999 scheme) or the *Motor Accident Injuries Act 2017* (2017 scheme).

1999 scheme

Damages assessment – A member will undertake an assessment of a claim for damages which includes an assessment of the issue of liability, unless the insurer accepts liability, and the amount of damages for that liability. A certificate and statement of reasons are issued.

Further damages claims assessments – A claim for damages may be remitted by the District Court (the Court) to the member who determined the matter if the Court considers that evidence provided in the proceedings may have materially affected the assessment made by the member if it had been made available to the member when the initial claims assessment was made. A further certificate and statement of reasons are issued.

Exemption of a claim from assessment – A mandatory exemption application is determined by the President, who, if satisfied, may issue an

exemption certificate which allows the parties to proceed to the Court for determination of the claim.

A member may make a recommendation to the President that a claim is unsuitable for assessment. If the President approves the member's recommendation, an exemption certificate will be issued which allows the parties to proceed to the Court for determination of the claim.

Special assessment of certain disputes in connection with a claim – These disputes include whether a late claim can be made, whether there has been due search and enquiry to establish the identity of the motor vehicle, or whether a claim is taken to have been withdrawn. The dispute is determined by a member and a certificate and statement of reasons are issued.

Medical disputes – Medical disputes include whether the degree of permanent impairment resulting from an injury caused by the motor accident is over 10% or whether the treatment provided or to be provided is reasonable and necessary and related to the injuries caused by the accident. Such disputes are determined by a medical assessor. A certificate is issued to the parties.

Medical reviews – Reviews are available if it is shown that the medical assessment is incorrect in a material respect. If a delegate of the President is satisfied that the review application can proceed, the matter will be referred to a medical review panel constituted by two medical assessors and one member who will conduct a new assessment. Unlike a medical appeal in the Workers Compensation Division, the review is not limited to only that aspect of the assessment, which is alleged to be incorrect, rather it is a new assessment of all matters with which the medical assessment is concerned. A new certificate will be issued which will either confirm the certificate of assessment of the single medical assessor or revoke that certificate.

Further medical assessment – A party may apply for a further medical assessment on the grounds that deterioration of the injury or additional relevant information about the injury is capable of having a material effect on the outcome of the previous assessment. A delegate of the President determines whether the further medical assessment application can proceed. If it can proceed, a medical assessor, the same who conducted the original assessment, if possible, will consider the dispute by way of a fresh examination, or, if suitable, on the papers. A new certificate and statement of reasons will be issued.

5. How the Commission delivers its services (continued)

2017 scheme

Merit reviews – A claimant may apply for a merit review of a decision made by an insurer. The types of disputes that can be considered for review include the amount of statutory benefits payable, whether the cost of treatment and care is reasonable and necessary, and whether the insurer has given the required notice before suspending or ending weekly payments. The review is undertaken by a merit reviewer and a certificate and statement of reasons are issued. All motor accident members are dually appointed as merit reviewers.

Merit review panel – A claimant or an insurer may apply to the President to refer a decision of a single merit reviewer determining a merit review application to a review panel of merit reviewers for review, on the grounds that the decision was incorrect in a material respect. The review panel may confirm the decision of the single merit reviewer or set aside the decision and make a decision in substitution for the decision the review panel set aside.

Miscellaneous claims assessment – A variety of disputes may be referred to the Commission for assessment by a member. These include whether the accident was caused wholly or mostly by the fault of the injured person, whether the insurer is entitled to reduce the statutory benefits payable in respect of the motor accident, and whether a late claim can be made.

Damages assessments and exemption of a claim from assessment – These disputes follow the same pathway as under the 1999 scheme.

Damages settlement approvals – The Commission must approve the proposed settlement of a claim for damages in which a claimant is not represented by an Australian legal practitioner. A member will consider the proposed settlement and may approve the proposed settlement, reject the proposed settlement or approve an amended proposed settlement. A certificate and statement of reasons are issued.

Medical disputes – As with the 1999 scheme, disputes may concern permanent impairment and/or treatment matters. Disputes under this scheme also arise in relation to whether an injury is a ‘threshold injury’. Such disputes are determined by a medical assessor. A certificate is issued to the parties.

Medical reviews – Reviews follow the same pathway as under the 1999 scheme.

Further medical assessment – As with the 1999 scheme, applications can be made on the grounds that deterioration of the injury or additional relevant information about the injury is capable of having a material effect on the outcome of the previous assessment. A limit of one further assessment per medical dispute is imposed by the 2017 scheme, and the process is the same as under the 1999 scheme.

How disputes are resolved

The Commission employs a combination of informal alternative dispute resolution methods, such as conciliation and mediation, and more formal hearings in the Workers Compensation Division to reach outcomes for the parties to disputes. Many of the Commission’s disputes are resolved by alternative dispute resolution during preliminary conferences without the need to proceed to formal hearings. Medical assessments are undertaken for disputes about the degree of impairment in the Workers Compensation Division. In the Motor Accidents Division, medical assessors determine both causation and the extent of impairment of the injuries caused by the motor vehicle accident.

Preliminary conferences

Members conduct preliminary conferences at an early stage with the parties. This provides a forum to discuss the legal issues and resolution of the dispute. A preliminary conference is usually the first step in the dispute pathway. Members have a statutory obligation to use their skills to assist the parties to identify the real issues in the dispute, explore settlement options, and attempt to find a solution acceptable to all parties.

Conciliation

If a legal dispute has not been resolved at the preliminary conference, the parties will meet again at a conciliation conference in the Workers Compensation Division. These are held via audio-visual link, in person or in a combination of these formats. A member, usually the same member who held the preliminary conference, tries to assist the parties to reach a resolution. Each party can move to private rooms with their lawyers to discuss settlement options and explore ways to resolve the dispute. The member is neutral and does not communicate with one party without the other party also being present.

Hearings and assessment conferences

If a dispute is not resolved through conciliation in the Workers Compensation Division, the member will make a binding determination following an arbitration hearing. In some circumstances, the dispute might be determined on the papers without a formal hearing.

In the Motor Accidents Division, if a damages assessment matter is not resolved at the preliminary conference, the member will conduct an assessment conference with the parties and undertake an assessment of damages. A certificate and statement of reasons are issued.

Other disputes in the Motor Accidents Division, such as special assessments under the 1999 scheme and merit reviews and miscellaneous claims assessments under the 2017 scheme, may be determined on the papers, or may involve a preliminary conference or hearing.

Mediation

The Commission's mediators conduct mediations to assist the parties to reach a settlement in work injury damages disputes. The mediator's role is to facilitate discussion between the parties to reach a resolution, not to give advice or make decisions. The mediator may have separate private conversations with each of the parties, if necessary, as this can help in resolving deadlocks in the negotiations. If the parties are unable to reach an agreement, the injured worker may then commence court proceedings.

Medical assessments

Medical assessments usually involve a Commission-appointed medical assessor conducting an examination of the injured person to gain an understanding of the circumstances and extent of their injury, their medical history, and treatments they may have received. A medical assessor reviews the medical reports from the doctors who have provided opinions for the insurer and the injured person, as well as any investigations such as X-rays, MRI scans, ultrasounds, CT scans and other documents that may help them understand the injury and its effects. In some circumstances, the assessment may be conducted on the papers. After completing their assessment, a medical assessor prepares

a certificate that sets out their opinion, and the dispute is then resolved based on that assessment. There is an appeal process available if a party believes that there is an error in the certificate.

How the Commission ensures excellence in decision-making

Excellence in decision-making is a high priority for the Commission in delivering its services for the injured people of NSW. *The Personal Injury Commission Act 2020* requires the Commission to:

- ensure that the decisions of the Commission are timely, fair, consistent and of a high quality,
- promote public confidence in the decision-making of the Commission and in the conduct of its members, and
- make appropriate use of the knowledge and experience of members and other decision-makers.

The Commission employs multifaceted strategies to achieve these objectives, including the following:

Recruiting and retaining the right people

The Commission recruits and retains highly skilled decision-makers who are selected using rigorous and competitive merit-based appointment practices. They are retained based on performance reviews conducted in advance of reappointment.

Accessible venues across NSW

Accessible and well-equipped venues help the Commission to meet its objective to resolve disputes justly, quickly, cost effectively and with as little formality as possible.

The Personal Injury Commission Act 2020 considers that the Commission will be accessible and promote public confidence in the decision-making process and the conduct of its members. These key principles apply to how the Commission chooses venues for events and the choice of venue for a particular dispute resolution event should have regard to the objects of the Act.

Further information on the Commission's venues for dispute resolution can be found in Chapter 4 of this Review.

5. How the Commission delivers its services (continued)

Maintaining a culture of excellence

The Commission maintains a culture that demands the ongoing development and maintenance of core decision-making skills. This includes formal training and instruction about hearing processes, evidence and principles of administrative law, as well as continuing updates on developments in law and policy within the Commission and its jurisdictions.

The Commission requires its decision-makers to continuously improve their decision-making processes in relation to timing issues, the formal requirements of a decision, burden and standard of proof, using Commission knowledge, structuring decision-making, making findings of fact, assessing credibility, evaluating expert information, weighing evidence, exercising discretion, and providing reasons.

Ensuring consistency

Consistency in decision-making is critical to the Commission meeting its objective of being open and transparent about its processes. Consistency in decision-making means that similarly situated claimants and workers receive similar treatment and outcomes. This in turn means that parties with comparable disputes experience the similar range of procedural treatment, from case management broadly to conciliation and different forms of hearing processes more specifically.

Consistency is promoted through tools such as style guides and through encouraging interaction between members, assisted by electronic document management. However, consistency does not mean that all members share identical views and perspectives on all issues. Rather, the Commission is comprised of members who represent the diverse and varied backgrounds for which it is responsible. The Commission understands that consistency is not solely obtained by requiring members to observe certain protocols. The Commission has built and maintains a culture that values consistency, coupled with support for the robust exchange of different views.

Managing community expectations

Community expectations are managed through written formal communications such as the rules, procedural directions, newsletters and manuals. If the parties and their representatives have a clear set of expectations around process and issues of law and policy, these expectations will be expressed in the way in which cases are prepared and presented to members.

Publishing decisions

The Commission is required to publish the details of its decisions under s 58 of the *Personal Injury Commission Act 2020*, subject to any successful application for de-identification or redaction of publishable decisions. Publication of decisions promotes open justice and helps to ensure the Commission is open and transparent about its processes, as specified in the Act.

The Commission is committed to open justice because it is a fundamental attribute of a fair hearing.¹ The High Court has said that “the rationale of the open court principle is that court proceedings should be subjected to public and professional scrutiny, and courts will not act contrary to the principle save in exceptional circumstances”.²

The Commission promotes awareness of its decisions by giving easy access to decisions through the weekly publication of the *Legal Bulletin*, which provides links to the Commission’s latest decisions. Stakeholders are encouraged to [subscribe](#) to the *Legal Bulletin*.

The Commission’s decision publication policy, available on the Commission’s [website](#), outlines the ability to apply for parts of a decision to be de-identified or redacted in line with the terms or rule 132(4) of the Personal Injury Commission Rules 2021 and encourages early application.

Explaining our processes

The Commission published a series of fact sheets and videos on its [website](#) to help injured workers and claimants understand what the Commission does and what to expect when taking part in a range of Commission events.

¹ *John Fairfax & Sons Limited v Police Tribunal of NSW* (1986) 5 NSWLR 465, 476–477 (McHugh JA, Glass JA agreeing).

² *Commissioner of the Australian Federal Police v Zhao* [2015] HCA 5; 316 ALR 378, [44] (French CJ, Hayne, Kiefel, Bell and Keane JJ).

6. How the Commission supports and engages tribunal users

The Personal Injury Commission places the needs of the injured people of NSW and all tribunal users at the centre of everything it does and proactively engages with all parties and users. In addition to meeting its legislative requirements to educate staff and decision-makers, the Commission values and fosters open and effective relationships and communication with the communities it interacts with on an ongoing basis. In 2024–25, the Commission deepened its commitment to meaningful engagement by building on the foundations of its Stakeholder Engagement Framework to provide substantial engagement, education and support for each stakeholder group. The Commission’s key engagement channels and activities are outlined in this chapter.

Communications

Personal Injury Commission News

The *Personal Injury Commission News*, widely known as *PIC News*, is the Commission’s flagship, subscription-based newsletter, providing regular updates on key initiatives, operational and procedural changes relevant to tribunal users.

Published no less than once a month, it remains a vital resource in keeping stakeholders and tribunal users informed and connected to the Commission’s work.

Legal Bulletin

The *Legal Bulletin* delivers weekly updates on recent Commission decisions. Each edition includes detailed headnotes summarising key points of the decisions, helping legal professionals and other interested parties to stay informed.

Targeted emails

In addition to its regular newsletters, the Commission utilises targeted emails to communicate urgent updates and specialised content to specific stakeholder groups. For example, when new features are added to the Pathway Portal, communications are sent directly to impacted users to ensure they are aware of upcoming changes and how to access them.

Website

The Commission’s website at pi.nsw.gov.au continues to serve as a key resource for tribunal users and stakeholders by providing guidance on accessing Commission services, news updates, and practice and procedure relating to the Commission’s work.

Regular newsletters such as the *PIC News* and *Legal Bulletin* are published on the website as they are distributed to subscribers, ensuring timely and consistent communication with the Commission’s broader audience. Appeal Case Summaries, which provide overviews of Presidential and Court of Appeal decisions, are also published as they become available.

Looking ahead to 2025–26, the Commission will refresh its website with the aim of continuing to be proactive and responsive to the needs of tribunal users. In April 2025, a business case was approved to enhance the website to improve its functionality and accessibility to deliver more targeted, relevant content that supports the needs of all tribunal users.

Stakeholder engagement

Reference groups

The Commission’s reference groups are collaborative forums composed of key stakeholders and experts who provide valuable expertise, perspectives, and insights to help inform the work of the Commission. Reference group members participate on behalf of the key stakeholder groups they represent and serve as a conduit for their cohorts’ views. Their participation and collaboration are invaluable to the Commission’s work.

6. How the Commission supports and engages tribunal users (continued)

In 2024–25, the Commission continued to meet quarterly with its four standing reference groups. The reference groups are:

External stakeholders:

- Stakeholder Reference Group, with representatives from the legal profession peak bodies, insurance industry, unions, the State Insurance Regulatory Authority and icare, and
- CTP (compulsory third party) Insurer Reference Group, with representatives from multiple CTP motor accident insurance companies, their legal representatives, and the insurance industry peak body.

Internal stakeholders:

- Medical Assessor Reference Group, with representatives from the Commission’s medical assessor panel, and
- Mediator Reference Group, with representatives from the Commission’s cohort of mediators.

In May 2025, the Commission refreshed its Medical Assessor Reference Group to ensure that it remained dynamic, relevant, representative, and effective.

Discussions with the NSW Self-Insurers Association on the possible establishment of a Self-Insurers Reference Group are ongoing.

Reference group membership as at 30 June 2025 is shown in Appendices G–J.

Industry consultation, education and engagement

The Commission proactively seeks opportunities to engage with stakeholders outside of its reference groups, given their key role in the dispute resolution process. This includes facilitating and attending meetings, providing education and training about the Commission and its rules and procedures, providing information on proposed changes to operations and legal instruments, and participation in key events within the personal injury sector. The Commission is responsive to any feedback raised.

Engagements in the reporting year included:

- extensive speaking engagements at universities, conferences and events throughout the year and active membership in the Council of Australasian Tribunals (COAT) with Marie Johns, Division Head, Motor Accidents appointed to its NSW Committee as Secretary
- consulting with a broad range of stakeholder groups on upcoming rule amendments, cyber security measures and other key subjects
- meeting with the NSW Self-Insurers Association to discuss key Commission topics such as self-insurers’ access to the Commission’s digital platform and rules.

Legal profession consultation, education and engagement

As representatives of the parties to disputes, legal professionals play a major role in the dispute resolution process. The Commission recognises the importance of a collegiate relationship with the profession and that legal professionals need a good understanding of how the Commission works and what is required of them to ensure the smooth progression of disputes through the resolution process.

The Commission provides a variety of engagement and education opportunities throughout the year to complement the profession’s representation on the Stakeholder Reference Group. These include:

- the President consults regularly with the New South Wales Bar Association and the Law Society of New South Wales regarding its operations and proposed changes to legal instruments and values their collegiate engagement and support. These ongoing discussions cover a range of important topics, such as recovery actions under s 145 (*Workers Compensation Act 1987*) and cyber security measures to protect sensitive data
- the President and Division Heads regularly participate in legal profession conferences, forums and other educational events and attended various events to mark the commencement of the law term in February 2025
- the President delivers speeches at legal events and gatherings, which included the UNSW Edge Seminar and Newcastle Regional Law Society Personal Injury CPD Seminar in the reporting period.

Engagement and consultation with NSW Government entities

The Commission regularly engages with representatives of the NSW Government and its departments and agencies to update them about the Commission's operations and consult with them on cross-agency matters. These include:

- Office of the NSW Attorney General
- Office of the Minister for Customer Service and Digital Government
- District Court of NSW
- NSW Department of Communities and Justice
- NSW Department of Customer Service
- Service NSW
- NSW Police Force
- Judicial Commission of NSW
- State Insurance Regulatory Authority
- Insurance and Care NSW (icare)
- Independent Review Office.

Since the Commission's jurisdiction was expanded on 27 September 2024 to include police officers injured in the course of their duties as part of the new Police Officer Support Scheme, the Commission has held meetings with the Minister for Police, Deputy Commissioner and senior NSW Police Force (NSWPF) personnel on arrangements to implement the scheme. Engagement and consultation in relation to the Police Officer Support Scheme is ongoing and the Commission is yet to receive its first dispute application for the scheme.

Annual Review

The Commission produces an Annual Review as is required by s 66 of the *Personal Injury Commission Act 2020*. The Annual Review is tabled in Parliament and published for public access.



Marie Johns, Motor Accidents Division Head and Marianne Christmann, Principal Registrar attended an International Women's Day event at the Law Society of New South Wales.



Jennifer Ball, President of the Law Society of NSW and Judge Gerard Phillips, President Personal Injury Commission.



Commission mediator Catherine Davidson chaired a panel of legal stakeholders at the annual Mediator Conference. From left to right: Mediator Catherine Davidson, Adele Fletcher, Practice Head of Turks' Employers Liability team at Turks Legal, Ty Hickey Barrister at Quay Chambers, and Peter Lleonart, Partner at Carroll & O'Dea Lawyers.

7. The Commission's people



The Commission's Executive Leadership Team from left to right: Glenn Capel, Workers Compensation Division Head, Marie Johns, Motor Accidents Division Head, Judge Gerard Phillips, President, Josephine Bamber, Police Officer Support Scheme A/Division Head, and Marianne Christmann, Principal Registrar.

The Personal Injury Commission's work in delivering justice for injured people, employers and insurers is made possible by a dedicated group of members, mediators, merit reviewers, medical assessors and staff who are led by the Commission's Executive Leadership Team.

Executive Leadership Team

President

Judge Gerard Phillips, LLB, LLM

The President of the Personal Injury Commission is appointed by the Attorney General under the *Personal Injury Commission Act 2020* and is a Judge of the District Court of NSW. He is responsible for directing the business of the Commission, including ensuring the adoption of rules, procedural directions and good administrative practices which facilitate the effective operation of the Commission.

The President also directly appoints the Commission's medical assessors, merit reviewers and mediators, recommends the appointment of members to the Attorney General and manages the members, with the assistance of the Division Heads. In addition, he hears appeals against decisions made by members in the Workers Compensation and Police Officer Support Scheme Divisions, strikes-out applications in work injury damages proceedings and determines novel or complex questions of law.

Principal Registrar

Ms Marianne Christmann, LLB, LLM, BSc (Psychology), GAICD

The Principal Registrar provides high-level, executive leadership and strategic advice to the President and supports the President in managing the business and affairs of the Commission. The Principal Registrar leads the operations of the Commission, is responsible for service delivery in registry and disputes, medical and legal services and manages the Commission's staff and medical assessors. The Principal Registrar also focuses on strategic and operational planning, governance, and evaluation of service delivery performance.

Division Heads

Ms Marie Johns, LLB, BSc (Psychology)
Motor Accidents Division Head

Mr Glenn Capel, LLB, BA
Workers Compensation Division Head

Ms Josephine Bamber, LLB, BA
Police Officer Support Scheme Division Head (acting)

The Division Heads are responsible for the members, merit reviewers and mediators that are appointed to their divisions. They manage the business of the Commission in their respective divisions under the President’s direction, ensuring each division has the appropriate specialised jurisprudence, knowledge, practice and procedures.

