



Legal Aid
Agency

Case Management Operational Performance

July 2021

The contents of this pack have been created by local operational teams and may vary from official statistics due to the method and scope of data collection. It is intended to give an overview of current performance, as experienced by the teams. This document should not be released outside of agreed channels of circulation.

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Legal Aid Agency

Civil Applications Operational Performance

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Working with others to achieve excellence in the delivery of legal aid



Legal Aid Agency

Exceptional & Complex Cases Team Operational Performance

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Legal Aid Agency

Civil Billing Operational Performance

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Civil Applications Operational Performance

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(Previously Very High Cost Cases)

Contains data on intakes, refusals and rejects.

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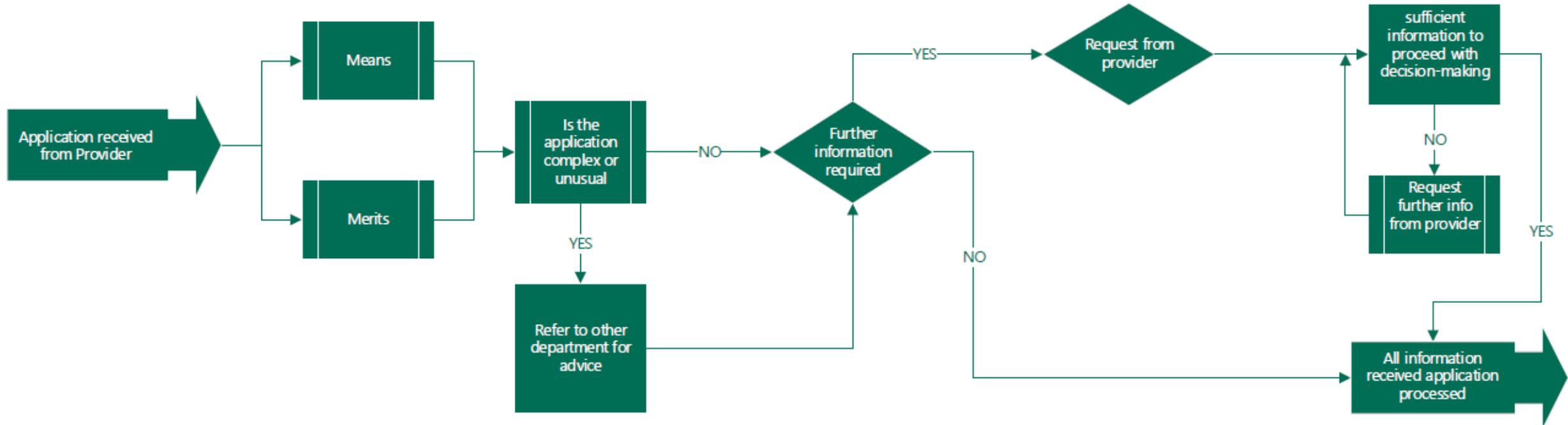
Section 1: Civil Applications

Please note that we are currently reviewing with our Management Information team to see if we can provide data on applications that has not yet been officially published.



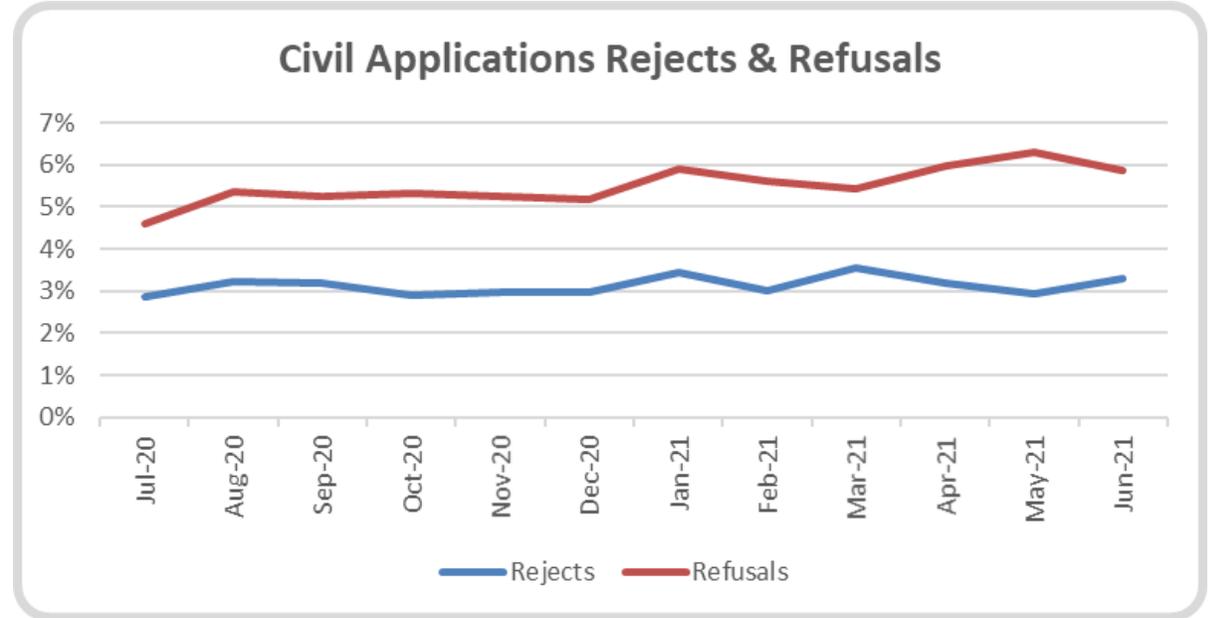
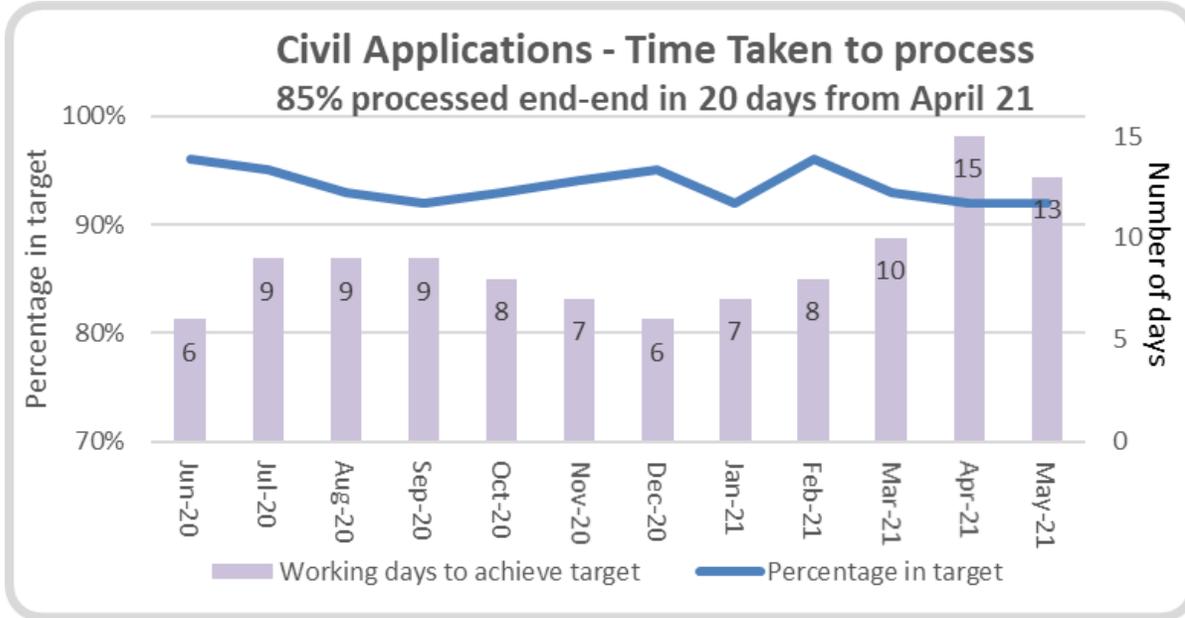
How does our end to end process work?

Please see below a process map, which illustrates how applications are generally dealt with when they come into the agency.



Please note, that the order in which Means and Merits are dealt with can differ. If the application is delegated functions, then the Merits are dealt with first. If it is a substantive application, then the means are dealt with first.

Civil Applications – time taken



- The target is to process 85% of all applications in 20 working days. This includes all applications (i.e. delegated and emergency)
- End to end time taken for processing applications was at 6 days at the start of the 2020 financial year and increased to 9 days over the summer (due to system issues and annual leave). We saw a further increase in April 21 as the target changed from 75% to 85%.
- We carried out some investigation which has now concluded. We found the majority of cases processed outside 20 working days was due to delays in information being provided. This is an end to end measure and therefore will include time spent waiting for documents from Providers..

Overall, we grant 90% of applications and we refuse 5%. The other 3% are withdrawals/rejects for further information or declines of funding from the client. The remaining 2% are where the provider has asked us to withdraw the application.

New processing targets for 2021-22;

- 85% of civil applications processed end-to-end (excluding the most complex) in 20 working days.
- 75% of applications for civil amendments (excluding Exceptional & Complex Cases) end-to-end in 20 working days



Guidance, Hints & Tips:

Help us consider your merits application in full by;

Non molestation orders – if you have uploaded the statement to court and it doesn't detail any recent police involvement then please provide the information regarding this in the merits report or on a separate document. We have to ensure paragraph 10.29 of the Lord Chancellors guidance is complied with.

SCA certificates and deprivation of liberty under inherent jurisdiction – if an application is made for a deprivation of liberty order under the inherent jurisdiction of the high court and this is to be heard within ongoing care proceedings, then this can be added to the existing SCA certificate. This can be done by adding a hearing limitation and free-typing the proceeding wording. If it is timetabled separately from care proceedings then a means and merits application for inherent jurisdiction application must be submitted.

Part 1 injunction Anti-Social Behaviour Crime and policing act – applications for representation on Part 1 injunction proceedings should be submitted under your residual contract and NOT housing. Please select the nuisance matter type.

Committal – funding for respondents to committal applications is funded under criminal legal aid and not civil legal aid. Applicants for committal and respondents to enforcement applications where liberty is not at stake are funded under civil legal aid.

Appeals to the county court under section 204 Housing Act 1996 – the correct proceeding option to select is 'Homelessness-Housing Act 1996-Housing'.

Article 21 of the Child Abduction and Custody Act 1985 – when representing the applicant and providing a letter from ICACU, please submit via CCMS as a Section 8 Child Arrangement (contact) Order for Full Representation limited to Final Hearing. You can email Peter Reed, Stephen Spittlehouse or Pamela Read to ensure the application is appropriately identified.

Section 37 Reports in Private Law Proceedings – legal aid is available pursuant to Paragraph 1(b) of Schedule 1, Part 1 LASPO. In the circumstances where the Court directs the Local Authority to produce a Section 37 report the client may apply for funding limited to this element of the proceedings. Please select Children – Miscellaneous Proceedings, Represented on s37 Report Application. The application should be limited to s37 Report. If the Local Authority does not bring their own proceedings once the Report has been filed, the legal aid funding will come to an end. If the Local Authority does bring proceedings, the separate appropriate application for legal aid should be submitted.

Housing Possession Proceedings – please ensure a detailed statement of case and all relevant supporting evidence is provided when making an application for representation within possession proceedings. This should include the Particulars of Claim/Claim Form, statement/affidavit in support, any notice to quit/notice seeking possession and the statement setting out details of your client's defence.

Civil Application fixer queries

May – June 2021

Number of queries down from the previous two months.

42 queries submitted; 40 Merits, 2 Means

- **24 were accepted as fixer issues** and dealt with by the team
- **2 were finance queries** and redirected
- **16 were not fixer queries** as the LAA had not made an error. Advice still provided to provider on what they needed to do.

Fixer and Claim fixer communication still in development to be shared shortly.

Varied error reasons but one notable trend; 6 items related to higher delegation cost request. We are continuing to work with caseworkers and the digital team to rectify these issues.

Feedback provided to caseworkers in all instances where an error has occurred.

*Fixer is an email service used by providers where they feel an error has been made by the LAA.

**Merits and Means info combined this time due to low volumes of Means queries.

Refusals

Top 20 Refusals and Reasons – last 6 months

Reason for Refusals	Grand Total	%
Special reasons - Refusal	1437	29%
Insufficient Information	371	7%
Evidence of DV doesn't justify funding	224	4%
Out of Scope - Criteria not satisfied	185	4%
Means Evidence Non Co-Op - DF	179	4%
No Attempt to settle	129	3%
Cost Benefit (Family)	128	3%
Not retrospective	127	3%
Out of Scope - Income	123	2%
Expert - special reason	119	2%
Means Evidence Non Co-Op	116	2%
Prospects of Success - poor	111	2%
Out of Scope - Capital	105	2%
Special Reasons	104	2%
Cost Benefit (proportionality)	97	2%
Within the Present Scope	85	2%
Out of Scope of LASPO Sch 1 Pt1 Excl Pt2	78	2%
Justify on Taxation	71	1%
Incorrect Limitation	64	1%
Duplicate Case	60	1%

Please note that 'special reasons' is a reason generated on CCMS which allows caseworkers to type free text into the box. It is used when none of the pre-set refusal reasons cover exactly what caseworkers want to say. As such, there are many reasons which fall into this category. Caseworkers use the option of free text to explain why exactly we can't grant i.e. what we are lacking.

Project underway looking at refusal reasons in CCMS. This will involve reviewing what we currently have and potentially adding more which may be missing. It is hoped this will remove the need to rely on 'Special Reasons' and provide more data around refusals.

Section 2: Legal Appeal Requests

Contains data on legal appeal requests



Civil Legal Appeals Data – Processing times for Adjudicator referrals only (May - June 2021) – Working days

		Internal Review (excluding ECCT and immigration)	Independent Funding Adjudicator
Total Processed		534	54
Decision	Grant	311	19
	Part-grant	29	3
	Refuse	113	32
	Reject	58	0
	Withdrawn	23	0

	Days taken for Adjudicator decision
Average	5.3
Minimum	1
Maximum	14

	Days taken to process IFA referrals in full from date of receipt of original appeal
Average	21.7
Minimum	3
Maximum	82

The case that took 82 days was a High Cost Case which involved multiple requests for further information from the provider due to the complexity of the case which was granted by IFA on 10th May 2021

New processing targets for 2021-22;

- 95% of civil application appeals (excluding Exceptional & Complex Cases) that do not require an external adjudicator to be processed within 20 working days



Breakdown of LAA decision & Adjudicator decision by category of law

Internal Review (excluding ECCT and immigration)

Category of Law	GRANT	PART GRANT	REFUSE	REJECT	WITHDRAWN
Children High Court Jurisdiction	3		2		
Children Miscellaneous			2	1	
Community Care		1	1		
Crime Civil	2				
Divorce, Nullity & Judicial Separation				1	1
Domestic Abuse	80	3	10	14	
Financial - Children	1				1
Financial & Property - Matrimonial	12	2	3	3	
Housing	34	6	15	6	
Judicial Review	2		1	1	
Private Law Family	45	4	15	8	3
Public Law Children	19		4	2	2
Section 8	112	13	60	22	15
Special Children Act	1				1
Grand Total	311	29	113	58	23

We have made changes to our appeals tracker to breakdown the Private Law Family categories of work. As this change was introduced during May some of the data has not been broken down into the individual categories.

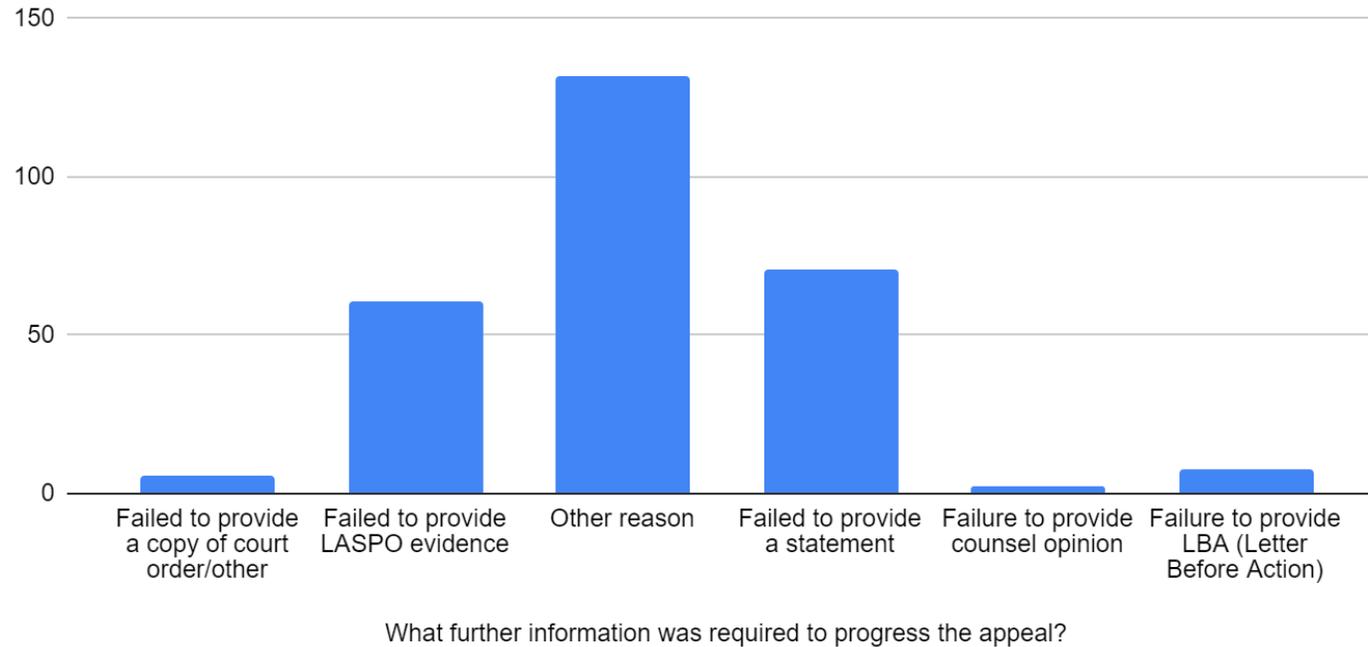
Independent funding adjudicator decision

Category of law	Grant	Part Grant	Refuse
AAP	2		8
Community Care	1		
Education	1		
HCC	1		
Housing	3	1	5
Immigration	4		1
Judicial Review	1		
Private Law Family	6	1	15
Public Law Children			3
Grand Total	19	3	32

