



## **PUBLIC MINUTES**

**MEDCO BOARD MEETING  
TIME:**

**8 May 2018  
12:45 – 15:30**

**MEETING PLACE**

**Suite 205  
New London House  
London Street  
London  
EC3 7AD**

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**ATTENDEES:**

Martin Heskins (MH) – Executive Chair  
Nigel Teasdale (NT) - Forum of Insurance Lawyers  
Simon Margolis (SM) – Association of Medical Reporting Organisation  
Susan Brown (SB) – Motor Accident Solicitors Society  
Stuart Fielding (SF) – Association of British Insurers  
Surendra Kumar (SK) – British Medical Association  
David Bott (DB) – Association of Personal Injury Lawyers  
Jackie Proctor (JP) – Motor Insurers Bureau  
Leigh Evans (LE) – Head of Operations MedCo  
Mark Waughman (MW) – DSO MIB  
Rowan Waller (RW) – MIB

**OBSERVERS ATTENDING THE BOARD**

Rosie Little (RL) (left the meeting at 14:37)

**SECRETARIAT – MINUTE TAKER:**

Jean Gillett – Motor Insurers Bureau

**APOLOGIES:**

Robert Khan (RK) – Law Society  
Brian Simpson (BS) – Chartered Society of Physiotherapy



## **PUBLIC MINUTES**

### **1. WELCOME**

#### **1.1 Declarations of interests/Gifts etc.**

There is no change to the existing Register of Interests that the Chairman holds. There are no gifts to declare.

#### **1.2 Notification of A.O.B**

None

#### **1.3 Minutes of April Board Meeting**

Approved

#### **1.4 Public Minutes April Board Meeting**

Approved

#### **1.5 Review of Actions of the last meeting.**

Please see updated Action Lists attached.

### **2. UPDATES**

#### **2.1 MoJ**

The Second reading of Civil Liability Bill took place on the 24<sup>th</sup> April in the House of Lords. MOJ feels there was wide support for the overall purpose of the Bill, although there will be some disagreements, it will now go to House of Lords Committee Stage, on 10<sup>th</sup> May. Day 1 will be Part 1 and the second day will be Part 2. The deadline for amendments is 8<sup>th</sup> May, only amendments by Lords are allowed. It was said that the final Bill unlikely to be ready much before the end of November/ beginning of December and that the Bill should receive royal assent by January 2019, subject to Brexit. It was expected that the Regulations would be published before Thursday (10 May).

#### **2.2 Audit**

No decisions were required. The report was noted as read.

#### **2.3 Operations**

The report was noted as read.

#### **2.4 EAPR**

The report was noted as read.

#### **2.5 Education and Training**

The report was noted as read, the board was advised that Bond Solon is undertaking the training analysis and that there will be a workshop in June.



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### 2.6 IT

The board were informed that the user journey improvements would be going live on Thursday 10<sup>th</sup> May and this would enable MRO's and Medical Experts to delete cases where they haven't received an instruction and also give MedCo MI more information.

### 2.7 Statistics

The report was noted as read, the statistics report will continue to be developed to improve the way the way the statistics are displayed.

At present there are: 8 Tier 1 and 73 Tier 2 MROs

It was noted from the statistics report that Physios make up 2% of Medical Experts.

### 2.8 Comms

The Board agreed that the SLA on Communications would be varied so that MIB MSL will work to publish 100% of agreed/signed off communications at the agreed date and time.

### 2.9 Accreditation

There was no accreditation report included in this board pack but will be published separately.

The Chairman took this opportunity to thank the Chairs of the subcommittees for all their hard work and for taking on the extra responsibility, particularly as it comes out of their own time. The Chairman also thanked the MIB MSL staff for supporting the directors in their roles in MedCo. The Chairman also advised he would be taking the opportunity to express the Board's satisfaction at his meeting with the new MIB CEO in June.