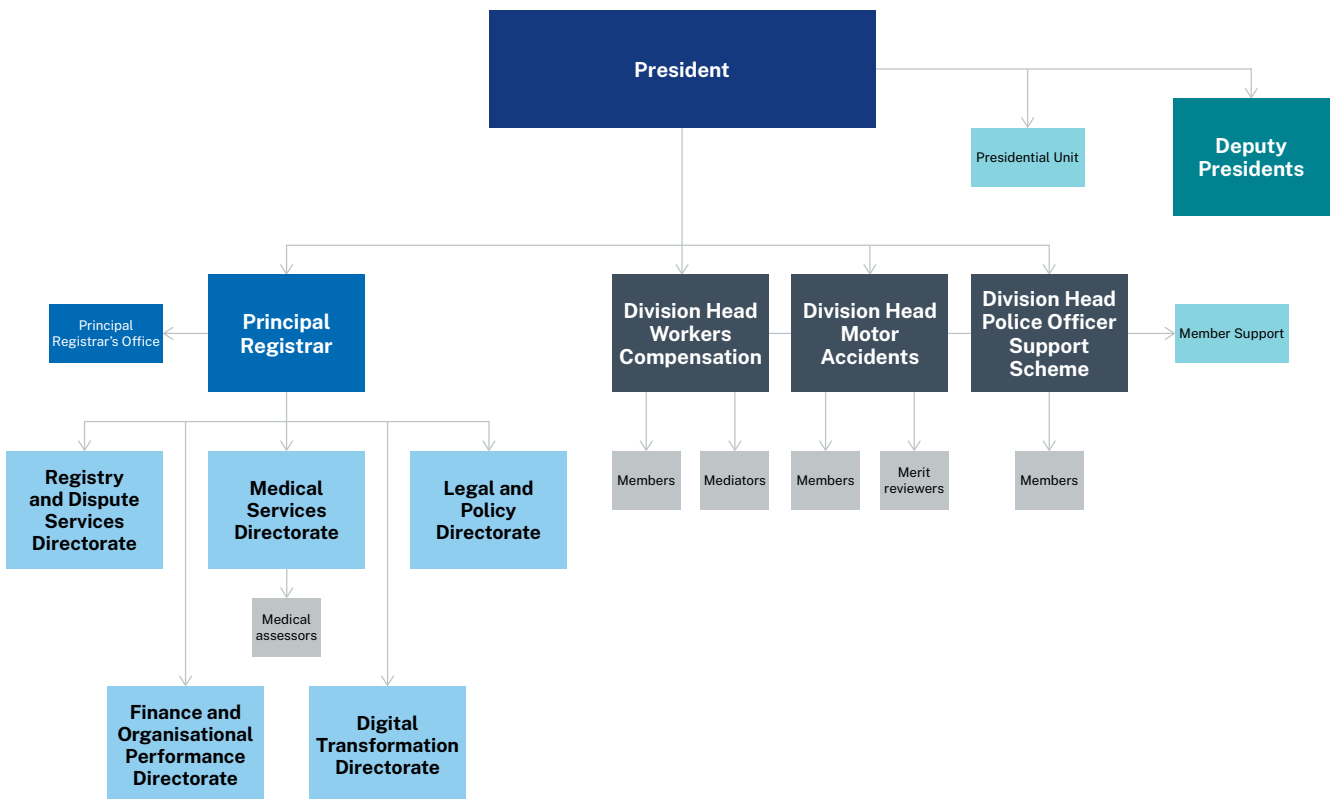
Organisational structure

The Commission’s structure reflects two streams:

- the three divisions, led by the Division Heads and comprising the members, mediators and merit reviewers, and
- the Personal Injury Commission Registry, led by the Principal Registrar and comprising the Commission’s staff and medical assessors.

The Commission had 413 members, mediators, merit reviewers, medical assessors and staff as at 30 June 2025, comprising:

- 62 members (including the President, Deputy Presidents and Division Heads)
- 26 mediators³
- one merit reviewer⁴
- 158 medical assessors
- 166 staff (including the Principal Registrar).



³ In addition, nine members are also appointed as mediators.

⁴ In addition, 25 members hold dual appointments as merit reviewers.

7. The Commission's people (continued)

Members

Members are appointed by the Attorney General under s 9 of the *Personal Injury Commission Act 2020*. They include Presidential members, principal members, senior members and general members and are experts in motor accidents, workers compensation and/or the police officer support jurisdictions.

Deputy Presidents

The Deputy Presidents are Presidential members who hear appeals against decisions made by members in the Workers Compensation and Police Officer Support Scheme Divisions.

See Appendix B for a list of the Commission's Deputy Presidents as at 30 June 2025.

Principal, senior and general members

Members are experienced, independent decision-makers who are appointed to the Commission to resolve disputes. Members may be appointed to more than one division which enhances the Commission's ability to respond to workload shifts and continue to resolve proceedings justly, quickly and cost effectively. Members aim to conduct Commission proceedings in a way that is fair to all parties and encourage and assist parties to resolve their dispute by finding a solution that is agreeable to everyone involved. If the parties cannot agree on a solution, the member will decide the dispute after hearing the submissions of the parties and considering the evidence filed.

Members also sit on appeal panels and review panels, which determine appeals and reviews of decisions made by medical assessors and merit reviewers.

See Appendix B for a list of the Commission's members as at 30 June 2025.

Opposite page – top row: The Commission's people enjoyed all-staff events; second row: Judge Phillips (centre) welcomed new members, Bianca Montgomery-Hribar, Jeremy Lum, The Hon. Lea Drake and Philip Carr, and a Commission all-staff event; third row: the Digital Transformation Directorate celebrated Diwali; fourth row: staff enjoyed end of year celebrations and the annual all-staff event.

Merit reviewers, mediators and medical assessors

Merit reviewers, mediators and medical assessors are statutory appointments made by the President under s 33 (merit reviewers and medical assessors) and s 39 (mediators) of the *Personal Injury Commission Act 2020*.

Merit reviewers

The Commission's merit reviewers exercise functions in the Motor Accidents Division to determine statutory benefit disputes under Schedule 2, 1 of the *Motor Accident Injuries Act 2017*. All members of the Motor Accidents Division also hold a dual appointment as a merit reviewer.

See Appendix C for a list of the Commission's merit reviewers as at 30 June 2025.

Mediators

The Commission's mediators exercise functions in the Workers Compensation Division. They assist parties to resolve work injury damages disputes.

See Appendix D for a list of the Commission's mediators as at 30 June 2025.

Medical assessors

Medical assessors are highly experienced medical and allied health practitioners qualified in a range of specialties. They are appointed to one or more divisions of the Commission and are independent of any party to a dispute.

Medical assessors conduct medical assessments to determine certain aspects of a dispute, such as assessing the degree of permanent impairment resulting from an injury. They can also provide decisions about an injured person's medical condition, threshold injury, the provision of medical treatment and fitness for employment. They are independent decision-makers and therefore do not give clinical advice or provide treatment to the injured person.

Medical assessors also sit on medical appeal panels and medical review panels.

The Commission appointed 11 senior medical assessors to support the mentoring, education and professional development of the medical assessor panel.

See Appendix E for a list of the Commission's senior medical assessors and medical assessors as at 30 June 2025.



7. The Commission's people (continued)

Staff

The Commission's staff are employed by the Department of Customer Service and report to the Principal Registrar through five directorates and three support offices, as described below.

See Appendices L–M for further information.

Registry and Dispute Services

Registry and Dispute Services is the Commission's largest directorate and is the 'front door' of the Commission. The team:

- provides frontline services to tribunal users, including claimants, workers, legal representatives, employers and insurers, via the Commission's reception, telephone enquiry line and email enquiry inbox
- registers applications and replies, processes documents received through the digital case management platforms, and streams applications to the appropriate area of the Commission
- case-manages motor accidents claims, merit and miscellaneous disputes and all workers compensation and police officer support scheme disputes
- supports members and internal stakeholders throughout the life of proceedings to facilitate the fair, timely and cost-efficient disposition of matters.

Medical Services

Medical Services oversees the Commission's medical assessment services and medical assessor panel. The team:

- provides case management to support the delivery of timely decisions in motor accidents medical disputes and supports the workers compensation disputes and the police officer support scheme teams with medical assessor availability
- leads the recruitment, engagement, and support of the Commission's medical assessor panel
- provides performance management, education, and continuous improvement of the medical assessor panel to ensure high-quality and robust single medical, medical review, and medical appeal panel decisions
- manages the Commission's on-site medical suites including all facilities and the scheduling of appointments.

Legal and Policy

Legal and Policy performs important decision-making functions and provides legal and policy advice across the Commission. The team:

- makes gatekeeping and procedural decisions under enabling and related legislation/rules, as well as decisions under privacy and access laws
- delivers secretariat services to the Rule Committee and reviews the Commission's procedural directions and delegations
- delivers legal advice about disputes practice and procedure, case management, and jurisdiction, together with procedural directions, protocols and templates
- provides general legal advice on work health and safety, inter-agency arrangements, privacy, public interest disclosures, and other matters
- coordinates and publishes the *Legal Bulletin*
- manages the Commission's litigation practice ensuring proper representation of the Commission when its decisions are appealed.

Finance and Organisational Performance

Finance and Organisational Performance manages important whole-of-Commission functions, including finance, organisational performance reporting, continuous process improvement and business support. The team:

- maintains a robust, accurate, and compliant finance function for the Commission and provides accurate financial and organisational performance reporting, internally and externally
- creates and maintains processes and procedures, identifies continuous improvement opportunities, and oversees audit and compliance functions
- manages the office accommodation, provides procurement and contract support
- ensures the Commission has guidelines and mechanisms to capture and utilise corporate knowledge
- supports and enables the divisions and directorates of the Commission to achieve their business outcomes.

Digital Transformation

Digital Transformation drives strategic and operational digital, cyber security, and information technology outcomes for the Commission. The team:

- leads the Commission's digital transformation strategy, including the design, development, and implementation of Pathway, the Commission's single digital platform
- ensures the stability, performance, cyber security, and data privacy of the Commission's core technology systems and manages governance of all data and system changes, aligning with the Department of Customer Service's Chief Information Security Officer to ensure best practices are deployed across all technology
- provides timely support for end users of the Commission's systems and ensures support requirements are met using appropriate channels and processes
- collaborates with the Commission's divisions and directorates to ensure service levels, systems and processes meet business needs.

Presidential Unit

The Presidential Unit is a small, specialist unit whose staff support the Commission's Presidential members in the exercise of their appellate and leadership functions. The team:

- supports the administration of high-quality decision-making through the provision of legal and administrative services, including advice to Presidential members, legal research, case-managing appeals and other matters
- assists with supporting the President's leadership and other functions, such as the appointment of members, merit reviewers and mediators, and stakeholder engagement.

Member Support

The Member Support Team is a small team that provides support to the Commission's Division Heads and decision-makers. The team:

- delivers a range of business support services, including legal, administrative, proofing, and project support to the Division Heads, members, mediators, and merit reviewers
- acts as a liaison between decision-makers and operational teams within the Commission.

Principal Registrar's Office

The Principal Registrar's Office provides executive support functions for the Principal Registrar to enable the effective operations of the Commission as a whole. The team:

- manages liaison with the Minister's Office, the Department of Customer Service, and other government agencies
- coordinates and prepares stakeholder correspondence
- manages communications, stakeholder engagement, events, and media liaison
- undertakes strategic planning and project manages Commission-wide projects.

Supporting our people

All the Commission's people play a vital role in contributing to the just, timely, and cost-effective resolution of personal injury disputes. The Commission undertakes a range of conferences, events and meetings to build the culture and social fabric of the organisation and provides education and professional development opportunities as outlined below.

Members, merit reviewers, and mediators

The Commission provides regular opportunities for professional networking, updates on the Commission's policies and operations and to hear from external experts in personal injury and vicarious trauma. Activities and resources include:

- annual conferences for members, merit reviewers, and mediators
- regular briefings, education and professional networking sessions, including the twilight lecture series
- ongoing skills development via relevant professional education courses and access to professional subscriptions e.g. LexisNexis legal analytics and Council of Australasian Tribunals (COAT) decision writing courses
- attendance at professional conferences for full-time members, including Council of Australasian Tribunals (COAT) events
- an on-site legal library at the Commission's premises and a comprehensive Decisions Style Guide
- a dedicated extranet containing information and reference material to support members, merit reviewers, and mediators.

7. The Commission's people (continued)



The Commission's Operational Leadership Group from left to right: Christine Fitzgerald, George Bullock, Principal Registrar Marianne Christmann, Luke Roberts, Janet Wagstaff and Rushdi Gamielien.

Medical assessors

The Commission's comprehensive education program for medical assessors meets its obligations under s 37 of the *Personal Injury Commission Act 2020* and promotes high quality decision-making in medical disputes. The medical panel officer team also supports medical assessors with all aspects of their role. Activities and resources include:

- a comprehensive induction and mentorship program for newly appointed medical assessors
- an annual medical assessor forum that brings all medical assessors together to hear from industry leading experts on important topics of the day
- bi-monthly virtual education and briefing sessions
- face-to-face and online myPathway training for all medical assessors and their support staff
- an e-newsletter that details aspects of the Commission's policies and operations relevant to medical assessors
- a dedicated extranet containing information and reference material to support medical assessors
- a dedicated help desk for medical assessor enquiries.

Staff

The Commission supports staff with a range of wellbeing, learning, and professional development and inclusion initiatives. Activities and resources include:

- an annual in-person strategic planning and networking workshop
- regular hybrid and in-person all-staff meetings and other events
- training and education to support the Commission's Mental Health and Wellbeing Framework
- an official recognition program aimed at acknowledging and celebrating the contribution of staff and teams
- a dedicated intranet with news, reference material and other resources
- opportunities for career development through secondments and temporary acting assignments
- ongoing development of our leaders through training programs and regular people leader workshops
- individual performance and career planning through the My Contribution program, including a focus on learning and development
- the establishment of a Workplace Presence Working Group to develop the Personal Injury Commission Guideline on Workplace Presence that ensured all Commission staff were supported to meet the Premier's direction to work principally from an approved office
- de-escalation and occupational violence and aggression (OVA) training.

De-escalation and OVA training for staff

The Commission is committed to providing a safe environment for its people, with physical safety and wellbeing remaining paramount. Over the reporting year, the Commission continued to enhance its physical security measures, procedures and processes and conducted security awareness training for its people. All staff participated in a bespoke de-escalation and OVA training program. Participant outcomes resulted in enhanced situational awareness, recognition of early signs of escalating situations, enhanced confidence in managing aggressive situations, and the implementation of de-escalation strategies when dealing with people both in person or over the phone.

A staff member referred to a difficult situation as:

“something I think we’ve all had from time to time ... and I think in that situation, having had that recent de-escalation training just assisted a good deal, having the confidence to deal with the situation. It’s an example of the Commission’s ongoing commitment to growing a confident, capable and connected workforce at all levels”.



Commission staff participated in de-escalation and OVA training.

8. The Commission's operations – section 66 requirements

Section 66 of the *Personal Injury Commission Act 2020* prescribes the requirements and timetable for the provision of this Annual Review.

Sub-section 4 details the metrics and information that must be reported:

- a) the number and type of proceedings instituted in each Commission division during the year
- b) the sources of those proceedings
- c) the number and type of proceedings that were made during the year but not dealt with
- d) the extent to which the operations of the Commission are funded by each operational fund
- e) any other information that the President considers appropriate to be included or the Minister directs to be included.”

This section reports on the above requirements to meet the Commission's obligations under the Act while Chapter 9 reports in more detail the Commission's performance in handling dispute applications.

Operational funds

The Commission resolves dispute applications which are funded from four operational funds:

- a) the Motor Accidents Operational Fund (the SIRA Fund) under the *Motor Accident Injuries Act 2017*
- b) the Motor Accidents Operational Fund under the *Motor Accidents Compensation Act 1999*
- c) the Workers Compensation Operational Fund under the *Workplace Injury Management and Workers Compensation Act 1998*
- d) the Police Officer Support Scheme under the *Police Act 1990*.

The *Motor Accidents Compensation Act 1999* scheme remains in its run-off stage accounting for only 3% of all motor accidents dispute registrations in the 2024–25 year. The *Police Amendment (Police Officer Support Scheme) Act 2024* (POSS scheme) commenced on 27 September 2024 and as at 30 June 2025, no disputes have been lodged. The POSS scheme costs in the reporting period represent the establishment costs of the new Division.

The Commission must demonstrate how much of its operations are funded by each operational fund. This is because, under the enabling legislation, money from these funds can be used only for a fund purpose.

Cost distribution methodology

The Commission's cost distribution methodology is mature, robust and drives the funding allocation and cost distribution to meet its reporting obligations under s 66(4)(d). Wherever possible, when an expenditure is incurred, it is accounted for in the workers compensation, motor accidents or POSS cost centre. Other shared costs are isolated in general cost centres and distributed between the three schemes, based on the proportion of matters finalised within each.

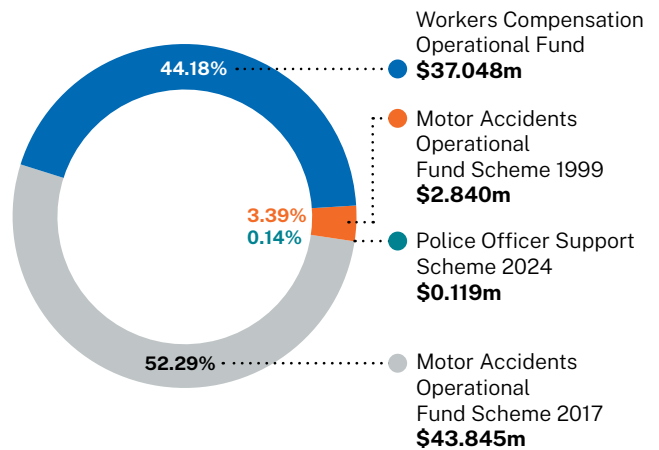
With rises and falls in filings across the schemes, the contribution to each scheme is a changeable figure depending upon the point in time it is observed. However, the formula under which the methodology is based is a reasonable and appropriate means of calculating each scheme's contribution.

To confirm this and given our commitment to best practice, the Commission will perform an external audit of the Commission's financial data reported every second year, as evidenced in this 2024–25 Annual Review.⁵

External audit outcomes

The expenditure reported has been subject to an ASA 805 *Special Considerations – Audits for Single Financial Statements and Specific Elements, Accounts or Items of a Financial Statement* performed by KPMG and found to be presented fairly, in all material respects.

Contributions by operational fund



In the financial year from 1 July 2024 to 30 June 2025:

- 44.18% (\$37.048m) of the total cost (\$83,852m) was attributed to the Workers Compensation Operational Fund (WCOF),
- 3.39% (\$2.840m) to the Motor Accidents Operational Fund Scheme 1999 (MAOF Scheme 1999),
- 52.29% (\$43.845m) to the Motor Accidents Operational Fund Scheme 2017 (MAOF Scheme 2017), and
- 0.14% (\$0.119m) to the POSS scheme.⁶

Details of the operating expenses and income related to each operational fund are shown on page 44. These figures include increased service partner costs when compared to 2023–24 which are predominantly driven by an increase in motor accident medical review panel costs and fee harmonisation strategies, as well as increased medical assessment activity across both jurisdictions. During 2024–25, several initiatives were successfully implemented, which increased the number of medical reviews finalised, compared to the previous year. Medical reviews are a high-cost service that account for more than 55% of the total service partner cost increase during the year.

⁵ The Commission is not required to perform an independent audit every year as it is an independent tribunal that is only required to publish an annual review (s 66 of the Act). However, the Commission's income and expenditure transactions reported here are subject to audit by the Audit Office as part of the State Insurance Regulatory Authority (SIRA) and Department of Customer Service (DCS) annual audits. This is because SIRA manages the operating funds' bank accounts and DCS manages several shared services on behalf of the Commission, including payroll for Commission staff. Consequently, the transactions reported are captured in the audit of these agencies.

⁶ This compares to a FY24 total cost of \$77.530m, comprising WCOF 46.6% (\$36.116m), MAOF Scheme 1999, 6.2% (\$4.804m) and MAOF Scheme 2017, 47.2% (\$36.610m).