Legal Appeals Decision data – Further information requirements by the LAA

(excluding ECCT and Immigration)

Further information requirements by the LAA to progress the appeal

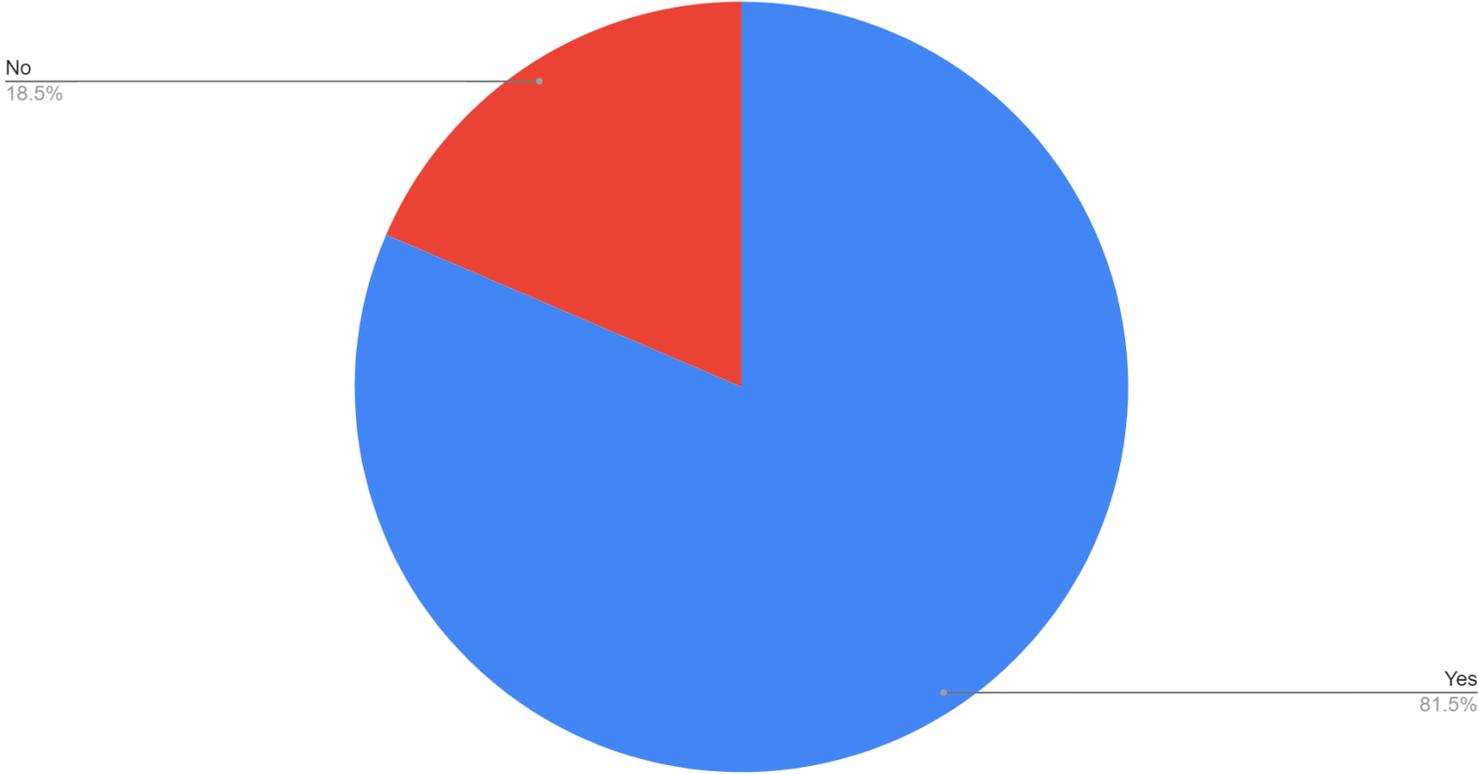


Sample of "other" reasons

- Failure to provide evidence that attempts to settle have been made
- Failure to provide breakdown of costs
- Failure to provide C100 form that was requested
- Failure to provide evidence of undertaking breaches
- More details required on breach of undertaking

Legal Appeals Decision data – Initial Caseworker decisions on applications & Independent adjudicator decisions – May/June 2021

Was the initial decision of the caseworker processing the initial application correct?(information provided from caseworkers processing appeal - excluding ECCT and Immigration)



Rate for initial caseworker decision on initial application not being correct for March/April was 19.4%

Analysis of IFA Grant Decisions (8th February – 17th May 2021)

- The sample of referrals to be reviewed consisted of all IFA decisions reported between 8 February 2021 and 17 May 2021 where the IFA had recommended any overturning of a determination. In total the IFA recommended the overturning of the initial determination wholly or partially on twenty-eight separate cases that form the sample in this period.
- Of the twenty-eight IFA decisions between 8 February 2021 and 17 May 2021, seventeen of the reported referrals were made by specialist teams (ECCT, High Cost Family). Of these seventeen, five cases involved Independent Costs Assessors on High Cost Family cases and twelve cases related to applications and amendments against public bodies considered by ECCT.
- Of the remaining eleven referrals to an IFA, two were sent by a Technical Lead.
- That the sample should be effectively reduced to consideration of only nine cases reported in a thirteen week period would indicate that there is no significant wider issue with regard to failure demand by way of delay or incorrect decision making and shows that caseworkers are not making unnecessary referrals in any significant volume given the total number of legal appeal requests actually processed in the same period.

Analysis of IFA Grant Decisions (8th February – 17th May 2021)

Family Proceedings

- Within the 'Family' category of law three cases concern 'Section 8 orders' matter type and three cases concern 'Domestic Abuse' matter type. The six cases involve six different legal services providers and four individual reviewing caseworkers. The cases concern different types of submission at different stages in the certificate lifecycle from initial application, to amendment to add additional proceedings, to an amendment to include final hearing.
- In the majority of those six overturned decisions, the IFA did not identify any error or feedback for the LAA, but that they were applying a greater degree of discretion in their decision making.

Housing Proceedings

- Within the 'Housing' category of law there are only three cases. Two cases involve disrepair and one case involves a Homeless Appeal which is being brought in the Court of Appeal. The three cases involve three different legal services providers and three different reviewing caseworkers.
- The IFA recommended a partial-grant in one case to enable a specific piece of work to be completed. Another case concerned Court of Appeal proceedings where the IFA indicated prospects could not be deemed better than borderline. Feedback in the final case indicated the LAA had misunderstood the facts of the case.

Analysis of IFA Grant Decisions (8th February – 17th May 2021)

Summary

Given the volume of applications and amendments processed in this time and the number of legal appeal requests submitted via CCMS in a thirteen week period it is considered that the frequency of an IFA referring the overturning of a determination of the LAA on appeal is small. No specific training needs in any areas of law were identified, frequently the IFA stated that the reviewing caseworker was not in error. Even in cases where the determination is fully overturned the feedback from the IFA is often that the correct test is being applied, however, in the particular circumstances of the case, the IFA is minded to exercise a more generous discretion in considering subjective tests such as the proportionality test and the reasonable private paying individual test.

Appeal Feedback For Caseworkers

- Following a review of our data and governance we have tightened up our feedback process when we identify the initial decision to refuse/part-grant funding was incorrect.

Developed
standardised
format for
capturing
feedback



Feedback
delivered by
Team Managers.
Constructive
conversation on
learning &
development to
identify where
there is a need for
additional
training and
support



Reduce
incorrect
refusals,
allowing us to
get it right
first time

Section 3: Civil Means



Top 5 Reject Reasons

1. Passported/non-passported clients – when the means report doesn't tally up with this declaration

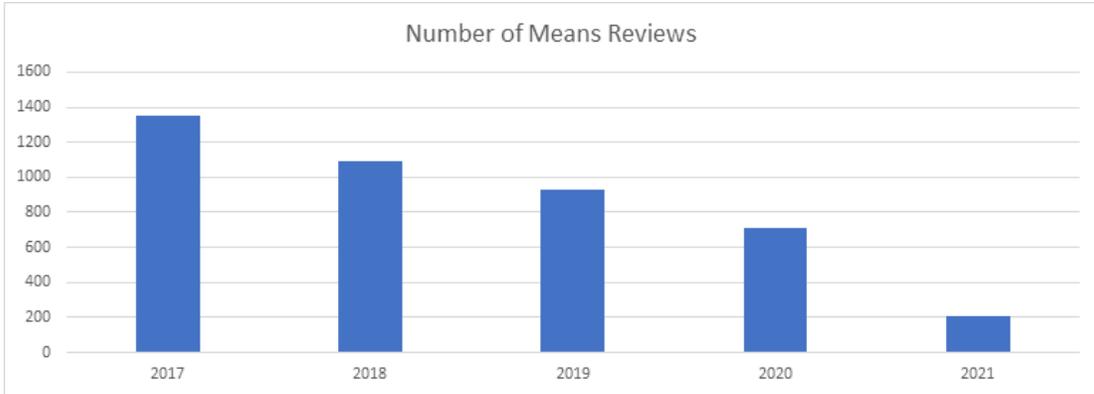
2. Assessment figures by LAA don't tally with the figures outlined in the means report

3. Client self-employed but this isn't detailed in the means report

4. Undeclared partner

5. Undeclared property

Means Reviews



Refusal Reason	2021	%
Disposable Capital	1	1%
Disposable Income	12	10%
Requested information/documentation has not been provided in a reasonable time	6	5%
See additional details	41	35%
Capital assessed / reassessed	23	20%
Income has been assessed/re-assessed and is ineligible	34	29%
Disposable Capital	1	1%

Guidance, Hints & Tips:

Help us consider your means assessment in full by;

- 1. Frequency of Wages and/or Benefits** - Entering the wrong frequency for wages or state benefits means your client can appear eligible for funding when this may not be the case. State benefits are usually paid weekly/2weekly or 4-weekly and not monthly. Wages may be paid weekly/2-weekly/4-weekly or per calendar month.
- 2. Childcare** - A child care deduction can be given when the client is absent from home for work or study. We will consider the usual term-time childcare costs and require evidence of the payments made by the client (e.g. receipts/payments evidenced on bank statements).
- 3. Housing Costs** - We require evidence of the current rent/mortgage liability and of the payments made by the client. Please also highlight all corresponding payments on the client's bank statements. If the client pays board and lodgings please provide a letter the person the payments are made to confirming the amount paid and how the payments are apportioned to rent, food, utilities and other incidentals. Please also highlight all corresponding payments on the client's bank statements.
- 4. Passported Applications** - Please ensure the client's name, date of birth and national insurance number are entered accurately as this will affect the result of the benefit check and is one of the main reasons for unconfirmed checks and requests for information on passported applications. If the check is not confirmed a full benefit award letter is required.
- 5. Bank Statements Required** - Bank statements should cover the three months preceding the computation date. Statements need be legible and continuous, have a visible name and account number and show all transactions and balances.
- 6. Explaining Transactions on Bank Statements** - Most further information requests regarding transactions on bank statements relate to credits from unknown sources or transfers to and from undeclared accounts. To reduce further information requests, where possible, please highlight and explain any transactions or transfers on the client's bank statements, particularly when they are;
 - a) Marked with the client's name and/or an account number that does not correspond to any of the declared accounts.
 - b) Regular cash credits or credits from the same source/individual.
- 7. Responses to Further Information requests** - Please ensure all questions are addressed and answered in requests for further information, as failure to do so will result in additional requests and delays in the application process.
- 8. Responding to Tasks and Notifications** - Please amend the task status when replying to notifications, i.e. to documents sent, as it will not return to us until the status is changed. Please note updating a task status to acknowledged will not return the request to us and closes the task.
- 9. Submitting Outcomes – Case Concluded** - As soon as the case has concluded please submit your outcome codes. This will prevent unnecessary requests for a means reassessment and the client may still be paying contributions which may no longer be required. You do not need to wait until the bill is ready to submit.
- 10. Ensuring Your Request is Actioned Promptly** - Please submit the correct task relating to your request, e.g. if a review of the means assessment is required please submit a request means review task. This will ensure the correct team receives the request promptly and will avoid delay.

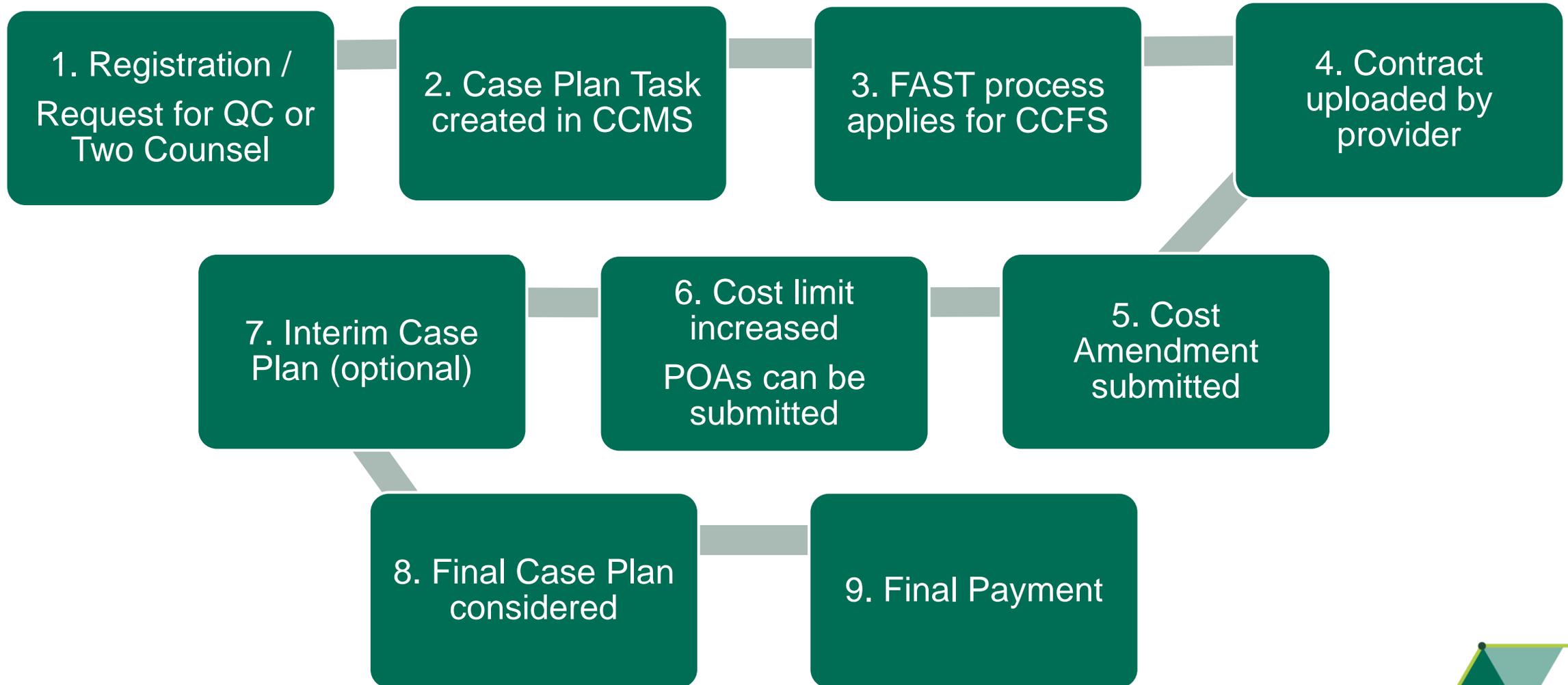
Section 4: High Cost Family

(Previously Very High Cost Cases)

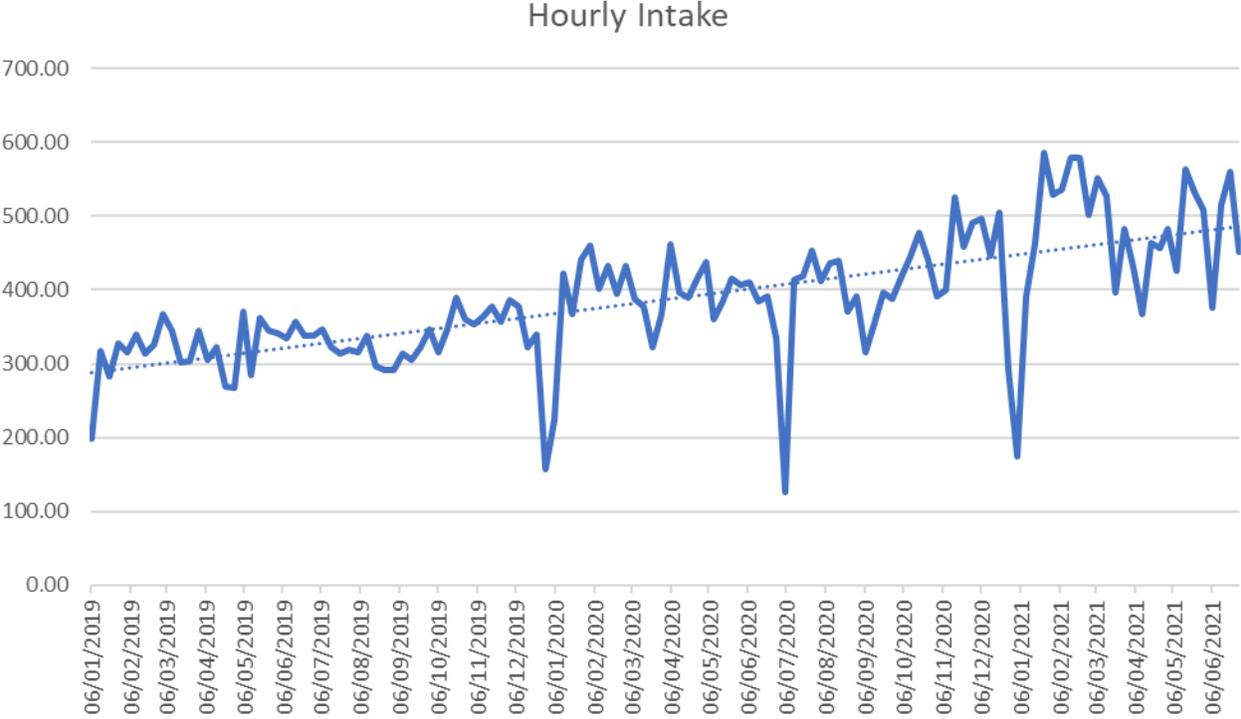
Contains data on intakes, refusals and rejects.



