

Triennial Review Report of the Independent Medical Expert Group

Report of the Triennial Review of the Independent Medical Expert Group (“IMEG”) as a Non-Departmental Public Body and a Scientific Advisory Committee

30th July 2015

Executive Summary

1. The Independent Medical Expert Group (the “IMEG”) is a Non-Departmental Public Body (NDPB) that provides expert scientific and medical advice to the Minister for Defence Personnel and Veterans about the operation of the Armed Forces Compensation Scheme (AFCS). The AFCS provides compensation to members of the Armed Forces who are injured or suffer illness as a result of their service in the Armed Forces.
2. Cabinet Office requires Departments to review the function, controls and governance arrangements of their NDPBs triennially. The IMEG is also subject to review as a Scientific Advisory Committee (SAC) every three years in accordance with guidance from the Government Office for Science (GO-Science). It is considered that combining both reviews is an appropriate and proportionate approach which will provide value for money for the taxpayer.
3. The Triennial Review of the IMEG was announced in Parliament on 24 March 2015.

Stage One

4. The first stage of this Review requires the continuing need for the NDPB to be challenged – this means that the Review needs to consider (A) whether the functions of the IMEG are still necessary; and (B) if so, whether it remains appropriate for those functions to be delivered by Government and specifically by an NDPB.
5. Following completion of Stage 1 of the Review, the Lead Reviewer concludes that the IMEG provides valuable, high quality, well-respected scientific advice to the Minister for Defence Personnel and Veterans in relation to the AFCS. The functions the IMEG fulfils continue to play an important role in ensuring that the AFCS relies on credible, up-to-date scientific evidence, and is also perceived to do so by those who apply to it. Other delivery options were considered but retaining the IMEG as an NDPB remains the most appropriate option, as it offers cost-effective high-calibre advice in an independent and transparent way which is valued by stakeholders. The IMEG meets the three tests for

remaining as an NDPB and the Lead Reviewer recommends that it should be retained in its current form.

Stage Two

6. Cabinet Office guidance requires that where the outcome of Stage 1 is that the NDPB should remain, the Department should review the NDPB's current control and governance arrangements to ensure that they are in accordance with recognised principles of good corporate governance.
7. Following Stage 2 of the Review, the Lead Reviewer concludes that the IMEG complies with the principles of good corporate governance, and complies with the Code of Code of Practice for Scientific Advisory Committees and the Principles of Scientific Advice to Government. The Lead Reviewer concludes that the IMEG is an efficient body and there is little scope for making efficiency savings.
8. Following the completion of the Triennial Review the Lead Reviewer would recommend that:
 - a. The IMEG should continue to carry out its functions;
 - b. The IMEG should continue as an NDPB; and
 - c. The IMEG should consider whether it could publish the register of members' interests.

Catherine Gregory

30th July 2015

Introduction

Aims of the Review

9. It is Government policy that a non-departmental public body (NDPB) should only be set up, or remain in existence, where the model can be clearly evidenced as the most appropriate and cost-effective way of delivering the functions of that body.

10. In April 2011, Cabinet Office announced that all NDPBs still in existence following the first stage of public bodies' reform would have to undergo a substantive review every three years. Triennial Reviews have two principal aims, represented by two stages:
 - a. Stage 1 aims to provide a robust challenge of the continuing need for individual NDPBs – both their functions and their form; and where it is agreed that a body remain as an NDPB, to review its capacity for delivering more effectively and efficiently, including identifying potential for efficiency savings and its ability to contribute to economic growth; and
 - b. Stage 2 aims to review the control and governance arrangements in place to ensure that the public body and the sponsoring department are complying with recognised principles of good corporate governance. This should also include an assessment of the body's performance.

11. All triennial reviews are carried out in line with Cabinet Office guidance "Guidance on Reviews of Non Departmental Public Bodies", revised in 2014. This guidance states that all reviews should be conducted in line with the following principles:
 - a. ***“Challenge:*** *Reviews must be challenging. They should take a first principles approach to whether the function of a body is still needed, and if it is what the best form for delivery of that function is. Reviews should not just seek to evidence the status quo. They should be robust and rigorous and provide evidence for all recommendations.”*

- b. ***“Proportionality:*** *Reviews must not be overly bureaucratic and should be appropriate for the size and nature of the NDPB being reviewed.”*
 - c. ***“Contextual:*** *Reviews should not be undertaken in silos, but should wherever possible be integrated with other departmental policy initiatives, efficiency reviews, landscape reviews, and seek to look across departmental boundaries to cluster reviews of bodies to further enable informed discussions about potential efficiencies.”*
 - d. ***“Pace:*** *Reviews must be completed quickly to minimise the disruption to the NDPB’s business and reduce uncertainty about its future.”*
 - e. ***“Inclusivity:*** *Reviews must be open and inclusive. The NDPB being reviewed must be engaged and consulted at both an Executive and a Non-Executive level. Users and stakeholders must have the opportunity to comment and contribute. Parliament must be informed about the commencement and conclusions of reviews. Departmental Select Committees must be given the opportunity to input.”*
 - f. ***“Transparency:*** *All reviews must be announced formally, both to Parliament and to the public. All review reports must be published once clearance has been given by the Minister for the Cabinet Office. The results of reviews must be announced to Parliament.”*
12. The IMEG was set up in 2010 as the Interim Independent Medical Expert Group (IIMEG) following Admiral the Lord Boyce’s Review of the Armed Forces Compensation Scheme (AFCS), as recommended by that report. In 2012 it was established as a permanent NDPB, the Independent Medical Expert Group. Thus it is due for its first Triennial Review in 2015.
13. The IMEG is also to be reviewed as a Scientific Advisory Committee (SAC) as required by the Government Office for Science (GO-Science), and in the interests of proportionality and value for money, these reviews are being combined. GO-Science

requires Departmental Triennial Reviews of SACs to consider compliance with the Code of Practice for Scientific Advisory Committees and the Principles of Scientific Advice to Government. Compliance of the IMEG with these SAC principles has been considered during Stage 2 of the Review.