8. The Commission's operations – section 66 requirements (continued)

Operating expenses and income related to each operational fund

Personal Injury Commission	2025 \$'000	WCOF \$'000	MAOF Scheme 2017 \$'000	MAOF Scheme 1999 \$'000	POSS Scheme 2024 ⁷ \$'000
EXPENSE					
Personnel services					
Salaries and allowances (including annual leave) ⁸	28,524	12,825	14,632	948	119
Agency short term staff ⁹	1,269	522	702	45	
Total personnel services	29,793	13,347	15,334	993	119
Other operating expenses					
Accommodation expenses	6,139	3,033	2,917	189	
Payments to service partners ^{10 11}	40,516	16,795	22,278	1,443	
Software expenses	1,569	761	759	49	
Other miscellaneous expenses ¹²	5,835	3,112	2,556	166	
Total other operating expenses	54,059	23,701	28,514	1,847	
Total expenditure	83,852	37,048	43,845	2,840	119
INCOME					
Contributions (WCOF)	37,048	37,048			
Contributions (MAOF Scheme 2017)	43,845		43,845		
Contributions (MAOF Scheme 1999)	2,840			2,840	
Contributions (POSS Scheme 2024)	119				119
Total income	83,852	37,048	43,845	2,840	119
Net result					

- 7 Jurisdiction of the Police Officer Support Scheme (POSS) was legislated to the Commission in September 2024. No lodgements were made in 2024–25, but preliminary establishment costs were incurred to determine a compliant funding strategy, as well as the appointment of the new POSS Division Head.
- 8 The Motor Accident Operational Funds contributed more towards personnel services than the Workers Compensation Operational Fund as higher numbers of staff were required to manage the motor accidents portfolio. The Police Officer Support Scheme personnel services represent preliminary establishment costs and new Division Head appointment. This is a true reflection of the personnel engaged in activities for their respective funds.
- 9 Agency short-term staff are contractor expenses. These costs have reduced during 2024–25, as Pathway moves from the development to enhancement phase.
- 10 Payments to service partners comprise those to sessional members, medical assessors, mediators and sessional merit reviewers. Payments to service partners under the Workers Compensation Operational Fund increased marginally during 2024–25, due to an increase in medical appeal panel and member costs.
- 11 Payments to service partners under the Motor Accident Operational Fund increased significantly during 2024–25, predominantly due to the successful implementation of several initiatives aimed at increasing the finalisation rate of medical reviews. This initiative accounted for more than 67% of motor accident service partner cost increase. Additionally, fee harmonisation strategies contributed to cost increases experienced during the year.
- 12 'Other miscellaneous expenses' represent other operating expenses incurred, including strategic operational costs and enhancements of Pathway, the Commission's single digital platform. As a result of the Pathway enhancements, it became possible to bring the processing of the service partner payroll back in-house, negating the need to use a third-party payroll service provider and delivering a significant cost saving.

Section 66(4)(a), (b) and (c) reporting obligations

The following tables summarise the number and type of proceedings instituted in each division during the year, the number and type of proceedings that were made during the year but not dealt with (in progress), and the source of those proceedings.

Motor Accidents Division proceedings 2024–25

Legislation	Jurisdiction	Instituted	In progress
1999 MACA	Medical assessment service	150	96
1999 MACA	Claims assessment and resolution service	39	92
1999 MACA	Total	189	188
2017 MAIA	Medical assessment	4,515	2,107
2017 MAIA	Merit review	71	17
2017 MAIA	Claims assessment	1,441	1,291
2017 MAIA	Miscellaneous claims assessment	132	56
2017 MAIA	Total	6,159	3,471
Total		6,348	3,659

Workers Compensation Division proceedings 2024–25

Application type	Instituted	In progress
Application to resolve a dispute (Form 2 and 2D)	7,460	1,964
Application for expedited assessment (Form 1)	305	9
Workplace injury management dispute (Form 6)	10	0
Application for assessment of costs (Form 15)	2	0
Registration of commutation (Form 5A)	86	6
Application for mediation (Form 11C)	2,420	275
Application to cure a defective pre-filing statement (Form 11B)	17	3
Application for assessment by a medical assessor (Form 7)	99	14
Appeal against decision of a member (Form 9)	56	30
Appeal against a decision of medical assessor (Form 10)	495	58
Total	10,950	2,359

The source of proceedings by division

Source of proceedings	Workers compensation	Motor accidents
Legally represented claimant	98%	82%
Self-represented claimant	0.1%	3%
Insurer	1.9%	15%

8. The Commission's operations – section 66 requirements (continued)

Section 66(4)(e) reporting obligations

On 23 June 2025, the Minister for Customer Service and Digital Government wrote to the President (Appendix K) requesting the Commission include the following information in the 2024–25 Annual Review:

- Any progress updates regarding suggestions arising out of the Statutory Review of the *Personal Injury Commission Act 2020*, and in particular any relevant updates on the data publication policy.
- A high-level summary of amendments to the Personal Injury Commission rules and a list of procedural directions issued in the financial year 2024–25.

The Commission has addressed these requests in Chapter 4 under 'Statutory Review of the *Personal Injury Commission Act 2020*' and 'Enhancing the Personal Injury Commission rules and procedural directions'.

Additionally, the Minister suggested that the Commission review the latest requirements in the [NSW Treasury Annual Reporting Framework](#),¹³ and include relevant matters in its 2024–25 Annual Review. The Commission is a small independent tribunal that is legislated to produce an annual review only (s 66), so is not required to comply with Treasury's reporting framework however the Commission is pleased to report it already meets the majority of those requirements in its annual review.

¹³ NSW Treasury Policy and Guidelines – Annual Reporting Requirements TPG23-10, August 2023.

9. The Commission's performance

How performance is reported

The Commission's performance data is reported for the period from 1 July 2024 to 30 June 2025.

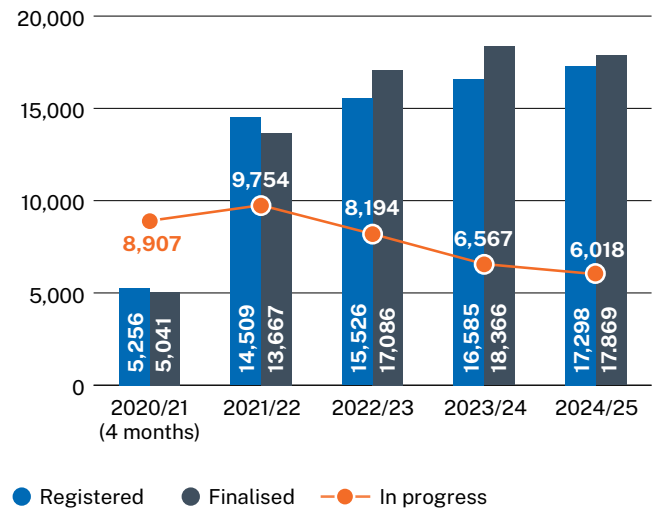
Data is presented for the Commission as a whole and for both the Motor Accidents Division, which resolves motor accidents disputes, and the Workers Compensation Division, which resolves workers compensation disputes.

In September 2024, the *Police Amendment (Police Officer Support Scheme) Act 2024* was passed, placing the responsibility for dispute resolution under the scheme in the Commission. At 30 June 2025, no applications to resolve disputes in this scheme had been registered. The Commission will report activity in the Police Officer Support Scheme in the Annual Review 2025–26.

Dispute applications registered, finalised and in progress

In 2024–25 the Commission as a whole:

- had 6,567 dispute applications in progress as at 1 July 2024
- registered 17,298 new dispute applications
- finalised 17,869 dispute applications
- had 6,018 in progress dispute applications on hand at 30 June 2025.



Note: Applications registered and later found to have been created in error and applications that were finalised and subsequently reopened account for the variance between in progress figures when compared with disputes registered and disputes finalised.

The above chart shows the increase in dispute applications registered since the Commission commenced. This year's increase in filings of 4%, though more modest than the previous two years, is nevertheless an increase on a larger base. The Commission has been managing the increase in registrations well, and finalisations have kept pace with and exceeded the number of registrations. The Commission maintained a healthy clearance rate of 103%, and reduced work on hand by a further 8% to 6,018 at 30 June 2025.

9. The Commission's performance (continued)

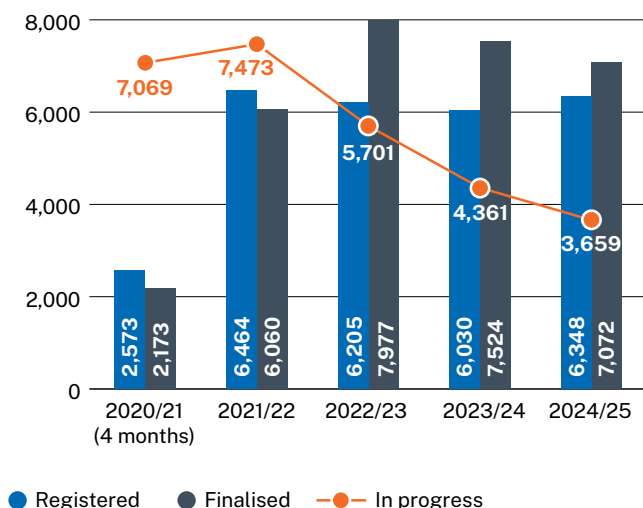
Motor Accidents Division

Most motor accidents dispute applications related to claims under the *Motor Accident Injuries Act 2017* (97%). Dispute applications for claims under the *Motor Accidents Compensation Act 1999* continued to decline, accounting for only 3% of all dispute registrations in the year.

Despite a 5% increase in dispute applications in the year, finalisations remained high and the number of disputes in progress continued to decrease, reducing by a further 16% to 3,659 at the end of the year. This is shown in the table and chart below.

Motor accidents dispute applications		2024–25		
Legislation	Jurisdiction	Registered	Finalised	In progress
1999 MACA	Medical assessment service	150	279	96
1999 MACA	Claims assessment and resolution service	39	147	92
1999 MACA	Total	189	426	188
2017 MAIA	Medical assessment	4,515	4,801	2,107
2017 MAIA	Merit reviews	71	81	17
2017 MAIA	Claims assessment	1,441	1,648	1,291
2017 MAIA	Miscellaneous claims assessment	132	116	56
2017 MAIA	Total	6,159	6,646	3,471
Total		6,348	7,072	3,659

Motor accidents dispute applications registered, finalised and in progress



In 2024–25, there was only a slight increase (1%) in applications for panel review of a single medical assessment registered while finalisations of medical reviews increased by 19% to 1,155. The number of medical reviews on hand at the end of the year reduced by 7% to 651.

The Commission continues to address a small number of delays within these disputes, particularly those related to psychiatry assessment, through the Psychiatry Medical Review Panel Pilot. As the Pilot is ongoing, results will be reported in the 2025–26 Annual Review.

Workers Compensation Division

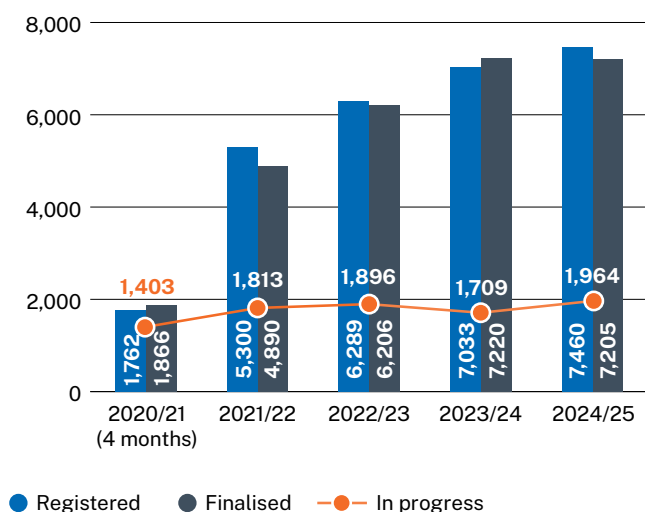
Dispute applications registered in the Workers Compensation Division increased by 4% in the year to a record high of 10,950. Finalisations were stable compared with the previous year but remain high. The overall clearance rate for the division was 99% and there were 2,359 dispute applications in progress at the end of the year.

Most (68%) workers compensation dispute applications registered with the Commission are Form 2 applications to resolve a dispute (including Form 2D: application in respect of death of worker). This is shown in the table below.

Workers compensation dispute applications	2024-25		
	Registered	Finalised	In progress
Application to resolve a dispute (Form 2 and 2D)	7,460	7,205	1,964
Application for expedited assessment (Form 1)	305	316	9
Workplace injury management dispute (Form 6)	10	10	0
Application for assessment of costs (Form 15)	2	2	0
Registration of commutation (Form 5A)	86	86	6
Application for mediation (Form 11C)	2,420	2,398	275
Application to cure a defective pre-filing statement (Form 11B)	17	14	3
Application for assessment by a medical assessor (Form 7)	99	106	14
Appeal against decision of a member (Form 9)	56	89	30
Appeal against decision of a medical assessor (Form 10)	495	571	58
Total	10,950	10,797	2,359

In 2024-25, Form 2 applications registered increased by 6% from the previous year. In the same period the number of Form 2 applications finalised remained stable. At 30 June 2025, there were 1,964 Form 2 dispute applications in progress, a 15% increase on the previous year. Overall this demonstrates that the Commission has been able to respond well to the increasing workload.

Form 2 and 2D dispute applications registered, finalised and in progress



9. The Commission's performance (continued)

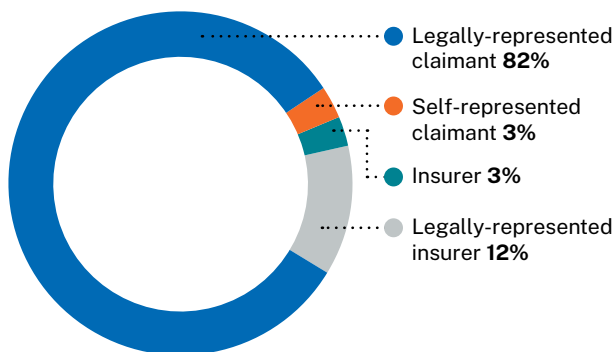
Source of dispute applications

The Commission receives dispute applications from a combination of:

- legally-represented motor accidents claimants and workers
- self-represented motor accidents claimants and workers
- insurers
- legally-represented insurers.

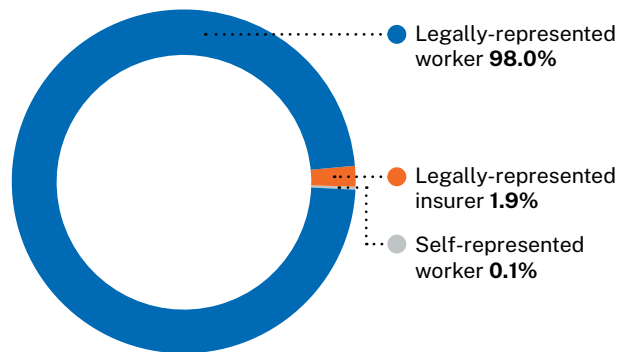
The sources of registrations by operational division are detailed below. It is important to note that claimant representation can change through the course of a dispute. Some self-represented claimants take on legal representation, and some legally represented claimants become self-represented after registration.

Source of applications – Motor Accidents Division



In the Motor Accidents Division, 82% of dispute applications were lodged by claimant legal representatives. Self-represented claimants registered 3% of applications, a 2% decrease on the previous year. Insurers including legally-represented insurers, account for 15% of registrations. Applications for panel review of a single medical assessment see a higher proportion of lodgements by insurers and in 2024–25, 40% were lodged by insurers or insurer legal representatives.

Source of applications – Workers Compensation Division



In the Workers Compensation Division, 98% of dispute applications were lodged by legal representatives of injured workers. Self-represented workers accounted for 0.1% of applications. The remaining 1.9% of applications were lodged by insurers. Member appeals and medical appeals had higher percentages of applications lodged by insurers, at 52% and 30%, respectively.

Dispute types and outcomes

Motor Accidents Division

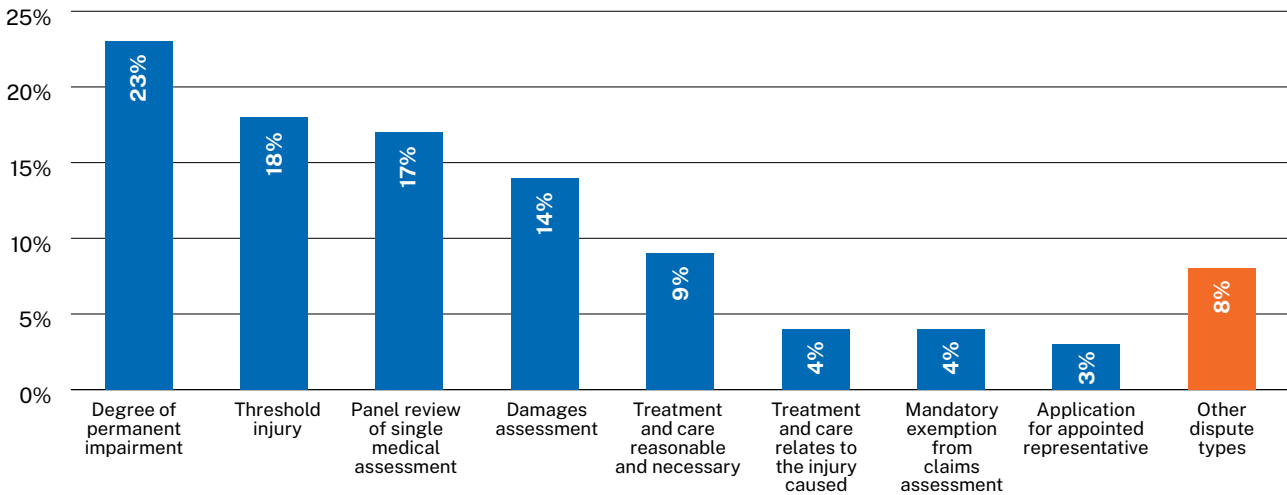
Whilst there was a 5% increase in motor accidents dispute applications registered in the year, medical disputes registered increased by 13%. Medical disputes across the two schemes now account for 73% of all motor accidents disputes registered, with disputes about permanent impairment, panel review of single medical assessment and threshold injury being the most common.

Permanent impairment disputes are the most frequently registered dispute type, accounting for 23% of all disputes registered.

There was a significant increase (58%) in the number of threshold injury disputes registered in the year. Threshold injury disputes are now the second most commonly registered dispute and account for 18% of all motor accidents disputes registered.

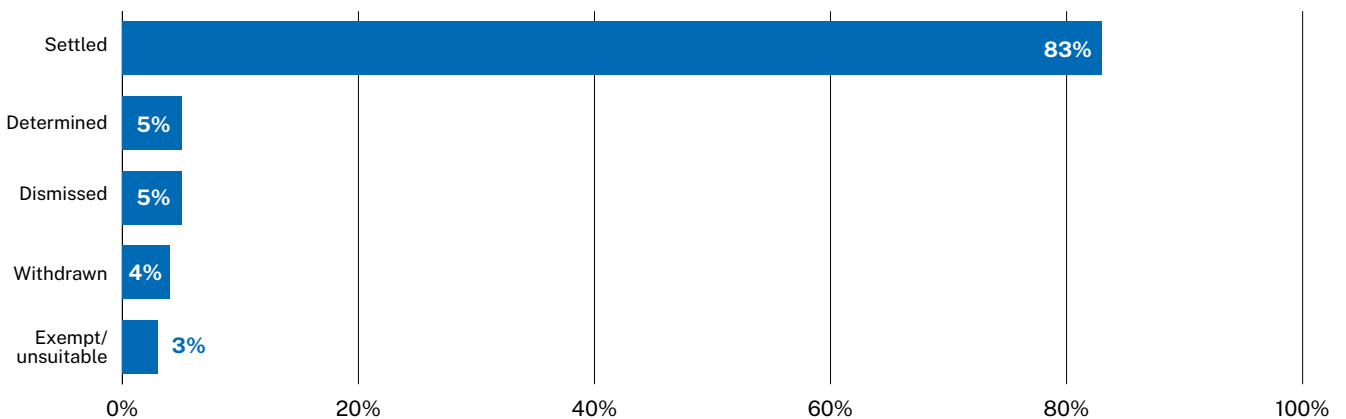
Damages assessment disputes decreased by 21% in 2024–25 compared with the previous year, and now account for 14% of all disputes registered.

Dispute types registered



Damages assessment disputes account for 17% of all disputes finalised in the year. The vast majority of damages assessment disputes are resolved prior to a decision being made. Of the damages assessments finalised in the year, 83% were settled by the parties. This is an increase from the previous year which is offset by a decrease in the proportion of damages disputes that were withdrawn. The percentage of damages disputes determined by a member remained stable at 5%.