## 3. RISK MANAGEMENT

The MedCo Risk Framework document was included in the Board pack. The document set out the approach that the MedCo Board is taking to Risk management. It will be used to formulate the Risks, score them and monitor them. Medco is continuing to develop the risk strategy.

## 4. REVISED GUIDANCE ON MoJ QUALIFYING CRITERIA

The Board was present with a summary of the work to date to arrive at the drafts contained in the Board pack and that the intention was to seek Board sign off. The updated Guidance on how Medco interprets the MoJ Qualifying Criteria has been drafted following consultation with AMRO and CMA, together with lessons learned from the Judicial Reviews and queries received throughout Audits. The Guidance had been reviewed by the Audit Committee and MedCo legal representatives.

Before the Board were taken through the key policy decisions a query was raised as to why the new version contained a lengthy preamble and what it meant. The Board were advised that it was a legal addition that sets out that the document explains how MedCo interpret the guidance but that if an alternative is presented and it was felt to be in the spirit of the guidance MedCo may accept the evidence/interpretation.



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Whilst the majority of changes related to including additional detail on existing guidance, there were 3 policy decisions before the board and 1 decision required clarification regarding the payment policy.

### **Item 1.13 e)(b)(i)(a) Clinical QA**

This is new to the guidance to help the MRO understand what time is needed for appointments. It was thought that having a minimum appointment time would help with clinical quality assurance. The Board debated the need to include this in the guidance and talked about publishing minimum numbers per hour. It was advised some MROs wanted guidance in this area whilst others expressed their opinions. The Board considered that it needed to do what it could to help MROs make sure medical experts are doing a good job and at the same time help the Audit committee and team. The Board agreed at this time not to be more prescriptive and expressed a view to get such guidance relating to examination time into the Accreditation. MedCo will continue to place an onus on MROs to take responsibility to ensure the ME is doing his job well.

### **Decision**

Unanimously agreed to the new wording

### **Item 1.13( e)(b)(i)(e) Clinical QA**

The current guidance, para (e), allows an MRO's CMO to produce medical reports for it, subject to certain safeguarding provisions. The revised guidance, replacing para (e) with para (d), proposes prohibiting this altogether in order to eliminate any conflicts of interest. The Board asked if there were any examples that had been seen where there was problems. The Board were advised of an MRO where the owner did reports, owned the MRO and was the CMO.

### **Decision**

After discussion it was unanimously agreed that the current guidance would remain, with the addition of the words "as a CMO" inserted into (e)(i)(3).

### **Item 1.1(g).**

The Board debated why it was felt necessary to include such a provision. Would it allow an MRO to reject work without reason. It was advised that the operations subcommittee regularly received enquiries to ask what to do where an MRO had received instructions from a firm it was in dispute with. The new clause was approved subject to amending sub-clause (i)(b) as follows: "*There is a demonstrably untenable relationship between the MRO and Instructing Party e.g. significant commercial dispute or legal proceedings have commenced.*"

### **Decision**

It was unanimously agreed that the above paragraph would be added to the Guidance.



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### Item 1.3

The Board raised questions about whether an MRO would understand the impact of this guidance and the prompt payment code, in particular, making payments within 60 days. The Board looked at the wording and after discussion of a number of other proposed changes to the Guidance, result in amending 1.3b deleting *"implementing of this on a phased but substantive basis is acceptable"*

### 5. REVISED AUDIT GUIDE

This document is for the purpose of showing MROs' what to expect at an Audit. There were no comments from either the CMA or AMRO. The document has been approved by the legal team.

#### Decision

The Revised Audit Guide is approved unanimously by the board.

The Chairman thanked the Audit Team for all their hard work.

### 6. DATA RETENTION

The Board were presented the Public Data Retention Policy and the legal advice from DAC Beachcroft to ensure compliance with the new GDPR regulation coming into force in May 2018.

#### Decision

The Board unanimously agreed the Public Data Retention Policy and that it would be reviewed annually in June.

### 7. MANAGEMENT ACCOUNTS

The Management Accounts were approved.