Background on the body being reviewed

The Armed Forces Compensation Scheme (AFCS)

14. The AFCS, which is administered by the Ministry of Defence on behalf of the Minister for Defence Personnel and Veterans, provides compensation for any injury, illness or death which is caused by service in the Armed Forces on or after 6 April 2005. The AFCS is a no-fault scheme which means payment is made without assessing fault. All current and former members of the UK Armed Forces, including reservists, may submit a claim for compensation. In the event of death related to military service, the scheme pays benefits to eligible partners and children.
15. There are two main types of benefits which can be claimed. For injury or illness, the AFCS provides a tax free lump sum payment for pain and suffering, the size of which reflects the severity of the injury/illness. For those with the most serious injuries and illnesses, the AFCS also provides an income stream known as the Guaranteed Income Payment (GIP) which is a tax free, index linked monthly payment which is paid when the claimant is no longer a member of the Armed Forces.
16. The scheme uses the balance of probabilities standard of proof, in line with similar schemes for civil claims. If it is determined that the injury is predominantly caused by military service, the AFCS will then go on to consider whether an award is warranted under the scheme and if so, the correct level of that award. Awards are made on a tariff based system, with levels graded 1-15 dependent on the degree of severity of the injury, Level 1 being for the most severe injuries and Level 15 for more minor injuries.

Role of the IMEG

17. The IMEG is a scientific advisory NDPB which provides advice to the Minister for Defence Personnel and Veterans on medical and scientific aspects of the AFCS and related matters.

18. The IMEG is comprised of a chairperson and 7 members who are senior licensed medical consultants drawn from relevant specialties, including trauma/orthopaedics, neurology, audio vestibular/ audiological medicine, occupational medicine and mental health. The group also includes a member representing the ex-service organisations and 3 ex officio members: the Chief of Defence Personnel's Medical Adviser; a service representative who sits on the Central Advisory Committee on Pensions and Compensation (CAC); and an injured service person who has claimed under the AFCS.
19. The IMEG is responsible for investigating the issues on which advice is requested by the Minister for Defence Personnel and Veterans, reaching conclusions and making recommendations based on evidence, providing evidence comprising independent, published, peer-reviewed scientific and medical literature, and consulting other experts and inviting interested parties to submit relevant research. The IMEG does not commission research but offers independent scientific validation of the AFCS in a way that assures its quality and credibility.
20. The IMEG does not have any involvement in individual applications to the AFCS – it only advises the Minister for Defence Personnel and Veterans on the operation of the AFCS as a whole.
21. All of the IMEG members are unpaid and only receive reimbursement for travel and subsistence costs.
22. The IMEG is supported by a Ministry of Defence secretariat drawn from the Armed Forces Remuneration team in Head Office.

The Review: Stage One

Process

23. The IMEG Triennial Review was announced in Parliament by written statement on 24 March 2015. The combined Triennial Review of the IMEG as an NDPB and an SAC has been carried out in accordance with Cabinet Office and GO-Science's respective guidance and requirements.
24. The Lead Reviewer is Catherine Gregory, a Legal Adviser employed by the Government Legal Department (formerly employed by the Ministry of Defence) to provide legal advice to the Ministry of Defence in relation to commercial and public law matters. She is independent of the IMEG and of the MoD secretariat team which supports and sponsors the IMEG. She undertook the Review alone with no challenge group - this was considered to be a proportionate approach given the small size of the NDPB under review, its purely advisory function, and the small burden it places on public sector resources.
25. The formal terms of reference of the Review are attached at Annex A.
26. Stage 1 identified and examined the key functions of the IMEG, and considered whether these were still necessary. Since the functions were considered necessary, a range of alternative options for delivery was reviewed. Finally, the Review assessed whether the IMEG passed one or more of the Government's "three tests" for remaining as an NDPB:
 - a. Does the IMEG perform a technical function which requires expertise external to government?
 - b. Does the IMEG need to have, and demonstrate, absolute political impartiality?
 - c. Does the IMEG need to act independently of Ministers?

Evidence and Stakeholder Engagement

27. The IMEG provides advice to the Minister for Defence Personnel and Veterans on medical and scientific aspects of Armed Forces Compensation Scheme (AFCS) and related matters, and this fairly narrow remit means that the group of people which it impacts is confined to AFCS claimants – and thus, only military personnel (current and former) and their families. Because of this narrow stakeholder base, it was decided following informal discussion with the Cabinet Office that open public consultation would be disproportionate and a narrower, targeted stakeholder engagement by way of questionnaire was carried out. The stakeholders who were recipients of the questionnaire included representatives of veterans’ charities and relevant tribunals, MoD civil servants and members of the Armed Forces with connections to the work of the AFCS, members of staff from the Defence Medical Rehabilitation Centre, and the Chair of the Industrial Injuries Advisory Committee. From a distribution of 35 recipients, 12 substantive responses were received. A list of the respondents to the questionnaire is annexed at Annex B.
28. The Lead Reviewer also engaged directly with the Chair of the IMEG in a one-to-one meeting discussing the functions and operation of the Group, and attended one of the IMEG’s scheduled quarterly meetings as an observer, and was able to engage informally with various members of the Group in the margins of that meeting.
29. Unfortunately, due to the timing of this Review, the Defence Select Committee was not sitting during the time of the stakeholder engagement, although the clerk was contacted via the MoD Parliamentary Branch. No substantive engagement was possible.

Are the functions of the body still required?

30. The administration of the AFCS remains a fundamental part of MoD core business. Under the statutory requirements, the AFCS must decide whether the illness, injury or death being claimed for was caused (wholly or partly) or worsened by military service, and what level and type of compensation is appropriate for the illness, injury or death.

31. Providing advice to Minister for Defence Personnel and Veterans on medical and scientific aspects of Armed Forces Compensation Scheme (AFCS), in particular about whether the illness and injury tariffs and descriptors are appropriate and up-to-date with scientific research evidence requires expert knowledge of the relevant areas of medicine and science. The Minister must be able to be confident that the advice provided is robust, reliable and accurate, and is based on high quality scientific evidence and expert opinion.
32. The Lead Reviewer is satisfied that the IMEG members are highly-respected national and international experts in their relevant fields of medical specialism, which include trauma/orthopaedics, neurology, audio vestibular/ audiological medicine, occupational medicine and mental health.
33. The fact that the advice the IMEG provides is provided by a body which is impartial and therefore not influenced by governmental policy factors is important to the stakeholder community.
34. Stakeholders were unanimously of the opinion that there is a continued need for the provision of this independent and expert advice to the Minister for Defence Personnel and Veterans. The following comments were among those received:
 - a. "To provide credible evidence based assessment in this area remains central to maintaining trust amongst the AF [Armed Forces] community that their concerns and pains are carefully considered by Whitehall."
 - b. "Independent specialist advice is essential for Ministers."
 - c. "IMEG offers an informed and independent opinion on the levels and evidence base for compensation. The impartiality remains essential."
35. The Review concludes that there is an ongoing need for the function that the IMEG currently provides.