Damages assessment outcomes



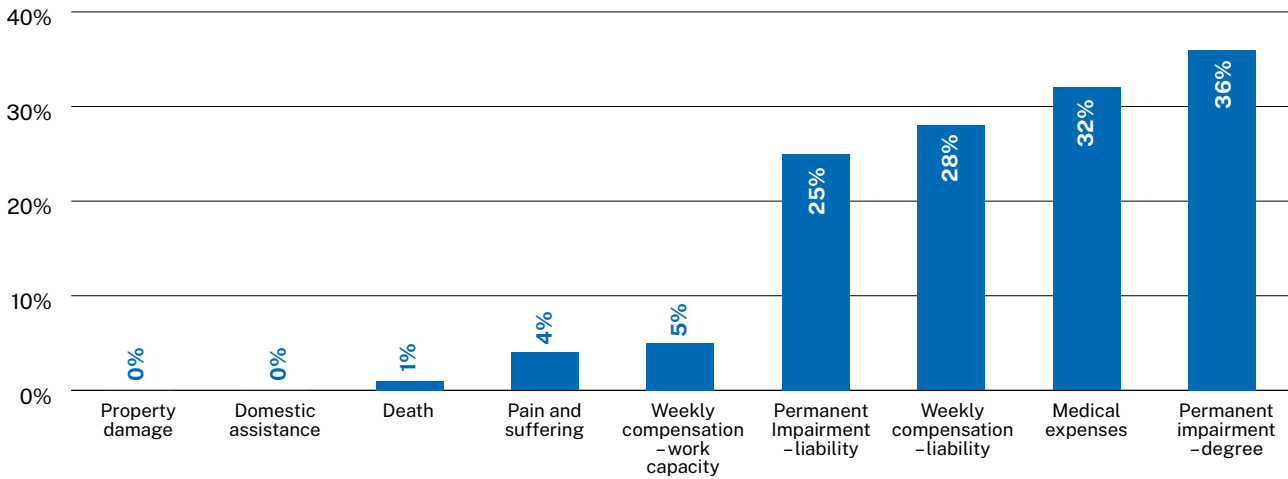
9. The Commission's performance (continued)

Workers Compensation Division

Applications to resolve a dispute (Form 2 including Form 2D) are the most frequently registered application type, and account for 68% of all dispute applications registered.

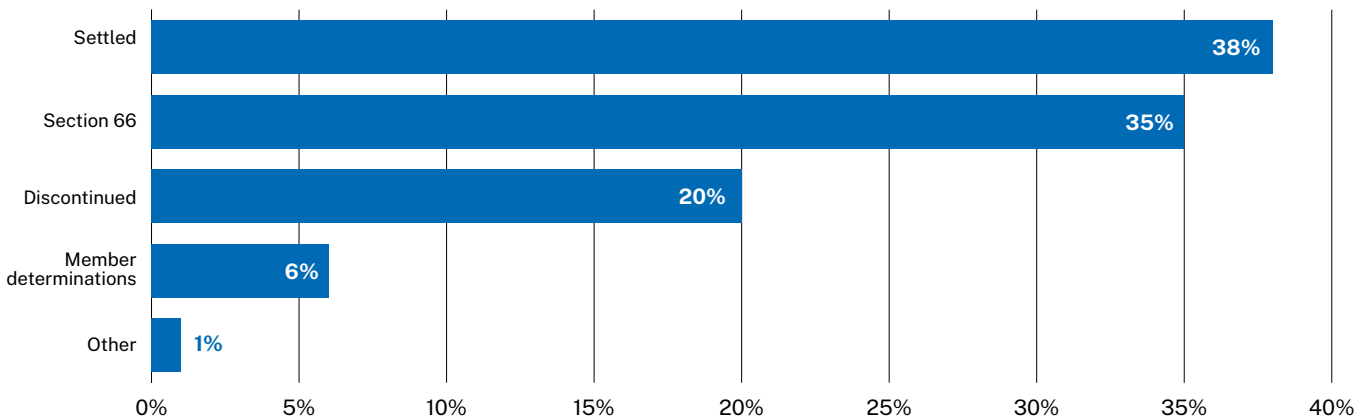
As illustrated in the chart below, the most commonly disputed compensation types continue to be permanent impairment, medical and related expenses, and weekly compensation. It's also common for a single Form 2 application to include claims for multiple types of compensation, which is why the combined figures exceed 100%.

Form 2 – compensation in dispute



Disputes limited to the degree of permanent impairment (quantum only) made up 35% of all resolutions for Form 2 dispute applications, as shown in the chart below. Settlements accounted for 38% of all resolutions. Members were required to determine 6% of disputes that were finalised.

Form 2 – outcomes



The Commission also plays a significant role in resolving work injury damages claims through pre-trial case management and mediation services. A total of 2,420 applications for mediation to resolve a work injury damages claim (Form 11C) were registered by the Commission. Mediation conferences were held in 1,990 matters, of which 1,353 (68%) were settled.

Appeals

Motor Accidents Division

Medical reviews

There were:

- 4,371 reviewable medical certificates issued
- 1,096 applications for panel review of single medical assessment made
- 1,155 applications for panel review of single medical assessment finalised, of which 541 were determined by a medical review panel, and the remainder either dismissed, settled, or withdrawn.

Judicial review of decisions

A total of 28 motor accidents decisions were challenged on judicial review in the Supreme Court of New South Wales.

This included:

- nine Presidential delegate decisions
- three member decisions
- four medical assessment certificates
- 12 medical review panel decisions.

In the same period in the Supreme court, 24 applications for judicial review were finalised, of which:

- 12 were dismissed
- nine set aside the original decision
- three discontinued.

In 2024–25, eight Supreme Court judgments pertaining to motor accidents matters were subsequently appealed to the Court of Appeal.

Six Court of Appeal decisions were finalised in the same period of which:

- one application was discontinued
- one application seeking leave to appeal was refused (*Khanna v Insurance Australia Limited* [2025] NSWCA 125)
- two appeals were dismissed, upholding the Supreme Court judgment which upheld the decision of the medical review panel (*Allianz Australia Insurance Limited trading as Allianz v Susak* [2025] NSWCA 91; *Insurance Australia Limited t/as NRMA Insurance v Le* [2025] NSWCA 121)
- one appeal set aside the Supreme Court judgment, setting aside the decision of the medical review panel and confirming the

medical assessment certificate of the initial medical assessor (*Allianz Australia Insurance Limited v Estate of the Late Summer Abawi* [2025] NSWCA 85)

- one appeal set aside the Supreme Court judgment, upholding the medical assessment certificate and Presidential delegate decision (*Allianz Australia Insurance Limited v Yangzom* [2025] NSWCA 104).

Workers Compensation Division

Appeals against a decision of a member

A total of 56 applications to appeal against a decision of a member (Form 9) were registered, and Presidential members determined 82 appeals.

Overall, 7% of appellable decisions by members were revoked on appeal.

Medical appeals

There were:

- 2,767 appellable medical assessment certificates issued
- 495 applications to appeal against a decision of a medical assessor (Form 10) registered
- 490 medical appeals finalised, of which 400 were determined by a medical appeal panel, and the remainder either dismissed, settled, or withdrawn.

Judicial review of decisions

A total of 24 workers compensation decisions were challenged on judicial review in the Supreme Court of New South Wales including three decisions heard in the Supervisory Jurisdiction Court of Appeal.

This included:

- two Presidential delegate decisions
- one member decision
- one medical assessment certificate
- 20 medical appeal panel decisions.

In the same period, 23 applications for judicial review of workers compensation decisions were finalised, of which:

- six applications were dismissed
- 13 set aside the original decision
- four applications were discontinued.

In 2024–25, two Supreme Court judgments pertaining to workers compensation matters were appealed to the Court of Appeal.

9. The Commission's performance (continued)

Three Court of Appeal decisions were finalised in the same period, of which:

- one application was discontinued
- one appeal was dismissed, upholding the Supreme Court judgment which upheld the decision of the medical appeal panel (*Sawaneh v Flintwood Disability Services Ltd* [2024] NSWCA 178)
- one appeal set aside the Supreme Court judgment, upholding the decision of the medical appeal panel (*Coca-Cola Europacific Partners API Pty Ltd v Pombinho* [2024] NSWCA 191).

One application for special leave to appeal was made to the High Court of Australia from a judgment of the Court of Appeal. That application was pending as at the end of the 2024–25 financial year.

In the same period, one High Court decision was finalised, which dismissed the application for special leave to appeal (*Wright v The State of New South Wales (Western Sydney Local Health District) & Ors* [2024] HCASL 229).

Appeals to the Court of Appeal from Presidential decisions

In 2024–25, three appeals against Presidential decisions were made to the Court of Appeal. The Court of Appeal did not finalise any appeals against Presidential decisions.

In 2023–24, one application for special leave to appeal was made to the High Court of Australia from an appeal decision by the New South Wales Court of Appeal. That application was refused in September 2024.

Key performance indicators

The Commission published its inaugural key performance indicators (KPIs) on 1 July 2022. These KPIs are used to quantify and monitor performance and track how the Commission is meeting its statutory objectives, set out at s 3 of the *Personal Injury Commission Act 2020*. They also provide Commission users with indicative information about the timeframes, quality, and efficiency they can expect when dealing with the Commission's services.

The KPIs were developed acknowledging the practice and procedures in the legacy organisations that preceded the Personal Injury Commission and set consistent standards across major areas of operation in both the Motor Accidents and Workers Compensation Divisions. The Commission consulted with the NSW Bar Association, the Law Society of NSW, icare and the members of the Commission's CTP Insurer Reference Group.

This is the third year the Commission reports against these KPIs. Results are shown for the 2024–25 year and the previous two years (2023–24 and 2022–23).

Workflow

The following workflow measures monitor the Commission's performance in meeting the demands for Commission services and in reducing the volume of work on hand.

Through 2024–25, the Commission has continued to focus on reducing the number of motor accidents medical disputes in progress. In the Motor Accidents Division, the Commission is pleased to report a clearance rate for the year of 111%, meaning many more disputes were finalised throughout the year than registered. This contributed to a 19% reduction in the number of disputes in progress by year's end.

In the Workers Compensation Division, the Commission achieved a clearance rate of 99%. Although this is a decrease from the previous year, it is important to note that Workers Compensation registrations increased by 4% in the year. Overall, this indicates that the Commission was able to respond well to increasing demand for its services.

Although clearance rates decreased for the Commission as a whole and for the Motor Accidents and Workers Compensation divisions, overall, the Commission maintained a healthy clearance rate of 103% in 2024–25, with 571 more disputes finalised than registered and a 9% reduction in the volume of disputes in progress.

KPI measure	2022–23	2023–24	2024–25
FINALISATIONS ARE GREATER THAN OR EQUAL TO REGISTRATIONS – CLEARANCE RATE >100%			
Personal Injury Commission	110%	111%	103%
Motor Accidents Division	127%	125%	111%
Workers Compensation Division	98%	103%	99%

Lifecycles

Lifecycle measures monitor the time taken to finalise the Commission’s most frequently registered disputes. In 2024–25 the Commission continued to focus on reducing the average time to finalise disputes.

In the Motor Accidents Division, average medical dispute lifecycles reduced by 125 days to 208 days. Within 12 months, 86% of medical disputes were finalised, an improvement from 65% in the previous year. A similar trend can be seen in motor accident damages dispute lifecycles with a decrease of 57 days to 508 days and 68% of disputes finalised within 12 months, up from 57% in the previous year.

In the Workers Compensation Division, despite an increase in Form 2 and Form 2D registrations (6%), the average lifecycle remained steady at 129 days. 94% of Form 2 and 2D applications were finalised within 9 months, a slight improvement from the previous year.

KPI measure	2022–23	2023–24	2024–25
DISPUTES ARE RESOLVED WITHIN THE TARGET TIMEFRAMES			
Motor accidents – medical disputes			
The average lifecycle is less than 120 days	385	333	208
45% are resolved in 3 months	17%	16%	22%
85% are resolved in 6 months	26%	33%	60%
97% are resolved in 9 months	37%	51%	77%
99% are resolved in 12 months	49%	65%	86%
Motor accidents – damages disputes¹⁴			
The average lifecycle is less than 120 days	511	565	508
45% are resolved in 3 months	16%	27%	27%
85% are resolved in 6 months	32%	42%	50%
97% are resolved in 9 months	42%	50%	59%
99% are resolved in 12 months	48%	57%	68%
Workers compensation – Form 2/2D			
The average lifecycle is less than 120 days	149	129	129
45% are resolved in 3 months	51%	54%	51%
85% are resolved in 6 months	82%	87%	87%
97% are resolved in 9 months	92%	93%	94%
99% are resolved in 12 months	95%	96%	96%

¹⁴ Motor accidents damages dispute data excludes matters that have been stood over.

9. The Commission's performance (continued)

Quality

The quality of the Commission's decision-making is measured in terms of the 'appeal rate' and the 'revocation rate', either internally within the Commission or through the court system. The appeal rate is the number of appeals lodged as a proportion of total number of decisions issued in the period. The revocation rate is the number of appeals finalised that revoked the original decision as a proportion of the total number of decisions issued in the period, however, it should be noted that it has a different meaning depending on which division it relates to.¹⁵

In the reporting period, the appeal rate for motor accidents medical decisions increased by 1% to 25%. The revocation rate of motor accidents medical certificates was 10%, which was an increase of 3% from 2023–24.

Medical certificates in the Workers Compensation Division saw a reduction in the appeal rate which decreased to 18% in the year. However, the revocation rate of workers compensation medical certificates increased to 11% in the year.

The appeal rate of member decisions in the Workers Compensation Division saw a reduction in the year down to 14%. The proportion of member decisions revoked on appeal increased slightly to 7%, but both appeal rate and revocation rate remain comfortably within the Commission's target range.

Each year the Commission issues thousands of medical assessor, member, review panel and delegate of the President decisions, of which only a very small number are challenged in the NSW Supreme Court or the NSW Court of Appeal. In 2024–25, fewer than 1% of all appellable decisions were appealed or revoked in a higher court.

KPI measure	2022–23	2023–24	2024–25
APPEAL RATE IS LESS THAN 20%			
Motor accidents medical decisions with a review application lodged	22%	24% ¹⁶	25%
Workers compensation appellable member decisions with an appeal	20%	16%	14%
Workers compensation appellable medical certificates with an appeal	18%	20%	18%
REVOCATION RATE IS LESS THAN 10%			
Motor accidents medical decisions revoked on review	8%	7%	10%
Workers compensation appellable member decisions revoked on appeal	5%	6%	7%
Workers compensation appellable medical certificates revoked on appeal	7%	10%	11%
'Appeal rate' of the Commission's appellable decisions to a higher court is less than 10%	<1%	<1%	<1%
% of the Commission's appellable decisions set aside by a higher court is less than 5%	<1%	<1%	<1%

¹⁵ For medical appeal panels in the Workers Compensation Division, the word revocation relates to the panel's appeal decision to set aside the original certificate. In the Motor Accidents Division, the application is a de novo review rather than an appeal from the first instance medical assessor and may be accompanied by additional evidence. The claimant is assessed as they present on the day before the review panel and the panel may reach a different view.

¹⁶ The percentage of motor accidents medical decisions with a review application lodged for 2023-24 has been adjusted to 24%, up from 23% as published in the 2023–24 Annual Review. This is due to an adjustment made to the count of medical certificates issued in that year.

Outcomes

The Commission's success in encouraging early dispute resolution is measured by the percentage of disputes successfully settled without proceeding to formal determination.

Motor accidents damages disputes settled saw a marked improvement in the year increasing to 83%.

Workers compensation applications for mediation to resolve a work injury damages claim (Form 11C) that proceeded to mediation and resulted in the matter being settled decreased slightly to 68% for the year but overall settlement rates remain high. The percentage of Form 2 and 2D disputes settled decreased slightly to 37% and remains on target.

KPI Measure	2022-23	2023-24	2024-25
SETTLEMENT RATE IS GREATER THAN TARGET			
More than 70% of workers compensation Form 11C proceeding to mediation are settled	70%	72%	68%
More than 35% of workers compensation Form 2/2D are settled	35%	38%	37%
More than 60% of motor accidents damages assessment disputes are settled	70%	73%	83%

User expectation

User expectation performance indicators are used to monitor the Commission's performance in meeting expected timeframes of key events throughout the dispute resolution process.

The proportion of disputes with early member listings (within 28 days of registration) had large improvements and increased in both the Workers Compensation (39%) and Motor Accidents (60%) Divisions.

The early scheduling of medical assessments continues to be an issue in both divisions. Medical assessor availability, particularly for high use specialties including psychiatrists and orthopaedic surgeons remains an issue. In motor accidents a continued focus on dealing with the oldest disputes first results in poor performance against this measure. Wait times for medical assessments have decreased in 2024-25 and the Commission is committed to further reducing medical assessment wait times in 2025-26.

The timely issuing of medical assessor and member decisions has remained relatively stable but below the Commission's targets. In 2024-25 there has been a modest improvement in the timeliness of member decisions in the Workers Compensation division increasing to 55%.

KPI measure	2022-23	2023-24	2024-25
90% OF KEY DISPUTE EVENTS OCCUR WITHIN THE TARGET TIMEFRAME			
Workers compensation			
Form 2/2D with a listing with a member within 28 days of registration	39%	27%	39%
Medical assessments that are scheduled within 35 days of registration	9%	12%	8%
Medical assessor decisions issued within 14 days	78%	76%	73%
Member decisions issued within 21 days	41%	45%	55%
Motor accidents			
Damages assessment disputes with a listing with a member within 28 days of registration	55%	50%	60%
Medical assessments that are scheduled within 35 days of lodgment	0%	0%	1%
Medical assessor decisions issued within 14 days	69%	63%	74%
Member decisions issued within 21 days	55%	64%	56%

9. The Commission's performance (continued)

Review of the Commission's Key Performance Indicators

The Commission's Key Performance Indicators (KPIs) were set in 2022–23 and the Commission has reported performance against these KPIs in the previous two annual reviews.

In 2024–25, the Commission undertook a review of its KPIs to ensure they are relevant, that performance is measured appropriately, and that performance targets are realistic and achievable.

As a result of the KPI review, the Commission has set new and amended KPIs. A number of KPIs remain unchanged as they have proven to be sufficient performance measures. Whilst there are other KPIs the Commission considered amending in the KPI review, the Commission decided not to change all KPIs at this time during a period of potential scheme reform.

From 1 July 2025, the Commission will measure its performance against the following amended KPIs and provide a full performance report in the Annual Review 2025–26.

Workload

New KPIs to measure workload have been introduced. The Commission will report on the volume of open matters in progress, expressed as months' worth of lodgments. These measures aim to demonstrate that the volume of work on hand is manageable, sustainable, and that backlogs or delays are not developing.

Total open matters are less than 6 months' worth of lodgments	Target
Personal Injury Commission	<6 months
Motor Accidents Division	<6 months
Workers Compensation Division	<6 months

Lifecycles

The lifecycles KPIs remain relatively unchanged. For Motor Accidents Damages disputes, the KPI will no longer exclude disputes that have been stood over, but when calculating the lifecycle, it will exclude the number of days that a dispute was stood over. This change better reflects the time the Commission takes to resolve damages assessment disputes.

Disputes are resolved within the target timeframes	Target
Motor accidents – damages disputes	
The average lifecycle is less than 120 days	120 days
45% are resolved in 3 months	45%
85% are resolved in 6 months	85%
97% are resolved in 9 months	97%
99% are resolved in 12 months	99%

Note: Motor accidents damages dispute lifecycle data excludes the days that a matter was stood over.

Outcomes

The outcome measures remain largely unchanged however the target for motor accidents damages disputes settled has increased to 70% from 60%.

Settlement rate is greater than target	Target
% of workers compensation Form 11C proceeding to mediation are settled	70%
% of workers compensation Form 2/2D are settled	35%
% of motor accidents damages assessment disputes are settled	70%

10. The law in focus

The use of Generative Artificial Intelligence in the law

In early 2025, the Supreme Court Practice Note on Generative Artificial Intelligence (Gen AI) commenced. It was rapidly adopted by the Land & Environment Court, the District Court and Local Court. Speaking at the Law Society's Commencement of Law Term Dinner 2025, the Chief Justice said that "the legal profession is and should be a critical, thinking profession. Its members are subject to well-known ethical constraints and obligations in relation to how information and evidence is presented to courts and deployed in the administration of justice. Any regulation of Gen AI must bear those matters uppermost in mind."

The challenges presented by AI in the courts and tribunals is clear. At stake is the trust and confidence of the public in the integrity of decision-making. Legal problems generally involve disputes between people which require human consideration for their resolution.

The Commission has therefore adopted an approach to AI which closely mirrors that of the courts. Our one change is that the Commission requires the disclosure of the presence of AI in evidence rather than an application for leave being made. This merely reflects the different dispute resolution model in place at the Commission and the fact that the rules of evidence do not apply.

