

Response from Anonymous #4

10 July 2009

I write in my capacity as a Consultant surgeon to express my view that clinicians should not be limited by their employing Trust in any way, shape or form, as to their ability to undertake work for competing organisations in non contracted hours.

The strategic direction of healthcare in this country is towards increasing quality through generating competition brought about by encouraging new providers to enter the healthcare economy and the promotion of clinicians into leadership roles. A prerequisite for this to happen is that there should be a body of medical professionals able to deliver that expertise. Previous experience with the so called "additionality" clause has indicated that this can only be achieved from the clinical perspective, whilst maintaining a high standard of care, by using the existing pool of consultants. Any other conclusion frustrates the Government agenda and ensures existing providers maintain a monopoly over service provision.

Attempts to support a contrary view have been based on three putative issues that consultants should not have a financial stake in a competing provider organisation, that they should not hold any managerial role and that they should not be involved in tendering for work. The common thread here is that they are considered to create conflicts of interest that might jeopardise the interests of the employing Trust. There are however, already numerous situations where clinicians might find themselves in a position where there might be a conflict of interest. We are familiar with adhering to strict ethical and professional codes of practice and being monitored by independent bodies to ensure that this position is not abused. The continuing existence of this status quo is deemed of greater importance so that clinicians can continue to utilise their professional expertise for the benefit of their patients and very rarely do any issues arise.

There is no reason to believe that these so called conflicts cannot be managed along the same lines that we are already familiar with and the argument that they should be the basis for limiting Consultants use of non contracted hours does not stand up to rigorous scrutiny. Only by allowing clinicians unrestricted ability to pursue clinical practice in non contracted hours in any organisation they choose to, can we prevent existing providers from solidifying their monopoly position and defeating Government ambition by promotion of spurious arguments about conflict of interest.