Is there an appropriate alternative delivery model?

36. The Cabinet Office Triennial Review guidance sets out a checklist of delivery options that departments should consider when reviewing the functions of an NDPB. The list is not exhaustive, but as a minimum, departments must evidence that they have considered all of the options set out in this checklist. The Review considered each of these options as set out below:

- a. **Abolish** – Whilst the AFCS remains a core part of MoD business, there is a requirement for independent expert medical and scientific advice to be provided to the Minister for Defence Personnel and Veterans about the AFCS to ensure that the illness and injury tariffs and descriptors remain up-to-date and appropriate. If such advice were not provided, the AFCS may not be able to continue to operate in a medically up-to-date manner, and would therefore struggle to command the respect of its claimants. There could then be an increased potential for legal challenge in relation to the AFCS's operation and decision-making as regards awards made or refused, as a result of inequitable treatment (or a perception thereof). In addition, the AFCS would, over time, become out-of-date medically-speaking. Therefore, as the functions remain necessary, if the IMEG were abolished, another body would be required to fulfil its functions.

- b. **Move out of central government** – If the IMEG functions were moved out of central government, they would have to be performed by local government, the voluntary or charity sector, or by a private sector entity. The potential role of private sector entities is considered in paragraph 36c below. The IMEG's functions require high-level independent medical expertise which Ministers and the AFCS claimants can be confident in. There is no existing body of such expertise in local government, and although there is much expertise spread throughout the voluntary and charity sectors as a whole, there is no single body which brings together all of the areas of expertise which are required in order to properly advise the Minister for Defence Personnel and Veterans in relation to the AFCS. Putting together such a body would result in something looking very much like the IMEG already looks.

- c. **Commercial models** - If the IMEG functions were to be outsourced to a commercial entity, questions might be raised about the independence of that entity, which could undermine the confidence of the AFCS claimants in the medical advice being provided to the AFCS. It may be more difficult for Minister for Defence Personnel and Veterans to confidently rely on the advice given, as there would be the potential that the private sector entity might have an agenda beyond the task in hand, based on the other commercial interests of its company or group of companies. In addition, it seems likely that the costs of such an outsource would be considerable, because a private sector entity would presumably have to pay each of its experts, perhaps on the basis of an hourly consultation rate, and would almost certainly charge a management fee / overhead in addition. Compared to the model of the IMEG, where the experts in the Group give their time on an unpaid basis and only claim back their travel and subsistence costs, a commercial outsource arrangement would be a significant expense to the public purse.
- d. **Bring in-house** – If the IMEG functions were to be brought in-house to be delivered by MoD, the independence of the body (and the perception thereof) would be lost, which would lead to a possible loss of confidence in the AFCS on the part of the claimants. It would also mean that the Minister for Defence Personnel and Veterans would receive advice from within their own departmental community, which could lead to allegations or a perception that the advice being provided could be coloured by other government pressures and agendas, such as cost-cutting. In addition, part of the value of the IMEG is the fact that the experts have medical and academic interests outside of the IMEG which inform their IMEG activities – if the IMEG functions were to be performed by crown servants, those crown servants could, over time, develop a MoD-centric perspective which could narrow their breadth of knowledge and experience. In addition, there would be a significant cost to recruiting a number of highly-respected medics into MoD, assuming that they could actually be recruited. Other than the Armed Forces medical teams, MoD is not an acknowledged career path for medics.

- e. **Merge with another body** – There are no scientific advisory committees which fulfil a similar role to the IMEG in consideration of injuries and illnesses arising as a result of military service. There is a body which advises the Industrial Injuries Compensation Scheme on medical and scientific issues, which is perhaps the most analogous body, but their area of medical and scientific expertise is very different from that covered by the IMEG, because of the very different nature of the risks faced by the claimants of the two schemes. Merging with another body which does not share the same skill set and area of expertise would be counter-productive in terms of efficiency.

- f. **Less formal structure** – A less formal structure could be created by bringing together a group of relevant experts to consider each issue on which advice is requested by the Minister for Defence Personnel and Veterans. There would be a number of disadvantages to this. Firstly, the members of the informal groups might need to be paid for their time (they may be unwilling to act in an unpaid capacity where they were not members of a permanent committee). Secondly, there would be little sense of overview or strategic direction or advice if a group was formed for each issue separately. Part of the value of the IMEG is the strategic overview which the Chair and members gain over time, enabling them not just to advise on the specific issues which are raised by the Minister for Defence Personnel and Veterans but also to recommend other issues which might be worthy of consideration. Thirdly, it is likely that an element of the credibility which the IMEG has due to its permanent status and highly-respected members would be lost by gathering together a group to consider each issue, regardless of the makeup and calibre of those informal groups.

- g. **Delivery via a new Executive Agency** – It is hard to see how any efficiency or other benefits could be realised by transferring the functions of the IMEG to a new Executive Agency. The IMEG is made up of a small number of unpaid experts who voluntarily give their time, and supported by MoD civil servants, but there are no employees of the IMEG, and no need for any.

- h. **Continued delivery by an NDPB** – This model would see the IMEG continue to deliver its functions as it does now (subject to any governance changes recommended by this Review). This Review concludes that this is the preferred option and would therefore recommend this approach. This is because the continued provision of independent and credible medical advice by highly-respected experts in the relevant fields, delivered in a cost-efficient manner by a formally constituted body will continue to command the confidence of all those concerned with the operation of the AFCS. Stakeholders overwhelmingly preferred this option.

The Three Tests

- 37. As set out above, the preferred option of the Review is that the IMEG functions should continue to be delivered by an NDPB, which means that the Review must include consideration of whether the body passes at least one of the Government’s “three tests” for an NDPB:

- a. **Is this a technical function for which external expertise is needed?**

The IMEG performs a technical function which is the provision of a range of expert scientific and medical advice about injuries and illnesses which are caused by military service to the Minister for Defence Personnel and Veterans, to inform the operation and administration of the AFCS. This depth and breadth of knowledge is not available within the MoD community. Therefore the IMEG meets this test.