The new rules are currently being settled by the Parliamentary Counsel and will be commencing in the near future.

All Commission decision-makers however must comply with the Chief Justice's requirements for all judicial officers.

Notable decisions

Several notable decisions were published during the review period relating to the *Workers Compensation Act 1987* (1987 Act) and the *Motor Accident Injuries Act 2017* (2017 Act). Principal member John Harris has summarised six of these decisions which have important implications for the Commission and the consideration of personal injury disputes.

Allianz Australia Insurance Limited v The Estate of the Late Summer Abawi [2024] NSWSC 1245

Supreme Court of New South Wales, 4 October 2024
Griffiths AJA

Ms Abawi sustained injuries including superficial lacerations in a motor vehicle accident in 2017. A dispute arose as to whether her injuries were "threshold injuries" within the meaning of s 1.6 of the 2017 Act. Ms Abawi passed away in 2021 for reasons unrelated to the accident. The proceedings were continued by the estate.

Section 1.6 of the 2017 Act relevantly provides:

- " (1) For the purposes of this Act, a **threshold injury** is, subject to this section, one or more of the following—
- (a) a soft tissue injury,
 - (b) a psychological or psychiatric injury that is not a recognised psychiatric illness.
- (2) A **soft tissue injury** is (subject to this section) an injury to tissue that connects, supports or surrounds other structures or organs of the body (such as muscles, tendons, ligaments, menisci, cartilage, fascia, fibrous tissues, fat, blood vessels and synovial membranes), but not an injury to nerves or a complete or partial rupture of tendons, ligaments, menisci or cartilage."

A medical review panel (the Review Panel) determined that the laceration injuries fell outside the definition of "soft tissue injury" and were therefore non-threshold injuries.¹⁷

17 *Abawi v Allianz Australia Insurance Ltd [2024] NSWSC 1245*.

10. The law in focus (continued)

An application for judicial review of this decision was dismissed by the Supreme Court although not for the reasons advanced by the Review Panel.¹⁸ Griffiths AJA observed that the insurer's submissions placed undue emphasis on context and purpose. His Honour placed considerable emphasis on the failure by Parliament to include "skin" in the list in the parentheses of examples that were defined as soft tissue.¹⁹

Griffiths AJA also held that there was a common theme in the parenthesised examples in that they were connective tissue which had a "unique and important role to play in orthopaedic injuries".²⁰ This was supported contextually by the two explicit exceptions at the end of the definition.

His Honour held that the construction was supported by the supporting Motor Accident Injuries Regulation 2017 (Regulations) and Motor Accident Guidelines (Guidelines) which formed part of the overall statutory scheme and focused on the clinical features of the injury.

The insurer appealed from Griffiths AJA's decision to the Court of Appeal, which upheld the appeal and set aside the Supreme Court and Review Panel decisions.²¹ The reasons of the Court were provided by Kirk JA.²²

The parties agreed that skin is both a tissue and an organ but disagreed as to whether the definition of "soft tissue injury" extended to cover organs.

The Court of Appeal disagreed with both the Review Panel and the first instance Judge that either the Regulations or Guidelines can be considered in construing s 1.6(2) of the 2017 Act as it is impermissible to construe an Act using delegated legislation under that Act unless the Act provided for its own modification by operations of regulations made under it.²³

The Court held that the description of "soft tissue" seeks to delineate a subgroup of human tissue and the key words "connects, supports or surrounds" all describe the role played by that tissue.²⁴

The Court found that organs are *capable* of being soft tissue injuries, however, noted that most organs will be excluded due to the "connects, supports or surrounds" limitation in section 1.6(2). The Court said that "connecting, supporting or surrounding" other structures or organs in a physical sense should be a significant characteristic of the tissue in question.

The Court held that an injury to skin that does not involve an injury to nerves is a "soft tissue injury" for the purposes of the 2017 Act. The Court concentrated on the words "connects, supports or surrounds" within the definition, describing these words as having the "central role to play in delineating the types of tissue encompassed by the provision."²⁵

The Court held that organs which otherwise comprise of soft tissue will fall within the definition if a "significant and characteristic feature of the tissue"²⁶ is that they connect, support or surround other structures or organs in a physical sense to warrant that tissue as being characterised as having that function.²⁷

On this construction, skin, whilst having several functions, fell within the definition of soft tissue injury²⁸ approving a previous medical review panel decision of *Dhupar v AAI Limited t/as GIO*²⁹ which had been critiqued by the first instance Judge and the Review Panel.

18 *Allianz Australia Insurance Limited v The Estate of the Late Summer Abawi* [2024] NSWSC 1245 (SC).

19 SC, [50]–[56].

20 SC, [58].

21 *Allianz Australia Insurance Ltd v Estate of the Late Summer Abawi* [2025] NSWCA 85 (Abawi).

22 Stern JA agreeing with Kirk JA; Adamson JA agreeing with Kirk JA on the textual considerations said to be "compelling" (at [79]).

23 Reference was made to the observations of French CJ in *Plaintiff M47/2012 v Director-General of Security* (2012) 251 CLR 1; [2012] HCA 46, [56].

24 *Abawi*, [31].

25 *Abawi*, [37].

26 *Abawi*, [38].

27 *Abawi*, [71].

28 *Abawi*, [72].

29 [2023] NSWPICMP 99 (*Dhupar*), [111]–[129].

The Court emphasised that the key words require an analysis of the “significant and characteristic feature” of an organ and suggested that an injury to most if not all organs (apart from skin) will unlikely fall within the definition. This is because:³⁰

“As already noted, in practice most human organs will generally have some distinct, specific and readily identifiable function, and any role they play in acting to connect, support or surround other structures or organs in a physical sense is unlikely to be a sufficiently significant feature as to warrant bearing that characterisation.”

Accordingly, most organs are excluded from the definition of soft tissue, not because they are soft tissue, but because they fall outside the functional requirement that a significant and characteristic feature of the tissue in question is to connect, support or surround other structures or organs.³¹

More significant skin injuries, such as burns or road rash, may fall outside of the definition of “soft tissue injury” if they involve an injury to nerves.

The Court adopted the findings by the original medical assessor that there was no nerve injury stating that, whilst it may involve some uncertainty, whether there was a nerve injury is “capable of medical assessment”.³² This will be a question of fact to be determined by a medical assessor on a case-by-case basis.³³

AAI Limited t/as GIO v Evic [2024] NSWSC 1272

*Supreme Court of New South Wales, 11 October 2024
Mitchelmore J*

The claimant, Mr Evic, was involved in a motor vehicle accident in 2022 involving his motorcycle. No other vehicle was involved in the accident. There was no dispute that the accident occurred in the course of driving the motorcycle and that the claimant suffered an injury as defined in s 1.4 of the 2017 Act.

The claimant made a claim for statutory benefits. The insurer, who was the compulsory third party insurer of the claimant’s vehicle, denied liability

for statutory benefits pursuant to ss 3.11 and 3.28 of the 2017 Act after 26 weeks on the basis that the claimant was wholly at fault for the motor accident.³⁴

The claimant applied to the Commission for a miscellaneous claims assessment on the issue of whether, for the purposes of s 3.11 and s 3.28 of the 2017 Act, the motor accident concerned was wholly or mostly by the fault of the claimant.

The member concluded that, as a matter of construction, an owner driver injured in a single vehicle motor accident could not be “at fault” as that term is used in s 3.11 and s 3.28 of the 2017 Act. This is because the meaning of “fault” in those provisions must be construed as referring to the actionable tort of negligence, thus excluding contributory negligence, and an owner driver injured in a single vehicle motor accident could not be at fault.

The member otherwise concluded that, if she was wrong on the construction of ss 3.11 and 3.28, she was not satisfied that the claimant failed to exercise reasonable care and skill in his operation of the motorcycle. The insurer when applying for judicial review, did not challenge that part of the decision.

The Attorney General of NSW intervened, conceding that the member had made an error of law, that a declaration could be made to that effect, but the Court should not exercise the discretion under s 75 of the *Supreme Court Act 1970* to make a declaration.

The Supreme Court found that the member erred in law on the construction of wholly or mostly at fault but declined to grant relief because there were no foreseeable consequences between the insurer and the claimant.³⁵

The reasoning by the Court as to the error by the member on the construction point turned upon the following considerations.

The definition of “fault” in s 1.4 means “negligence or any other tort” and the identical definition in the *Motor Accidents Compensation Act 1999* has been interpreted to mean “any other tort”.³⁶

30 *Abawi*, [40].

31 *Abawi*, [34].

32 *Abawi*, [67].

33 Approving *Dhupar*, [130]–[132].

34 The accident occurred prior to 1 April 2023 and the amendments to ss 3.11 and 3.28 extending the time period to 52 weeks did not apply.

35 *AAI Limited t/as GIO v Evic* [2024] NSWSC 1272 (*Evic*), [75]–[80].

36 *Evic*, [36] referring to *Axiak v Ingram* [2012] NSWCA 311, [59].

10. The law in focus (continued)

The general entitlement to statutory benefits under the 2017 Act is not fault-based and those benefits are payable pursuant to s 3.1 if the death or injury results from a motor accident. Those benefits are payable, where the motor accident concerned involved only one motor vehicle, by the insurer of the motor vehicle and where the motor accident concerned involved more than more than one motor vehicle, by the insurer of the at fault motor vehicle.³⁷

Sections 3.11 and 3.28 are drafted in “prohibitive terms” and provide that an injured person is not entitled to ongoing weekly payments of statutory benefits if one of the two conditions of the relevant provisions are satisfied.³⁸ Section 3.38, to which ss 3.11 and 3.28 refer, provide for a reduction of weekly benefits after six months for contributory negligence in the circumstances referenced in that section. Mitchelmore J’s reason for concluding that the notion of fault included contributory negligence is found in the following paragraphs. Her Honour stated:³⁹

“The qualifiers ‘wholly or mostly’ inform each other and are intended to address the same mischief, namely, contributory negligence. That is made clear in subs (2) of both s 3.11 and 3.28, which sets out when a motor accident is caused ‘mostly by the fault of a person’, namely, ‘if the contributory negligence of the person in relation to the motor accident (as referred to in section 3.38) was greater than 61%’.

Considered in the particular statutory context for which Part 3 makes provision, ss 3.11 and 3.28 are directed at the extent to which the injured person’s failure to take reasonable care contributed to the motor accident. The sections (and s 3.36) use the word ‘fault’ accompanied by a qualifying phrase (‘wholly or mostly’) which clearly invokes contributory negligence. That is confirmed by the express reference, in subs (2), both to contributory negligence and s 3.38. Consistently with the balance of Part 3, the provisions are concerned with contributory negligence not for the injury, but for the motor accident, in a manner that accommodates all types of motor accidents, including single vehicle accidents where the injured person is the owner driver.”

Her Honour concluded that the construction found by the member did not give sufficient weight to the particular statutory context of the 2017 Act and s 3.11 and s 3.28 are “directed at the extent to which the injured person’s failure to take reasonable care contributed to the motor accident.”⁴⁰ These sections use the word “fault” and a qualifying phrase (“wholly or mostly”) which clearly means contributory negligence.

Atwal v Insurance Australia Limited trading as NRMA Insurance (No 2) [2025] NSWSC 350

*Supreme Court of New South Wales, 11 April 2025
Schmidt AJ*

The claimant, Mr Atwal, was injured in a motor vehicle accident in June 2020. He subsequently made a claim for damages in accordance with the 2017 Act on the insurer. Liability for the claim was admitted.

The claimant applied to have the proceedings listed for hearing before the Personal Injury Commission and asserted that he was entitled to an award of damages for non-economic loss on the basis that he had a permanent impairment greater than 10% arising from both the physical and psychological injuries he suffered as a result of the accident.

The claimant and the insurer had separate psychiatrists who had both assessed the permanent impairment as a result of psychological injury as greater than 10%. The insurer provided reasons why it did not accept the doctor’s assessment qualified on its behalf. The insurer’s position was that there was a dispute about whether the degree of permanent impairment of the claimant was sufficient for an award of damages for non-economic loss. Damages for non-economic loss may not be awarded unless the degree of permanent impairment had been assessed by a medical assessor under Div 7.5 of the 2017 Act: s 4.12(1) 2017 Act.

³⁷ Section 3.2(1) of the 2017 Act.

³⁸ *Evic*, [49]–[51].

³⁹ *Evic*, [56]–[57].

⁴⁰ *Evic*, [62].

The senior member accepted the insurer's submission that the existence of a dispute, for the purposes of s 4.12, does not necessarily require evidence from an approved health practitioner of permanent impairment below the threshold. An insurer may dispute the degree of permanent impairment on the basis that the medical evidence is flawed and cannot be relied on to establish the level of impairment.⁴¹

The senior member held that in circumstances where the insurer considered the assessment it obtained of the permanent impairment to be "flawed", the opinion (including the assessment of permanent impairment) did not bind the insurer, nor did it prevent the insurer from declining to accept that the claimant has a permanent impairment that is greater than 10%. The claimant did not refer to any contrary authority.

The claimant's submission that, for there to be a medical dispute to which s 4.12 applies, there must first be a referral under s 7.20 and a determination by the President that there is a bona fide dispute that can be referred for medical assessment, was rejected.

The senior member was satisfied, for the purposes of s 4.12, that there was a dispute between the parties about whether the degree of permanent impairment of the claimant was sufficient for an award of damages for non-economic loss and that s 4.12(1) was engaged.

He reasoned that the text of s 4.12 was in clear and unambiguous terms and in any dispute about whether the degree of permanent impairment of the claimant is sufficient for an award of damages for non-economic loss, damages cannot be awarded unless the degree of permanent impairment has been assessed by a medical assessor under Division 7.5. No such assessment had been undertaken. Accordingly, the senior member held that if the matter were to proceed to assessment of damages under s 7.36, damages for non-economic loss may not be awarded.

Neither party had made an application for assessment of a medical dispute about permanent impairment. No determination had been made under s 7.20 as to whether the dispute was to be assessed by a medical assessor. As it stood, there was an undetermined dispute between the parties about the degree of permanent impairment.

The senior member concluded that if the claim proceeded to assessment, he could not make an award for non-economic loss.

Mr Atwal sought judicial review of the senior member's decision. The Court held that neither the 2017 Act nor the Guidelines required the insurer to concede that the threshold has been satisfied despite the absence of expressed medical opinion that the claimant had not satisfied the threshold.⁴² Clause 4.130 of the Guidelines provided that an insurer "should" concede that the threshold had been satisfied in some circumstances, but did not require the insurer must accept those reports.

Neither s 4.12 nor the Guidelines require that such a dispute be "genuine".⁴³ This conclusion was consistent with the decision of *Insurance Australia Ltd t/as NRMA Insurance v Scott*⁴⁴ which related to the former statutory scheme where it was held that a medical dispute referred for assessment was not predicated on the existence of a "genuine dispute". Further, the existence of a medical dispute was not a jurisdictional factor to be determined by the Court, but rather a matter to be determined by the proper officer.⁴⁵

The Court dismissed Mr Atwal's summons.

Freeth v Volvo Group Australia Pty Ltd [2025] NSWPI 153

Personal Injury Commission of New South Wales, 16 April 2025

Member Rachel Homan

The worker, Ms Freeth, sustained physical injuries to her upper limbs in the course of her employment as a store person and remained in receipt of weekly compensation.

41 *Atwal v Insurance Australia Limited t/as NRMA Insurance* [2024] NSWPI 440.

42 *Atwal v Insurance Australia Ltd* [2025] NSWSC 143 (*Atwal*), [55].

43 *Atwal*, [57].

44 [2016] NSWCA 138 (*Scott*).

45 *Scott*, [115]–[119]; *Atwal*, [61].

10. The law in focus (continued)

The worker subsequently claimed compensation in respect of a primary psychological injury alleged to have been caused by differential treatment, scrutiny and bullying. Liability for the psychological injury was accepted by the employer's insurer at the arbitration hearing. There remained a dispute as to the quantification of the worker's entitlement to weekly compensation in respect of the psychological injury.

The worker sought a full award of weekly compensation pursuant to ss 36(1) and 37(1) of the 1987 Act based on no current work capacity, notwithstanding that she remained in receipt of weekly compensation in respect of her physical injuries throughout the relevant period.

The respondent submitted that a discretion pursuant to s 46 of the 1987 Act arose and ought to be exercised so that the award for weekly compensation in respect of the primary psychological injury should be reduced to prevent dual benefits of the same kind being payable.

The issues before the Commission were whether a discretion pursuant to s 46 arose in the circumstances of the case and if so, whether the discretion ought to be exercised.

Section 46 of the 1987 Act provides:

“ 46 Reduction of weekly payments to prevent dual benefits

- (1) The Commission may, on the determination of an application for any weekly payment of compensation or on a review under this Act of any weekly payment of compensation, order that the weekly payment be reduced to prevent dual benefits of the same kind being payable by the employer during and in respect of the incapacity for work.
- (2) Any such order shall have effect according to its tenor.
- (3) This section does not affect the operation of section 49 or 50.”

Referring to *Roads & Traffic Authority of NSW v Smith*⁴⁶ and *Workers' Compensation Dust Diseases Board of NSW v Cook*⁴⁷ the member found that the worker was entitled to benefits of the same kind, being weekly compensation under Part 3, Division 2 of the 1987 Act, in respect of both her physical and psychological injuries. The benefits were both payable by the respondent “during” the period of incapacity, which was the subject of the proceedings.⁴⁸

A further issue was whether the benefits were payable “in respect of the incapacity for work”.

The worker submitted that the incapacity had to be the same and that the incapacity resulting from the worker's physical injuries produced a separate and distinct incapacity from the incapacity resulting from the psychological injury.

The member, referencing *Cordina Chicken Farms Pty Ltd v Le*⁴⁹ accepted that the incapacity resulting from both injuries flowed from different symptoms and restrictions. The physical injury affected the worker's ability to use her upper limbs for work. The injury which was the subject of the proceedings affected the worker's psychological ability to engage in work.

The member found that the physical and psychological injuries affected the worker's capacity for work in the same way rendering her unable to work in her pre-injury employment or in any other suitable employment. The incapacity resulting from both injuries had at all relevant times, been the same.⁵⁰ As a result of this conclusion, the discretion arose in s 46 to prevent the payment of dual benefits.

The member found that the discretion should be exercised, noting that a number of provisions in the 1987 Act, such as s 50 and s 151Z, operated to prevent double recovery. Further, were the discretion under s 46 not exercised, the quantum of weekly compensation payable to the worker would exceed the amount she would have earned had she remained uninjured.

46 [2007] NSWCCPD 134.

47 [2015] NSWCA 270.

48 *Freeth v Volvo Group Australia Pty Ltd* [2025] NSWPIC 153 (*Freeth*), [62].

49 [2008] NSWCCPD 125.

50 *Freeth*, [68].

The worker otherwise submitted that any reduction should be for an amount that would leave 100% of her pre-injury average weekly earnings (PIAWE) so that the worker would be properly compensated for the entirety of her losses.

The member noted that this submission was broadly consistent with the approach taken in *Alcan Australia Ltd v Jordan*,⁵¹ which was concerned with awards of compensation under the former and repealed s 40 of the 1987 Act.

The member found that the present scheme was substantially different, as ss 36, 37 and 38 of the 1987 Act entitled workers who were incapacitated by an injury to an amount of weekly compensation which was a percentage of their PIAWE. In those circumstances there was no statutory basis for the worker's submission that she should be compensated at the rate of 100% of the PIAWE.

The member ordered the respondent to pay weekly compensation in respect of the psychological injury at the maximum statutory rate pursuant to ss 36 and 37 of the 1987 Act, such payments being reduced pursuant to s 46 of the 1987 Act by the amount already paid in respect of the physical injury.

Noble v Petuha [2025] NSWPCPD 5

Personal Injury Commission of New South Wales,
23 January 2025

Deputy President Michael Snell

Hannah Marsland-Howard (Hannah) lived with her brother Joshua and her mother (Ms Noble). Tete Petuha (Mr Petuha) was a shearing contractor who operated a team of shearers. Joshua was employed by Mr Petuha as a roustabout and wool presser. On 3 June 2022 Mr Petuha visited the house that Joshua shared with Hannah and asked Hannah whether she wanted to try out doing some work with him. Hannah agreed.

Five days later, Hannah carried out the duties of a roustabout at a shearing shed working in a team with Joshua and under the supervision of Mr Petuha. The team's working day was from 7.30am to 5pm, with a lunchbreak taken between

noon and 1pm. During her lunchbreak, Hannah was killed when the car in which she was travelling with Joshua and his girlfriend collided with a truck.

