

01 September 2021

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Tēnā koe Ross

Your Official Information Act request, reference: GOV-013192

Thank you for your email of 4 August 2021, asking for the following information under the Official Information Act 1982 (the Act):

As at 21 June 2021, ACC had received 127 claims relating to the Pfizer Covid-19 vaccine and had accepted 22 claims for injury or harm.

- 1. Regarding each of the 22 accepted claims, what has been the harm or injury likely caused by the Covid-19 vaccine, and what remedy - financial or otherwise - has been provided to each claimant?*
- 2. Among the 91 undecided claims, what have been the three most severe injuries possibly caused by the vaccine?*
- 3. Among the 127 claimants, how many (if any) said that following vaccination they had experienced or suffered from facial paralysis, Bell's Palsy, or related symptoms?*
- 4. Since roll-out of the Covid-19 vaccine began until the present day, how many people have made a claim to ACC for injury or harm relating to side-effects from the vaccine?*

Background information about treatment injury data

As you are aware, ACC has provided cover for treatment injuries since 1 July 2005. The treatment injury provisions replaced the medical misadventure provisions of the Accident Compensation Act 2001, to bring it more in line with the no-fault nature of the scheme.

A treatment injury is a personal injury caused as a result of seeking or receiving medical treatment from a registered health professional. In order to fulfil the criteria for cover, the person must have suffered a personal injury and there must be a clear causal link between the treatment and the injury, and the injury must not be a necessary part or ordinary consequence of the treatment.

When considering treatment injury data, it is important to note that the number of claims lodged with ACC cannot be taken as an accurate indication of the occurrence of injury during treatment or the quality of care. This is because, among other reasons, not all occurrences of injury during treatment are lodged with ACC.

Context

Treatment injury (TI) data is available from 1 July 2005, when treatment injury provisions came into law.

Further information about treatment injury can be found at the following links:

- <https://www.acc.co.nz/for-providers/treatment-safety/> and
- <https://www.acc.co.nz/assets/provider/ACC7971-Supporting-Treatment-Safety-2021.pdf>

(overview of treatment injury in public and private surgical hospitals and general practice settings).

Claim lodgement rates are dependent on several factors. They can be influenced by:

- population demography i.e. the characteristics of the resident population, visitors and referred patients
- health status of the population treated
- what level of facility the organisation provides i.e. tertiary versus secondary
- familiarity of health providers or clients in recognising and/or lodging treatment injury claims.

Notes about the data provided

The following points should be considered when interpreting the data provided:

- The data has been extracted for COVID-19 vaccine-related TI claims for which a cover decision had been made, as at 21 June 2021. The year the cover decision made may differ from the year in which the claim was lodged/and or the injury occurred.
- The data was extracted on 12 August 2021 and may differ if extracted again at a later date.

Costs

There are three broad categories of costs (entitlements) a claim could receive:

- **Compensation** (weekly compensation for lost earnings, lump sums and death benefits)
- **Treatment** (initial hospital treatment and on-going primary and secondary treatment)
- **Rehabilitation** support (physical rehabilitation and various forms of personal support).

The biggest single factor in determining the long-term costs of some injuries is the amount of personal support needed by the client. Some treatment injury types may be minor and require little or no ongoing support from ACC.

Payments

ACC pays for the provision of services for injured persons through DHBs via two mechanisms:

- a) Public Health Acute Services (PHAS) payments. Acute treatment for covered claims in public hospitals is provided by an annual service agreement between ACC and the Ministry of Health, and is funded by bulk payments from ACC to the Crown.
- b) Direct purchase of other services by ACC for persons suffering a personal injury.

Payment data relating to this request is limited to services purchased directly by ACC only.

ACC takes privacy seriously

ACC does not routinely disclose claim counts fewer than four. Accordingly, some of the figures provided below only indicate the claim count is fewer than four. This limits the potential for particular individuals or matters specific to certain individuals from being identified. Withholding the data in the is way is necessary to protect our clients' privacy. This decision has been made under section 9(2)(a) of the Act. In doing so, we considered the public interest in making the withheld figure available and determined that it does not outweigh the need to protect their privacy.