- b. **Is this a function which needs to be, and be seen to be, delivered with absolute political impartiality?**

The AFCS provides benefits to serving or former military personnel and their families, where they have been injured, suffered an illness, or died as a result of their military service. The AFCS helps to ensure that service personnel and veterans are not left uncompensated for medical problems arising from their military service, and as such plays an important part in looking after people who have suffered as a result of serving their country. It is important that the AFCS claimants are confident that the AFCS is based on independent and current medical research and is not influenced by cost or other irrelevant concerns. The AFCS helps to avoid

the cost of litigation and its detrimental effects on the parties, and seeks to avoid considerations of blame and fault by focusing instead on the needs of the claimant. The IMEG helps to establish the credibility of the AFCS, both in terms of demonstrating that it is based on up-to-date medical knowledge, and in terms of demonstrating that it is not influenced by political or cost factors. The IMEG meets this test.

c. Is this a function which needs to be delivered independently of Ministers to establish facts and/or figures with integrity?

It is clear from the responses from the stakeholders that it is a valued attribute of the IMEG that is it independent from Ministers and can offer its expert medical and scientific advice in an impartial way having considered the peer-reviewed research which is available in academic publications. The IMEG meets this test.

Conclusions of Stage One

38. The Review has concluded that the IMEG's functions are necessary to provide up-to-date, scientifically robust, impartial advice to the Minister for Defence Personnel and Veterans about injuries and illnesses which are caused by military service in order to inform the administration of the AFCS. The continuation of the IMEG as an NDPB remains the most efficient and effective way to ensure these functions are delivered and the IMEG passes each of the three tests required to retain its NDPB status. It offers excellent value for money and should continue to exist as an advisory NDPB.

The Review: Stage Two

39. The recommendation of Stage 1 is that the IMEG's functions are still required and that the IMEG should be maintained as an NDPB.
40. The Review then moved on to Stage 2 to consider the body's adherence with the principles of good corporate governance. Specifically, the Review considered:
 - a. the IMEG's compliance with principles of good corporate governance as an NDPB;
 - b. its compliance with the Code of Practice for Scientific Advisory Committees and the Principles of Scientific Advice to Government; and
 - c. its efficiency.

Compliance with the Principles of Good Corporate Governance for Advisory NDPBs

41. The Review followed Cabinet Office's standard "comply or explain" approach when assessing the IMEG's compliance with the principles of good corporate governance, such that where areas of non-compliance were identified, an explanation was sought about why an alternative approach had been adopted.
42. The assessment of the "comply or explain" approach for the principles of good corporate governance are set out in the table at Annex C, on a principle by principle basis, and it is considered that the IMEG is in compliance with almost all of the principles, and for the principles where it is not in compliance, it has a good explanation.
43. That said, the Review would recommend that to improve the corporate governance of the IMEG, the publication of the register of members interests should be considered.

Compliance with the Code of Practice for Scientific Advisory Committees and the Principles of Scientific Advice to Government

44. Stage 2 also considered the IMEG's working practices as a SAC, and whether these were in line with the GO-Science's Code of Practice for SACs and the Principles of Scientific Advice to Government guidance.
45. The IMEG advises on matters as requested by the Minister for Defence Personnel and Veterans. Matters raised in writing from other sources, such as members of the public and the stakeholder community will be noted by the secretariat and discussed with the Chair in order to inform, where appropriate, the forward work plan. Matters which members of the IMEG are aware of through their areas of medical expertise may also be relevant, and the IMEG members are encouraged to raise any such issues if they believe that it would be beneficial for them to be explored.
46. There is a MoD civilian Medical Adviser whose role is to advise the Chief of Defence Personnel, and she works closely with the IMEG and the secretariat. When the IMEG begins a specific review she assists the IMEG members in undertaking a comprehensive focused literature search for research evidence published in high-quality, peer-reviewed international medical and scientific journals. She also assists the IMEG in seeking evidence, where appropriate, from senior experts of both a military and civilian background.
47. The IMEG does not have a research budget and does not commission research. One stakeholder commented that perhaps the commissioning of research should be considered in relation to military-specific medical problems which would be unlikely to receive any research attention otherwise (the example being Helmand Fever). This would be beyond the current remit of the IMEG but could be considered as a possibility in the future.
48. The standard of proof required by the AFCS is clearly explained in the IMEG's reports.
49. **The Committee's Role and Remit** – The IMEG's role and remit is clear, based on its terms of reference which are published on its area of the gov.uk website. The terms of reference are kept under informal review but no need for change has arisen as yet. The

IMEG reports formally to the Minister for Defence Personnel and Veterans, and on a day-to-day basis through the secretariat to the MoD.

50. **Balance of Expertise** – The IMEG members represent a good balance of expertise across the areas of medical specialism which are required to advise on the medical aspects of the AFCS. The Chair facilitates open discussions and invites views from those with the relevant specialisms for the topic in hand. The IMEG’s decision-making as evidenced in its reports is evidence-based and a clear audit trail is set out explaining how its conclusions and recommendations were reached. References are fully cited in the reports.
51. The Chair and the secretariat agree that the current balance of areas of expertise appears to meet the IMEG’s current needs, but if changes were considered to be required, this would be discussed. Appointments are made for an initial period of 3 years, so if the need for a particular area of expertise were to diminish, the composition of the IMEG membership could change. The IMEG also retains the option in accordance with its terms of reference to draw on outside expert advice where needed.
52. The members are well-respected leaders in their field and have other professional roles as well and their wider experience is beneficial to their IMEG work.
53. **Responsibilities of Chair** – The responsibilities of the Chair are addressed in Annex C in the context of the principle of good corporate governance.
54. **Independence and Objectivity** – it is clear from the stakeholders’ responses that the IMEG is widely considered to operate free of influence from the sponsor department. A member of the MoD’s Surgeon-General’s team attends the IMEG meetings as an observer. His response to the stakeholder questionnaire indicates that he has no concerns about the independence or objectivity of the IMEG.

