

NHS Task and Finish Group: Managing conflicts of interest

Background

There is widespread concern about how conflicts of interest are managed across the NHS. Without consistency of principles and transparency of process, there is inevitably suspicion that the use of public funds is open to influence by private benefit.

Allegations recently in the press include:

- Staff being paid upwards of £500 a day to attend meetings to essentially be lobbied by industry to adopt their products for use in the NHS;
- Staff involved in drugs purchasing decisions for NHS bodies who also hold advisory roles with drugs companies

In addition, we should take note of the finding of the Carter review that at one point 650 sales representatives were targeting one hospital in England, with 65 on site at one time. We need to clarify the distinction between the provision of clinical support by industry to the NHS, and the influence of an on-site sales force.

The National Audit Office and Public Accounts Committee have called for greater scrutiny and assurance of CCGs' management of conflicts of interest by NHS England, and this is currently the subject of a consultation issued by us last month.

The aim of this work is not to inhibit legitimate and beneficial partnership working, which is key to commissioning and providing effective services for patients and the public. Instead, it shall develop proposals which will strengthen public confidence in the way in which conflicts are managed.

Terms of Reference

The task and finish group will develop a package of reform proposals, ready for consultation across the NHS. In doing so, they will:

- Develop a comprehensive framework based around the circumstances in which individuals and organisations in the NHS may be placed in a position of conflict between primary interests (e.g. enabling high quality care for patients and the public) and secondary (public and private) interests - including gifts, inducements, other payments, other influences, personal and family relationships, and hospitality)
- Review current national and international best practice
- Determine a common set of principles applicable to the identification and management of such conflicts of interest across the NHS

- Develop a common approach to the processes for managing conflicts, such as registers of interest, making and handling declarations of interest, exclusion from participation in items of business when conflicted, declaring payments
- Develop detailed rules likely to be applicable to the majority of cases in which conflicts need to be managed, avoiding rigidity and a one size fits all approach, but at a level of principle and specificity sufficient to challenge all individuals and organisations with responsibility for spending NHS funds to review and align their current arrangements on a comply or justify basis
- Develop a common “sunshine” approach to transparency and public dissemination, institutional and public scrutiny, and whistleblowing
- Review the adequacy of current and potential sanctions, including institutional disciplinary action, criminal and civil proceedings, and professional regulatory action.

Following consultation, the group will consider and provide recommendations on how these proposals will be implemented across the system.