



Ministry  
of Justice

# MedCo: Revised and New Supplementary Qualifying Criteria

## Stakeholder Engagement Exercise

24 February 2020

A decorative graphic in the bottom right corner consisting of a dark blue line with white dots at its vertices, forming a zig-zag path. This line is overlaid on a pattern of light blue triangles of various sizes and orientations.

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# Introduction

1. The provision of good quality independent medical evidence to support road traffic accident (RTA) related personal injury claims under £5,000, remains a key element of the Government's whiplash reform programme. We remain committed to ensuring that all those who will provide medical reports to both represented and unrepresented claimants are competent, efficient and have well run, transparent consumer protection policies and procedures in place.
2. The MedCo Qualifying Criteria (QC) therefore, remain as important as ever as they ensure that medical reporting organisations (MROs) already registered, as well as those wishing to register, with MedCo are properly constituted businesses. This means that MROs have satisfactory systems and sufficient resources in place to operate to the minimum required standards for both business-to-business operations and, where applicable as an MRO to unrepresented claimants.
3. The purpose of this survey is to seek the views of MedCo registered MROs on revised QC for all MROs and new supplementary QC for MROs wishing to undertake work with unrepresented claimants.

# Survey Part 1: Revised QC for all MROs and additional QC for High Volume National MROs

4. The QC for all MROs and the additional QC for tier 1 MROs was last changed in October 2016. These changes were in large part to tighten the requirements and deal with a number of unexpected behaviours such as the formulation of ‘shell’ MROs. Following the completion of the MedCo MRO audit programme, MoJ has taken the opportunity to consider and revise both the existing QC for all MROs and the additional QC for high volume national MROs.
5. Although not materially different to the previous version, there have been a number of changes and we would be interested in the views of stakeholders on these revisions. Respondents should review the new QC, which are set out in **tables 1 and 2**, attached at **Annex A** and respond via the online survey: <https://www.smartsurvey.co.uk/s/LMO11/>
6. Key changes to the QC have been highlighted for ease of reference.

## Survey Part 1: Questions

1. The wording of the rationale to QC1.1 has been revised in relation to the establishment of ‘shell’ companies and clarified to provide guidance on the management and payment of medical evidence. Do you agree with the highlighted changes, and do you have any suggestions to further update and improve this QC (please explain your reasoning)?
2. QC1.6 has been updated to include reference to the General Data Protection Regulation requirements. Additional clarification on MROs responsibilities has also been included in the rationale for this QC. Would further explanatory material and/or links to information about data protection be helpful (please explain your reasoning)?
3. QC1.8 has been strengthened in relation to MROs business ethics policies, in particular, it now provides more detail in relation to an MROs controlling Party. Do you agree with the highlighted changes, and do you have any suggestions to further update and improve this QC (please explain your reasoning)?

4. In relation to QC1.9 we have taken the opportunity to strengthen and clarify the requirements related to an MROs complaints procedure, including the provision of a new definition of what constitutes a 'complaint'. Do you agree with the changes and definition, and do you have any suggestions to further update and improve this QC (please explain your reasoning)?
5. QC1.12 deals with MRO ownership, and the revised text looks to tighten the wording to ensure that owners/controlling funders are of good character with no fraud convictions etc. Additional definitions of who would be considered owners, controlling shareholders or principal funders have also been provided. Do you agree with the highlighted changes and definitions, if not what would you change and do you have any suggestions to further update and improve this QC (please explain your reasoning)?
6. We have provided additional explanatory material in the rationale for QC1.13. This covers requirements for the management and control of an MROs expert panel. Do you agree with the highlighted changes, and do you have any suggestions to further update and improve this QC (please explain your reasoning)?
7. QC2.1 has had additional wording included to clarify and strengthen the requirements in relation to the provision of financial statements for MROs applying for high volume national status. Do you agree with the highlighted changes, and do you have any suggestions to further update and improve this QC (please explain your reasoning)?
8. We have reviewed the number of active medical experts required by MROs seeking to apply for high volume national status which is included in QC2.2 and reduced this to 225. Do you agree with this reduction, and if not at what level do think this should be set (please explain your reasoning)?
9. QC2.6 deals with the appointment by high volume national MROs of a 'Caldecott Guardian', and we have strengthened the rationale for this QC. Do you agree with the highlighted changes, and do you have any suggestions to further update and improve this QC (please explain your reasoning)?

