

Merit award threat

By Leslie Berry

Consultants claim they have been warned their future clinical excellence awards will be at risk if they work for NHS-funded alternative providers.

Evidence to a Co-operation and Competition Panel (CCP) inquiry, from the Hospital Consultants and Specialists Association, alleged some consultants were being threatened with being 'named and shamed' to their trust board.

They were given 'less than thinly veiled threats' that any applications for awards would be unlikely to be favourably regarded.

The HCSA said it had first-hand knowledge of some trust chief executives actively trying to per-

suade NHS consultants to boycott other providers. Doctors were told this would amount to a conflict of interest and damage their employer's business interests.

But the TUC-affiliated union said competition from a plurality of providers entering the NHS market was an inevitable result of Government policy.

The CCP is investigating restrictions on NHS consultants' ability to work for alternative providers of NHS-funded services during their non-contracted hours.

HCSA evidence concluded that the inquiry should acknowledge 'the benefits to Government and patients alike in maintaining the ability of NHS patients to be seen by NHS consultants in a variety of settings'.

It argued there should be no for-

mal restriction on what consultants did outside their contracted hours for the health service.

And it said it was unaware of any evidence to support an assertion that senior doctors were suffering fatigue as a consequence of doing private or independent practice on top of NHS work.

The association said NHS consultants should not actively canvass, nor negotiate the terms of, any contract for NHS services that might go to a competitor provider. They should also be open and transparent in declaring all medical diagnosis and treatment performed outside NHS contracted hours.

It told the CCP that consultants' terms and conditions of service required them to support initiatives that increased NHS capacity.

Private units to publish data

Private hospital work for consultants is tipped to rise following publication of new benchmark figures enabling patients to compare independent-sector providers with one another and the NHS.

The Hellenic Project will collect and compare anonymous clinical and non-clinical information about patients from hospital groups and from submissions to third-party agencies such as the Care Quality Commission and the Health Protection Agency.

It promises high-quality, reliable information on independent-sector hospitals' performance.

The initiative will be run by the Independent Healthcare Advisory

Services (IHAS) and NHS Partners Network in partnership with Dr Foster Research.

Dr Jean-Jacques de Gorter, NHS Partners Network vice-chairman, said: 'By making high-quality information available we believe patients will increasingly choose private hospitals to look after them.'

'The NHS has committed itself to becoming a quality-driven service and the Hellenic Project sends a clear message that the independent sector intends to be in the vanguard.'

Dr Foster will work with Healthcode to collect private patient data. Key performance

indicators, such as mortality rates, day case rates, MRSA and *C.diff* rates and surgical site infections for knee and hip operations, will be made available to participants by means of a web-based application, ISIS (the Independent Sector Information System). ISIS will allow those participating in the project to measure their performance against the independent sector and the NHS.

IHAS director Sally Taber said: 'For the first time, independent-sector providers will be able to accurately measure clinical quality at a national level, both within the sector and against the NHS.'

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Cosmetic surgeons can sell PMI

Cosmetic surgeons can now sell patients insurance at a profit to pay for corrective procedures for putting right complications.

Beautysure, the first cosmetic surgery insurance of its kind, pays out up to £4,000 and covers the most common complications including capsular contracture, infections,

scarring requiring surgery, MRSA and others – although not simple aesthetic 'dissatisfaction'.

It is only available to practitioner members of the British Association of Aesthetic Plastic Surgeons or the British Association of Plastic, Reconstructive and Aesthetic Surgeons, at £225 per patient.

EDITORIAL COMMENT



Now let us help you go for gold

There is a party atmosphere at *Independent Practitioner Today* with this issue as we celebrate our first birthday. We hope you will agree it's a cracker and helps the business side of your practice to maintain, or attain, its own gold-star performance.

We've been growing up fast with your valued support – both for editorial initiatives and with company advertisers wanting to reach a target private doctor audience of 13,000 a month.

Yet again we are even bigger – weighing in with 40 pages this month, our largest issue so far. That's 16 pages more than a year ago. There is so much to tell you about.

This month, enjoy nibbling at our birthday feature starting on page 14, bringing together some of the best tips from experts during the last 11 issues. And don't miss your chance to win our present to one of you – a £2,500 holiday for six in France (p37). It is easy to enter.

Welcome aboard to all you new subscribers and the many private GPs now reading us – there's a special feature for you on page 26.

It was great to put so many faces to names at our tax-saving seminar last month. If you are a subscriber, then you can access extra tax-saving advice and crucial questions for you to ask your accountant on our website www.independent-practitioner-today.co.uk. And you can also now access all previous news and features in our last three editions. Enjoy. *Robin Stride*

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