55. The roles of the Chair and other members are advertised and appointments made in accordance with the Code of Practice for Ministerial Appointments using a transparent process.
56. The IMEG demonstrates its commitment to openness and transparency by holding regular meetings with stakeholders.
57. **Members' rights and responsibilities** – The Chair and members are made aware of the seven principles of public life during the appointment process, and the type and extent of their roles and responsibilities if they are appointed.
58. The Chair and the members' role and responsibilities are set out in the "Role and Conditions of Appointment" documents which effectively serve as their terms of appointment letter. This letter clearly states, among other things, the remuneration policy, the need to avoid or declare conflicts of interest, the restriction on political activity, and the responsibilities and duties of the appointee.
59. **Committee Support and Departmental Relationships** – The MoD secretariat consists of two MoD civil servants and is responsible for legislative compliance in areas such as Data Protection, Freedom of Information, etc. It assists with the day-to-day running of the IMEG such as setting up meetings, scrutinising expenses claims, and organising the logistics of publication of reports.
60. The IMEG Chair has good relationships with many MoD stakeholders, such as the Surgeon-General's team, the teams at the Defence Medical Rehabilitation Centre, etc. The IMEG Chair holds a pre-meeting with the secretariat before IMEG meetings to ensure that they are in agreement about the pressing issues and matters of concern.
61. **Working Practices** – The IMEG works to achieve openness in its operation, while protecting its ability to meet its functions properly and effectively. It publishes the agendas of all of its meetings and all of its formal reports on the gov.uk website. It does not publish meeting minutes for reasons of encouraging candour and open exploratory

discussion amongst those present – it is considered that publication of minutes could be unhelpful given that the open exploratory discussions pave the way towards IMEG formally reaching conclusions on which it will report, but do not necessarily represent the IMEG's settled and considered views.

62. **Reporting of Risk or Uncertainty** – The IMEG bases all of its recommendations on peer-reviewed evidence and would highlight any areas of uncertainty. It would not make recommendations if the statutory test for an illness or injury falling within the AFCS were not met.
63. **Procedure for arriving at conclusions** – The IMEG reports are evidence-based and the rules for whether an illness or injury is covered by the AFCS are clear. The Chair encourages open and frank discussion between all members and external views from experts and stakeholders are sought where appropriate.
64. **Dealing with dissenting views** – Where possible the IMEG would seek to represent a consensus view in its reports, and this is usually possible because the IMEG members have different areas of medical specialism.
65. **Communication with the public** – IMEG meetings to which wider stakeholders (such as employees and patients at the Defence Medical Rehabilitation Centre) are invited have been held on a number of occasions and are regularly considered. The IMEG's meeting agendas are on the gov.uk website for public view. All correspondence is considered by the secretariat and raised with the Chair if appropriate.
66. **Open meetings** – The regular IMEG meetings are not held in open forum for reasons of encouraging candour and open exploratory discussion amongst those present. Opening up those meetings could be unhelpful given that the open exploratory discussions pave the way towards IMEG formally reaching conclusions on which it will report, but do not necessarily represent the IMEG's settled and considered views. However, stakeholder meetings are regularly held - they serve a different function and are very useful in their own right.

67. **Public consultation** – The fairly narrow range of stakeholders in relation to the IMEG’s work means that public consultations are not particularly helpful in this context. However, if that position were to change, public consultations would be considered.
68. **Peer review** – Due to the nature of the IMEG’s functions, it consults the experts it needs to during the process of putting together its reports. The IMEG’s decision-making is evidenced in its reports, which are evidence-based and include a clear audit trail explaining how its conclusions and recommendations were reached. References are fully cited in the reports.
69. **Information exchange** – The IMEG members bring to the IMEG relevant information gathered from their professional networks and contacts. Some links are maintained with the Industrial Injuries Advisory Council, which is an NDPB advising the Department for Work and Pensions in relation to the Industrial Injuries Compensation Scheme, to the extent there is any overlap in areas of medical interest.
70. **Dealing with confidential information** – The IMEG is predominantly interested in published research and has no access to information specific to any claimant to the AFCS or any other confidential information.
71. **Engaging the broader academic community** – The IMEG members all have professional work outside of the IMEG in their respective areas of specialism which is what positions them so ideally for their IMEG roles. This level of deep specialism within the IMEG members is recognised by stakeholders (as evidenced by the responses to the stakeholder engagement questionnaire).
72. **Handling disagreement with sponsoring body or Ministers** – It is entirely possible that the Minister could decline to implement the recommendations of the IMEG and both parties understand that the IMEG’s role is ultimately an advisory one. The IMEG understands that the Minister has to consider wider factors than just the medical recommendations it makes.

73. **Publication of documents – general** – As a matter of course, the IMEG publishes on gov.uk its meeting agendas but, as set out above, it does not publish meeting minutes for reasons of encouraging candour and open exploratory discussion amongst those present.
74. The IMEG publishes on gov.uk the reports in which it sets out its formal advice to the Minister for Defence Personnel and Veterans. These reports are also provided in hard copy to specific stakeholders. As stated above, references are fully cited in the reports.
75. The last forward work programme which was published was dated November 2013 and another is due for publication soon.
76. It is not considered appropriate for working papers including early drafts of the IMEG reports to be published for much the same reasons as meeting minutes are not published – because publication could be unhelpful given that the early draft documents do not necessarily represent the IMEG’s settled and considered views.
77. **Communication with the media** – In the event that there was any media interest in the IMEG’s work, the Chair would act as the IMEG spokesperson, but this has not occurred thus far.

Efficiency

78. Efficiency is a key driver in the Triennial Review programme. A consideration of the potential for efficiency improvements in the IMEG has been set out below, in a way which is proportionate to the size, role and remit of the IMEG.

Efficiency driver	Assessment of the IMEG
Reported savings	The IMEG does not have a budget of its own but has funding allocated out of MoD resources.

Digital by default	The IMEG publishes its documents online on the gov.uk website and only prints a limited number of hard copies of its formal reports for stakeholders who specifically request hard copies. There is little scope for efficiency savings in this context.
Commercial models	The delivery of the IMEG's functions via a commercial model has been considered at paragraph 36c and this is not considered to be likely to bring any efficiency savings.
Property	The IMEG does not own any property therefore there is no scope for efficiency savings in this context.
Shared Services	The IMEG is a small advisory body with a very small secretariat team and as such there are very few back-office costs arising. There is therefore no scope for efficiency savings in this context.
Procurement of Common Goods and Services	The IMEG does not procure common goods or services.
Areas subject to Cabinet Office Spending Controls	Advertising/recruitment is subject to Cabinet Office spending controls. This is done in accordance with MoD policy and is kept to a minimum while balancing the need to ensure access to the appropriate experts.
Major Projects	The IMEG does not carry out any work which would fall within this category.
Workforce	All of the IMEG members are unpaid and only receive reimbursement for travel and subsistence costs, therefore there is no scope for efficiency savings in this context.
Commercial Relationships / Technology infrastructure / Construction / Fraud, Error and Debt	The IMEG is a small advisory body and as such commercial relationships, technology infrastructure, construction and fraud are not relevant. There is therefore no scope

	for efficiency savings in this context.
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Overall conclusions