COVID-19 vaccine related treatment injury claims

The data below has been extracted for treatment injury claims where the treatment event was *vaccination or injection/medication, adverse reaction/medication error* and where the medication type was recorded as *vaccine*.

For this purpose of this response, a combination of a structured data extraction (for specific treatment events, as above) and a free text search of the claim forms received by ACC which mention *Covid vaccine, Covid vaccination* or the vaccine name *Comirnaty*. Free text search methods are not reliable

data extraction methods and can result in anomalies in the data so the resulting claims have been manually reviewed to exclude claims are not relevant. For example, accidents occurring on the way to a COVID-19 vaccination centre.

Please note that we can only respond based on the vaccine related claims lodged with ACC, and the figures may differ to those previously reported or supplied. Up-to-date data on the number of adverse effects resulting from the COVID-19 vaccine can be found on the MedSafe website, [here](#).

1. Regarding each of the 22 accepted claims, what has been the harm or injury likely caused by the Covid-19 vaccine, and what remedy - financial or otherwise - has been provided to each claimant?

As at 21 June 2021, 22 claims had been accepted for cover following a COVID-19 vaccination. Eleven of these claims were for adverse or allergic reactions to the vaccine. Five were for an anaphylactic reaction and the remaining six were covered for other injuries such as infections.

As of 11 August 2021, 14 of these 22 claims have had a payment made for treatment and, of these, fewer than four have been paid compensation or rehabilitation payments. Fewer than four claims have been paid over \$500.

Table 1. Accepted COVID-19 claims by primary injury and payment type

Primary Injury	Claim Count	All Payments (\$)	Treatment Payments (\$)	Compensation Payments (\$)	Rehabilitation Payments (\$)
Adverse/Allergic Reaction	11	390	390	0	0
Anaphylactic Reaction	5	10,040	1,497	7,826	717
Other	6	9,351	1,998	7,353	0
Total	22	19,781	3,885	15,179	717

2. Among the 91 undecided claims, what have been the three most severe injuries possibly caused by the vaccine?

As at 21 June 2021, 91 claims had not been decided. As ACC is a no-fault scheme, the severity of an injury is not material for ACC to make a cover decision.

As noted in our previous response, measuring the impact of an injury on a person is challenging. Among other measures, ACC uses the overall cost of a treatment injury claim as an indicator of the severity of the injury because generally more costly claims have a more severe impact on the person injured. While not always directly related, overall cost is one measure of severity and impact.

Another measure is comparing the number of people who only need medical treatment for their treatment injury with the number of people who receive additional support as well as treatment. An entitlement claim is a claim that has received additional support such as weekly compensation or social or vocational rehabilitation for a covered injury as well as any funded medical treatment required.

As of 11 August 2021, 36 of the 91 claims that were previously undecided have been accepted. To date, no compensation or rehabilitation payments have been made for these claims and 23 claims had more than \$100 paid in treatment costs.

With regard to the remaining 55 undecided treatment injury claims, we are unable to use the measures above to as a proxy to indicate the *three most severe injuries* as payments for these claims have not yet been made.

3. ***Among the 127 claimants, how many (if any) said that following vaccination they had experienced or suffered from facial paralysis, Bell's Palsy, or related symptoms?***
4. ***Since roll-out of the Covid-19 vaccine began until the present day, how many people have made a claim to ACC for injury or harm relating to side-effects from the vaccine?***

As of 7 August 2021, ACC had received 201 Treatment Injury claims related to the COVID-19 vaccine. A manual review of these claims indicates that fewer than four claims related to Bell's Palsy (Facial Cranial Nerve VII palsy). In reviewing for typical "related symptoms" for Bell's Palsy beyond facial weakness, we considered; dryness of the eye and mouth, taste disturbance and hyperacusis (noise sensitivity). In addition, fewer than four claims received were related to trigeminal neuritis, which typically results in facial pain.

If you have any questions

If you have any questions, you can email me at GovernmentServices@acc.co.nz.

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at www.ombudsman.parliament.nz or by phoning 0800 802 602.

Nāku iti noa, nā



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