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Table 1 – Minimum Qualifying Criteria

1) 1.13 – Direct Management of a MRO's Panel of Medical Experts

If a MRO deals with a company that provides administrative services ('AS company') on behalf of medical experts, will it be considered to be dealing with an intermediary?

Yes, if the MRO does any one of the following (below are examples, list is not exhaustive):

- Outsources core MRO functions to the AS company.
- Sends instructions to the AS company without explicitly naming the medical expert to produce the report on each occasion.
- Receives and acts on requests from the AS company to change which medical expert produces the report.
- Enters into any agreements, contractual, performance or otherwise, with the AS company on behalf of the medical expert rather than with the medical expert.
- Makes payments to the AS company on behalf of the medical expert.
- Deals with the AS company in a manner that indicates that the decision-maker in the relationship between the expert and the AS company is the AS company rather than the expert. The MRO should always know whether it is dealing with the medical expert or AS company.

The onus is always on the MRO to ensure that it is not dealing with an intermediary.

2) 1.13 - Geographical Coverage

a) Which postcode areas are urban and which are rural?

MedCo assesses this using the Office for National Statistics (ONS) usual resident population density measure (persons per hectare). The data below is from the 2011 census where postcode areas with densities of 4.0 and below are considered rural. Please check the ONS website for the latest data.

Postcode Area	Density (Persons per hectare)	Postcode Area	Density (Persons per hectare)	Postcode Area	Density (Persons per hectare)
AL - St Albans	8.1	HD – Huddersfield	8.0	RM - Romford	17.7
B - Birmingham	14.7	HG – Harrogate	1.5	S - Sheffield	7.4
BA – Bath	2.4	HP - Hemel Hempstead	4.9	SA - Swansea	1.3
BB - Blackburn	4.9	HR – Hereford	0.9	SE - London SE	73.8
BD - Bradford	4.4	HU – Hull	4.7	SG - Stevenage	3.1
BH - Bournemouth	5.7	HX - Halifax	5.5	SK - Stockport	5.2
BL – Bolton	12.5	IG – Ilford	36.2	SL - Slough	9.0
BN - Brighton	7.3	IP - Ipswich	1.6	SM - Sutton	39.6

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BR - Bromley	20.8	KT - Kingston upon Thames	15.7	SN - Swindon	2.1
BS – Bristol	8.1	L - Liverpool	16.0	SO - Southampton	4.4
CA – Carlisle	0.6	LA - Lancaster	1.3	SP - Salisbury	1.4
CB - Cambridge	2.3	LD - Llandrindod Wells	0.2	SR - Sunderland	18.5
CF – Cardiff	6.7	LE - Leicester	4.2	SS - Southend-on-Sea	13.5
CH - Chester	6.7	LL - Llandudno	1.0	ST - Stoke-on-Trent	4.3
CM - Chelmsford	3.6	LN - Lincoln	1.2	SW - London SW	83.5
CO - Colchester	3.1	LS - Leeds	8.5	SY - Shrewsbury	0.6
CR - Croydon	26.6	LU - Luton	8.8	TA - Taunton	1.5
CT - Canterbury	5.3	M - Manchester	30.1	TD - Galashiels	0.5
CV - Coventry	4.5	ME - Medway	6.1	TF - Telford	2.6
CW – Crewe	3.3	MK - Milton Keynes	3.7	TN - Tonbridge	2.6
DA - Dartford	16.2	N - London N	77.9	TQ - Torquay	2.4
DE – Derby	4.1	NE - Newcastle upon Tyne	2.4	TR - Truro	2.1
DH - Durham	4.3	NG - Nottingham	4.4	TS - Cleveland	5.8
DL - Darlington	1.1	NN - Northampton	3.5	TW - Twickenham	29.7
DN - Doncaster	2.7	NP - Newport	3.0	UB - Southall	28.0
DT - Dorchester	1.3	NR - Norwich	2.2	W - London W	94.3
DY – Dudley	6.9	NW - London NW	69.1	WA - Warrington	8.8
E - London E	81.7	OL - Oldham	12.4	WC - London WC	100.8
EC - London EC	80.4	OX - Oxford	2.6	WD - Watford	13.8
EN – Enfield	15.3	PE - Peterborough	1.6	WF - Wakefield	10.6
EX – Exeter	1.1	PL - Plymouth	1.9	WN - Wigan	14.7
FY - Blackpool	17.3	PO - Portsmouth	7.5	WR - Worcester	2.3
GL - Gloucester	2.2	PR - Preston	5.4	WS - Walsall	9.8
GU - Guildford	4.5	RG - Reading	4.0	WV - Wolverhampton	7.0
HA - Harrow	42.6	RH - Redhill	3.8	YO - York	1.1

b) What venues are appropriate to use for consulting rooms, whether fixed or mobile?

For medical experts to assess patients, MedCo considers that at all times the best interest of the claimant must be considered and locations must be confidential, private, safe and secure and be regarded as a professional environment. Subject to the right to periodical review, currently it considers the following venue types as examples but not an exhaustive list:

- i. Best practice: Medical facilities e.g. clinics, GP practices and other medically equipped centres.
- ii. Acceptable: Hotel conference / meeting rooms / offices / experts' private consulting rooms at or adjacent to their residence, equipped to an equivalent standard to medical facilities that are confidential, private, safe and secure and home visits (eg elderly/vulnerable patients).
- iii. Inappropriate: Hotel bedrooms, other offices / commercial premises, private residences and via webcams or other means whereby the medical expert is remote from the patient.

If in any doubt, medical experts should refer back to their own regulator and published medical best practice to seek guidance.

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3) 1.16 - Minimum Standards and Service Levels

What is the appropriate basis to calculate SLAs 1 and 2?

A worked example follows, based on 10 cases with the following characteristics:

- 7 no delay requested by solicitors: 4 within SLA and 3 outside SLA
- 3 delay requested by solicitors: 1 within SLA and 2 outside SLA
- SLA days is a variable, depending upon SLA number and whether part a or b

Worked examples:

- SLA 1a (all instances): 50% i.e. (4+1)/10, where SLA days = 25 business
- SLA 1b (excluding delays): 57% i.e. (4/7), where SLA days = 20 business
- SLA 2a: calculated as 1a, except SLA days = 35 business
- SLA 2b: calculated as 1b, except SLA days = 25 business

General Disclaimer:

The Answers to FAQs ("answers") listed above are provided strictly for guidance purposes only and are intended to be read in conjunction with the MedCo Guidance on the MoJ Qualifying Criteria. The answers are produced in response to queries that have been raised since the Guidance was produced. At all times, MRO must comply with the Qualifying Criteria. The answers are produced only to indicate how MedCo may interpret the Qualifying Criteria in given situations; they are not a legal document and may be revised from time to time.

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