Ms Noble made a claim for the relevant death benefit payable pursuant to s 25 of the 1987 Act. The only liability issue for determination was whether Hannah was a 'worker' in the employ of Mr Petuha at the time of her death. It was agreed that, subject to the worker issue, the circumstances of the fatal injury to Hannah were such that the provisions of s 11 of the 1987 Act applied (recess claims).

There was reference to Hannah being involved in a 'work trial' on the day she died. The respondent relied on the decision of the High Court in *Dietrich v Dare*⁵² in contesting that Hannah was a worker when she sustained her fatal injury.

The senior member found that Hannah was not a 'worker' employed by Mr Petuha⁵³ concluding that the arrangement between Hannah and the respondent was a work trial to see if "she liked the work and was able to perform it".⁵⁴ The senior member described the circumstances that Hannah found herself in on the day when undertaking roustabout duties for Mr Petuha as "analogous to those in which Mr Dietrich came to be engaged in doing some painting for Mr Dare."⁵⁵ It was concluded that there was no legal obligation on Hannah to perform the work or the respondent to proceed with any engagement. It was determined that there was no intention to create legal relations when Hannah was offered a work trial.

An appeal by Ms Noble was successful.⁵⁶

The Deputy President applied the discussion of the High Court in *Ermogenous v Greek Orthodox Community of SA Inc*⁵⁷ in determining whether there was an intention to create legal relations requiring an objective assessment of the "state of affairs" between Hannah and Mr Petuha at the time of Hannah's death.

The Deputy President concluded that the evidentiary statements provided by Joshua and Mr Petuha, which were largely consistent, permitted a distinction to be drawn between

51 [1995] NSWCA 12.

52 (1980) 54 ALJR 388 (*Dietrich*).

53 *Noble v Petuha* [2024] NSWPCPD 79 (SM).

54 SM, [100].

55 SM, [99].

56 *Noble v Petuha* [2025] NSWPCPD 5 (*Noble*).

57 [2002] HCA 8.

10. The law in focus (continued)

what was agreed by the respondent and Hannah on the day of the work, as opposed to the consideration of longer-term employment.⁵⁸

The evidence was consistent with an intention between Hannah and the respondent to enter into legal relations in that:

- (a) Hannah attended work on 8 June 2022 in performance of an oral agreement made between her and Mr Petuha on 3 June 2022;
- (b) the agreement was that Hannah would work for the day;
- (c) the agreement was that Mr Petuha would pay Hannah for her work for the day, and
- (d) Mr Petuha intended to then employ Hannah on a full-time basis if she “did well” on the trial.

Recourse to the parties’ conduct could be considered where the contract was partly oral to “identify the point at which the contract was formed and the contractual terms that were agreed” applying *Construction, Forestry, Maritime, Mining and Energy Union v Personnel Contracting*.⁵⁹

Applying this test, the Deputy President held that the subsequent actions of Hannah and the respondent were consistent with the agreement including Hannah’s attendance and working at the shearing shed until lunchtime, taking breaks like other employees and working under the respondent’s supervision.

The Deputy President did not accept the circumstances in this particular matter were “analogous” to those in *Dietrich*. It was held that there was significant factual distinction between the matters including (a) there was a genuine need on the respondent’s part to engage employees as he was “getting very busy”; Hannah undertook real work, and the respondent paid Hannah \$180 gross per day, which exceeded the award rate for someone of her age and experience.

The case emphasises that cases are rarely “analogous” to previously decided cases. Factual findings do not need to be distinguished. In a different context, the observations of Barwick CJ resonate that what other cases determine on the facts does not create legal precedent: *Edwards v Noble*.⁶⁰

Haddad v The GEO Group Australia Pty Ltd [2024] NSWCA 135

Supreme Court of New South Wales, 5 June 2024
Kirk JA, Stern JA, Griffiths AJA

The worker, Mr Haddad, was employed by the respondent as an immigration detention officer at Villawood Detention Centre from 1998 to 2001. Subsequently he worked for various other employers until the end of 2016. In January 2017, the worker sought treatment from Dr Anthony Henderson, a forensic psychologist who determined that the worker was suffering from severe and untreated post-traumatic stress disorder caused by confronting events witnessed at the Villawood Detention Centre.

In January 2021, the worker made a claim for weekly payments of compensation from January 2017 as well as for treatment expenses. The respondent disputed liability on several grounds including that the worker had failed to give notice of injury or make a claim as required by ss 254 and 261 of the *Workplace Injury Management and Workers Compensation Act 1998* (the 1998 Act).

In proceedings before the Commission, the worker limited the claim to medical expenses. The member determined that the date of injury was deemed to be in January 2017, and the claim was barred by operation of s 261 of the 1998 Act. Section 15(1) of the 1987 Act provides:

- “ (1) If an injury is a disease which is of such a nature as to be contracted by a gradual process—
- (a) the injury shall, for the purposes of this Act, be deemed to have happened—
 - (i) at the time of the worker’s death or incapacity, or
 - (ii) if death or incapacity has not resulted from the injury – at the time the worker makes a claim for compensation with respect to the injury”.

Paragraphs (i) and (ii) of s 15(1)(a) are referred to as the “two limbs” of the provision when discussed below. Section 16 (aggravation of diseases) is expressed in the same form.

⁵⁸ *Noble*, [42].

⁵⁹ [2022] HCA 1, [190] per Gordon J.

⁶⁰ [1971] HCA 54, [14] per Barwick CJ.

The worker's appeal was dismissed by the Deputy President⁶¹ who held, relying on observations by Basten JA in *Inghams Enterprises Pty Ltd v Thoroughgood*⁶² that where there is incapacity flowing from an injury, the date of incapacity is the deemed date of injury.⁶³

The appeal by the worker to the Court of Appeal was dismissed.⁶⁴ The reasons of the Court of Appeal in *Haddad* were delivered by Griffiths AJA, with Kirk and Stern JJA agreeing.

The following propositions are derived from the reasons in *Haddad*:

- (a) the determination of which limb of s 15(1)(a) applies turns on whether the applicant has an incapacity;⁶⁵
- (b) the text in s 15(1) does not make the content or the formulation of a claim for incapacity determinative in selecting which of the two limbs applies;⁶⁶
- (c) even if not pleaded, the fact that there is an incapacity cannot be ignored.⁶⁷ Where there is no objective evidence of incapacity, the second limb of the deeming provision will apply;⁶⁸
- (d) the correct position is that where a disease injury causes an incapacity and at the same time gives rise to an entitlement for either medical expenses and/or permanent impairment, the claim is deemed to have occurred at the time when the worker suffered incapacity,⁶⁹ and
- (e) this construction is supported by reference to context and purpose.⁷⁰

A previous Court of Appeal decision of *SAS Trustee Corporation v O'Keefe*⁷¹ supported the worker's submission that a previous claim for weekly compensation was irrelevant and that a claim for permanent impairment compensation pursuant to the disease provisions of ss 15 or 16 of the 1987 Act was deemed to have occurred at the time of the claim.

The findings in *O'Keefe* are subject to what was said by Griffiths AJA in *Haddad*. His Honour stated:⁷²

“Some aspects of this reasoning appear to overstate the correct position. First, the authorities do not support the proposition at [96] that ss 15(1)(a)(i) and 16(1)(a)(i) only apply to a claim for weekly compensation. Nor does the text of those provisions support that proposition. Secondly, the cases do not support the proposition at [101] that, where there is a claim for lump sum compensation, any earlier claim for weekly compensation is always irrelevant. That proposition is stated too broadly. Whether or not an earlier claim for weekly compensation is relevant or irrelevant depends on the facts, as the differing outcomes in *Alto Ford* and *Berkeley* reveal. The subsequent reasoning in *Thoroughgood* (in which *McColl JA* also sat) expresses the position more accurately.”

Since the decision of the Court of Appeal, the Commission has issued several decisions by members⁷³ and at Presidential level⁷⁴ that “where the disease injury causes incapacity and gives rises to an entitlement to compensation (either medical expenses or permanent impairment), the first limb of s 15(1)(a) operates to deem the date of injury to be when the worker suffered incapacity.”⁷⁵

61 *BBY v The GEO Group Australia Pty Ltd* [2023] NSWPCPD 60 (PD).

62 [2014] NSWCA 166 (*Thoroughgood*).

63 PD, [147].

64 *Haddad v The GEO Group Australia Pty Ltd* [2024] NSWCA 135 (*Haddad*).

65 *Haddad*, [70].

66 *Haddad*, [70], [71], [80] and [95].

67 *Haddad*, [72]–[73].

68 *Haddad*, [75].

69 *Haddad*, [80].

70 *Haddad*, [82]–[93].

71 [2011] NSWCA 326 (*O'Keefe*).

72 *Haddad*, [118].

73 See for example *Ellis v Dontarna Pty Ltd* [2024] NSWPC 513 (*Ellis*).

74 *Razmovski v NIB Health Funds Ltd* [2025] NSWPCPD 9; *Secretary, Department of Education v Wells* [2025] NSWPCPD 11.

75 *Ellis*, [22], applying *Haddad*, [80].

10. The law in focus (continued)

Vale the Hon. John O’Meally AM, RFD

His Honour Judge John Lawrence O’Meally AM RFD was born in 1939 and died on 4 October 2024, a little short of his 85th birthday. He was educated at Marcellin College, Randwick, with which he retained a life-long association, and the University of Sydney where he was awarded an LLB. His subsequent career in the law was extraordinary. He served on many courts and tribunals.

His Honour was admitted to the bar in 1964. He acquired a large and successful practice in personal injury law. He regularly appeared before the Workers Compensation Commission of NSW, establishing an enduring connection with its community of judges and practitioners. He was appointed an Acting Judge of the National Court of Justice, Papua New Guinea in 1977. Inevitably, he was appointed a judge of the Workers Compensation Commission of New South Wales in 1979, at the age of 39. On the creation of the Compensation Court of NSW in 1984, his Honour became a judge of that Court. On its abolition in 2003, his Honour became a judge of the District Court of NSW, an appointment he retained until he retired in 2011. On his retirement from the Bench, he was the longest serving judge in New South Wales, having served for a period of 32 years. During that time his Honour also served on the Eastern Caribbean Supreme Court and the High Court of Antigua and Barbuda. On his retirement from the bench his Honour served on NCAT and was appointed a Commissioner of International Commission of Jurists.

In 1989, the Dust Diseases Tribunal of New South Wales (DDT) was established in response to an upsurge in common-law claims for injuries caused by asbestos including the fatal disease of mesothelioma. His Honour is particularly remembered for his role in the establishment and development of the DDT, a specialist court which dealt expeditiously with claims for damages based on dust exposure. His Honour was appointed as the first judge of the new tribunal. That was an insightful decision. Judge O’Meally made an indelible mark on both practice and procedure in the DDT and the substantive law of negligence.

The hearing of a mesothelioma case often commenced shortly after filing at the plaintiff’s bedside and ended with an ex tempore judgment. His Honour was rarely overturned despite the novelty and complexity of the legal issues associated with asbestos litigation.

His Honour determined that a parent company was liable for the negligent acts of its subsidiary; that mesothelioma was caused by the cumulative effect of all relevant exposure to asbestos; and that the children of Wittenoom contracted the disease while at play in asbestos tailings. These were landmark decisions.

On further appointments to the DDT his Honour was appointed the Senior Judge and in 1998 the President. A world class case management system was introduced by a rules committee over which he presided. Issues determined by earlier cases could not be relitigated without leave and material obtained in earlier proceedings could be used in later proceedings. Settlement became the accepted method of disposing of cases and the flood of dust diseases claims became manageable.

These cases frequently involved plaintiffs suffering from asbestos-related diseases who were elderly, very ill, perhaps bed-bound or hospitalised, with severely compromised life expectancy. There was great pressure to deal with the cases promptly, during the plaintiffs’ limited remaining time. Judge O’Meally (and others who became members of the DDT) would frequently sit outside normal court hours, in locations such as the hospitals in which plaintiffs were being treated or the plaintiffs’ homes.

On one occasion, following a three-week trial, his Honour delivered an ex tempore judgment, over a period of five hours, commencing at 9 am on Christmas eve. On another occasion both his Honour and a terminally ill plaintiff were inpatients at the same hospital. His Honour, wearing a hospital gown, was introduced to the plaintiff as the judge.



It is reported that his Honour heard the case and delivered a judgment while he was himself an inpatient. It is also reported that, after reading his own hospital notes while an inpatient, his Honour never again trusted hospital records at face value.

His Honour had a lively wit, that periodically led to banter in his court involving the legal profession. The President of the Personal Injury Commission, Judge Phillips, recalled the Monday directions list in the DDT, saying these “tested not only one’s knowledge of the law, but also the history of Australia, Ireland and the Catholic Church (not always in that order)”. On country circuits Judge O’Meally’s tipstaff would commence the day’s proceedings by announcing “Let all ye who have business before this honourable court draw nigh and give your attendance, and you shall be heard”.

On one occasion, James Poulos, a senior counsel, came into his Honour’s court without his wig. As Mr Poulos was not fully robed, his Honour said, “I cannot see you”. After confirming his apparent invisibility with the judge, Mr Poulos put his hands on his nose and blew the judge a raspberry. Writing of this incident later, his Honour said the court was adjourned “until composure was restored”. On a circuit in the town of Orange, the list after the luncheon adjournment was disrupted by the slightly late return of a prominent local solicitor. On the solicitor’s return, a little after 2 pm, his Honour sentenced him to the rising of the court. The smiling solicitor passed part of the afternoon session standing in the dock of the court, until his Honour needed to release him so that he could take instructions from his clients. The solicitor took this in good humour, although it may have puzzled his clients.

Justice Michael Kirby, speaking at a dinner in 2008 (which Judge O’Meally attended) to celebrate the Compensation Court of New South Wales, noted that criminal law, family law, industrial law and compensation law affect the lives of ordinary citizens. Justice Kirby referred to the “bond of robust empathy that links the lawyers who have worked in ‘people’ law” and “the comradeship of litigation in workers compensation cases”.

His Honour Judge O’Meally was also at different times an honorary colonel in the Australian Army Legal Corps and a Commissioner of the International Commission of Jurists, Geneva. In 2002 his Honour was appointed a Member of the Order of Australia.

His Honour Judge Phillips said of Judge O’Meally:

“Those of you who knew him saw a man of great learning, intellect and compassion. To hear the cases that he did in the DDT, replete with human suffering and the imminent prospect of death, required the special man that John was.”

Michael Snell

Deputy President
Personal Injury Commission

Paul Sweeney

Acting Deputy President
Personal Injury Commission

10. The law in focus (continued)

Vale Allan Cowley

A reflection by Jill Cowley – loving wife of five decades

Allan had many loves in his life; his family, wine, food and his work as a lawyer. He did it all with style and gusto.

He was born in Wagga Wagga and attended both primary and secondary schools there. His family could best be described as modest and hard-working, so despite a scholarship to attend university, it wasn't possible to leave Wagga and start life in Sydney.

But working as an Article Clerk in Wagga presented too many challenges so at the age of 19, he packed his car and left for a life in the city, enrolling in a Bachelor of Commerce while he worked full time as a stockbroker. He told stories of catching a bus from the city to UNSW for lectures in the evening and falling asleep en route only to find himself in the bus depot at La Perouse. He wasn't really impressed with what the bus depot could offer.

But he persisted and made friends with fellow students and others after joining the university hockey club. He married on April Fools' Day 1972.

In his last year of study for his first degree, he also enrolled in a part time LLB, which was, of course, against all the rules but after some 'discussion' with the university it was allowed. More friends and more laughter.

The LLB was formative in so many ways. He loved it and eventually was able to attend university as a full-time student of law. At last. He was admitted as a solicitor in 1977, his first job being with Madgwick and Madgwick who dealt almost exclusively with corporate insolvency.

By mid-1980 it was time for a change. A sea change. The family moved and he started work with Stone and Poulos in Lismore, becoming a partner after a year. This firm changed names many times but at its heart was Allan. Country practice can be very different.

He specialised in commercial litigation and personal injury law, such specialisation leading to a role as an Assessor for the predecessor of the Personal Injury Commission. He retired from private practice in 2017 but remained as a sessional member of the Personal Injury Commission until his final retirement early in 2025 after more than 20 years.

He is greatly missed by his family, friends and colleagues.

Thank you, Allan, for a life well lived.



Appendices

Appendix A – Executive Leadership Team

President

Judge Gerard Phillips

Division Heads

Division Head, Motor Accidents Division

Ms Marie Johns

Division Head, Workers Compensation Division

Mr Glenn Capel

Division Head, Police Officer Support Scheme Division

Ms Josephine Bamber (acting)

Principal Registrar

Ms Marianne Christmann

Appendix B – Members

Presidential members

Deputy Presidents

Mr Michael Snell

Ms Elizabeth Wood

Acting Deputy Presidents

Mr Geoffrey Parker SC

Ms Kylie Nomchong SC

Mr Michael Perry

Mr Paul Sweeney

Principal members

Ms Josephine Bamber

Mr John Harris

Senior members

Ms Elizabeth Beilby

Ms Kerry Haddock

Mr Brett Williams

Appendices (continued)

General members

	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
FULL-TIME MEMBERS			
Mr Alexander Bolton		X	
Mr Cameron Burge	X		
Ms Belinda Cassidy		X	
The Hon. Lea Drake ⁷⁶	X		
Ms Rachel Homan	X		
Mr John Isaksen	X		
Ms Susan McTegg	X	X	X
Ms Bianca Montgomery-Hribar		X	
Mr Terence O'Riain	X	X	
Ms Jacqueline Snell	X		
Mr Gaius Whiffin	X		
SESSIONAL MEMBERS			
Mr Brett Batchelor	X		
Ms Diana Benk	X		
Mr Stephen Boyd-Boland		X	
Mr Terrence Broomfield		X	
Ms Kathryn Camp	X		
Mr Philip Carr	X	X	
Mr Maurice Castagnet		X	
Mr Marshal Douglas	X		
Mr David Ford		X	
Ms Karen Garner	X		
Ms Anne Gracie	X		
Mr Adam Halstead	X		
Mr Michael Inglis	X	X	
Mr Jeremy Lum	X	X	
Mr Parnel McAdam	X		
Ms Catherine McDonald	X		
Mr Michael McGrowdie	X		
Mr Hugh Macken		X	
Ms Elizabeth Medland		X	
Ms Deborah Moore	X		
Mr Michael Moore	X		
Ms Bridie Nolan		X	

⁷⁶ The Hon. Lea Drake was on secondment as at 30 June 2025.

	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
Mr Gary Patterson		X	
Ms Jane Peacock	X		
Mr Richard Perrignon	X		X
Mr Raymond Plibersek		X	
Ms Shana Radnan		X	
Ms Carolyn Rimmer	X		
Ms Fiona Seaton	X		
Mr Anthony Scarcella	X	X	
Mr Terence Stern OAM		X	
Mr Mitchell Strachan	X		X
Mr Cameron Thompson	X	X	
Mr John Turner	X		
Ms Elyse White		X	
Mr Michael Wright	X		
Mr Christopher (John) Wynyard	X		

Notes:

- Nine members are also appointed as mediators as listed on page 74.
- All members of the Motor Accidents Division (25 members) also hold a dual appointment as a merit reviewer as listed on page 74.

Appendices (continued)

Appendix C – Merit reviewers

Ms Josephine Bamber
Mr Alexander Bolton
Mr Stephen Boyd-Boland
Mr Terrence Broomfield
Mr Philip Carr
Ms Belinda Cassidy
Mr Maurice Castagnet
Mr David Ford
Mr John Harris
Mr Michael Inglis
Mr Jeremy Lum
Mr Hugh Macken
Ms Bianca Montgomery-Hribar
Ms Susan McTegg
Ms Elizabeth Medland
Ms Bridie Nolan
Mr Terence O’Riain
Mr Gary Patterson
Mr Raymond Plibersek
Ms Shana Radnan
Ms Katherine Ruschen⁷⁷
Mr Anthony Scarcella
Mr Terence Stern OAM
Mr Cameron Thompson
Ms Elyse White
Mr Brett Williams

Appendix D – Mediators

Mr Ross Bell
Ms Lara Bishkov
Professor Laurence Boulle
Mr Calvin (Jak) Callaway
Mr Glenn Capel
Mr Philip Carr
Mr Joseph Catanzariti AM
Ms Janice Connelly
Ms Catherine Davidson
Ms Geri Ettinger
Mr David Flynn
Mr Robert Foggo
Ms Nina Harding
Ms Danae Harvey
Ms Kathryn Ireland
Dr Katherine Johnson
Ms Bianca Keys
Mr Stephen Lancken
Ms Margaret McCue
Mr Michael McGrowdie
Mr John McGruther
Mr Garry McIlwaine
Ms Elizabeth Medland
Mr Chris Messenger
Mr Michael Mills
Mr Dennis Nolan
Ms Philippa O’Dea
Mr Richard Perrignon
Mr Michael Perry
Mr Raymond Plibersek
Mr Anthony Scarcella
Mr Paul Sweeney
Mr John Tancred
Mr John Whelan
Mr Christopher Wood

⁷⁷ Ms Katherine Ruschen is solely a merit reviewer with the Commission, while all other merit reviewers also hold dual appointment as motor accidents members.