High Cost Family - Simplified Process Flowchart



High Cost Family Performance



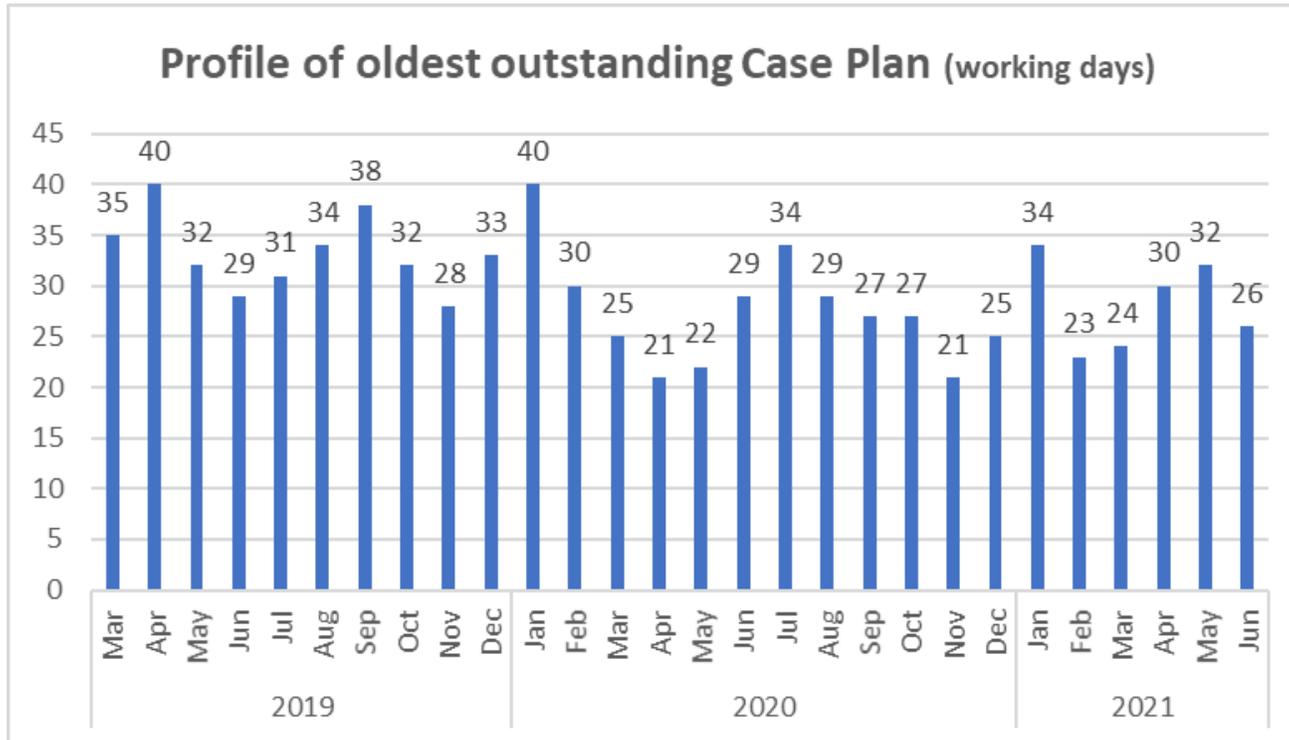
The High Cost Family team reports the position of the oldest items in the WIP backlog on a weekly basis. This is based upon the number of working days since the oldest item was submitted. As a target, the team aims to process 90% of all cases plans within 20 working days of receipt from a provider.



High Cost Family Performance

HCF Recovery Plan

The High Cost Family Team are mid-way through a structured recovery plan, which began in late October 2020. This plan has had to evolve as a result of an unforeseen and sustained increase in intakes (ca. 33%). To combat this the team have made use of weekend overtime whilst recruitment has been ongoing. The new starters on the team are in place and are in training, with a view to being signed off by September 2021.



Key Progress Points – June 2021:

- ❑ Events training provided to all new starters with consolidation taking place to increase speed and accuracy over coming months,
- ❑ Continued work with CST has seen a review of the initial 8x8 documents with further changes being drafted.

Ongoing HCF Projects;

- Registration Review – we are currently reviewing the way we register cases and the level of information required in order to make this process faster and more effective. This should help ensure a streamlined service as work can be focused on only those cases which are likely to go high cost, whilst also reducing the overall touch-points for both providers and the LAA.
- Review of Communication Channels – looking at how providers communicate with us and seeing if we streamline this/make it easier.
- Review of oldest cases – reviewing the oldest ongoing cases, noting what is preventing their movement and looking to see how we can address this. Are there any trends we can draw from the data?
- Fixer email – promoting wider use of this and using the data to analyse trends.

Top five reasons for rejects:

1. Attendances notes not provided / signed for Advocates Meetings.

2. Incorrect events rates applied to CCFS Case Plans.

3. Under / over run rates claimed incorrectly for CCFS Case Plans.

4. More information needed for counsel fees on traditional hourly rates case plan.

5. Expert fees found to be higher than expected for work being undertaken.

Why can High Cost Family Case Plans take so long to agree?

The complexities of a High Cost Family case means that no two are necessarily the same. This means each has to be considered and assessed on an individual basis, and unusual circumstances may mean additional information needs to be provided.

It is also important to note that the High Cost Family Team can only control their own response time.

If a provider takes longer to reply, this will naturally have an impact on the length of time until a contract is fully agreed.

Section 5: Quality Control



Development of Quality Control Database Better Access to Management Information

We have developed and introduced a new Quality Control Database for our caseworkers

Old Database

- Data held in Excel format
- Reliant on caseworkers manually typing data
- Resulted in difficulties extracting Management Information
- Trend analysis or identification of issues/risks was completed manually

New Database

- Utilising Microsoft applications to capture and store data
- Reduced reliance on free text data to enable more efficient trend analysis
- Management Information easier to extract
- Integration of bespoke reports, which update in real time, to identify trends and issues/risks

What does this mean for you?

- Quicker identification of risks in specific categories of law and types of application
- Improved decision making and reduction in unnecessary requests for information
- Improved development of training materials
- More timely feedback for caseworkers with a focus on a culture of getting it right first time

Section 6: Future Development of Slide Pack



Future Information:

- **Return Rate Tool**

We have developed a new tool which provides improved data on the return rate of civil applications and amendments. In addition to rejects and refusals, we will be able to track the number of document requests and gain better insight into the number of interactions between the LAA and Providers. With a continued focus on getting it right first time, we will review the profile of caseworker and Provider return rates, using the data to identify measures we can take to reduce the number of interactions.

- **High Cost Family**

We are looking to share detailed information on appeals which go to the independent adjudicator – we are hoping to be able to provide feedback on trends which will help both caseworkers and providers. We are also doing regular deep dives into our complaints data and will share our findings in the next pack. We have started to promote use of the Fixer tool and hope that providers will take advantage of the service. We will be sharing regular updates on items we receive.

- **Legal & Means**

We currently gather detailed information on complaints to identify trends and are looking to share this within the next pack. We are also keen to investigate refusals and provide a breakdown by category of law. We know providers want to know more in this space and we hope to be able to pull out some trends which enable us to undertake improvement work.

We are striving towards getting it right time and we appreciate your assistance and feedback as part of this process.



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EXCEPTIONAL & COMPLEX CASES

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		PUBLISHED KPIS														
Measure	Targets for 2021/22	Jul-20	Aug-20	Sept-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD 21/22	June-21	May-21
1	ECCT Applications Process (end-to-end) 80% of Exceptional and Complex Case Applications and Emergency Applications in 25 working days	72%	83%	81%	76%	81%	85%	80%	84%	85%	81%	82%	83%	82%	DAY 25	DAY 24
2	ECF Applications Process 90% of Exceptional Case Funding applications in 25 working days, excluding urgent apps (caseworker time only)	93%	90%	91%	92%	95%	91%	89%	92%	90%	82%	85%	86%	84%	DAY 30	DAY 28
Total Measures Met		1	2	2	1	2	2	1	2	2	1	1	1	1		
Total Measures		2	2	2	2	2	2	2	2	2	2	2	2	2		
RAG Rating		A	G	G	A	G	G	A	G	G	A	A	A	A		

ECCT are in the process of reviewing allocation practises with a view to seeing some measurable improvements. The team are expecting increased resource in the near future – currently training new staff and reviewing recruitment needs as there are some vacancies open. Overtime has been used to stay on top of the WIP and keep a reasonable percentage in time. The team expected a downturn particularly in shadow KPI areas as per last month. They have also improved their % total WIP in target from 87% at the beginning of June to 90% at the end of the month.

End-to-end measurements are recorded from the date of first submission through to the date the application is completed.

Caseworker time measurements are recorded in the same way, but exclude time the application is ‘on hold’ while awaiting further supporting information.



EXCEPTIONAL & COMPLEX CASES

SHADOW KPIS

Measure	Targets for 2021/22	Jul-20	Aug-20	Sept-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD 21/22	June-21	May-21
ECF Urgent Applications	Process 90% of Exceptional Case Funding urgent applications in 10 working days (caseworker time only)	94%	89%	85%	84%	78%	86%	82%	77%	82%	54%	80%	83%	72%	DAY 12	DAY 12
ECC Amendments	Process (end to end) 90% of ECC Amendments within 25 working days	77%	84%	83%	83%	81%	80%	73%	79%	84%	77%	71%	74%	74%	DAY 40	DAY 45

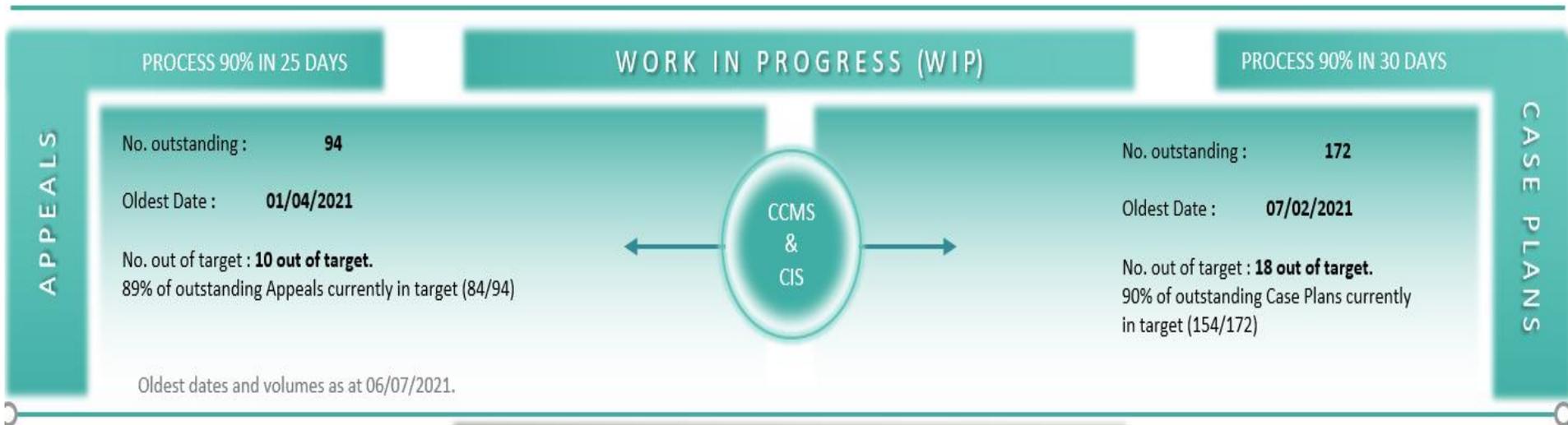
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ECF Urgent applications are a Shadow KPI measurement as of April 2021. The low volume of items in this category means that a small number of applications out of target have significant impact on percentages. The average time taken in June 2021 was 12 days.

Shadow KPI's were predicted to be out of target for June 2021 as ECCT has attempted to focus on New Apps and clear a number of out of target cases.



EXCEPTIONAL & COMPLEX CASES



Issues impacting performance June 2021

High volume of training with an average of 59 hours per week spent in training during June compared to an average of 45 hours per week in May 2021.



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Contains data on return rates for civil claims along with trends on reasons for returning claims and Civil Claim Fix.

Section 3: Civil Bill Intakes & Processing Times

Contains data on how long LAA are spending processing your civil claims

Section 4: Escaped Cases Bills & Cost Appeals

Contains data on bill decisions and assessments for Civil Escaped Cases & Legal Help claims

Section 5: Escaped Cases Bill Rejects

Contains data on rejected bills for Civil Escaped Cases & Legal Help claims

Section 6: Escaped Cases Intakes & Processing Times

Contains data on how long LAA are spending processing your Civil Escaped Cases & Legal Help claims

Section 7: Caseworker Topics

Contains trends on issues being raised by caseworkers

Section 8: Bi-Monthly Top Tips

A summary of the pack's top tips

Section 9: A Spotlight On...

A spotlight on individual teams in LAA

Section 10: Appendices

Contains explanations of key terms and how data is reported.

Notes:



Click on an image to jump straight to the individual section. If printing, right click on your mouse and select **'print'**.



Under the header Page Size & Handling, make sure to select **'shrink oversized pages'** to ensure your printer doesn't cut off any information.

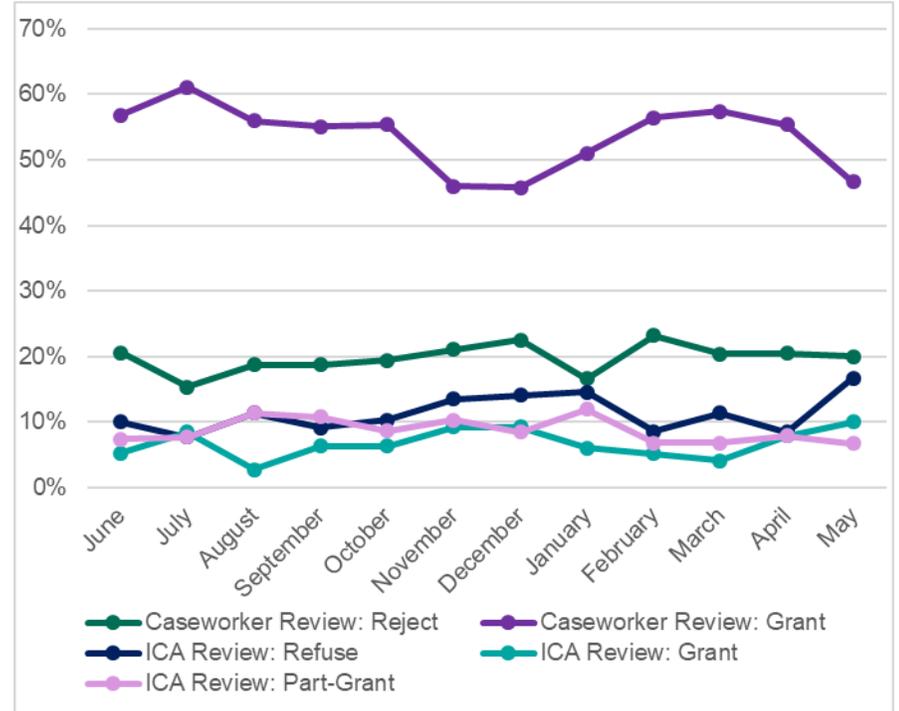
Section 1: Civil Cost Appeals

Contains data on trends for appeals against LAA assessments and assessments overturned with additional information.



Civil Cost Appeals: 12-Month Rolling Decisions Made

Month	Total	Caseworker Review: Stage 1				ICA Review: Stage 2				Outstanding		
		Reject	%	Grant	%	Refuse	%	Grant	%		Part-Grant	%
June	190	39	21%	108	57%	19	10%	10	5%	14	7%	
July	131	20	15%	80	61%	10	8%	11	8%	10	8%	
August	150	28	19%	84	56%	17	11%	4	3%	17	11%	
September	176	33	19%	97	55%	16	9%	11	6%	19	11%	
October	175	34	19%	97	55%	18	10%	11	6%	15	9%	
November	185	39	21%	85	46%	25	14%	17	9%	19	10%	
December	142	32	23%	65	46%	20	14%	13	9%	12	8%	
January	151	25	17%	77	51%	22	15%	9	6%	18	12%	
February	177	41	23%	100	56%	15	8%	9	5%	12	7%	
March	221	45	20%	127	57%	25	11%	9	4%	15	7%	
April	166	34	20%	92	55%	14	8%	13	8%	13	8%	
May	150	30	20%	70	47%	25	17%	15	10%	10	7%	
Total	2,014	400	20%	1,082	54%	201	10%	132	7%	174	9%	



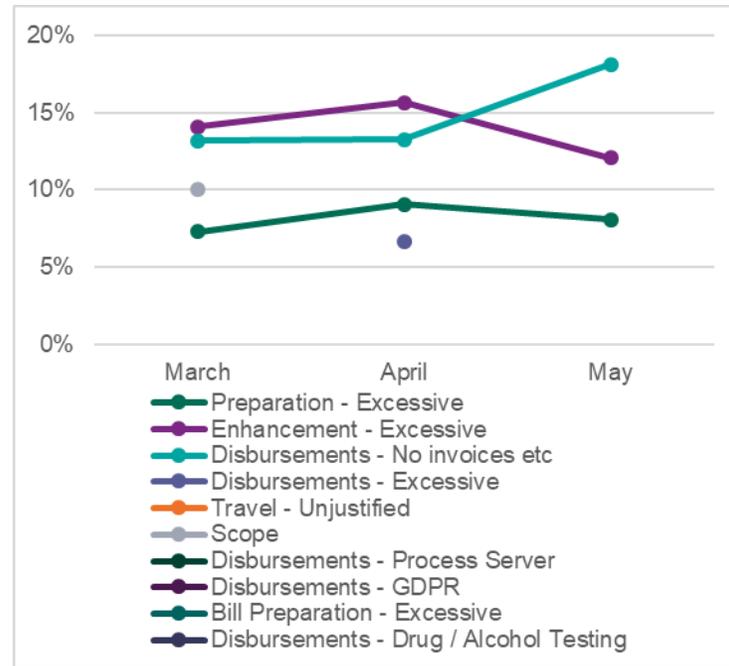
Data Note:

- ❖ Appeals Data as of 06 July 2021
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

Civil Cost Appeals: 3-Month Rolling Reasons For Assessment And Appeal

March	Volume	%
Enhancement - Excessive	31	14%
Disbursements - No invoices etc	29	13%
Scope	22	10%
Preparation - Excessive	16	7%
Preparation - Included in FAS fee	13	6%
April	Volume	%
Enhancement - Excessive	26	16%
Disbursements - No invoices etc	22	13%
Preparation - Excessive	15	9%
Disbursements - Excessive	11	7%
Enhancement - No Justification	11	7%
May	Volume	%
Disbursements - No invoices etc	27	18%
Enhancement - Excessive	18	12%
Counsel (hourly rate) - Excessive	12	8%
Preparation - Excessive	12	8%
Cost Limitation	8	5%

Year to date	Volume	%
Disbursements - No invoices etc	248	12.33%
Enhancement - Excessive	247	12.28%
Preparation - Excessive	207	10.29%
Scope	179	8.90%
Disbursements - Excessive	119	5.92%



The Caseworker View:



“It really assists caseworkers when providers mark the court order containing drug/alcohol testing directions, any advocates meetings and court bundles, and the confirmation of start/end times for remote hearings. It can be easy to miss the information when it’s buried in 60 pages of court orders in a single upload in CCMS. It is a bit of extra work upfront, but it does help us pay your bill in full first time round and avoids any important information being overlooked. It’s especially relevant since the move to remote working where court orders are being relied on more heavily as evidence for payments being claimed.”

