



The Accident Compensation Corporation's Expert Panel –Terms of Reference

Purpose of Expert Panel

1. The objective of the Accident Compensation Corporation's Expert Panel ("the Panel") is to provide independent, impartial advice to the Accident Compensation Corporation (hereafter referred to as "ACC") on clinical matters of diagnosis, causation, and clinical management and any other clinically relevant questions posed within its area of expertise.

Panel membership

2. The Panel will consist of individual clinicians who have volunteered to be members of the Panel and who have been endorsed by their professional body as a suitable expert.
3. The Panel will consist of a minimum of three contributing clinicians. This number is exclusive of any clinician who may need to abstain from a contribution because of a conflict of interest.
4. The Panel proceedings will be facilitated by an ACC clinician staff member who will clarify the questions being posed by ACC. The ACC clinician staff member is not part of the Panel and will not contribute to the Panel opinion.
5. The Panel proceedings will be recorded by an administrator provided by ACC who will draft the Panel report. The administrator is not part of the Panel and will not contribute to the Panel opinion.

Panel administration

6. Meetings of the Panel will be scheduled for either a half day (4 hours - either morning or afternoon) or for a full 8 hour day depending on the number of claims that are ready for discussion.
7. Panel members will be provided with the relevant clinical information prior to the Panel meeting.
8. A Draft Report will be generated for each case discussed by the Panel and referred (by email) to all Panel members for endorsement. Any recommendations or changes will be incorporated until a Final Report is agreed, which will be authorised by all Panel members.
9. Panel members will provide consent for their electronic signature to be used to authorise the Final Report.

Managing privacy

10. Panel proceedings will be managed securely and in accordance with Privacy Act 1993 and the Health Information Privacy Code 1994. All information and records will be identified, communicated, stored and disposed of appropriately following ACC policy and standards that apply to information security, including ACC's privacy policy.

Conflict of interest

11. Panel members will be obliged to identify and declare any potential conflicts of interest to the Panel before the matter is discussed by the Panel.

Responsibilities

12. The Panel will base its opinions on file information supplied by ACC, and any additional information provided by the claimant which is also made available to ACC.
13. The Panel will consider the information and provide advice on matters of diagnosis, causation, and clinical management and any other clinically relevant questions as posed by ACC.

Reaching consensus or majority view

14. The Panel will seek to form a consensus view but may form a majority opinion at its discretion. Any opinion expressed will be qualified by whether or not the opinion was unanimous or by majority.
15. In their capacity as Panel members, appointees will accept all decisions of the Panel as binding on the whole Panel and will commit to the consensus or majority view.
16. Any opinion expressed by the Panel on matters of diagnosis, clinical management and causation will be qualified in terms of the confidence held by the Panel in that opinion. Thus, opinions will be expressed in terms of likelihood. If applicable, the Panel will advise what could be done (if anything) in order to better clarify any persisting uncertainties.
17. Any opinion expressed by the Panel will be justified.
18. The names of participating Panel members shall be listed when any opinion is given.
19. On completion of each case, the Panel's advice will be conveyed in writing in a Report to the ACC staff member making the referral. This will be the responsibility of the Panel Coordinator.

20. The Panel Report will be entered on the claimant's ACC file.

Standards of practice

21. Panel members are expected to be aware of the standards of practice as outlined in the December 2010 statement produced by the Medical Council of New Zealand titled "*Non-treating doctors performing medical assessments of patients for third parties*". The relevant sections of that document that the panel will adhere to are titled "Performing medical assessments", "Reports for the third party", "File assessments by non-treating doctors", and "Financial influences for the non-treating doctors".

22. With the exception of the reporting function to ACC, all client specific information will remain confidential to the Panel and its members.

I/We agree to be bound by the terms of reference as outlined above (please sign, print name, and date):