## Survey Part 2: New Supplementary QC for MROs opting-in to do unrepresented claimant work

7. In addition, and in line with the conclusions published in the Government response to the 'Future Provision of Medical Reports' consultation, we will also be implementing new QC for those MROs who wish to offer services to unrepresented claimants. These supplementary QC have been specifically developed to apply to MROs who choose to 'opt in' to service this sector.

MoJ has worked closely with MedCo to develop this new, robust, supplementary QC and we are keen to receive feedback from MROs on this new QC, particularly from those MROs considering to opt-in. The intention for this supplementary QC (as set out in table 3 which is also included in Annex A) is to ensure that MROs conducting this work will be able to operate to an appropriate standard in relation to customer care so that the process provides consumer confidence in the services provided.

### Survey Part 2: Questions

10. QC3.1 is drafted to provide reassurance that the MROs offered to unrepresented claimants, are effective, well run businesses, with sufficient experience and customer focussed processes to handle their requirements. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?
11. QC3.2 ensures that owners, controlling parties and key staff of MROs opting-in are 'fit and proper' people to offer services to and interact with unrepresented claimants. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?
12. QC3.3 explains the requirements in relation to the operational capability and back office resources of MROs wishing to opt in to produce medical reports for unrepresented claimants. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?
13. QC3.4 requires MROs to directly manage the full end to end process for unrepresented claimants using their services. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?

14. QC3.5 requires MROs to provide unrepresented claimants with full explanations of the medico-legal system, so that they fully understand the steps and processes involved in obtaining a medical report.

Do you agree that this QC is sufficient for this purpose or should there be other requirements?

15. QC3.6 requires MROs to have effective performance management systems in place to monitor their performance against MedCo's quality standards and service level agreements. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?

16. QC3.7 covers the information to be supplied to unrepresented claimants on the medical reporting process by the MRO handling their medical report. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?

17. QC3.8 deals with MROs responsibilities in relation to registering with and being audited by MedCo. Do you agree that this QC is sufficient for this purpose or should there be other requirements (please explain your reasoning)?

## Survey Part 3: Revised Statement of Financial Links and Survey of MROs wishing to Opt-in

8. In addition to the revised QC, we have also made a few small changes to the Statement of Financial Links. These (highlighted) amendments reflect the adjustments made to the QC and views are also sought on this revised statement (attached at Annex B).
9. As well as views on the revised and new QC, we are seeking an indication from the sector on the number of MROs who are anticipating opting in to provide reports to unrepresented claimants. Whilst we have undertaken a number of surveys in this area previously, it is appropriate to do so again now that the sector has had an opportunity to consider the QC that MROs will be assessed against.
10. The final question in this survey is an opportunity for respondents to comment on issues related to the QC and Financial links which may not have been covered in the main survey.

### Survey Part 3: Questions

18. Minor changes have been made to the MoJ Statement of Financial Links to reflect the amendments to the QC. Do you have any comments in relation to this revised statement or do you have any suggestions to further update and improve this document (please explain your reasoning)?

19. Having considered the revised QC and statement of financial links, do you intend to opt-in and be audited by MedCo to provide medical reports for unrepresented claimants (please explain your reasoning)?

20. Having considered the revised QC and statement of financial links, do you have any additional comments or suggestions in relation to these documents not already covered by the questions above (please explain your reasoning)?



## Responding to this survey

11. This survey will close at midnight on Wednesday 11 March 2020. Respondents should complete the online survey at: <https://www.smartsurvey.co.uk/s/LMO11/>

12. Or alternatively, paper copies of the questionnaire are available on request which can be completed and emailed to: [Whiplashcondoc@justice.gsi.gov.uk](mailto:Whiplashcondoc@justice.gsi.gov.uk); or posted to:

The Whiplash Reform Team  
10.23, 102 Petty France  
London  
SW1H 9AJ

13. Further information on the changes to the medical reporting process following the implementation of the whiplash reform programme, including copies of the Future Provision of Medical Reports consultation and Government response, can be found at:

<https://www.gov.uk/government/consultations/future-provision-of-medical-reports-in-road-traffic-accident-related-personal-injury-claims>

14. Thank you for taking the time to respond to this survey.

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