Data Note:



- ❖ Percentage figures provided reflect the volume of assessments for that month, rather than the full population of work for that month.
- ❖ The graph opposite charts the top 5 assessment reasons per month only.

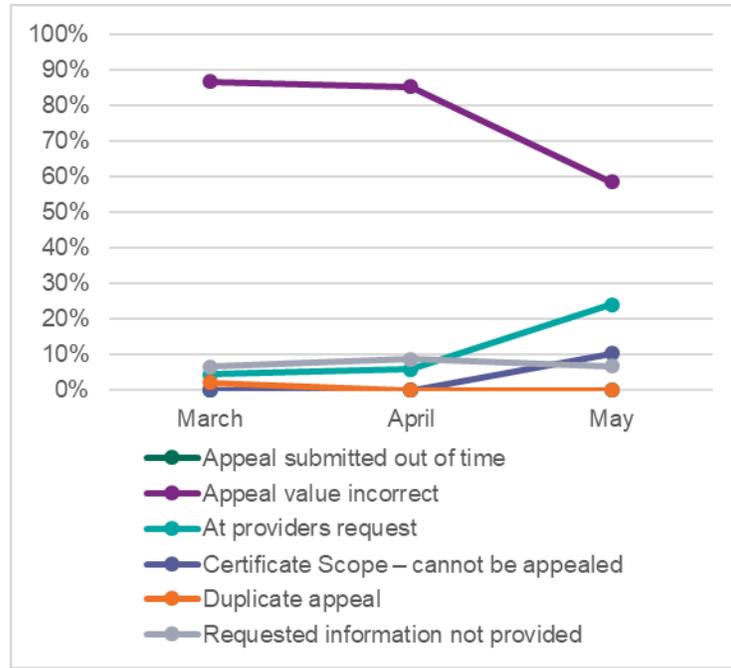
Civil Cost Appeals: 3-Month Rolling Appeal Bill Rejections

March	Volume	%
Appeal value incorrect	39	87%
Requested information not provided	3	7%
At providers request	2	4%
Duplicate appeal	1	2%
Appeal submitted out of time	0	0%

April	Volume	%
Appeal value incorrect	29	85%
Requested information not provided	3	9%
At providers request	2	6%
Appeal submitted out of time	0	0%
Certificate Scope – cannot be appealed	0	0%

May	Volume	%
Appeal value incorrect	17	59%
At providers request	7	24%
Certificate Scope – cannot be appealed	3	10%
Requested information not provided	2	7%
Appeal submitted out of time	0	0%

Year to Date	Volume	%
Appeal value incorrect	311	78%
Requested information not provided	39	10%
At providers request	22	6%
Certificate Scope – cannot be appealed	14	4%
Duplicate appeal	7	2%



The Caseworker View:



“It really helps me consider an appeal first time when providers follow the picture guide on the CCMS Training Website. It’s very frustrating returning an appeal you know you could otherwise grant on review, simply because it’s not been claimed properly in CCMS! The Appeal bill should be for the value of the Appeal only, not a resubmission of the whole bill.”

Guidance, Hints & Tips



❖ The most common mistake on appeals is that the full claim is submitted again. We only want the Appeal bill to be the value for which you are appeal. If we have reduced a 60 minute attendance on the client to 24 minutes, then you should appeal for 36 minutes. If you are unsure what to do, you can follow this [Appeals Advanced Step-by-Step Guide](#)

Data Note:



❖ Percentage figures are for the % of appeals rejected, not the full population of appeals.

Civil Cost Appeals: Overturned by Independent Caseworker Review

LAA Issue	Caseworker Decision Reason	12-Month Rolling		March		April		May	
		Volume	%	Volume	%	Volume	%	Volume	%
LAA Issue	Caseworker Error	146	15%	39	31%	11	12%	3	4%
	LAA Error	3	0%	0	0%	1	1%	0	0%
Provider Issue	Evidence supplied - Disbursement justification	284	29%	28	22%	26	28%	32	46%
	Evidence supplied - Disbursement breakdown	102	10%	13	10%	10	11%	12	17%
	Evidence supplied - Preparation justification	92	9%	10	8%	13	14%	6	9%
	Evidence supplied - File notes	81	8%	10	8%	12	13%	3	4%
	Discretionary Allowance	80	8%	11	9%	5	5%	0	0%
	Evidence supplied - Attendance justification	78	8%	4	3%	4	4%	4	6%
	Evidence supplied - Enhancement justification	56	6%	6	5%	7	8%	3	4%
	Evidence supplied - Travel justification	53	5%	6	5%	0	0%	2	3%
	Cost Limit Issue Resolved	6	1%	0	0%	2	2%	4	6%
	Evidence supplied – Routine Letter/Calls	2	0%	0	0%	1	1%	1	1%
	Total	983							

The Caseworker View:



“It is very helpful to avoid a provisional assessment of costs if the provider can include an explanation of any unusual expert fees or disbursements - including where an unusual apportionment of costs is being claimed. This will help to prevent any delay or unnecessary reduction to their costs.”

Guidance, Hints & Tips



- ❖ Disbursement vouchers are often missing key information, such as addresses experts have travelled from and to. A full breakdown of all the detail we require is published at [Chapter 10.2 of the Civil Finance Electronic Handbook](#).

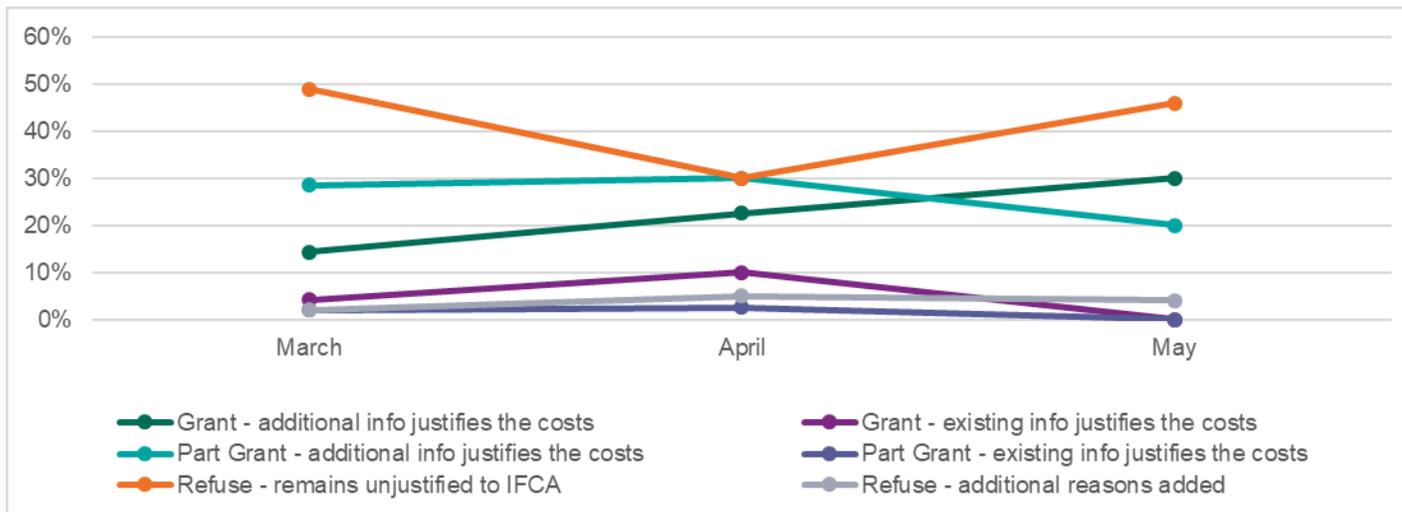
Data Note:



- ❖ Percentage figures are for the % of appeals decided on internal review, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

Civil Cost Appeals: 3-Month Rolling ICA Decisions

ICA Decision	Year To Date		March		April		May	
	Volume	%	Volume	%	Volume	%	Volume	%
Grant - additional info justifies the costs	102	19%	7	14%	9	23%	15	30%
Grant - existing info justifies the costs	30	6%	2	4%	4	10%	0	0%
Part Grant - additional info justifies the costs	149	28%	14	29%	12	30%	10	20%
Part Grant - existing info justifies the costs	25	5%	1	2%	1	3%	0	0%
Refuse - remains unjustified to IFCA	204	38%	24	49%	12	30%	23	46%
Refuse - additional reasons added	22	4%	1	2%	2	5%	2	4%
Total	532		49		40		50	



The Caseworker View:



“I’d like to reiterate that when solicitors are claiming mileage to court, they must specify which court they travel to. Otherwise we have to go on other evidence available, which may lead to us reducing what might be legitimate travel costs. This would reduce potentially the number of provisional assessments.”

The Caseworker View:



“If a claim has previously been rejected, it is helpful if you can provide a comment explaining any action taken or further evidence provided. This can be in the ‘Message to LAA’ when submitting documents.”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)

Data Note:



- ❖ Percentage figures are for the % of appeals decided on by an ICA, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

Civil Cost Appeals: 12-Month Rolling Time Taken

Month	Provider	Stage 1	Stage 2		Overall Time Taken	
	Average Time Taken To Appeal	Time To Process	Time Out With An ICA	Average Time Taken	Average End to End	Longest Overall Time Taken
April	22	3	7	12	7	40
May	25	2	7	10	5	42
June	24	2	7	9	5	28
July	29	4	6	7	7	24
August	33	2	7	8	7	21
September	28	3	7	9	6	37
October	31	3	6	8	5	24
November	34	3	5	8	6	33
December	25	4	6	7	6	19
January	26	2	5	7	4	20
February	31	2	5	7	4	22
March	29	2	4	5	4	23
Overall	28	3	6	8	5	28

The Caseworker View:



“It would be really useful if the providers could make sure that all the documentation we need is checked and present when the claims are submitted in accordance with our requirements in the LAA Electronic Handbook. It would also be useful if the claims are entered correctly onto CCMS.”

The Caseworker View:



“When uploading multiple documents, it is useful if they can be accurately labelled e.g. including the date for any court orders or invoices. This allows caseworkers to easily navigate the supporting evidence and reduces the likelihood that information will be missed.”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)
- ❖ The format of your file of papers can impact how easily accessible information is for caseworkers. Make sure your file is in chronological order and contains all correspondence, orders and attendance notes: <https://www.gov.uk/guidance/model-file-submissions-for-civil-billing>

Data Note:



- ❖ For an explanation of terms, column headers, and how dates are calculated, please refer to [Appendix 2: Appeals Explanation](#)

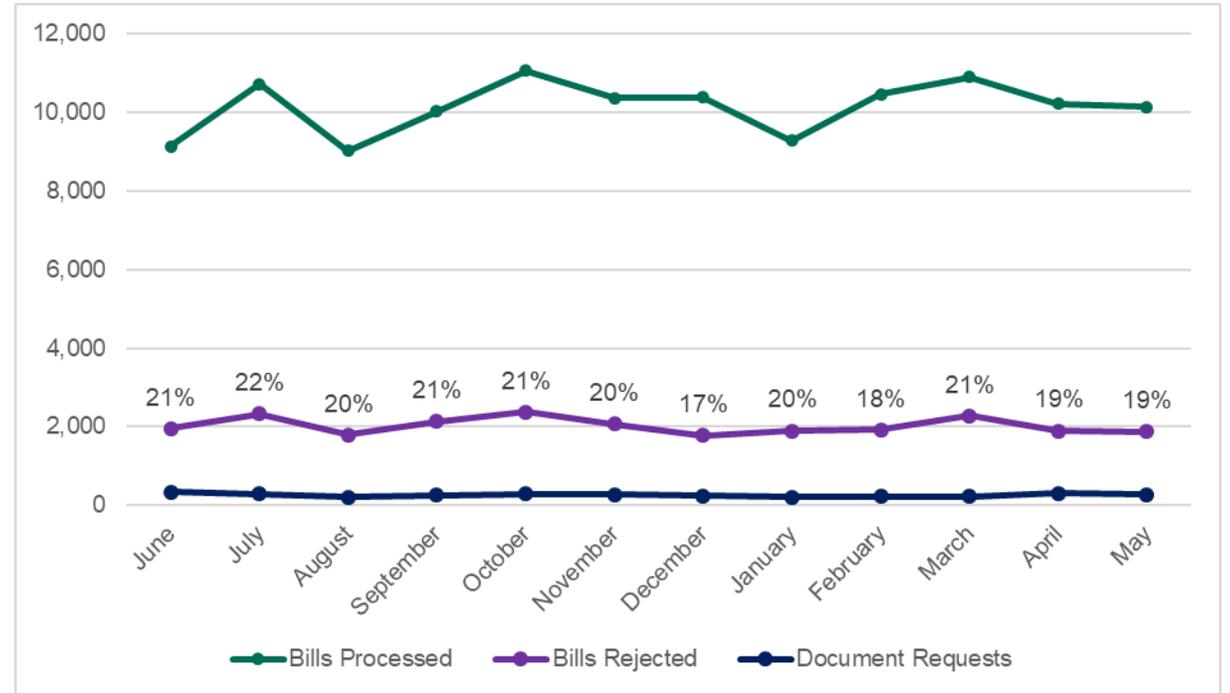
Section 2: Civil Bill Rejects

Contains data on return rates for civil claims along with trends on reasons for returning claims and Civil Claim Fix.



Civil Bill Rejects: 12-Month Rolling Return Rates

Month	Bills Processed (CCMS & Paper)	Bills Rejected (CCMS & Paper)	Document Requests (CCMS Only)	Reject Rate	Document Request Rate
June	9,138	1,952	344	21%	4%
July	10,715	2,324	288	22%	3%
August	9,014	1,795	210	20%	2%
September	10,014	2,132	262	21%	3%
October	11,058	2,375	295	21%	3%
November	10,362	2,065	279	20%	3%
December	10,368	1,776	243	17%	2%
January	9,280	1,900	210	20%	2%
February	10,457	1,925	233	18%	2%
March	10,898	2,282	222	21%	2%
April	10,216	1,900	302	19%	3%
May	10,137	1,876	270	19%	3%
Total	121,657	24,302	3,158		



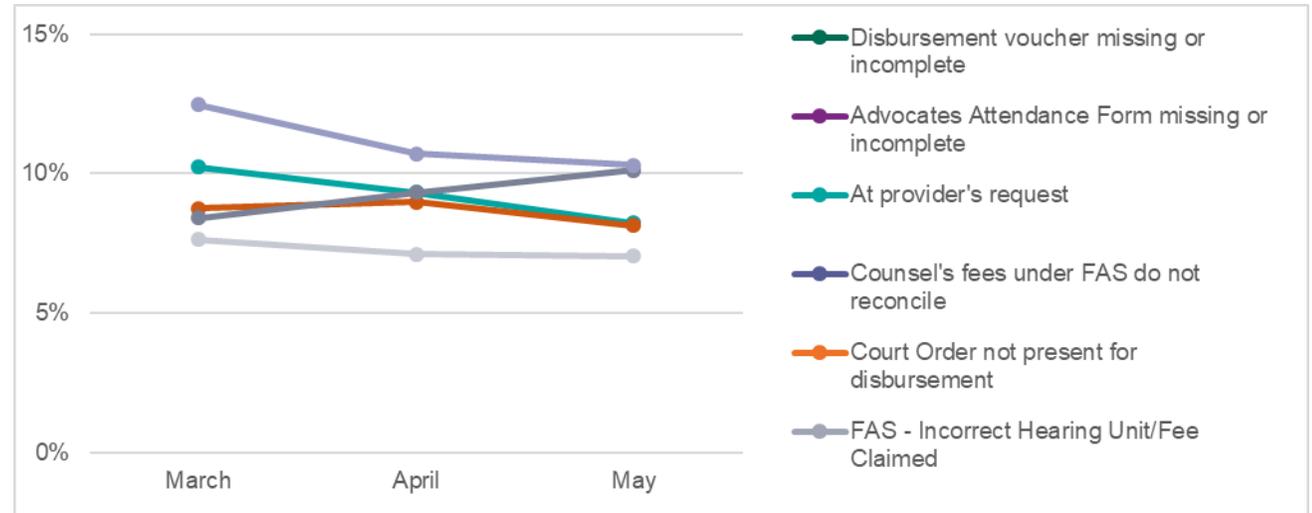
Data Note:



- ❖ As of April 2021, LAA no longer distinguishes between KPI and non-KPI rejects and instead reports the Civil Bill Reject rate as a global position. For an explanation of terms, please refer to [Appendix 3: Rejects & Civil Claim Fix Terms Explanation](#)
- ❖ 'Reject Rate' and 'Document Request Rate' are individual % totals of each processed bill from that month that were either rejected or document requested
- ❖ A document request can be made multiple times on the same bill.