79. Stage 1 of the Review concluded that the IMEG's functions are necessary to provide up-to-date, scientifically robust, impartial advice to the Minister for Defence Personnel and Veterans about injuries and illnesses which are caused by military service in order to inform the administration of the AFCS. The continuation of the IMEG as an NDPB remains the most efficient and effective way to ensure these functions are delivered. The IMEG passes each of the three tests required to retain its NDPB status.
80. Stage 2 of the Review has considered:
- a. the IMEG's compliance with principles of good corporate governance as an NDPB;
 - b. its compliance with the Code of Practice for Scientific Advisory Committees and the Principles of Scientific Advice to Government; and
 - c. its efficiency.
81. The Review concludes that the IMEG complies with the principles of good corporate governance. Using the "comply or explain" approach there are very few areas of non-compliance and in most of these areas a good explanation has been given which is accepted by the Lead Reviewer. The Review has one recommendation to make arising from this consideration, which is that the publication of the register of members' interests should be considered.
82. The Review concludes that the IMEG complies with the Code of Code of Practice for Scientific Advisory Committees and the Principles of Scientific Advice to Government.
83. The Review concludes that the IMEG is an efficient body and there is little scope for making efficiency savings due to its small size, the advisory nature of its functions, and the fact that its members are highly-regarded experts who carry out the IMEG functions unpaid.

84. Following the completion of the Triennial Review the Lead Reviewer would recommend that:

- a. The IMEG should continue to carry out its functions;
- b. The IMEG should continue as an NDPB; and
- c. The IMEG should consider whether it could publish the register of members' interests.

Annex A: Terms of Reference of the Review

Triennial Review of the Independent Medical Expert Group (the “IMEG”)

Terms of Reference of the Review

Triennial Reviews are a Cabinet Office mandated process for reviewing the function of Non-Departmental Public Bodies (NDPB), the appropriateness of the bodies’ delivery mechanisms and their governance arrangements. Reviews should take place every three years for each NDPB.

The Minister of State for Defence Personnel, Welfare and Veterans announced the commencement of the Triennial Review of the Independent Medical Expert Group (IMEG) in a Written Statement on 24 March 2015.

The IMEG was created in 2010, becoming an NDPB in 2012. Its purpose is to provide medical and scientific advice on the Armed Forces Compensation Scheme to MOD Ministers.

Aims

The Cabinet Office has identified two principle aims for Triennial Reviews:

- To provide a robust challenge of the continuing need for individual NDPBs – both their function and their form, and
- Where it is agreed that a particular body should remain as an NDPB, to review the control and governance arrangements in place to ensure that the public body is complying with recognised principles of good corporate governance.

Stages

Reflecting these principles Triennial Reviews have two distinct stages:

- Stage 1 is designed to examine whether the functions of the NDPB are still needed and to consider evidence against a range of delivery options to see if an NDPB model is the most appropriate to achieve the Group's aims. When assessing delivery models, a body should only exist as an NDPB if it meets one or more of the following three tests:
 - o Performs a technical function which needs external expertise;
 - o Needs to be, and be seen to be, delivering with absolute political impartiality; and or
 - o Needs to act independently of Ministers.
- Where it is agreed that a body should remain as an NDPB, Stage 2 looks at the control and governance arrangements in place to ensure that the NDPB is operating in line with recognised principles of good corporate governance.

Approach

All triennial reviews are carried out in line with Cabinet Office guidance "Guidance on Reviews of Non Departmental Public Bodies", June 2011. This guidance states that reviews should be:

- Proportionate: Reviews must not be overly bureaucratic and should be appropriate for the size and the nature of the NDPB in question;
- Timely: Reviews should be completed quickly – the first stage ideally within three months – to minimise disruption to the NDPB's business and reduce uncertainty about its future;
- Challenging: Reviews should be robust and rigorous. They should evidence the continuing need for individual functions and examine and evaluate as wide a range as possible of delivery options;
- Inclusive: Reviews should be open and inclusive. Individual NDPBs must be engaged in reviews. Key users and stakeholders should have the opportunity to contribute to reviews. Parliament must be informed about the commencement and conclusions of reviews;
- Transparent: All reviews should be announced and all reports of reviews should be published; and
- Value for Money: Reviews should be conducted in a way that represents value for money for the taxpayer.

The IMEG is a NDPB and a Scientific Advisory Body. A Scientific Advisory Committee (SAC) Review will be undertaken as part of the IMEG's Triennial Review. For the purpose of the SAC Review some specific additional requirements need to be considered as follows:

Key Questions to be addressed concerning the IMEG's role as an SAC:

- Are the roles and responsibilities of the group clear;
- Is it independent; and
- Does it operate with transparency and openness?

In addition, the SAC Review element should address whether the following applies:

- As a Scientific Advisory Body IMEG's scientific and medical advice and recommendations on AFCS policy and related matters should be evidence based, reflecting the international published peer-reviewed scientific and medical understanding of topics and discussion with recognised experts in the topic areas.

Timelines and Deliverables

The Sponsor for the Review of the IMEG is Air Commodore Garry Tunnicliffe, Head of Armed Forces Remuneration.

The Triennial Review is expected to take three to four months and be completed by July 2015. It will conclude on receipt of the reviewer's report, which will be provided through the Sponsor to Ministers.

Issued by CDP Remunerations

April 2015

Annex B: List of Stakeholders Consulted

NAME	POST	ORGANISATION
Barry Le Grys	General Secretary	BLESMA
Kim Richardson	Chair	Naval Families Federation
Tony Phillips	Chairman	Veterans Advisory & Pensions Committee
Brig Hugh Williamson	IMEG Observer	MoD
Air Cdre Garry Tunnicliffe	Head of Armed Forces Remuneration team	MoD
Air Mshl Paul Evans	Surgeon General	MoD
Surg R Adm Alasdair Walker	Dir Med Policy & Op Cap	MoD
Colonel John Burgess	Surgeon General's Dept, Responsible Officer	MoD
Lt Gen Sir Gerald Berragan	Adjutant General - PPO	MoD
Capt Paul Hughes	DMRC Commanding Officer	MoD
Professor Keith Palmer	IIAC Chairman	IIAC, DWP
Admiral The Lord Boyce	Member of House of Lords; author of 2010 Report on the AFCS	House of Lords

