

## Response from the Royal College of Physicians

9 July 2009

**Re: CCP STUDY: NHS CONSULTANTS' NON-CONTRACTED HOURS Notice of possible recommendations**

The Royal College of Physicians is grateful for the opportunity to respond to the above consultation. We would like to make the following comments:

For all services within the NHS the principles applied by the European Working Time Directive (48hrs) must be relevant.

It is acceptable for a consultant working within the private sector to receive NHS patients as part of their previous private practice.

A conflict of interest occurs when a consultant is part of a consortium bidding for a new service in competition with their primary employer.

If a consultant declines to participate in the development of the service provided by the primary employer (NHS) but supports other developments to the detriment of primary income this should be prohibited.

Shifting points of view and priorities often occur. For example, a Trust may have no issue with consultants undertaking NHS work for another provider and might encourage it due to lack of real local competition and insufficient out-patient capacity of its own. However, this situation can easily change if an Independent Treatment Centre (ITC) is set up locally. Thus from a Trusts point of view a 'flexible' approach is desired (for their benefit). From the consultants point of view they would prefer no restriction on their 'spare' time. If restraint of practice is to be put in place there would have to be a clear mechanism as to how changes in policy are negotiated / implemented at a future date with changes in Trusts 'points of view'. The College does not believe that an ITC should be permitted unless the Trust/Local Services lack capacity to treat patients.

In essence, guidelines for consultants working for other non-NHS providers need be no different from the well established guidelines that apply for any other private practice. There is a danger that 'consideration of these issues' could be overworked and negatively impact on public resources.

I trust these comments will be of use.

Yours sincerely

Dr Rodney Burnham

Registrar