Civil Bill Rejects: 3-Month Breakdown of Reject Reasons for CCMS

Month	No. of Rejects	%
March		
Solicitor bill has been submitted without the corresponding claim from counsel	302	12%
At provider's request	248	10%
Disbursement Voucher not uploaded	212	9%
Disbursement Voucher detail insufficient	204	8%
Counsel fees under FAS do not reconcile with costs allocated	185	8%
April		
Solicitor bill has been submitted without the corresponding claim from counsel	224	11%
At provider's request	195	9%
Disbursement Voucher detail insufficient	195	9%
Disbursement Voucher not uploaded	188	9%
Counsel fees under FAS do not reconcile with costs allocated	149	7%
May		
Solicitor bill has been submitted without the corresponding claim from counsel	209	10%
Disbursement Voucher detail insufficient	205	10%
At provider's request	167	8%
Disbursement Voucher not uploaded	165	8%
Counsel fees under FAS do not reconcile with costs allocated	143	7%



The Caseworker View:



"I would advise that before pressing 'Submit' on the bill, please double check all items are correctly claimed by downloading a draft copy and reviewing it. If you are missing an expert's fee, it's better to know before submitting the claim to save contacting us, asking for it back, amending then resubmitting."

Data Note:



- ❖ Percentage figures are the total of all rejects combined. They do not include paid claims or document requests.
- ❖ The graph only charts recurring reject reasons in the top 5 for a month. In order to be tracked on the graph, the reject reason must be in any 2 of the 3 reported months.

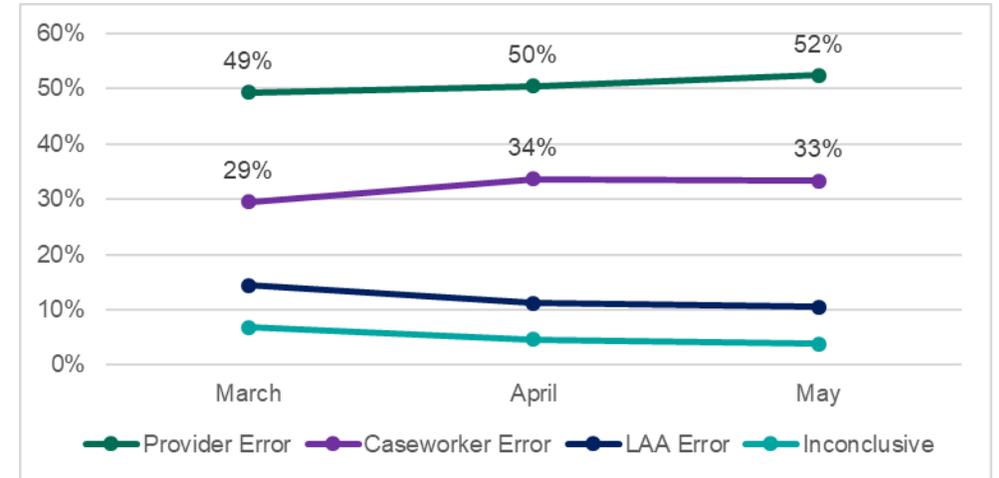
Civil Bill Rejects: 3-Month Breakdown of LAA Civil Claim Fix

	March	April	May
Total Number of Rejects this period:	2,282	1,900	1,876
Total Requests Dealt with by Civil Claim Fix	159	122	112

	Number of Actual Challenges	% of challenges compared to all combined rejects	Number of Actual Challenges	% of challenges compared to all combined rejects	Number of Actual Challenges	% of challenges compared to all combined rejects
Total Number of Provider Challenges	146	6%	107	6%	105	6%
Average Number of Challenges per week	37		27		26	

	Outcome of Challenge	% of Total Challenges this period	Outcome of Challenge	% of Total Challenges this period	Outcome of Challenge	% of Total Challenges this period
Provider Error	72	49%	54	50%	55	52%
Caseworker Error	43	29%	36	34%	35	33%
LAA Error	21	14%	12	11%	11	10%
Inconclusive	10	7%	5	5%	4	4%

	Other Requests Received & Dealt with by Civil Claim Fix		
Provider Query	12	13	6
Internal Referral	1	2	1



The Caseworker View:



“I would like to encourage the use of the Rates Calculator by providers, for both checking the rates being claimed are correct, but also the FAS hearings are accurate. It’s still available on the guidance website, even with most claims now being made on CCMS. It’s still a very useful tool, so I would encourage providers to use it.”

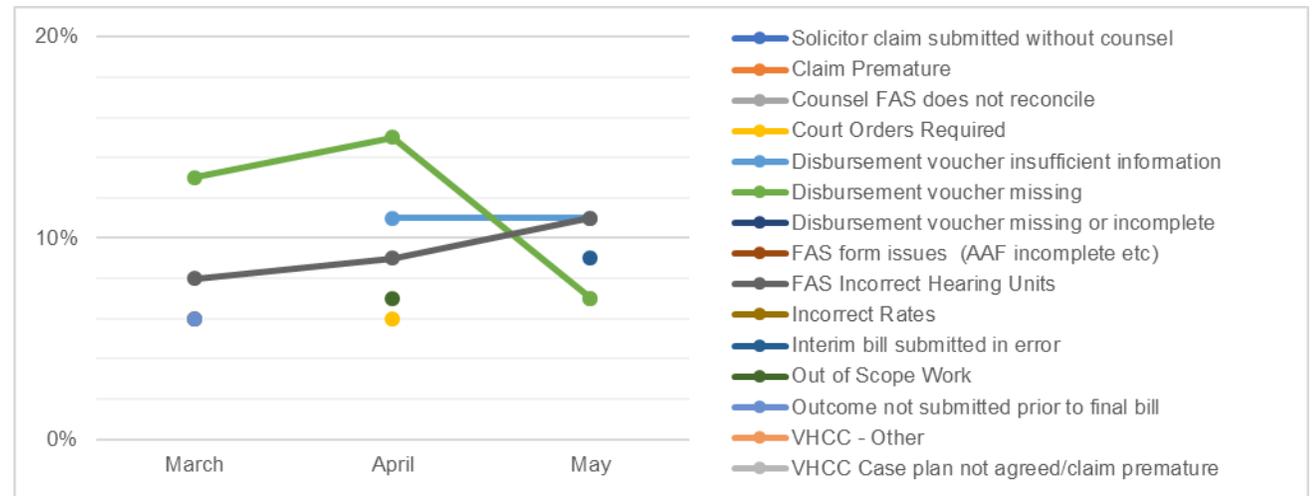
Data Note:



❖ For a definition of LAA categories, and a copy of the feedback loop, please refer to [Appendix 3: Rejects & Civil Claim Fix Terms Explanation](#)

Civil Bill Rejects: 3-Month Rolling Civil Claim Fix Provider Errors

Month	No. of Error	Error %
March		
Disbursement Voucher Missing	9	13%
FAS Incorrect Hearing Units	6	8%
Claim Premature	4	6%
Incorrect Rates	4	6%
Outcome Not Submitted Prior to Final Bill	4	6%
April		
Disbursement Voucher Missing	8	15%
Disbursement voucher insufficient information	6	11%
FAS incorrect hearing units	5	9%
Out of scope work	4	7%
Court orders required	3	6%
May		
Disbursement voucher insufficient information	6	11%
FAS Incorrect Hearing Units	6	11%
Interim Bill submitted in error	5	9%
Disbursement voucher missing	4	7%
Counsel FAS does not reconcile	4	7%



The Caseworker View:



“When uploading disbursement vouchers to CCMS, please check upfront to ensure that the voucher has sufficient information to allow to make an assessment of the reasonableness of the costs. If the voucher isn’t itemised, we don’t know how much time has been spent doing different activities, and without that context, it’s difficult to say if the costs is ‘reasonable’ or not.”

Data Note:



- ❖ Percentage figures are the total of all provider errors as categorised by Civil Claim Fix
- ❖ For an explanation of terms, please refer to [Appendix 3: Rejects & Civil Claim Fix Terms Explanation](#)

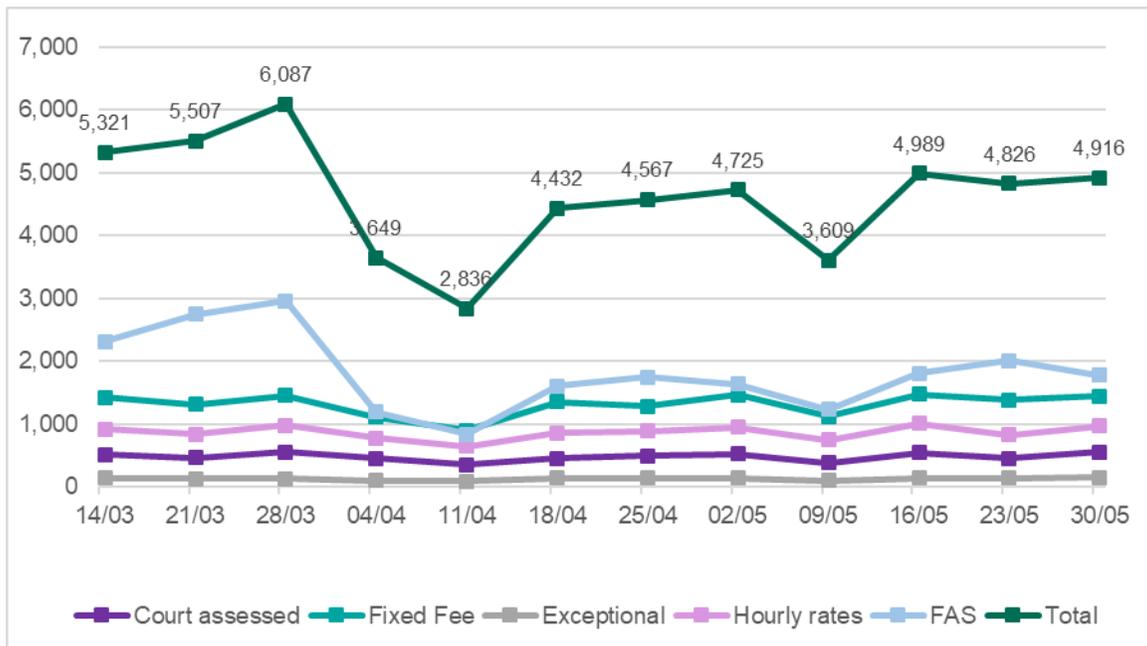
Section 3: Civil Bill Intakes & Processing Times

Contains data on how long LAA are spending processing your civil claims



Processing Times: 12-Week Rolling Civil Bill Intakes

	14/03/2021	21/03/2021	28/03/2021	04/04/2021	11/04/2021	18/04/2021	25/04/2021	02/05/2021	09/05/2021	16/05/2021	23/05/2021	30/05/2021	Average
Court assessed	517	470	555	460	356	459	496	528	390	552	462	555	483
Fixed Fee	1,425	1,313	1,456	1,109	901	1,358	1,284	1,465	1,127	1,474	1,383	1,451	1,312
Exceptional	144	136	130	109	90	148	140	142	109	146	144	155	133
Hourly rates	924	840	986	778	645	859	896	954	753	1,008	829	973	870
FAS	2,311	2,748	2,960	1,193	844	1,608	1,751	1,636	1,230	1,809	2,008	1,782	1,823
Total	5,321	5,507	6,087	3,649	2,836	4,432	4,567	4,725	3,609	4,989	4,826	4,916	4,622



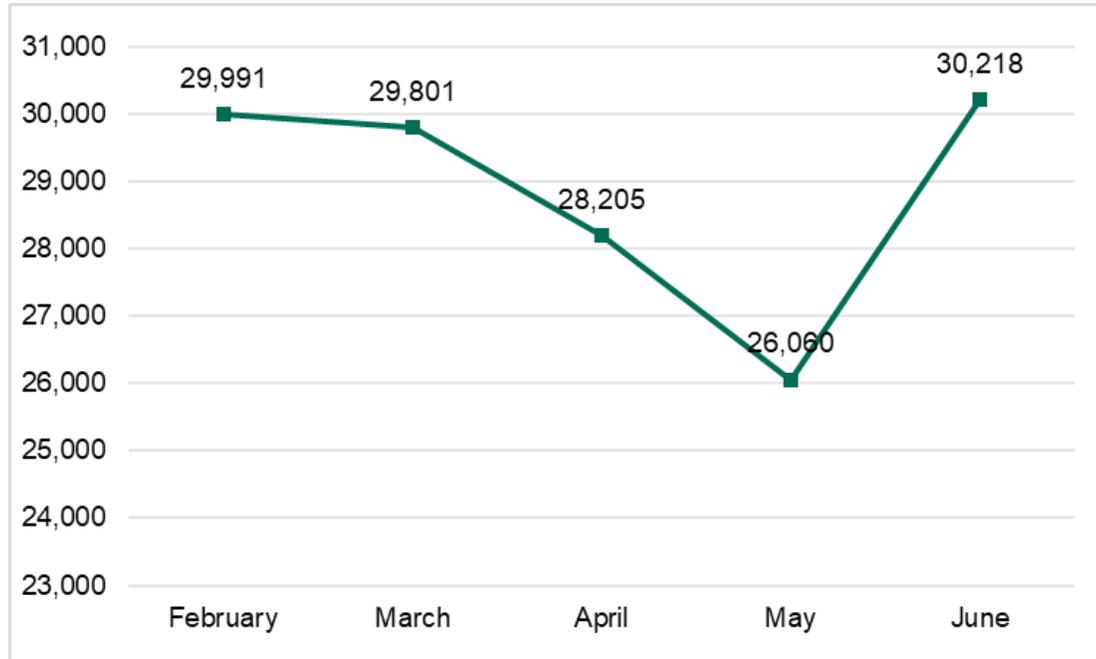
Guidance, Hints & Tips



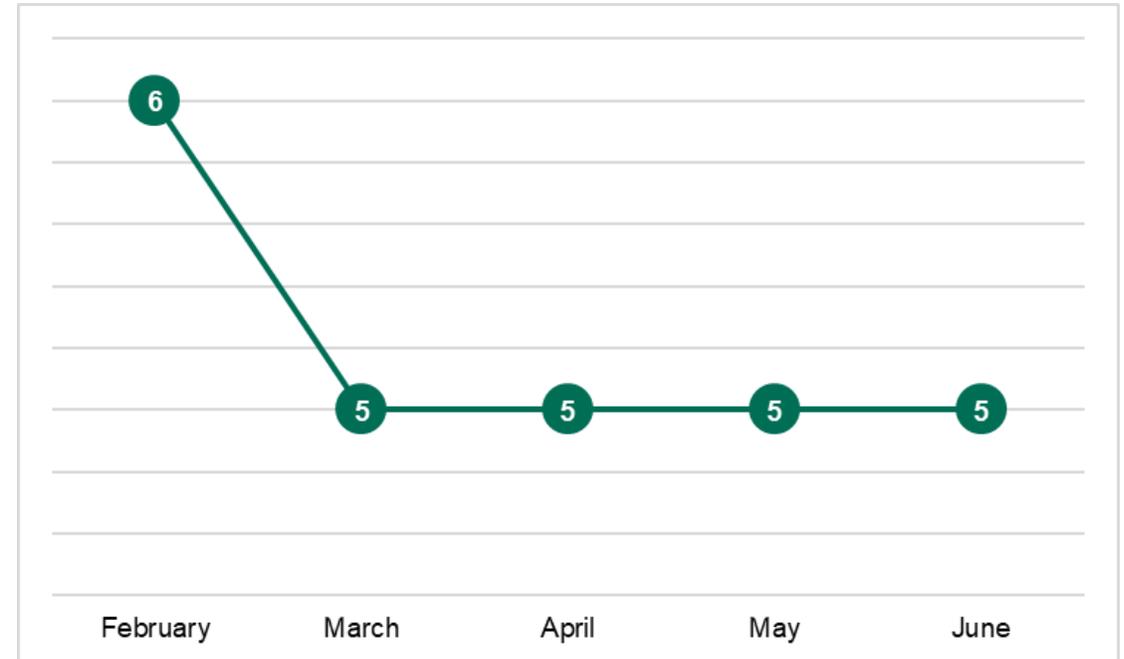
- ❖ **Outcomes:** although CCMS allows you to create your Outcome immediately followed by your claim, it will not release your claim to LAA for processing until your Outcome has been completed. CCMS will keep your claim on hold until we have processed your Outcome. **You can help to avoid delays by ensuring your Outcome is submitted and completed as soon as possible**, so it does not impact on the assessment of your bill.
- ❖ **Counsel:** in non-family cases only, where you have allocated counsel on to your certificate, CCMS will send a notification to counsel once you have created and submitted your final claim. CCMS will then hold your claim for a maximum of 14 days before releasing your claim for processing. If counsel has not submitted their claim and uploaded their documents by this point, we will reject your claim. You can help to avoid delays and claim rejects by liaising with counsel once your bill is submitted to encourage them to do the same.

Processing Times: 5-Month Rolling Civil Bills Time Taken

Total Volume Processed



Processing Days to 90%



Data Note:



- ❖ The **'Total Volume Processed'** table shows the number of claims processed in each month.
- ❖ The **'Processing Days to 90%'** table shows the point at which the local target of 90% in 15 days was reached.
- ❖ For a definition of LAA terms, please refer to [Appendix 4: Processing Explanations](#).