Annex C: Compliance with the Principles of Good Corporate Governance

REQUIREMENT	COMMENTS	COMPLIANCE ASSESSMENT
<i>Principle: Accountability</i>		
<i>The Minister is ultimately accountable to Parliament and the public for the overall performance, and continued existence, of the IMEG</i>		
<i>Accountability: Supporting Provisions</i>		
The Minister and sponsoring Department should exercise appropriate scrutiny and oversight over the IMEG. This includes oversight of any monies spent by, or on behalf of, the IMEG.	The IMEG does not have a budget of its own but has funding allocated out of MoD resources. Scrutiny of the IMEG's expenses is undertaken by MoD through the secretariat and the Head Office Finance Department. MoD also exercises routine oversight of the IMEG's governance arrangements including by day-to-day oversight by the IMEG secretariat.	Compliant
Appointments to the IMEG should be made in line with any statutory requirements and, where appropriate, with the Code of Practice issued by the Commissioner for Public Appointments.	The Chair and the other members' roles are advertised appropriately and the appointments made in accordance with the Code of Practice for Ministerial Appointments and the MoD Statement of Civilian Personnel Policy on Making Public Appointments.	Compliant
The Minister will normally appoint the Chair and all board members of the IMEG and be able to remove individuals whose performance or conduct is unsatisfactory.	Members' roles are advertised and members are appointed by a transparent process, in which the Chair plays a pivotal role (chairing the application sift and the interviews). The Chair and the Minister for Defence Personnel and Veterans have the ability to terminate members' appointments for failure to perform duties to the expected standard.	Compliant
The Minister should meet the Chair on a regular basis.	In accordance with the IMEG's terms of reference, the Chair meets with the Minister for Defence Personnel and Veterans on an annual basis or more	Compliant

	often if required.	
There should be a requirement to inform Parliament and the public of the work of the IMEG in an annual report (or equivalent publication) proportionate to its role.	The IMEG provides its advice to the Minister for Defence Personnel and Veterans by the publication of reports on relevant medical issues as requested by the Minister. These have thus far been published on an approximately annual basis.	Compliant
The IMEG must be compliant with Data Protection legislation.	Data Protection legislation compliance is dealt with by the secretariat on behalf of the IMEG.	Compliant
The IMEG should be subject to the Public Records Acts 1958 and 1967.	Public Records Acts compliance is dealt with by the secretariat on behalf of the IMEG.	Compliant
<p><i>Principle: Roles and Responsibilities</i></p> <p><i>The Departmental Board ensures that there are appropriate governance arrangements in place with the IMEG.</i></p> <p><i>There is a sponsor team within the Department that provides appropriate oversight and scrutiny of, and support and assistance to, the IMEG.</i></p>		
<p><i>Roles and Responsibilities: Supporting Provisions</i></p>		
The Departmental Board's agenda should include scrutiny of the performance of the IMEG proportionate to its size.	The IMEG is identified within the Operating Model of the Defence Board and forms part of its oversight of defence business.	Compliant
There should be a document in place which sets out clearly the terms of reference of the IMEG. It should be accessible and understood by the sponsoring department and by the Chair and by members of the IMEG. It should be regularly reviewed and updated.	The terms of reference of the IMEG are clearly set out and published on the IMEG page on the gov.uk website, which is easily accessible to the public using internet search engines. There has, in the relatively short history of the IMEG, not been a need to update the terms of reference.	Compliant

There should be a dedicated sponsor team within the sponsor department. The role of the sponsor team should be clearly defined.	There is a dedicated sponsor team within the Ministry of Defence, which is the secretariat, which comprises 2 MoD civil servants. Because of its small size, the IMEG Chair and the secretariat members are clear about their roles.	Compliant
There should be regular and ongoing dialogue between the sponsoring department and the IMEG.	There is regular, ongoing and constructive dialogue between the IMEG and the secretariat, and any issues which needed to be escalated within the MoD would be escalated.	Compliant
There should be an annual evaluation of the performance of the IMEG and any supporting committees – and of the Chair and individual members.	The secretariat brief the Minister for Defence Personnel and Veterans and the 1* Head of Armed Forces Remuneration in MoD Head Office on a six-monthly basis in preparation for attendance at the Central Advisory Committee meetings. This acts as a review process because any concerns would be raised in this context.	Compliant
<p><i>Principle: Role of the Chair</i></p> <p><i>The Chair is responsible for leadership of the IMEG and for ensuring its overall effectiveness.</i></p>		
<p><i>Role of the Chair: Supporting Provisions</i></p>		
The IMEG should be led by a non-executive Chair.	The IMEG is led by a non-executive Chair.	Compliant
There should be a formal, rigorous and transparent process for the appointment of the Chair. This should be compliant with the Code of Practice issued by the Commissioner for Public Appointments. The Chair should have a clearly defined role in the appointment of non-executive board members.	The Chair's role is advertised appropriately and the appointment made in accordance with the Code of Practice for Ministerial Appointments. Members' roles are advertised and members are appointed by a transparent process, in which the Chair plays a pivotal role (chairing the application sift and the interviews).	Compliant

<p>The duties, role and responsibilities, terms of office and remuneration (if only expenses) of the Chair should be set out clearly and formally defined in writing. Terms and conditions must be in line with Cabinet Office guidance and with any statutory requirements. The responsibilities of the Chair will normally include:</p> <p>Representing the IMEG in any discussions with Ministers;</p> <p>Advising the sponsoring department and Ministers about member appointments and the performance of members;</p> <p>Ensuring that members have a proper knowledge and understanding of their role and responsibilities. The Chair should ensure that new members undergo a proper induction process and is normally responsible for undertaking an annual assessment of non-executive board members' performance;</p> <p>Ensuring that the IMEG, in reaching decisions, takes proper account of guidance provided by the sponsoring department or ministers;</p> <p>Ensuring that the IMEG carries out its business efficiently and effectively; and</p> <p>Representing the views of the IMEG to the general public, when required.</p>	<p>The Chair is made aware of the seven principles of public life during the appointment process, and his/her role and responsibilities are set out in the "Role and Conditions of Appointment of the Chair of the IMEG" document which effectively serves as his/her terms of appointment letter.</p> <p>This document clearly sets out the remuneration policy and the need to avoid or declare conflicts of interest.</p>	<p>Compliant</p>
<p><i>Principle: Role of Other Members</i></p> <p><i>The members should provide independent, expert advice</i></p>		
<p><i>Role of Other Members: Supporting Provisions</i></p>		

