

Poor practice on conflict of interest in NHS may be damaging trust in clinicians

26 March 2018

Many NHS trusts in England are failing to log, track, or disclose information on conflicts of interest (COI) for their staff, so potentially undermining public trust in health professionals, suggests research published in the online journal *BMJ Open*.

A statutory body, along the lines of the US model, is now needed to ensure that all NHS trusts have strong policies in place to tackle this issue, say the researchers.

Direct gifts and inducements have been banned by pharma trade body, the Association of the British Pharmaceutical Industry ABPI), since 2010. But pharmaceutical companies can still pay clinicians to deliver continuing professional development lectures, sponsor their attendance at conferences or educational events, and provide training to other clinicians.

In 2015 the pharma industry reported this spend as £115 million.

Doctors and other healthcare professionals are required to declare all financial COI so that their appropriateness, and any possible impact on professional behaviour, can be assessed independently and transparently.

The doctors' regulator, the General Medical Council, also requires healthcare providers to declare any potential COI to both their patients and their employers, while NHS England has issued standards to NHS trusts.

These standards stipulate that all NHS staff should declare potential conflicts of interest to their employers, and that these should be recorded in a gifts and hospitality register. Although many trusts do include these in local guidance, these standards are not mandatory.

The researchers therefore set out to look at how

many NHS trusts in England record and share their employees' COI disclosures. They submitted Freedom of Information (FoI) requests to all trusts in England and received responses from 217 out of 236 (92% response rate).

The FoI questions were designed to assess all disclosures for completeness and openness, for each of five measures of transparency to find out if trusts: responded on time to the FoI request; provided a gifts and hospitality register; specified the donor, recipient, and cash amount in the register; provided a register in a format that permitted further analysis; and had their register publicly available online.

The responses were then scored on each of the five measures to create a 'transparency index.'

Some 71 trusts didn't respond within the 28-day deadline required by the FoI Act, and 19 didn't respond at all.

More than three out of four (78%) of 185 trusts provided a gifts and hospitality register - also described as a COI register.

Seven trusts described or returned no entries for their register, but a search of the ABPI [disclosure](#) database turned up 230 records for these trusts relating to payments to individual employees amounting to £119,851.35.

What's more, the researchers found 107 records of payments made directly to these trusts, averaging out at £22, 293 per [trust](#).

The responses showed that most COI registers were incomplete by design; only 31 of them contained enough information to assess conflicts of interest.

Around two thirds (68%) of the 185 trusts that said they provided a register didn't record the names of

recipients.

Provided by British Medical Journal

One in four (47) didn't record the cash value of the gift or hospitality, while only 16 percent (31) included the names of recipients and donors, as well as the sums received.

One in 10 of the registers didn't contain recipient or donor names, or the cash amount. And only 15 (6%) trusts had their disclosure register publicly available online.

The transparency index revealed the average score to be 1.9 out of 5. No trust met all five criteria.

There are various barriers to transparency around conflict of interest, say the researchers. These include the absence of a centralised system for disclosures to employers; poor auditing of records; variation in the types of information disclosed, suggesting confusion about what constitutes a COI; and the general lack of public availability of COI records.

"Despite obligations on healthcare professionals to disclose conflicts of interest, and on organisations to [record](#) these, the current system for logging and tracking such disclosures is not functioning adequately," they write.

The Physician Payment Sunshine Act (PPSA) in the US requires that all payments to doctors are declared onto a single central database that is openly accessible. A similar system should be adopted in the UK, they argue.

"The ongoing absence of transparency around COI in the UK may undermine [public trust](#) in the healthcare professions. Simple clear legislation and a requirement for open disclosure of COI to a central body, similar to that in the US, would present a simple and effective solution," they conclude.

More information: A cross-sectional study of all clinicians' conflict of interest disclosures to NHS hospital employers in England 2015-2016, *BMJ Open* (2018). [DOI: 10.1136/bmjopen-2017-019952](https://doi.org/10.1136/bmjopen-2017-019952)

APA citation: Poor practice on conflict of interest in NHS may be damaging trust in clinicians (2018, March 26) retrieved 22 August 2022 from <https://medicalxpress.com/news/2018-03-poor-conflict-nhs-clinicians.html>

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