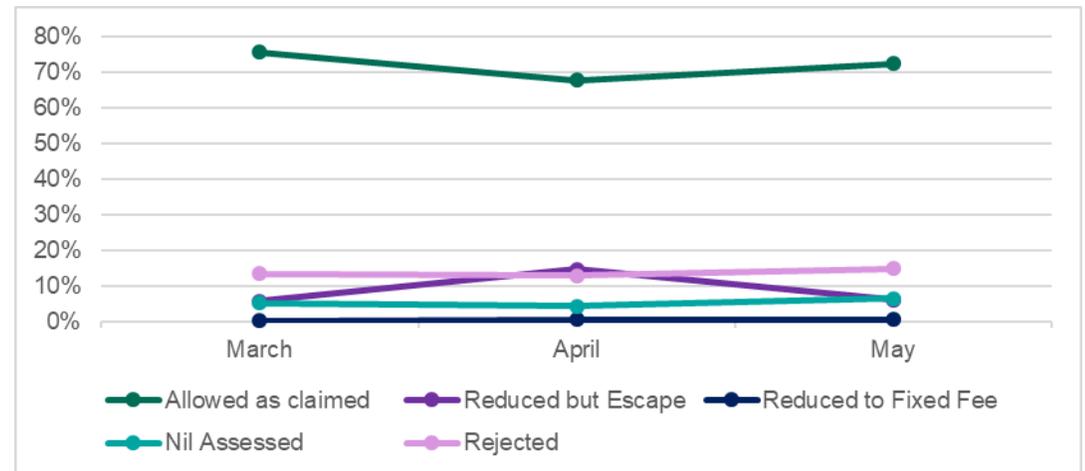
Section 4: Escaped Cases Bills & Cost Appeals

Contains data on bill decisions and assessments for Civil Escaped Cases & Legal Help claims



Escaped Cases: 3-Month Rolling Initial Bill Decisions Made

Month	Claims Received	Allowed as claimed	Reduced but Escape	Reduced to Fixed Fee	Nil Assessed	Rejected
March						
Civil	616	454	43	2	43	74
Mental Health	179	154	6	0	2	17
Immigration and Asylum	197	143	7	0	5	42
Totals	992	751	56	2	50	133
		76%	6%	0%	5%	13%
April						
Civil	683	542	36	4	39	62
Mental Health	223	94	117	1	0	11
Immigration and Asylum	196	111	9	1	7	68
Totals	1,102	747	162	6	46	141
		68%	15%	1%	4%	13%
May						
Civil	667	512	29	1	53	72
Mental Health	92	76	2	1	1	12
Immigration and Asylum	270	157	31	2	11	69
Totals	1,029	745	62	4	65	153
		72%	6%	0%	6%	15%



The Caseworker View:



"I find that pages 5 and 6 of the Legal Help Form, relating to questions of the clients available capital and income are often incomplete. Also, when telling us about any passported benefits specifically: for example, 'Income Related ESA' and not just a generic confirmation (ESA). Finally, bank statements cannot be used as confirmation of a client's gross wages or their receipt of a passported benefit (with the exception of Income Support and Universal Credit)"

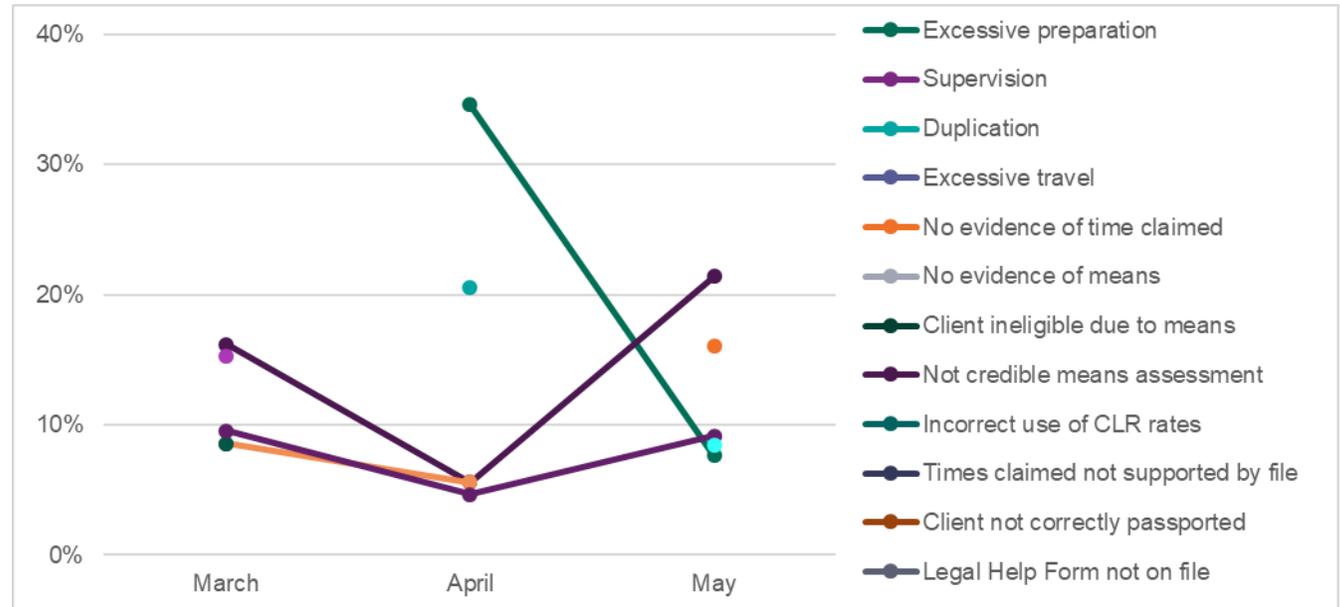
Data Note:



❖ For an explanation of the terms used, please refer to [Appendix 5: Escaped Cases Terms](#)

Escaped Cases: Breakdown of Bill Assessment Reasons – Overall

March	No. of Assessments	%
Not credible means assessment	17	16%
Out of scope work claimed	16	15%
Means assessment evidence provided insufficient	10	10%
Disbursements not reasonable	9	9%
CW1 form completed incorrectly/not signed	9	9%
April	No. of Assessments	%
Excessive preparation	74	35%
Duplication	44	21%
Not credible means assessment	12	6%
Disbursements not reasonable	12	6%
Means assessment evidence provided insufficient	10	5%
May	No. of Assessments	%
Not credible means assessment	28	21%
No evidence of time claimed	21	16%
Means assessment evidence provided insufficient	12	9%
Decision reason not given	11	8%
Excessive preparation	10	8%



The Caseworker View:



“Where larger attend/prep times are claimed on your running record of costs, please provide sufficient detail on a file note as to the complexity. Getting this information upfront can be the difference between paying the claim first time or assessing and then overturning on appeal.”

Data Note:



- ❖ Percentage figures are the total of all assessments.
- ❖ In order to be tracked on the graph, the assessment reason must be in 2 of the 3 reported months.

Escaped Cases: Breakdown of Bill Assessment Reasons – By Category

Month	Civil		Mental Health		Immigration				
	No. of Assessments	%	No. of Assessments	%	No. of Assessments	%			
March	Not credible means assessment	17	20%	Excessive preparation	3	38%	CW1 form completed incorrectly/not signed	4	33%
	Out of scope work claimed	14	16%	Duplication	1	13%	Excessive preparation	1	8%
	Disbursements not reasonable	8	9%	Times claimed not supported by file	1	13%	No evidence of time claimed	1	8%
	Means assessment evidence provided insufficient	8	9%	Out of scope work claimed	1	13%	No evidence of means	1	8%
	Decision reason not given	6	7%	Means assessment evidence provided insufficient	1	13%	Out of scope work claimed	1	8%
April	Out of scope work claimed	9	11%	Excessive preparation	69	58%	Disbursements not reasonable	5	29%
	Not credible means assessment	8	10%	Duplication	44	37%	Not credible means assessment	3	18%
	CW1 form completed incorrectly/not signed	8	10%	Decision reason not given	4	3%	Means assessment evidence provided insufficient	3	18%
	Disbursements not reasonable	7	9%	Not credible means assessment	1	1%	No evidence of means	2	12%
	Means assessment evidence provided insufficient	7	9%	Supervision	0	0%	Legal Help Form not on file	2	12%
May	Not credible means assessment	23	28%	Excessive preparation	3	75%	No evidence of time claimed	20	45%
	Means assessment evidence provided insufficient	10	12%	No evidence of means	1	25%	Not credible means assessment	5	11%
	Decision reason not given	8	10%	Supervision	0	0%	Disbursements not reasonable	5	11%
	Excessive preparation	7	8%	Duplication	0	0%	Decision reason not given	3	7%
	Client not correctly passported	6	7%	Excessive travel	0	0%	Means assessment evidence provided insufficient	2	5%

Escaped Cases: 3-Month Rolling Appeal Decisions

	Total	Caseworker Review:				ICA Review:				Part-Grant	%	To Complete	
		Stage 1		Stage 2		Stage 2		Stage 2					
		Reject	%	Grant	%	Refuse	%	Grant	%				
Year to Date	851	57	7%	680	80%	50	6%	30	4%	22	3%	0	
Category													
Civil	592	45	8%	519	88%	37	6%	22	4%	14	2%	0	
CLA	16	0	0%	11	69%	3	19%	2	13%	0	0%	0	
Mental Health	33	1	3%	26	79%	4	12%	1	3%	5	15%	0	
Immigration	130	11	8%	123	95%	6	5%	5	4%	3	2%	0	
3 Month Rolling													
March	88	4	5%	69	78%	5	6%	3	3%	3	3%	0	
April	131	8	6%	97	74%	16	12%	7	5%	2	2%	0	
May	124	7	6%	99	80%	6	5%	3	2%	6	5%	0	

The Caseworker View:



“I see a lot of interpreter invoices where they are claiming for a minimum charge, but there’s no justification for why. We’ve reduced it on assessment, which is then appealed and we get a justification: like there being a scarcity of interpreters for that language. We then reinstate those costs. It is a little bit extra effort upfront, but getting that justification with the original claim would save the effort of having to appeal at all.”

Data Note:



- ❖ Appeals Data as of 06 July 2021
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

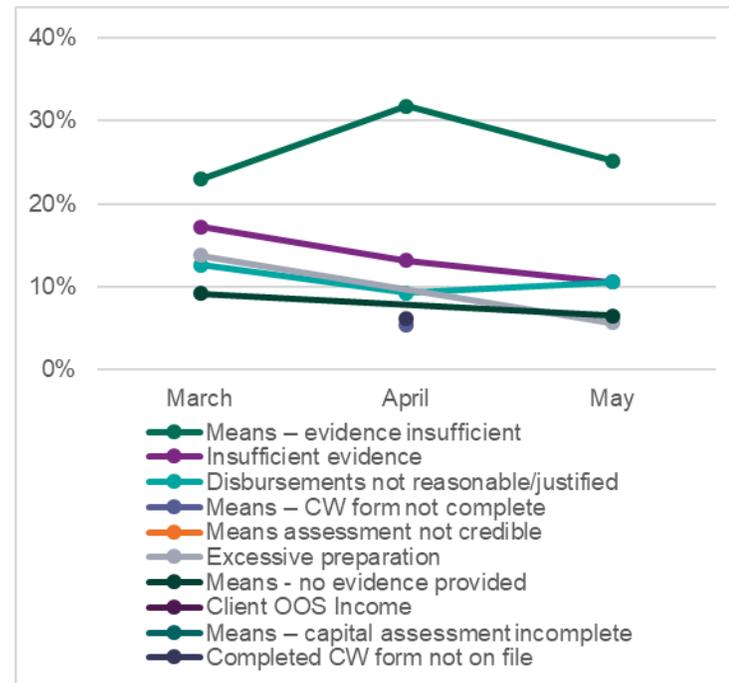
Escaped Cases: 3-Month Rolling What is Being Appealed

March	Volume	%
Means – evidence insufficient	20	23%
Insufficient evidence	15	17%
Excessive preparation	12	14%
Disbursements not reasonable/justified	11	13%
Means - no evidence provided	8	9%

April	Volume	%
Means – evidence insufficient	41	32%
Insufficient evidence	17	13%
Disbursements not reasonable/justified	12	9%
Completed CW form not on file	8	6%
Means – CW form not complete	7	5%

May	Volume	%
Means – evidence insufficient	31	25%
Disbursements not reasonable/justified	13	11%
Insufficient evidence	13	11%
Means - no evidence provided	8	7%
Excessive preparation	7	6%

Year To Date	Volume	%
Means – evidence insufficient	209	25%
Insufficient evidence	92	11%
Disbursements not reasonable/justified	84	10%
Means - no evidence provided	56	7%
Means – CW form not complete	55	6%



Nil Assessments (Year To Date)	Volume	%
Means – evidence insufficient	196	36%
Means – CW form not complete	55	10%
Means - no evidence provided	49	9%
Means assessment not credible	30	6%
Means - CW form not signed	25	5%

The Caseworker View:



“Please make sure to check the hourly rates claimed in housing and family cases before submitting your claim. This will help make sure they reflect the correct level of service: where it’s right first time, it means we can get the bill paid quicker, which is good for the provider as well as less work for us.”

Data Note:



❖ Percentage figures provided reflect the volume of assessments for that month/YTD, rather than the full population of work for that month.

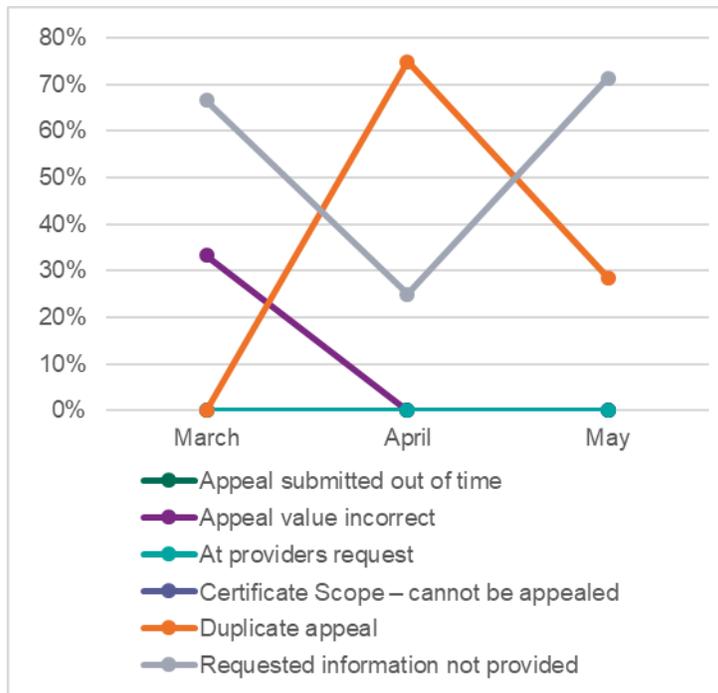
Escaped Cases: 3-Month Rolling EC Appeal Rejections

March	Volume	%
Requested information not provided	2	67%
Appeal value incorrect	1	33%
Appeal submitted out of time	0	0%
Duplicate appeal	0	0%
At Providers Request	0	0%

April	Volume	%
Duplicate appeal	6	75%
Requested information not provided	2	25%
Appeal submitted out of time	0	0%
Appeal value incorrect	0	0%
At Providers Request	0	0%

May	Volume	%
Requested information not provided	5	71%
Duplicate appeal	2	29%
Appeal submitted out of time	0	0%
Appeal value incorrect	0	0%
At Providers Request	0	0%

Year to Date	Volume	%
Duplicate appeal	19	51%
Requested information not provided	15	41%
Appeal submitted out of time	3	8%
Appeal value incorrect	0	0%
At Providers Request	0	0%



The Caseworker View:



“I would advise providers to please make sure they have all the relevant evidence before submitting their appeal. This is especially true for cases where we’ve nil assessed because of the means assessment. If there is a key piece of information missing, it should be sent in on the appeal. Otherwise, I just have to reject the appeal, which causes more delay for the provider and extra work for us. It must be very annoying for providers.”

Guidance, Hints & Tips



- ❖ Make sure you’re getting your appeals right first time by following the guidance at [chapter 9 of the Escaped Cases Electronic Handbook](#)
- ❖ After any LAA assessment to nil, usually for means assessments, that is overturned, LAA will carry out an assessment of the file as normal in line with [6.81 of the Standard Civil Specification Contract](#)

Data Note:



- ❖ Percentage figures are for the % of appeals rejected, not the full population of appeals.

Escaped Cases: Overturned by Independent Caseworker Review

Caseworker Decision Reason	Year To Date		March		April		May	
	Volume	%	Volume	%	Volume	%	Volume	%
LAA Issue								
Caseworker Error – Decision Making	13	2%	0	0%	0	0%	2	0%
Caseworker Error – Admin Error	2	0%	0	0%	0	0%	0	0%
LAA Error	1	0%	0	0%	0	0%	0	0%
Provider Issue								
Evidence supplied – Means evidence provided	250	40%	30	5%	46	7%	40	6%
Evidence supplied - File notes	146	24%	21	3%	25	4%	16	3%
Evidence supplied - Disbursement justification	57	9%	9	1%	7	1%	10	2%
Evidence supplied – Original/LH form now on file	47	8%	3	0%	9	1%	5	1%
Discretionary allowance	25	4%	4	1%	4	1%	6	1%
Evidence supplied – Correct means assessment carried out for client	23	4%	0	0%	0	0%	3	0%
Evidence supplied – Clients capital confirmed	21	3%	1	0%	1	0%	5	1%
Evidence Supplied - Disbursement breakdown	12	2%	1	0%	2	0%	5	1%
Evidence supplied - Attendance justification	10	2%	1	0%	2	0%	2	0%
Evidence supplied – Client correctly pass-ported	7	1%	0	0%	0	0%	3	0%
Evidence Supplied - Travel Justification	4	1%	0	0%	1	0%	0	0%
Total	618							

The Caseworker View:



“I would go to back to the basics and advise Providers to check their invoices to ensure all necessary details are recorded and correct before submitting the claim. They should be case specific with the client’s name recorded, or case reference if we can cross reference this, and ensure a breakdown of the total fee is provided. This will prevent delays in processing the bills.”

Guidance, Hints & Tips



- ❖ Disbursement vouchers are often missing key information, such as addresses experts have travelled from and to. A full breakdown of all the detail we require is published at [Chapter 5.2 of the Escape Cases Electronic Handbook](#).