Appendix E – Medical assessors

Medical assessor	Speciality	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
SENIOR MEDICAL ASSESSORS				
Dr Douglas Andrews	Psychiatry	X	X	X
Dr John Baker	Psychiatry	X	X	X
Professor Ian Cameron	Rehabilitation Medicine	X	X	X
Ms Anna Castle-Burton	Occupational Therapy		X	
Dr Drew Dixon	Orthopaedic Surgery	X	X	X
Dr John Garvey	General Surgery	X	X	X
Professor Nicholas Glozier	Psychiatry	X	X	X
Dr Todd Gothelf	Orthopaedic Surgery	X	X	X
Dr Wayne Mason	Psychiatry	X	X	X
Dr Kerrie Meades	Ophthalmology	X	X	X
Dr Brian Williams	ENT	X	X	X
MEDICAL ASSESSORS				
Dr Nigel Ackroyd	General Surgery	X	X	X
Ms Lauren Alach	Occupational Therapy		X	
Dr Martin Allan	Psychiatry	X	X	X
Dr Timothy Anderson	Occupational Medicine	X	X	X
Dr Mohammed Assem	Rehabilitation Medicine	X	X	X
Dr Leslie Barnsley	Rheumatology		X	
Dr Melissa Barrett	Psychiatry	X	X	X
Dr Jennifer Batchelor	Neuropsychology		X	
Dr Timothy Berry	Psychiatry	X	X	X
Dr Michael Biggs	Neurosurgery	X	X	X
Dr Graham Blom	Psychiatry	X	X	X
Dr James Bodel	Orthopaedic Surgery	X	X	X
Dr Michael Bowler	Oral & Maxillofacial Surgery	X	X	
Dr Truls Bratten	Psychiatry	X		X
Dr Christopher Canaris	Psychiatry	X	X	
Dr Malcolm Capon	Ophthalmology	X	X	X
Professor John Carter	Endocrinology	X	X	X
Dr Donald Cawthorne	Orthopaedic Surgery	X		X
Dr Suneel Chamoli	Psychiatry	X	X	
Dr Norman Chan	Gynaecology	X	X	X
Dr Gerald Chew	Psychiatry		X	
Ms Fiona Condie	Physiotherapy		X	
Dr Michael Couch	Occupational Medicine	X	X	

Appendices (continued)

Medical assessor	Speciality	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
Dr James Cowlshaw	Gastroenterology	X	X	X
Dr David Crocker	Occupational Medicine	X	X	X
Dr Geoffrey Paul Curtin	Plastic and Reconstructive Surgery	X	X	X
Dr Michael Davies	Neurosurgery	X		X
Dr Russel Davies	Psychiatry	X	X	X
Dr Sathish Dayalan	Psychiatry	X	X	X
Dr David Dilley	Orthopaedic Surgery	X		
Dr Andrew Dimitri	Respiratory & Sleep Physician	X	X	X
Dr Alan Doris	Psychiatry	X	X	X
Dr Sylvester Fernandes	ENT	X	X	X
Adjunct Professor Robin Fitzsimons AM	Neurology	X	X	X
Dr Paul Friend	Psychiatry	X	X	
Dr Atsumi Fukui	Psychiatry		X	
Dr Peter GIBLIN	Orthopaedic Surgery	X	X	X
Dr Margaret Gibson	Occupational Medicine	X	X	X
Dr John Giles	Plastic and Reconstructive Surgery	X	X	X
Dr Ronald Gill	Psychiatry	X	X	X
Dr David Gorman	General Medicine	X	X	X
Associate Professor Christopher Grainge	Respiratory Physician	X	X	X
Dr Ron Granot	Neurology	X	X	X
Dr Rhys Gray	Orthopaedic Surgery	X	X	
Professor Graham Gumley	Orthopaedic Surgery	X	X	X
Dr Ankur Gupta	Psychiatry	X	X	
Dr Richard Haber	Cardiology	X	X	X
Professor Peter Haertsch	Plastic and Reconstructive Surgery	X	X	X
Dr Henley Harrison	ENT	X		X
Dr Peter Heathcote	Urology	X	X	X
Dr Samuel Mark Herman	Cardiology	X	X	X
Dr Roland Ronald Hicks	Orthopaedic Surgery	X	X	X
Dr Yiu-Key Ho	Orthopaedic Surgery	X	X	
Dr Adeline Hodgkinson	Rehabilitation Medicine		X	
Dr Alan Home	Occupational Medicine	X	X	X
Dr Peter Honeyman	Occupational Physician	X	X	X

Medical assessor	Speciality	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
Dr Michael Hong	Psychiatry	X	X	X
Dr Kenneth Howison	ENT	X	X	X
Dr Murray Hyde-Page	Orthopaedic Surgery	X	X	X
Dr John Ireland	Orthopaedic Surgery	X	X	
Dr Louis Izzo	Gynaecology		X	
Associate Professor Neil Jeyasingam	Psychiatry	X	X	
Dr Mark Jones	General Medicine	X		X
Dr Matthew Jones	Psychiatry		X	
Dr Clive Kenna	Musculoskeletal Medicine		X	
Dr Sikander Khan	General Surgery	X	X	X
Dr Edward Korbel	Urology	X	X	X
Dr John Korber	Diagnostic Radiology		X	
Dr Robert Kuru	Orthopaedic Surgery	X	X	X
Dr Mukesh Kumar	Psychiatry	X	X	
Dr Sophia Lahz	Rehabilitation Medicine	X	X	X
Dr John Lam-Po-Tang	Psychiatry	X	X	X
Mr Andrew Leaver	Physiotherapy		X	
Dr David Lewington	Rehabilitation Medicine	X		X
Dr Samuel Lim	Psychiatry	X	X	X
Dr Malcolm Linsell	Plastic and Reconstructive Surgery	X	X	X
Dr Jane Lonie	Neuropsychology		X	
Dr Frank Machart	Orthopaedic Surgery	X	X	X
Dr Anup Mangipudi	Occupational Therapy		X	
Dr Tommasino Mastroianni	Occupational Medicine	X		X
Dr Michael McGlynn	Plastic and Reconstructive Surgery	X	X	X
Dr David McGrath	Occupational Medicine	X	X	X
Dr Gregory McGroder	Occupational Medicine	X	X	X
Dr Ross Mellick	Neurology	X	X	X
Dr Nigel Menogue	Musculoskeletal Medicine	X	X	
Ms Lisa Middleton	Occupational Therapy		X	
Dr Geoffrey Miller	General Surgery	X	X	
Dr Robin Mitchell	Occupational Medicine	X	X	X
Dr Shane Moloney	Musculoskeletal Medicine		X	
Dr Patrick Morris	Psychiatry	X	X	X
Dr Abhishek Nagesh	Psychiatry	X	X	
Dr Jonathan Negus	Orthopaedic Surgery	X	X	X

Appendices (continued)

Medical assessor	Speciality	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
Dr Thomas Newlyn	Psychiatry		X	
Dr Bradley Ng	Psychiatry	X	X	
Dr Paul Niall	ENT	X		
Dr Paul Nichols	Dentistry	X	X	
Dr Christopher Oates	Occupational Medicine	X	X	
Dr John O'Neill	Neurology	X	X	
Dr Robert Payten	ENT	X	X	X
Ms Dawn Piebenga	Occupational Therapy	X	X	
Dr Roger Pillemer OAM	Orthopaedic Surgery	X		
Dr Andrew Porteous	Occupational Medicine	X	X	
Dr Sally Preston	Rheumatology		X	
Dr Thandavan Raj	ENT	X	X	X
Dr Adam Rapaport	General Surgery	X	X	X
Associate Professor Trudy Rebbeck	Physiotherapy		X	
Dr Loretta Reiter	Rheumatology	X	X	X
Dr Sharon Reutens	Psychiatry		X	
Dr Christopher Rikard-Bell	Psychiatry	X	X	X
Dr Samson Roberts	Psychiatry	X	X	
Dr Tania Rogers	Occupational Medicine	X	X	X
Dr Thomas Rosenthal	Occupational Medicine	X	X	X
Dr Doron Samuell	Psychiatry	X	X	X
Dr John Schmidt	Gynaecology	X	X	X
Dr Siddarth Sethi	Gastroenterology	X	X	X
Dr Farhan Shahzad	Occupational Medicine	X	X	X
Dr Glen Sheh	Rehabilitation Medicine	X	X	X
Dr Yu-Tang Shen	Psychiatry	X	X	X
Dr Doron Sher	Orthopaedic Surgery	X	X	X
Dr Alexey Sidorov	Psychiatry	X	X	X
Dr Himanshu Singh	Psychiatry	X	X	X
Dr Clayton Smith	Psychiatry	X	X	X
Dr Glen Smith	Psychiatry	X	X	X
Dr Peter Spittaler	Neurosurgery	X	X	X
Dr Michael Steiner AM	Ophthalmology	X	X	X
Dr Andrew Strokon	Orthopaedic Surgery	X		
Dr Aman Suman	Psychiatry	X	X	X
Dr Ash Takyar	Psychiatry	X	X	X
Dr Gerard Testa	Urology	X	X	

Medical assessor	Speciality	Workers Compensation Division	Motor Accidents Division	Police Officer Support Scheme Division
Dr Damon Thomas	Plastic Surgery	X		
Dr Stephen Thornley	Endocrinology	X	X	
Dr Philip Truskett	General Surgery	X	X	X
Dr Ahamed Veerabangsa	Rehabilitation Medicine		X	
Dr Surabhi Verma	Psychiatry	X	X	X
Dr Adrian Vertoudakis	Dentistry		X	
Dr Danielle Wadley	Orthopaedic Surgery	X		X
Dr Raymond Wallace	Orthopaedic Surgery	X	X	X
Dr Gerard Walsh	Psychiatry	X	X	X
Dr Tai-Tak Wan	Rehabilitation Medicine	X	X	
Mr Michael Ward	Physiotherapy		X	
Mr Andrew Webster	Physiotherapy		X	
Dr Ian Wechsler	Ophthalmology	X	X	X
Dr Nelukshi Wijetunga	Occupational Medicine	X	X	
Ms Jennifer Wise	Occupational Therapy		X	
Dr Alexander Woo	Orthopaedic Surgery	X	X	
Dr Steven Yeates	Psychiatry	X	X	X
Mr David Young	Physiotherapy		X	

Appendices (continued)

Appendix F – Rule Committee

Chair

Judge Gerard Phillips, President

Membership

Representative	Organisation represented
Ms Marie Johns, Division Head, Motor Accidents Division	Personal Injury Commission
Mr Glenn Capel, Division Head, Workers Compensation Division	Personal Injury Commission
Ms Josephine Bamber, A/Division Head, Police Officer Support Scheme Division	Personal Injury Commission
Ms Mandy Young	State Insurance Regulatory Authority (SIRA)
Ms Natasha Flores	Unions NSW
Ms Elizabeth Greenwood	Business NSW
Ms Elizabeth Welsh	Council of the NSW Bar Association
Mr Ross Stanton	Council of the NSW Bar Association
Mr Ian Jones	Council of the Law Society of NSW
Mr Shane Butcher	Council of the Law Society of NSW
Adjunct Professor Robin Fitzsimons AM	Royal Australasian College of Physicians (RACP), The Royal Australian and New Zealand College of Psychiatrists (RANZCP) and The Royal Australasian College of Surgeons (RACS)
Mr Andrew Reid	NSW Police Force

Secretariat

Ms Janet Wagstaff

Appendix G – Stakeholder Reference Group

Chair

Judge Gerard Phillips, President

Membership

Representative	Organisation represented
Ms Marianne Christmann, Principal Registrar	Personal Injury Commission
Ms Marie Johns, Division Head, Motor Accidents Division	Personal Injury Commission
Mr Glenn Capel, Division Head, Workers Compensation Division	Personal Injury Commission
Ms Genevieve Henderson	Australian Lawyers Alliance
Mr David Bullock	Australian Lawyers Alliance
Ms Catherine Pemberton	icare NSW
Ms Alice Nichol	Insurance Council of Australia
Mr Tom Lunn	Insurance Council of Australia
Mr Anthony Bowen	NSW Bar Association
Ms Lauren Sayer	State Insurance Regulatory Authority (SIRA) Motor Accidents Insurance Regulation
Mr Darren Parker	State Insurance Regulatory Authority (SIRA) Motor Accidents Insurance Regulation
Mr Timothy Concannon	The Law Society of New South Wales
Mr Leigh Davidson	The Law Society of New South Wales
Ms Katherine Toshack	The Law Society of New South Wales
Mr Greg Guest	The Law Society of New South Wales
Ms Sherri Hayward	Unions NSW

Appendices (continued)

Appendix H – CTP Insurer Reference Group

Chair

Ms Marie Johns, Division Head, Motor Accidents Division

Membership

Representative	Organisation represented
Ms Marianne Christmann, Principal Registrar	Personal Injury Commission
Ms Maja Maric	Allianz Australia Insurance Ltd
Ms Betty Taleski	Allianz Australia Insurance Ltd
Ms Diana Farah	Carroll & O’Dea Lawyers
Mr Scott Frazer	Enstar Australia
Ms Nancy Maksimovic	icare NSW
Mr Jamie Planes	icare NSW
Ms Lindsay Wilson	IAG
Ms Alice Nichol	Insurance Council of Australia
Mr Tom Lunn	Insurance Council of Australia
Mr John Cooper	Moray & Agnew
Ms Shannon Martin	QBE Insurance Group
Mr Peter Tran	Suncorp
Ms Michelle Graham	Suncorp
Ms Elizabeth Marinopoulos	Transport Accident Commission (TAC)
Ms Lauren Johnson	Transport Accident Commission (TAC)
Mr David Floro	Youi
Ms Courtney Archer	Youi

Appendix I – Medical Assessor Reference Group

Chair

Ms Marianne Christmann, Principal Registrar, Personal Injury Commission

Membership

Representative	Medical Assessor Type
Mr Luke Roberts, Director Medical Services	Personal Injury Commission
Mr John Barlow, Manager Medical Services	
Dr Douglas Andrews, Psychiatry	Senior medical assessor and specialty
Dr John Baker, Psychiatry	
Professor Ian Cameron, Rehabilitation Medicine	
Ms Anna Castle-Burton, Occupational Therapy	
Dr Drew Dixon, Orthopaedic Surgery	
Dr John Garvey, General Surgery	
Professor Nicholas Glozier, Psychiatry	
Dr Todd Gothelf, Orthopaedic Surgery	
Dr Wayne Mason, Psychiatry	
Dr Brian Williams, ENT	
Dr Michael Couch, Occupational Medicine	Medical assessor and specialty
Dr Margaret Gibson, Occupational Medicine	
Dr Chris Oates, Occupational Medicine	

Appendices (continued)

Appendix J – Mediator Reference Group

Chair

Mr Glenn Capel, Division Head, Workers Compensation Division, Personal Injury Commission

Membership

Representative	Mediator Type
Ms Marianne Christmann, Principal Registrar	Personal Injury Commission
Mr Philip Carr	Mediators
Ms Geri Ettinger	
Ms Nina Harding	
Ms Bianca Keys	
Mr John McGruther	
Ms Philippa O’Dea	
Mr Jak Callaway	
Mr David Flynn	

Appendix K – Letter from the Hon. Jihad Dib MP

OFFICIAL

The Hon Jihad Dib MP

Minister for Customer Service and Digital Government
Minister for Emergency Services
Minister for Youth Justice



Ref: MIN-00547-2025

The Hon Gerard Phillips
President
Personal Injury Commission

Re: Personal Injury Commission Annual Review 2024-25

Dear Judge Phillips *Gerard,*

Thank you for your letter regarding the Personal Injury Commission's 2024-2025 annual review and whether there is any additional information that should be included, in accordance with section 66(4)(e) of the *Personal Injury Commission Act 2020* (PIC Act).

For the 2024-2025 annual review, please also include:

- Any progress updates regarding suggestions arising out of the Statutory Review of the *Personal Injury Commission Act 2020*, and in particular any relevant updates on the data publication policy.
- A high level summary of amendments to the Personal Injury Commission Rules and a list of Procedural Directions issued in the financial year 2024-2025.

It may also be useful for your team to review the latest requirements for information departments and agencies should include in their annual reports, available in the [NSW Treasury Annual Reporting Framework](#).

I look forward to receiving the Commission's 2024-2025 annual review.

Sincerely

A handwritten signature in blue ink, appearing to read "Jihad Dib".

The Hon Jihad Dib MP

Minister for Customer Service and Digital Government
Minister for Emergency Services
Minister for Youth Justice

23/06/2025

OFFICIAL

Appendices (continued)

Appendix L – Staff profile

This section provides data on the number of full-time members, senior executives and staff working in the Commission.

	Head Count		
	FY23	FY24	FY25
Full-time members	20	20	20
Senior executives	6	6	6
Staff (including administrative and legal officers)	158	158	160
Grand total	184	184	186

Notes:

The head count is the number of people in each group, shown in the Commission's establishment report, at 30 June each year. The head count includes contractors.

The senior executives and staff of the Commission are employed by the Department of Customer Service pursuant to s 22 of the *Personal Injury Commission Act 2020*.

The full-time members are appointed by the Attorney General, pursuant to s 9 of the *Personal Injury Commission Act 2020*.

The remuneration of the President, members and senior executives is determined each year by the Statutory and Other Offices Remuneration Tribunal (SOORT):

- SOORT Judges and Magistrates Group Annual Determination
- SOORT Public Office Holders Group Annual Determination
- SOORT Public Service Senior Executives Determination.

The salaries of staff members are set under the Crown Employees (Administrative and Clerical Officers – Salaries) Award and the Legal Officers, Various Departments, Agreement No. 2375 of 1982.

Information about sessional members, medical assessors, merit reviewers and mediators can be found in appendices B-E.

Appendix M – Senior executive profile

In 2024–25, 5.0% of Commission employee-related expenditure was for senior executives compared to 4.9% in 2023–24.

Headcount	FY24				FY25			
	Female	Male	Total	Representation by women (%)	Female	Male	Total	Representation by women (%)
Band 4 (Secretary)								
Band 3 (Deputy Secretary)								
Band 2 (Executive Director)	1		1	100	1		1	100
Band 1 (Director)	2	3	5	40	2	3	5	40
Total	3	3	6	50.0	3	3	6	50.0

Appendices (continued)

Appendix N – Work health and safety

The Personal Injury Commission is committed to supporting the health, safety, and wellbeing of all its people, by implementing strategies that promote a safe, diverse, and inclusive workforce while also meeting legislative requirements. In the reporting period, the Commission undertook work to address psychosocial risks, uplift the mental health, wellbeing, and physical security of its staff and decision-makers, while also continuing to strengthen governance arrangements around work health and safety.

Mental Health and Wellbeing Framework

In 2023–24, the Commission launched its Mental Health and Wellbeing Framework (MHW Framework) which set out clear goals and objectives to support and improve the health and wellbeing of its people. The MHW Framework is focused on managing early mental health interventions effectively and ensuring the Commission meets its legislative obligations for managing psychosocial risks in the workplace.

In the reporting period, the Commission continued to implement the actions from its MHW Framework, supported by the Wellbeing Champions network. New terms of reference were established for the Commission's Wellbeing Champions to ensure staff wellbeing activities closely align with the goals and objectives outlined in the MHW Framework. The Wellbeing Champions hosted a range of events and activities for staff that were designed to foster a positive and connected workforce.

The MHW Framework includes a high priority goal to “develop targeted strategies to address specific psychosocial hazards, such as excessive workloads, burnout, vicarious trauma, and inappropriate client behaviour.” The nature of the Commission's work means its people, including members, mediators, merit reviewers, medical assessors, and staff, are often interacting with vulnerable people and navigating difficult or complex circumstances. The Commission's people may experience traumatic or stressful events directly, or be exposed to vicarious trauma through indirect means of exposure.