<p>There should be a formal, rigorous and transparent process for the appointment of members to the IMEG. This should be compliant with the Code of Practice issued by the Commissioner for Public Appointments.</p>	<p>The Chair and the other members' roles are advertised appropriately and the appointments made in accordance with the Code of Practice for Ministerial Appointments and the MoD Statement of Civilian Personnel Policy on Making Public Appointments.</p>	<p>Compliant</p>
<p>Members should be properly independent of the department and of any vested interest (unless serving in an ex-officio or representative capacity).</p>	<p>The IMEG members are required to declare any relevant interests and record them in a register of interests.</p>	<p>Compliant</p>
<p>Members should be drawn from a wide range of diverse backgrounds, but should have knowledge and expertise in the field within which the body has been set up to advise Ministers. The IMEG as a whole should have an appropriate balance of skills, experience, independence and knowledge.</p>	<p>The IMEG members are required to have in-depth knowledge in the specific medical specialisms which are relevant to the Armed Forces Compensation Scheme, and as such are drawn from a relatively small pool of suitably qualified people. In addition, a spread of the relevant medical specialisms is required in order to properly equip the IMEG to deal with any issues which arise. The members' posts are advertised appropriately so that as many potential candidates as possible are aware of the opportunities.</p>	<p>Compliant</p>
<p>The duties, role and responsibilities, terms of office and remuneration of members should be set out clearly and formally defined in writing. Terms and conditions must be in line with Cabinet Office guidance and with any statutory requirements.</p>	<p>The role and responsibilities of the members are set out in the "Role and Conditions of Appointment of the Members of the IMEG" document which effectively serves as their terms of appointment letters.</p> <p>This document clearly sets out the remuneration policy and the need to avoid or declare conflicts of interest.</p>	<p>Compliant</p>
<p>All members must allocate sufficient time to the IMEG to discharge their responsibilities effectively.</p>	<p>No concerns have been raised about the time allocated by any of the IMEG members to their IMEG duties.</p>	<p>Compliant</p>

<p>There should be a proper induction process for new members. This should be led by the Chair. There should be regular reviews by the Chair of individual members' training and development needs.</p>	<p>An informal induction is provided for new members, to introduce them to the AFCS and the role of the IMEG. Members' performance is reviewed by the Chair once during their initial three-year appointment.</p>	<p>Compliant</p>
<p>All members should ensure that high standards of corporate governance are observed at all times. This should include ensuring that the IMEG operates in an open, accountable and responsive way.</p>	<p>All the IMEG members are made aware of the principles of good corporate governance and the terms of reference of the IMEG, and they are made aware of their responsibility to ensure these are adhered to.</p>	<p>Compliant</p>
<p><i>Principle: Communications</i> <i>The IMEG should be open, transparent, accountable and responsive.</i></p>		
<p><i>Communications: Supporting Provisions</i></p>		
<p>The IMEG should operate in line with the statutory requirements and spirit of the Freedom of Information Act 2000.</p>	<p>The IMEG operates in line with the statutory requirements and the spirit of the Freedom of Information Act (FOI issues are dealt with by the secretariat on behalf of the IMEG).</p>	<p>Compliant</p>
<p>The IMEG should make an explicit commitment to openness in all its activities. Where appropriate, it should establish clear and effective channels of communication with key stakeholders. It should engage and consult with the public on issues of real public interest or concern. This might include holding open meetings or annual public meetings. The results of reviews or inquiries should be published.</p>	<p>The IMEG has held a number of meetings with stakeholders over the last few years and regularly considers whether further similar meetings would be beneficial in accordance with its terms of reference.</p>	<p>Compliant</p>

<p>The IMEG should proactively publish agendas and minutes of its meetings.</p>	<p>The IMEG publishes its meeting agendas but does not publish its meeting minutes for reasons of encouraging candour and open exploratory discussion amongst those present. Publication of the minutes could be unhelpful given that the open exploratory discussions pave the way towards IMEG formally reaching conclusions on which it will report, but do not necessarily represent the IMEG's settled and considered views.</p>	<p>Explanation given and accepted</p>
<p>There should be robust and effective systems in place to ensure that the IMEG is not, and is not perceived to be, engaging in political lobbying. There should also be restrictions on members attending Party Conferences in a professional capacity.</p>	<p>Nobody involved in the stakeholder engagement process commented on any political lobbying by the IMEG, so that does not seem to be a perception. The terms of appointment of all IMEG members contain a restriction on political engagement.</p>	<p>Compliant</p>
<p>Principle: Conduct and Behaviour</p> <p>Members should work to the highest personal and professional standards. They should promote the values of the IMEG and of good governance through their conduct and behaviour.</p>		
<p>Conduct and behaviour: Supporting Provisions</p>		
<p>A Code of Conduct must be in place setting out the standards of personal and professional behaviour expected of all members. This should follow the Cabinet Office Code. All members should be aware of the Code. The Code should form part of the terms and conditions of appointment.</p>	<p>In accordance with the IMEG's terms of reference, all IMEG members receive a "Role and Conditions of Appointment" letter which serves as a code of conduct.</p>	<p>Compliant</p>

<p>There are clear rules and procedures in place for managing conflicts of interest. There is a publicly available Register of Interests for members. This is regularly updated.</p>	<p>The IMEG members are required to declare any relevant interests and record them in a register of interests but this is not published.</p>	<p>Partially compliant. Consideration of publication of the register of members' interests is recommended.</p>
<p>There must be clear rules in place governing the claiming of expenses. These should be published. Effective systems should be put in place to ensure compliance with these rules.</p>	<p>Scrutiny of the IMEG members' expenses is undertaken by MoD through the secretariat and the Head Office Finance Department. The rules are in line with MoD rules for claiming expense but these are not publicly available.</p>	<p>Partially compliant but in line with civil service position.</p>
<p>There are clear rules and guidelines in place on political activity for members and there are effective systems in place to ensure compliance with any restrictions.</p>	<p>The "Role and Conditions of Appointment" letter for all IMEG members contains a restriction on political activity.</p>	<p>Compliant</p>
<p>There are rules in place for members on the acceptance of appointments or employment after resignation or retirement. These are enforced effectively.</p>	<p>The "Role and Conditions of Appointment" letter terms of appointment of all IMEG members applies the "business appointment rules for civil servants" which creates an authorisation or restriction process for the taking on of appointments or employment after their resignation or retirement from their current role. In practice, however, the advisory nature of the role of the IMEG members means that there is no access to any information or processes which is likely to create a conflict with any future roles.</p>	<p>Compliant</p>