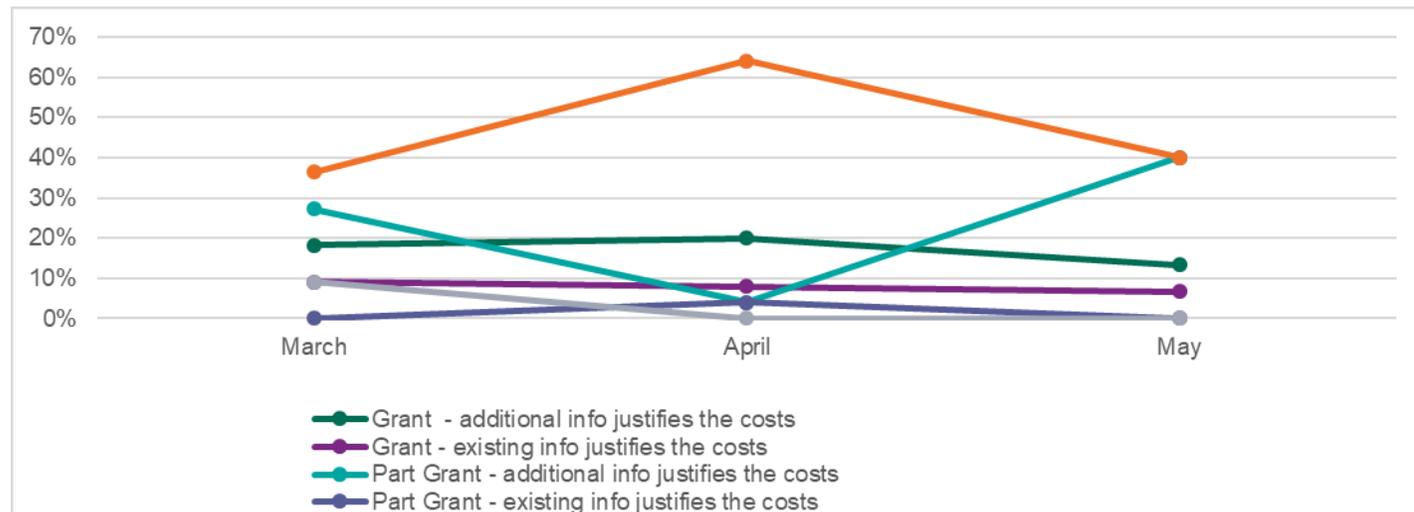
Data Note:



- ❖ Percentage figures are for the % of appeals decided on internal review, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 5: Escaped Cases Terms](#)

Escaped Cases: 3-Month Rolling ICA Decisions

ICA Decision	Year To Date		March		April		May	
	Volume	%	Volume	%	Volume	%	Volume	%
Grant - additional info justifies the costs	20	22%	2	18%	5	20%	2	13%
Grant - existing info justifies the costs	7	8%	1	9%	2	8%	1	7%
Part Grant - additional info justifies the costs	18	20%	3	27%	1	4%	6	40%
Part Grant - existing info justifies the costs	1	1%	0	0%	1	4%	0	0%
Refuse - remains unjustified to IFCA	43	47%	4	36%	16	64%	6	40%
Refuse - additional reasons added	2	2%	1	9%	0	0%	0	0%
Total	48		11		1		3	



The Caseworker View:



“It’s really helpful for me when providers use the Appeal pro forma, because it lays out everything being appealed in a straight forward manner. Not only does this let me make a proper review of the assessment, but it also helps lay out the issues for the ICA clearly. This means the ICA can lay out their reasoning for their decision more clearly and in turn helps us understand why our assessment was overturned, or providers understand if the assessment is upheld”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)
- ❖ For the Escaped Cases Appeal Pro Forma, please refer to the [Escape Cases Claim Forms](#)

Data Note:



- ❖ Percentage figures are for the % of appeals decided on by an ICA, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 5: Escaped Cases Terms](#)

Escaped Cases: 12-Month Rolling Appeals Time Taken

Month	Provider	Stage 1	Stage 2		Overall Time Taken	
	Average Time Taken To Appeal	Time To Process	Time Out With An ICA	Average Time Taken	Average End to End	Longest Overall Time Taken
June	20	7	7	9	8	43
July	27	5	6	9	7	53
August	26	5	9	10	5	28
September	43	5	2	28	7	20
October	21	4	3	5	5	44
November	49	5	9	11	6	35
December	44	9	13	14	10	40
January	24	4	7	9	6	39
February	14	6	37	7	7	25
March	13	6	6	8	8	34
April	21	6	8	13	9	51
May	20	7	7	12	8	53
Totals	27	6	9	11	7	39

The Caseworker View:



“If we’re doing an assessment on the file, it’s really helpful if the provider can lay it out as explained on our model file submission page. By doing that it makes information easier to find – if we can find the evidence first time, then we can pay the claim first time, and that means both us and the solicitor can avoid having to deal with an appeal.”

The Caseworker View:



“If you’re not sure on what evidence should be included in any disbursement voucher, you can refer to the Escape Cases Electronic Handbook for advice on what information we require.”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)
- ❖ The format of your file of papers can impact how easily accessible information is for caseworkers. Make sure your file is in chronological order and contains all correspondence, orders and attendance notes: <https://www.gov.uk/guidance/model-file-submissions-for-civil-billing>
- ❖ For the Escaped Cases Appeal Pro Forma, please refer to the [Escape Cases Claim Forms](#)

Data Note:



- ❖ For an explanation of terms, column headers, and how dates are calculated, please refer to [Appendix 5: Escaped Cases Terms](#)

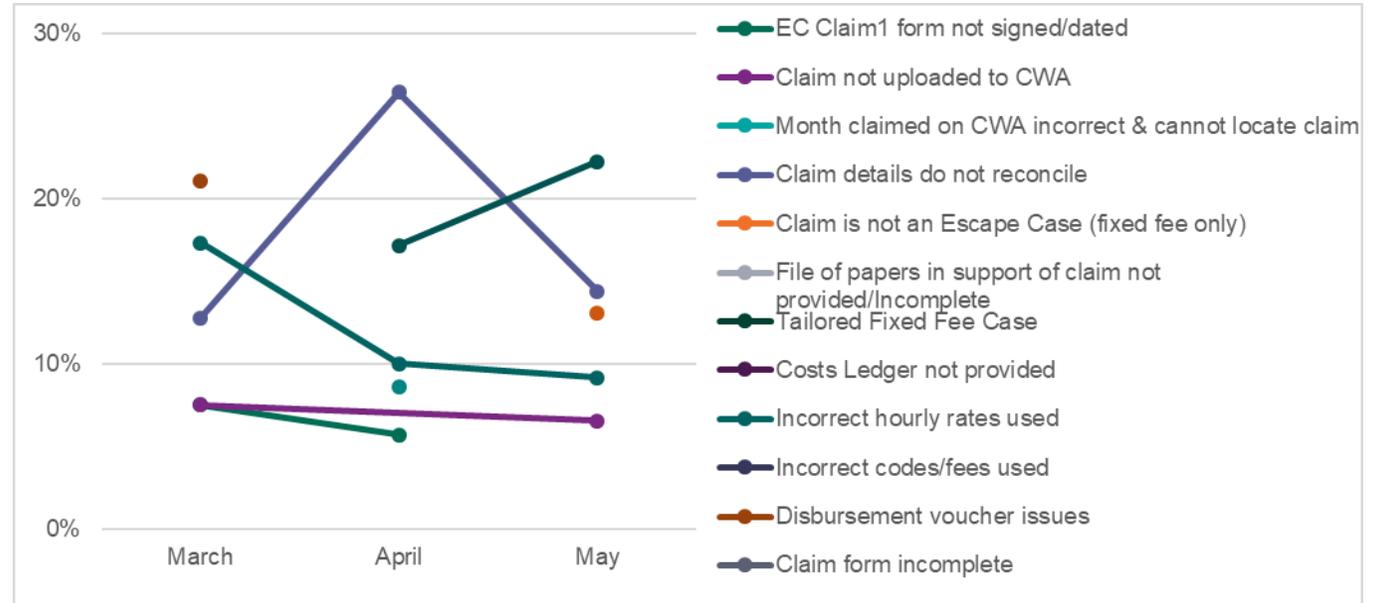
Section 5: Escaped Cases Bill Rejects

Contains data on rejected bills for Civil Escaped
Cases & Legal Help claims



Escaped Cases: 3-Month Breakdown of Bill Reject Reasons – Overall

March		
	No. of Rejects	Reject %
Disbursement voucher issues	28	21%
Incorrect hourly rates used	23	17%
Claim details do not reconcile	17	13%
EC Claim1 form not signed/dated	10	8%
Claim not uploaded to CWA	10	8%
April		
	No. of Rejects	Reject %
Claim details do not reconcile	37	26%
Disbursement voucher missing or unacceptable	24	17%
Incorrect hourly rates used	14	10%
Miscellaneous/other	12	9%
EC Claim1 form not signed/dated	8	6%
May		
	No. of Rejects	Reject %
Disbursement voucher missing or unacceptable	34	22%
Claim details do not reconcile	22	14%
File of papers in support of claim not provided	20	13%
Incorrect hourly rates used	14	9%
Claim not uploaded to CWA	10	7%



The Caseworker View:



A common theme I have noticed is disbursement vouchers for experts and interpreters that don't contain their applicable hourly rate as well as the total amount of hours worked on a case. It's difficult to judge the costs claimed without this information, so often I end up returning the claim for more information."

Data Note:



❖ Percentage figures are the total of all rejects.

Escaped Cases: 3-Month Breakdown of Bill Reject Reasons – By Category

Month	Civil		Mental Health		Immigration				
	No. of Rejects	Reject %	No. of Rejects	Reject %	No. of Rejects	Reject %			
March	Incorrect hourly rates used	18	24%	Claim details do not reconcile	5	29%	Disbursement voucher issues	10	24%
	Disbursement voucher issues	18	24%	File of papers in support of claim not provided	3	18%	Claim details do not reconcile	7	17%
	EC Claim1 form not signed/dated	6	8%	EC Claim1 form not signed/dated	2	12%	Incorrect hourly rates used	5	12%
	Claim not uploaded to CWA	6	8%	Miscellaneous/other	2	12%	Incorrect codes/fee used	4	10%
	Miscellaneous/other	6	8%	Claim not uploaded to CWA	1	6%	Claim not uploaded to CWA	3	7%
April	Claim details do not reconcile	15	27%	Claim details do not reconcile	5	50%	Claim details do not reconcile	17	33%
	Incorrect hourly rates used	13	24%	Miscellaneous/other	2	20%	Disbursement voucher missing or unacceptable	16	31%
	Miscellaneous/other	7	13%	Claim is not an Escape Case (fixed fee only)	1	10%	EC Claim1 form not signed/dated	7	14%
	Disbursement voucher missing or unacceptable	7	13%	Month claimed on CWA incorrect	1	10%	Claim is not an Escape Case (fixed fee only)	5	10%
	UFN does not match or missing	4	7%	Incorrect codes/fee used	1	10%	Claim not uploaded to CWA	4	8%
May	Disbursement voucher missing or unacceptable	15	26%	Costs Ledger not provided	6	60%	Disbursement voucher missing or unacceptable	17	33%
	Incorrect hourly rates used	12	21%	Disbursement voucher missing or unacceptable	2	20%	Claim details do not reconcile	11	21%
	Claim details do not reconcile	10	18%	Claim details do not reconcile	1	10%	File of papers in support of claim not provided	11	21%
	File of papers in support of claim not provided	9	16%	Costs ledger – insufficient info	1	10%	Miscellaneous/other	6	12%
	Claim not uploaded to CWA	8	14%	Out of scope work claimed	1	10%	UFN does not match or missing	4	8%

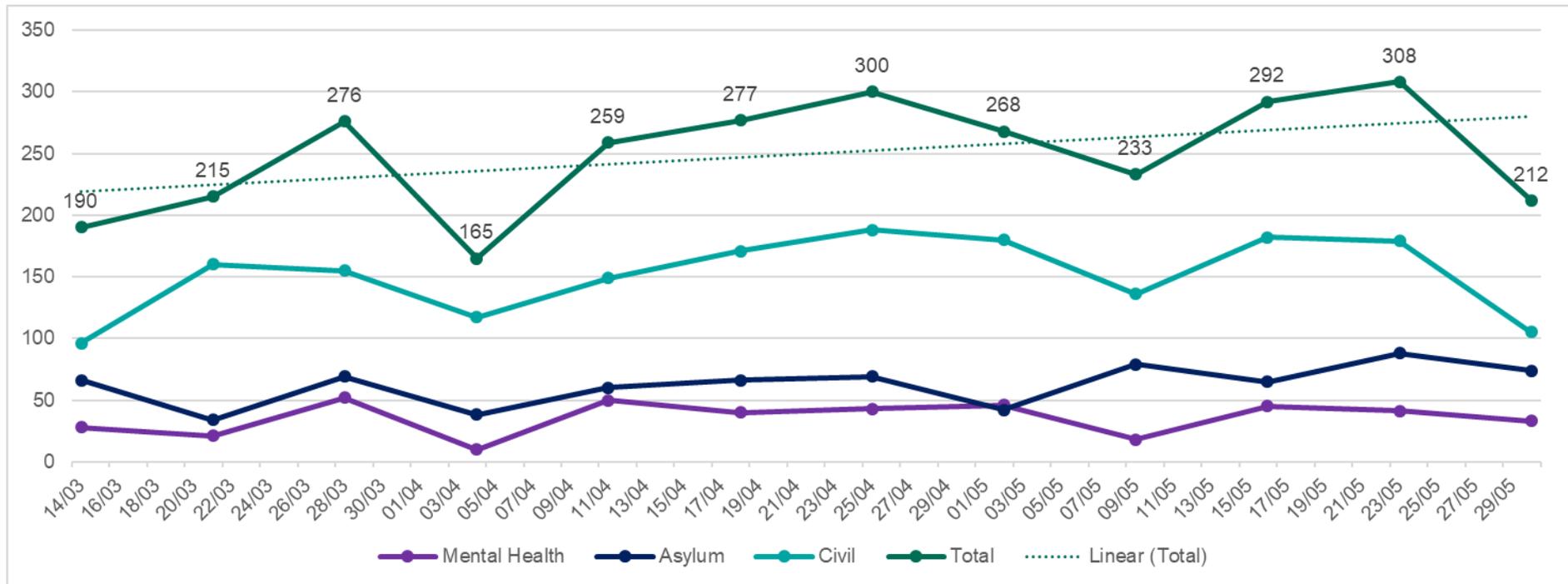
Section 6: Escaped Cases Intakes & Processing Times

Contains data on how long LAA are spending processing your Civil Escaped Cases & Legal Help claims



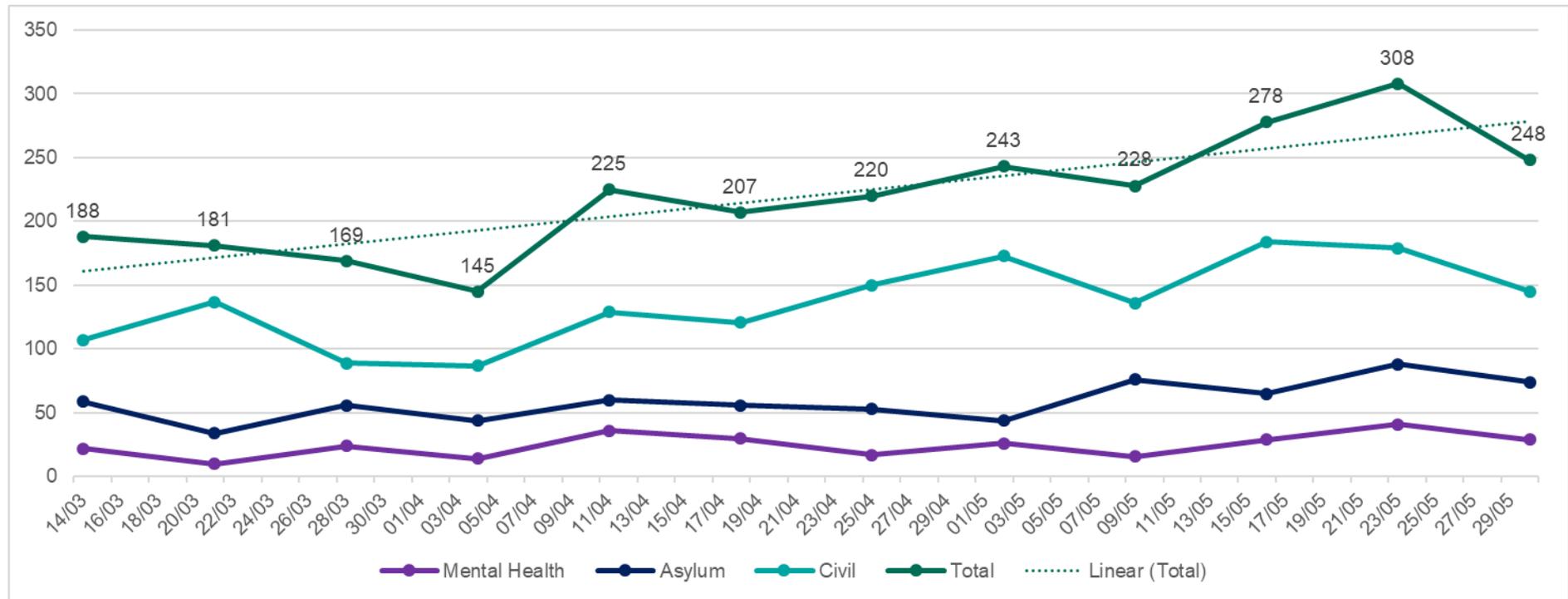
Escaped Cases: 12-Week Intakes

	14/03/2021	21/03/2021	28/03/2021	04/04/2021	11/04/2021	18/04/2021	25/04/2021	02/05/2021	09/05/2021	16/05/2021	23/05/2021	30/05/2021
Mental Health	28	21	52	10	50	40	43	46	18	45	41	33
Asylum	66	34	69	38	60	66	69	42	79	65	88	74
Civil	96	160	155	117	149	171	188	180	136	182	179	105
Total	190	215	276	165	259	277	300	268	233	292	308	212



Escaped Cases: 12 Week Work In Progress (WIP)

	14/03/2021	21/03/2021	28/03/2021	04/04/2021	11/04/2021	18/04/2021	25/04/2021	02/05/2021	09/05/2021	16/05/2021	23/05/2021	30/05/2021
Mental Health	22	10	24	14	36	30	17	26	16	29	41	29
Asylum	59	34	56	44	60	56	53	44	76	65	88	74
Civil	107	137	89	87	129	121	150	173	136	184	179	145
Total	188	181	169	145	225	207	220	243	228	278	308	248



Section 7: Caseworker Topics

Contains trends on issues being raised by caseworkers



Caseworker Topics: Civil Bill Rejects

This month for the Caseworker topic, we are looking specifically at the way LAA reports on Civil Bill Rejects.

Civil Claim Fix are seeing an increase in queries asking if a bill reject has been KPI or non-KPI rejected, this edition is to help providers understand what has changed and why LAA has changed it.

What is the change?

Since the start of financial year 2021 (1 April 2021), LAA removed the distinction between KPI and non-KPI rejects.

Why change?

Under the old distinction, where we reported on KPI rejects, we were presenting a disconnect between what we were saying and what we were doing. Our real return rate, which is what providers were experiencing, was 20%; but we were saying our reject rate was less than 5%. This was confusing for providers and making proactive action to reduce the reject rate difficult. This will allow us to pay more of your bills first time.