To support all of its people in the important public service they perform for the injured people of NSW and tribunal users, the Commission developed a Vicarious Trauma Framework (VT Framework) to guide the actions it takes to address the psychosocial risk presented by vicarious trauma for

the Commission's people. In the reporting period, the Commission held focus groups with staff and decision-makers to discuss their experiences of vicarious trauma in the Commission. Feedback gathered from these focus groups has informed the final VT Framework. An implementation plan is currently being developed which includes:

- onboarding a new people/employee assistance program provider with access to a support hotline for all staff and decision-makers
- developing resources and educational materials
- enhancing procedures and protocols
- measurement and reporting.

Health programs and services

Health programs and services available to all staff include:

- Employee Assistance Program (EAP) for all staff and their immediate family (with the program to be expanded to include all Commission decision-makers as noted above)
- annual flu vaccination program
- Fitness Passport program, providing access to a low-cost, flexible corporate gym and pool membership.

Physical security

The physical safety and wellbeing of our people and all tribunal users remains paramount. As a tribunal with many in-person dispute resolution events and medical assessments, the Commission has a range of stringent security controls in place at its premises at 1 Oxford St, Darlinghurst including:

- security guard on site during business hours
- duress buttons in reception areas and hearing rooms
- CCTV cameras in common areas
- signage installed to improve wayfinding and prevent accidental entry to restricted areas.

In the reporting period, CCTV cameras were installed in all hearing rooms as part of the Commission's security uplift program. To ensure the privacy of tribunal users, only video footage is captured (no audio) and no CCTV cameras are installed in breakout rooms or inside the medical suites.

The installation of additional CCTV cameras aligns the Commission’s security practices with those of other courts and tribunals and follows recommendations from the NSW Sheriff’s Office, NSW Police, and the Department of Customer Service safety and security team.

In 2024-25, the Commission continued its security education and training program for all staff and decision-makers. This included enhancing processes and procedures, conducting tailored security awareness sessions for all cohorts, and bespoke de-escalation and occupational violence and aggression training for all staff.

Work health and safety claims

Reportable claims⁷⁸ (excludes non-reportable claims⁷⁹)

	FY23	FY24	FY25
Total	3	1	0
MECHANISM OF INJURY			
Falls, trips and slips of a person	1	1	-
Body stressing	1	-	-
Mental stress	1	-	-

There were no prosecutions under the *Work Health and Safety Act 2011* during the 2024–25 financial year.

⁷⁸ Reportable claims are incidents where payments were made or estimates established.

⁷⁹ Non-reportable claims are incidents with no payments and nil estimates that are not or not yet classified as claims. They are excluded from reportable claims however can be reopened or become reportable claims in future and incur costs.

Appendices (continued)

Appendix O – Diversity and inclusion

The Commission values diversity and inclusion in its workplace. It should be noted that completion of Equal Employment Opportunity (EEO) data by employees is voluntary and as such under-reporting is likely.

Workforce diversity statistics⁸⁰

Workforce diversity group	Benchmark (%)	FY23 (%)	FY24 (%)	FY25 (%)
Women ⁸¹	50	67.2	68.0	71.5
Aboriginal and/or Torres Strait Islander people ⁸²	3.3	0.9	1.6	0.7
People whose first language spoken as a child was not English ⁸³	23.2	31.0	33.7	26.1
People with disability ⁸⁴	5.6	7.3	6.5	5.7
People with disability requiring work-related adjustment ⁸⁵	N/A	0.9	0.8	3.0

80 Statistics are based on NSW Public Service Commission Workforce Profile census data as of 22 June 2023, 20 June 2024 and 19 June 2025.

81 The benchmark of 50% for representation of women across the sector is intended to reflect the gender composition of the NSW community.

82 The NSW Public Sector Aboriginal Employment Strategy 2019–2025 takes a career pathway approach in that it sets an ambitious target of 3% Aboriginal employment at each non-executive grade of the public sector by 2025.

83 A benchmark from the Australian Bureau of Statistics (ABS) Census of Population and Housing has been included for 'People whose first language spoken as a child was not English'. The ABS Census does not provide information about first language but does provide information about country of birth. The benchmark of 23.2% is the percentage of the NSW general population born in a country where English is not the predominant language.

84 In December 2017, the NSW Government announced the target of doubling the representation of people with disability in the NSW public sector from an estimated 2.7% to 5.6% by 2027. More information can be found at: Jobs for People with Disability: A plan for the NSW public sector.

85 The benchmark for 'People with disability requiring work-related adjustment' was not updated.

Appendix P – Consultants

A consultant is an individual or organisation engaged to provide recommendations or high-level specialist or professional advice to assist in the decision-making by management. Their role is advisory in nature.

The Commission did not engage any consultants from 1 July 2024 to 30 June 2025.

Appendix Q – About this review

This review covers the Personal Injury Commission's operations from 1 July 2024 to 30 June 2025 and is available at:

pi.nsw.gov.au/resources/annual-review

The review was prepared with the help of an external graphic design agency. The following table sets out the production costs.

	Amount (\$)
Graphic design and artwork	\$10,900
Printing	\$2,100
Grand total	\$13,000

Appendix R – KPMG independent auditor’s report



Independent Auditor’s Report

To the Principal Registrar of the Personal Injury Commission

Opinion

We have audited the annual Operating Expenses and Income Statement (the **Statement**) of the Personal Injury Commission (the **Commission**) for the year ended 30 June 2025.

In our opinion, the accompanying **Statement** (Appendix A) of the Personal Injury Commission for the year ended 30 June 2025 presents fairly, in all material respects, in accordance with the attached **Basis of Preparation** (Appendix B).

The Statement comprises the **Commission’s** reporting in accordance with section 66 of the *Personal Injury Commission Act 2020* (NSW) (the **Act**).

The **Statement** comprises:

- The Operating Expenses and Income Statement for the year ended 30 June 2025; and
- accompanying **Basis of Preparation**.

Basis for opinion

We conducted our audit in accordance with *Australian Auditing Standards*. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Our responsibilities under those standards are further described in the *Auditor’s responsibilities for the audit of the Statement* section of our report.

We are independent of the **Commission** in accordance with the ethical requirements of the *Accounting Professional and Ethical Standards Board’s APES 110 Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the **Statement** in Australia. We have fulfilled our other ethical responsibilities in accordance with these requirements.

Emphasis of matter – basis of preparation and restriction on use and distribution

We draw attention to the attached *Basis of Preparation - Operating Expenses and Income Related to Each Operational Fund*, which describes the basis of preparation.

The Statement has been prepared by the Principal Registrar of the Commission for the purpose of meeting the Commission’s reporting requirements of the Act. As a result, the Statement and this Auditor’s Report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Our report is intended solely for the Principal Registrar of the Commission and for incorporation into the Commission’s Annual Review 2024-25 Document and should not be used by or distributed to any other party. We disclaim any assumption of responsibility for any reliance on this Auditor’s Report, or on the Statement to which it relates to any other party or for any purpose other than that for which it was prepared.

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Responsibilities of Management and Those Charged with Governance for the Statement

Management of the Commission are responsible for:

- the preparation and fair presentation of the Statement in accordance with the reporting requirements of the Act to the extent described in the attached Basis of Preparation - Operating Expenses and Income Related to Each Operational Fund.
- determining that the basis of preparation described in the attached Basis of Preparation - Operating Expenses and Income Related to Each Operational Fund is appropriate to meet the requirements of the Act.
- implementing necessary internal control to enable the preparation and presentation of the Statement that is free from material misstatement and non-compliance with the Act, whether due to fraud or error.
- assessing the Commission's ability to continue as a going concern and whether the use of the going concern basis of accounting is appropriate. This includes disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless they either intend to liquidate the Commission or to cease operations, or have no realistic alternative but to do so.

Those charged with governance being the Principal Registrar is responsible for overseeing the Commission's financial reporting process.

Auditor's responsibilities for the audit of the Statement

Our objective is:

- to obtain reasonable assurance about whether the Statement as a whole is free from material misstatement and non-compliance with the Act, whether due to fraud or error; and
- to issue an Auditor's Report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with *Australian Auditing Standards* will always detect a material misstatement and non-compliance when it exists.

Misstatements can arise from fraud or error. They are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this Statement.

A further description of our responsibilities for the Audit of the Statement is located at the *Auditing and Assurance Standards Board* website at: http://www.aasb.gov.au/auditors_responsibilities/ar4.pdf. This description forms part of our Auditor's Report.



KPMG



Leann Yuen

Partner

Sydney

23 September 2025

Appendices (continued)

Appendix 1

Operating expenses and income related to each operational fund

Personal Injury Commission	2025 \$'000	WCOF \$'000	MAOF Scheme 2017 \$'000	MAOF Scheme 1999 \$'000	POSS Scheme 2024' \$'000
EXPENSE					
Personnel services					
Salaries and allowances (including annual leave) ⁸	28,524	12,825	14,632	948	119
Agency short term staff ⁹	1,269	522	702	45	
Total personnel services	29,793	13,347	15,334	993	119
Other operating expenses					
Accommodation expenses	6,130	3,033	2,917	180	
Payments to service partners ^{10 11}	40,516	16,795	22,278	1,443	
Software expenses	1,569	761	759	49	
Other miscellaneous expenses ¹²	5,835	3,112	2,556	166	
Total other operating expenses	54,059	23,701	28,514	1,847	
Total expenditure	83,852	37,048	43,845	2,840	119
INCOME					
Contributions (WCOF)	37,048	37,048			
Contributions (MAOF Scheme 2017)	43,845		43,845		
Contributions (MAOF Scheme 1999)	2,840			2,840	
Contributions (POSS Scheme 2024)	119				119
Total income	83,852	37,048	43,845	2,840	119
Net result					



Appendix 2

Basis of Preparation – Operating Expenses and Income Related to Each Operational Fund

The Personal Injury Commission (Commission) resolves dispute applications. The Personal Injury Commission (PIC) Act section 66(4)(d) requires the Annual Review to include the extent to which the operations of the Commission are funded by each operational fund. The operational funds are specifically defined in s66(5) as:

- (a) The Motor Accidents Operational Fund (the SIRA Fund) under the Motor Accident Injuries Act 2017 (NSW) (MAOF Scheme 2017);
- (b) The Motor Accidents Operational Fund under the Motor Accidents Compensation Act 1999 (MAOF Scheme 1999);
- (c) The Workers Compensation Operational Fund under the Workplace Injury Management and Workers Compensation Act 1998 (WCOF); and
- (d) The Police Officer Support Scheme (POSS).

The attached *Operating Expenses and Income Related to Each Operational Fund* statement is prepared on accruals basis. The basis of preparation associated with each financial caption including the basis used to allocate expenses and income to each of the four operational funds is described below.

Expense recognition

Expenses are expenses as incurred when recharged by the relevant bodies. As the Commission does not operate a bank account, SIRA settles payments on the Commission's behalf. Should the Commission establish its own bank account, all payments will be settled through the Commission's bank account.

Personnel Services

Wages, salaries, superannuation, and annual leave

Operational staff are DCS employees, paid by the Department and subject to Department employee policies. The Commission's President and Members are not DCS employees, but are Statutory Appointees, who are paid through the Department's payroll functions.

Wages and salaries, including non-monetary benefits and annual leave expected to be settled within 12 months of the reporting date are recognised in respect of employee's services up to the reporting date. Annual leave expense represents the movement in the annual leave provision as at the beginning of the year compared to the provision as at reporting date as provided by the DCS.

Superannuation expense is calculated in accordance with the Superannuation Guarantee Charge of 11.5% per annum as applied to the wages and salaries expense incurred and recharged throughout the year. Payroll tax is calculated based on the NSW State rate of 5.45% applied to the gross salary costs for each operational fund.

Other personnel expenses

Comprises of contractor expenses as recharged by Contractor Central. Contractor expenses are directly allocated to the operational fund which engaged the services of the individual contractors as identified by the Commission.

Other Operating Expenses

Accommodation Expenses

Accommodation expenses reflects the rental charge for the premises that the Commission inhabits. Rental expense is applied in proportion with the income allocated to each operational fund under the Commission's income allocation methodology. For the 2025 year, this includes the costs associated with the refurbishment of premises occupied by the Commission and recharged from DCS.

Appendices (continued)

Payments to Service Partners

Payments to service partners comprise those to Sessional Members, Medical Assessors, Mediators, and sessional Merit Reviewers. Sessional Members, Mediators, Merit Reviewers and Medical Assessors ('Service Partners') are appointed on a three (3) year basis and paid on an agreed fee schedule for work performed. The ATO issued a Private Tax Ruling in 2020 that requires Sessional Members and Medical Assessors' earning be subject to PAYG income tax and superannuation. The Department's payroll function is managed in-house, with the SAP Payroll module used to pay Service Partners.

Payments to Service Partners are processed in the Commission's Case Management System. Service Partners upload their payment claims in the case management system. The claims are reviewed by the relevant case managers and approved. Every two (2) weeks the Commission extracts the approved invoices from the system and transfers this to the Department's payroll function who calculate the income tax component and superannuation liability.

Software Expenses

This reflects the incumbent case management system and supporting software packages. Costs incurred are expensed upon receipt of invoice. Where software expenses are prepaid, the expense is recognised upon receipt of invoice. Prepaid expenses are not capitalised and deferred over the period of service but are expensed as incurred.

Other Miscellaneous Expenses

Other miscellaneous expenses represent other operating expenses incurred, and the development, deployment, maintenance and enhancements of the single digital platform, and medical suites operations.

Expense allocation methodology

Expenses are allocated to each operational fund based on each individual employees assigned cost centre, being Motor Accidents, Workers Compensation, Police Officer Support Scheme and 'Generic'. Those in 'Generic' are allocated based on the proportion of cases finalised. Case finalisation represents the actual cases finalised as of 31 May each year.

Income

As the Commission does not have a bank account, SIRA receipts all income on the Commission's behalf. Should the Commission establish its own bank account, all income will be receipted through the Commission's bank account.

Contributions

Contributions are recognised upon the Personal Injury Commission's completion of the identified performance obligations. The performance obligation is satisfied over time as services are provided by the Commission.

Contributions are concentrated to SIRA which represents 99.9% of the income generated by the operational funds.

Income allocation methodology

Income is allocated to each fund based on the cases which generated the services.

Appendix S – Cyber security attestation statement



Personal Injury
Commission

New South Wales

Personal Injury Commission of New South Wales Cyber Security Attestation for Financial Year 2024–2025

1. Assurance Assessment Against Mandatory Requirements

We hereby attest that an assurance assessment has been conducted against all Mandatory Requirements in the NSW Cyber Security Policy for the financial year 2024–2025.

The assessment covered the following areas:

- Compliance with established cyber security policies and procedures
- Implementation of required security controls
- Effectiveness of the security measures in place.

The Commission has effectively managed cyber security risks in alignment with the mandatory requirements set by Cyber NSW. This attestation is supported by comprehensive evidence demonstrating sustained and maturing cyber security measures. Building upon prior years' work, the Commission has advanced its maturity through platform hardening, enhanced authentication controls, advanced threat detection, and robust data governance for its single strategic digital platform, Pathway.

2. Attestation on Cyber Security

2.1 Assessment of Cyber Security Risks

The Commission maintains a close strategic partnership with the Department of Customer Service (DCS) Cyber and Information Security Office (CISO), continuously refining the Commission's Cyber Risk Register, conducting risk assessments, and validating control effectiveness. These measures ensure the Commission's cyber security posture remains contemporary and responsive to evolving threats.

2.2 Cyber Security Risks with High or Extreme Residual Rating

During the 2024–2025 reporting period, the Commission has maintained a proactive approach to identifying and managing risks. All identified risks, including high or extreme, were actively monitored and addressed through the Commission's Cyber Security Framework and three-year roadmap.

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Appendices (continued)

2.3 Residual Risks Exceeding Agency's Risk Appetite

The Commission has not identified any unmanaged residual risks exceeding its risk appetite. All relevant risks are documented, monitored, and subject to ongoing mitigation activities.

2.4 Reporting Compliance

The Commission has adequately reported its cyber security assessment in compliance with the NSW Cyber Security Policy. Reporting includes:

- Documentation of identified risks and vulnerabilities
- Descriptions of implemented controls and their effectiveness
- Summaries of incidents and responses.

No reportable cyber security incidents occurred within the Commission during the 2024–2025 reporting year.

2.5 Governance Forums

Cyber security governance remains firmly embedded within the Commission's leadership and operational structures. Strategic control and accountability are retained by the Commission, supported by shared services arrangements with CISO and other third-party providers. Cyber security is a standing agenda item at governance forums, covering:

- Regular updates on the status of cyber security measures
- Review of risk assessment findings
- Decisions on improvements and resource allocation.

3. Continuous Improvement in Cyber Security Governance and Resilience

The Commission has established a formal Cyber Security Framework underpinned by a three-year roadmap consolidating governance, risk management, capability uplift, and continuous improvement.

Ongoing improvement activities in 2024–2025 included:

- Formalising the Major Cyber Incident Response Plan and conducting incident simulations
- Expanding penetration testing activities to ensure operational resilience
- Delivering targeted training and awareness initiatives for staff, decision-makers, and external users, including phishing simulations and cyber awareness campaigns
- Engaging external stakeholders such as insurers and legal practices to embed secure practices in system usage
- Overseeing the SOC 2 Type II certification process for the Commission's platform vendor, SBC, to enhance assurance of third-party controls.

Sign-off

Personal Injury Commission Senior Executive

Name: Judge Gerard Phillips

Title: President

Signature:

Date: 22 August 2025



Personal Injury Commission Cyber Security Officer

Name: Sam Mackay

Title: Chief Information Security Officer

Signature:

Date: 27/08/2025



Appendices (continued)

Appendix T – Accessing the Commission’s information

Types of information held by the Commission

The Commission collects information to register applications and make decisions about personal injury disputes. This includes personal information, health information, and other information provided by the parties and their legal representatives in Commission proceedings, including but not limited to:

- claim forms
- medical and investigative reports
- injury management plans, clinical notes and medical certificates
- witness statements
- notices issued under workers compensation or motor accidents legislation
- complying agreements
- receipts
- wage information and payslips.

The Commission also holds information relating to its decisions, proceedings, services, and administration.

Protecting personal and health information

The Commission has obligations under the New South Wales *Privacy and Personal Information Protection Act 1998* (PPIPA) and the *Health Records and Information Privacy Act 2002* (HRIPA) to protect the privacy rights of customers, service providers, staff, and members of the public. The Commission takes these responsibilities seriously.

The PPIPA and HRIPA contain principles about managing personal and health information which the Commission must comply with. These principles are legal obligations that describe what the Commission must do when it collects, stores, uses, or discloses personal and health information. This is to ensure safeguards are in place to protect personal and health information from loss, unauthorised access, use, modification, or disclosure, and against all other misuse. The Commission complies with these obligations.

While anyone can seek access under the *Government Information (Public Access) Act 2009* (GIPA Act) to government information that is held by the Commission, there are certain considerations taken into account before any information is released. The Commission is unlikely to disclose the personal or health information of another person. Many of the Commission’s records may also be considered ‘excluded information’ under the GIPA Act and therefore may not be accessible to third parties.

Information that is publicly available

The GIPA Act requires the Commission to make certain information, known as ‘open access information’, publicly available. Publicly available information which can be found on the Commission’s website includes details about our structure and functions, and a range of policy documents.

The GIPA Act also authorises the proactive release of information unless there is an overriding public interest against disclosure of the information. Accordingly, the Commission has made the following information publicly available, free of charge, on the website:

- procedural directions and guidelines
- decisions
- guides and codes of conduct
- policies
- annual reviews
- papers and presentations
- bulletins and fact sheets.

How to access the Commission's information

If the information sought is not available on the Commission's website, there are, under the GIPA Act, two mechanisms for the release of government information that may be used: an informal request or a formal access application.

An informal request can be made to the Commission for the release of certain information. The Commission is not obliged to consider an informal request but may do so if possible.

Much of the information that is held by the Commission, other than the publicly available information referred to above, relates to the personal information of individuals and is likely to be exempt from disclosure under the GIPA Act. However, a formal access application may be made using the formal access application form.

Applications for internal review of the conduct of the Commission under s 53(1) of the PPIPA

The Commission received two applications in the 2024–25 reporting year under s 53 of the PPIPA.

Government Information (Public Access) statistics

All agencies are required to report annually information and data on their obligations under the GIPA Act. For the purposes of these reporting requirements, the Commission is treated as part of DCS (GIPA Regulation Schedule 3) and reports the relevant data to DCS for inclusion in the DCS Annual Report.

During 2024–25, the Commission received seven access applications to release information under the GIPA Act. There were four invalid applications during this period.

Of the three valid applications received, two were granted access in full and one was granted access in part. An internal review of the application granted access in part resulted in the remaining information being released.






Personal Injury
Commission
New South Wales



New South Wales

Personal Injury Commission

Personal Injury Commission

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