Guidance, Hints & Tips



- ❖ For further advice on what constitutes a Civil Bill Reject and what issues LAA will reduce your claim on assessment for, please refer to chapter 16 of the [Civil Finance Electronic Handbook](#)

Provider FAQ

- Q Can we still challenge a rejected bill through LAA's Civil Claim Fix Service?
A Yes, *Civil Claim Fix will continue to operate a service allowing you challenge any rejected, or otherwise returned, civil bill. Where LAA are in error, a priority resubmission service will be provided and where providers are in error, feedback on avoiding that error in the future will be provided*
- Q Is the way we resubmit bills changing?
A No, *you will still be able to use CCMS' copy bill feature, or re-upload an XML as normal for CCMS' claim upload feature*
- Q Will the Handbook be updated?
A Yes, *the next update will combine the tables for KPI rejects and non-KPI rejects in to a single table.*
- Q Will we get any support for this change in approach?
A Yes, *Contract Managers will proactively support their firms as we aim to increase the amount of bills we can pay first time.*

Section 8: Bi-Monthly Top Tips

A summary of the pack's top tips



Caseworker Top Tips!

Help Us Say Yes By Highlighting The Key Part of Any Court Orders

- “It really assists caseworkers when providers mark the court order containing drug/alcohol testing directions, any advocates meetings and court bundles, and the confirmation of start/end times for remote hearings. It can be easy to miss the information when it’s buried in 60 pages of court orders in a single upload in CCMS. It is a bit of extra work upfront, but it does help us pay your bill in full first time round and avoids any important information being overlooked. It’s especially relevant since the move to remote working where court orders are being relied on more heavily as evidence for payments being claimed.”

Explain Travel Claimed

- “I’d like to reiterate that when solicitors are claiming mileage to court, they must specify which court they travel to. Otherwise we have to go on other evidence available, which may lead to us reducing what might be legitimate travel costs. This would reduce potentially the number of provisional assessments.”

Avoid Needing To Contact Us To Ask For Your Bill To Be Returned By Checking Upfront

- “I would advise that before pressing ‘Submit’ on the bill, please double check all items are correctly claimed by downloading a draft copy and reviewing it. If you are missing an expert’s fee, it’s better to know before submitting the claim to save contacting us, asking for it back, amending then resubmitting.”

Check Your Disbursement Vouchers When You Receive Them

- “When uploading disbursement vouchers to CCMS, please check upfront to ensure that the voucher has sufficient information to allow to make an assessment of the reasonableness of the costs. If the voucher isn’t itemised, we don’t know how much time has been spent doing different activities, and without that context, it’s difficult to say if the costs is ‘reasonable’ or not.”

Check Your Hourly Rates For All EC Claims

- “Please make sure to check the hourly rates claimed in housing and family cases before submitting your claim. This will help you to make sure they reflect the correct level of service you have provided to the client: where it’s right first time, it means we can get the bill paid and closed much quicker, which is good for the provider as well as meaning less work for us.”

Guidance Links

For getting your disbursements right, refer to:

- [Chapter 10.2 of the Civil Finance Electronic Handbook](#) for what evidence we need.
- [Appendix 7 of the Civil Finance Electronic Handbook](#) for example template invoices with what breakdown we need.

For evidential requirements for remote hearings, please refer to:

- [Remote Family Hearings Guidance](#) for guidance on what we can accept in place of an Advocates Attendance Form.

For information on satisfactory means evidence for your Escaped Cases, please refer to:

- [Guide to Determining Financial Eligibility for Controlled Work](#)

For justifying a claim for enhancement of your hourly rates, refer to:

- [Chapter 3 of the Civil Finance Electronic Handbook](#) for the two-stage test and examples of what would meet the criteria

For guidance on reporting the Statutory Charge to us, refer to:

- [Chapter 22 of the Civil Finance Electronic Handbook](#) for guidance on what information we require.

Section 9: A Spotlight On...

A spotlight on individual teams in LAA



A Spotlight on LAA's UPOA Team

This month for the team spotlight, we wanted to share some information about our UPOA Team. Here's everything you need to know about them!

Who We Are:

The UPOA Team (Unrecouped Payments on Account) are based in our Leeds Office and currently comprises 6 members of staff.

The small size of the Team may surprise some of you reading this, the general assumption is that the Team is much larger!



What We Do:

All our work is Provider Account based and the main **UPOA Project** work can be split as follows:

- ❖ Review of dormant cases with outstanding payments on account (POAs). Dormant cases are those with no activity for 24 months or longer.
- ❖ Review all outstanding cases on Provider accounts who no longer hold a contract.
- ❖ Review of stagnant cases: cases where no activity has taken place for 6 years or longer
- ❖ Closing outstanding cases where the solicitors firm have been intervened by the Solicitors Regulation Authority (SRA) or have ceased trading.

Why Do We Review?

To ensure there is adequate control of outstanding cases and POAs to protect the Fund in line with the National Audit Office requirements.

What Have We Achieved?

Our main work of recovery was “paused” in March 2020 due to the pandemic, but we were able to continue to work with Providers who no longer hold a contract and undertook bill assessment training to support our colleagues on Civil Finance.

As the country emerges from lockdown, and normal service starts up again, we will look to gradually recommence work on recoveries, likely with an initial focus being on stagnant cases.

Part of this will involve collaboration: collaboration is a key part of how we operate and is vital to the success of the Team. We regularly work with Providers, Counsel, Contract Management, Recovery Services, Cash Office, and the High Cost Family Team (formerly VHCC), to name a few.

This ensures all bases are covered as far as possible for all parties and particularly from a Providers' perspective in relation to cash flow.

Section 10: Appendices

Contains explanations of key terms and how data is reported.



Appendix 1: General Terms & Glossary

Glossary	Icon Guide	
<p>❖ CIS (Corporate Information System) LAA's database for paper-based claims</p>		<p>Electronic Assistance Hints and tips to help you use this document electronically</p>
<p>❖ CCMS (Client and Cost Management System) LAA's online database</p>		<p>Printing Assistance Guidance to help you if you want to print the document</p>
<p>❖ KPI (Key Performance Indicator) A contract-based performance measure used to monitor the performance of firms</p>		<p>Data Note Notes on how the data is collected, what the data is displaying and what the column headings mean</p>
		<p>The Caseworker View Quotes directly from our caseworkers to help you help us say yes to your claim first time</p>
		<p>Guidance, Hints & Tips Links to LAA's guidance, all publicly available for you to access</p>

Appendix 2: Appeals Explanation

Appeal Decisions:

- ❖ **ICA**
Independent Costs Assessor
- ❖ **Reject**
Appeal was not processable and returned to provider. These are not monitored under any KPI.
- ❖ **Grant**
Appeal was overturned on internal review by a caseworker.
- ❖ **Refuse**
ICA has considered the appeal and upheld LAA's assessment.
- ❖ **Reinstate**
ICA has considered the appeal and overturned LAA's assessment in full or in part.

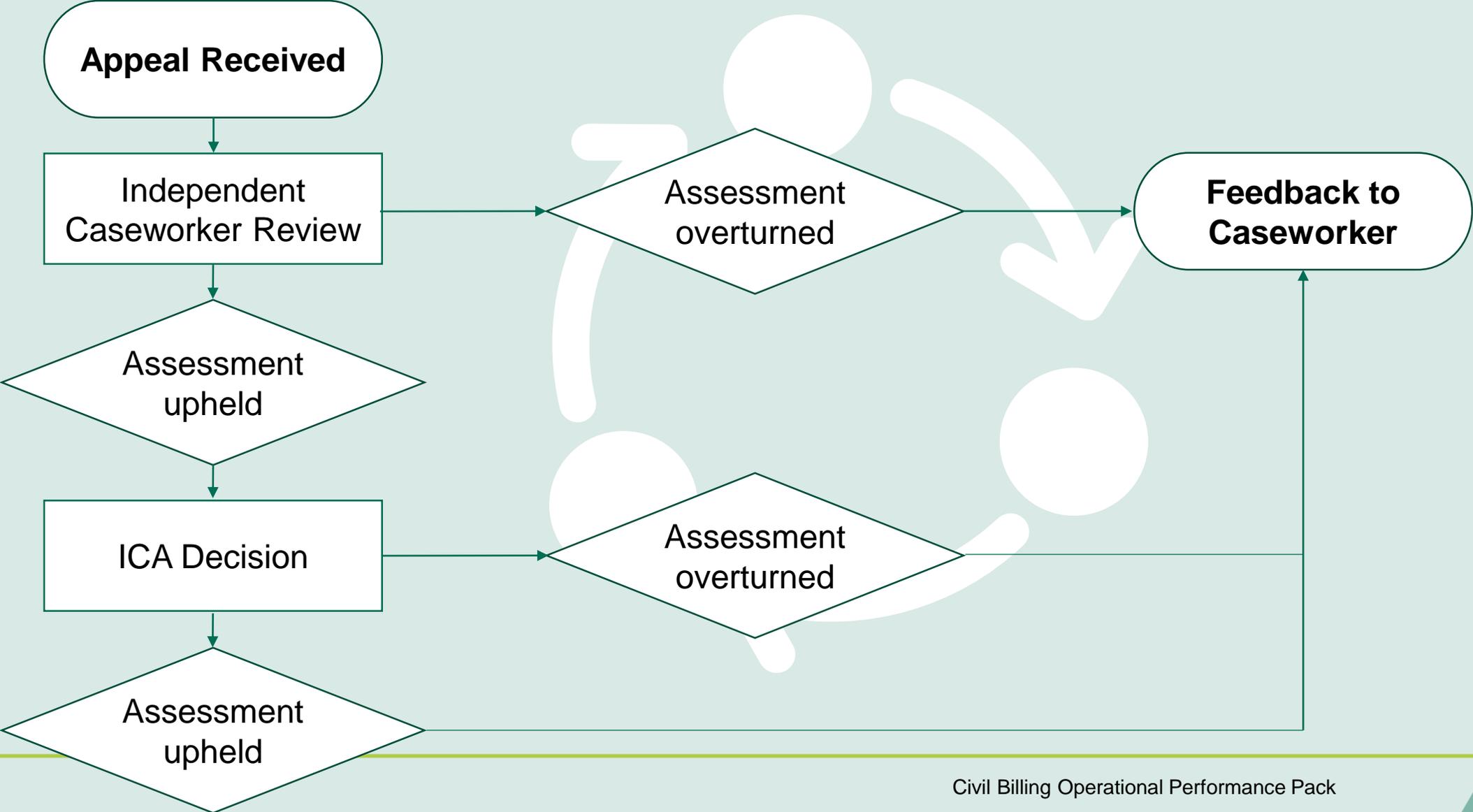
Caseworker Review Decisions:

- ❖ **Discretionary Allowance**
A small amount that is not worth the cost of sending to an ICA. For example, an appeal for a total of 2 hours 30 minutes, of which most is granted on internal review, but 6 minutes remains under dispute. The costs of sending to the ICA outweigh the cost of granting.
- ❖ **Evidence Supplied on Review**
General evidence supplied that does not fit in to one of the specific categories.
- ❖ **LAA Error**
LAA accepts the assessment is incorrect, but beyond the control of the caseworker.

Appeal Time Taken Data:

- ❖ Appeals data is in respect of appeals concluded in that month.
- ❖ **Average Time Taken to Appeal:**
The average time taken by the provider or counsel to submit the appeal, from the date LAA conducted the assessment to the date LAA received the appeal.
- ❖ **Time To Process:**
The 1st Stage caseworker review relates to time taken from receipt of the appeal to initial caseworker review.
- ❖ **Time Out With An ICA:**
Returned from ICA relates to the average amount of days taken for an appeal decision to be received back from the ICA.
- ❖ **Average Time Taken:**
The average time take by the ICA from the date LAA sends the appeal to the ICA for a decision until the ICA returns the decision to LAA for actioning.
- ❖ **Average End to End:**
Overall time taken is calculated from date of receipt to the date the provider was notified of the decision.
- ❖ **Longest Overall Time Taken:**
The single longest appeal LAA dealt with in that month, calculated from date of receipt to the date the provider was notified of the decision.

Appendix 2: Civil Cost Appeal Feedback Process



Appendix 3: Rejects & Civil Claim Fix Terms Explanation

As of April 2021, LAA no longer distinguishes between KPI and non-KPI rejects. This is to help an open and honest conversation with providers on how we are really performing on civil bill rejects and drive the real reject rate down further.

LAA now distinguishes between a reject or a document request and formally reports on the former only.

❖ **Reject**

A rejected claim that has been formally returned to the provider for amendment, for missing information to be provided or further information to help process the claim. Applies to claims made via CCMS and on paper forms also.

❖ **Document Request**

A specific request for more information made by a caseworker in a limited number of circumstances. Applies to CCMS claims only.

For specific examples of each type of reject, please refer to [Chapter 16.1 of the Civil Finance Electronic Handbook](#)

Civil Claim Fix Categories:

❖ **Caseworker Error**

The caseworker decision to reject was incorrect.

❖ **Provider Error**

The caseworker decision to reject was correct.

❖ **LAA Error**

LAA accepts the reject is incorrect, but beyond the control of the caseworker.

❖ **Inconclusive**

Fault for the reject cannot be found on either side.

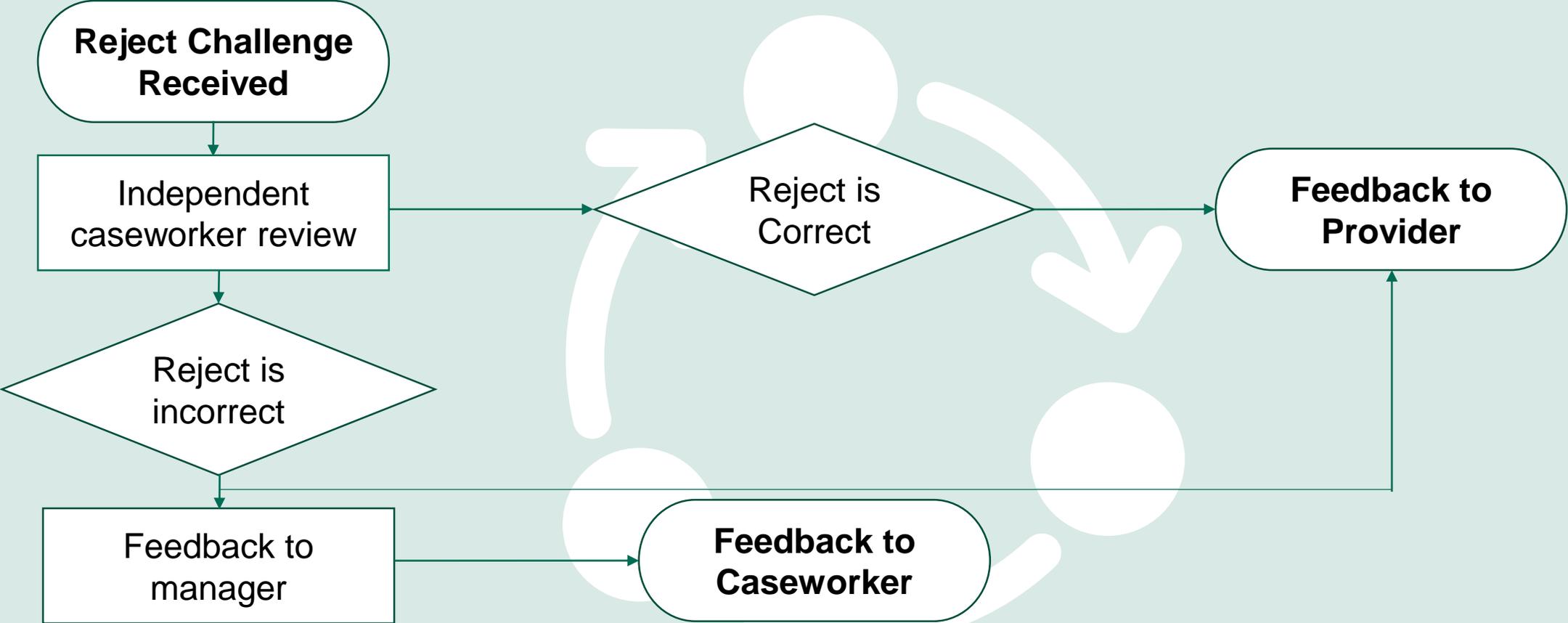
❖ **Provider Query**

A query submitted by a provider, not a challenge to a reject.

❖ **Internal Referral**

A referral to remove a rejection following internal quality control. Applies to paper claims only.

Appendix 3: Civil Claim Fix Feedback Process



Appendix 4: Processing Explanations

Processing Time Explanations:

- ❖ The time taken is calculated from the day after the bill becomes assessable until the final decision is made: this means the date that the money is either paid in to the provider or counsel's account or the day the claim is rejected.
- ❖ This means the day the bill comes available for processing counts as day 0. Time the claim is with the provider or counsel, for example, whilst awaiting documents to be uploaded or the Outcome to be completed, is excluded.

For live updates, please refer to [Civil Processing Dates](#)

KPI Targets

- ❖ 'Local target' is a processing target (rather than a payment target).
- ❖ 'KPI target' is to **pay 90% of complete and accurate bills** within 20 working days.

Appendix 5: Escaped Cases Terms

Initial Decisions Made

❖ **Allowed as Claimed**

A claim that has been assessed as drawn by the provider.

❖ **Reduced but Escaped**

A claim that has been reduced, but still passes the escaped threshold.

❖ **Reduced to Fixed Fee**

A claim that has been reduced to the applicable fixed fee.

❖ **Nil Assessed**

A claim that has been assessed to nil.

❖ **Rejected**

A claim that has been returned to the provider without being paid.

Appeal Time Taken Data:

❖ Appeals data is in respect of appeals concluded in that month.

❖ **Average Time Taken to Appeal:**

The average time taken by the provider or counsel to submit the appeal, from the date LAA conducted the assessment to the date LAA received the appeal.

❖ **Time To Process:**

The 1st Stage caseworker review relates to time taken from receipt of the appeal to initial caseworker review.

❖ **Time Out With An ICA:**

Returned from ICA relates to the average amount of days taken for an appeal decision to be received back from the ICA.

❖ **Average Time Taken:**

The average time take by the ICA from the date LAA sends the appeal to the ICA for a decision until the ICA returns the decision to LAA for actioning.

❖ **Average End to End:**

Overall time taken is calculated from date of receipt to the date the provider was notified of the decision.

❖ **Longest Overall Time Taken:**

The single longest appeal LAA dealt with in that month, calculated from date of receipt to the date the provider was notified of the decision.



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