

PSYCHIATRISTS'
**SUPPORT
SERVICE**

Information guide
for psychiatrists

On probity

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Introduction

This information guide is intended for a psychiatrist who needs advice on probity issues. The information can be used as a guide only and is not a substitute for professional advice. If you need further advice and support, please contact the Psychiatrists' Support Service or one of the organisations listed at the end of this information guide.

Definition and implications

Probity means integrity, trustworthiness, openness and honesty, and is expected in all areas of professional medical practice, not solely in connection with financial dealings.

Transgressions of this type may be those against:

- the law, for example fraudulent benefit claim, theft
- trust policies and standards, for example omission of making clear leave or sickness arrangements, inaccurate applications, false expense claims, prescribing illegitimately, not being available as agreed
- professional standards, for example misleading patients, falsifying records to cover up errors, making false claims.

These categories often overlap, but they help indicate what may happen as a consequence, as more than one type of sanction may be applicable.

A declaration of probity is required with the formal consultant appraisal format, which will be presented for revalidation to the General Medical Council (GMC). This includes acceptance of professional obligations and a declaration that there have been no criminal convictions or proceedings pending, nor formal regulatory or disciplinary issues. If the declaration cannot be made, then further explanatory details are expected.

GMC guidance

You need to be aware of the full details of all GMC guidance, but the section on probity especially emphasises the following areas, indicating where problems have arisen in the past.

1. Providing information about your services

This information must be factual and not make exaggerated claims. Prospective patients must not be pressurised in any way.

2. Writing reports, giving evidence and signing documents

Reasonable steps must be taken to verify any verbal or written formal statements, and these should not be misleading because of omitted information (as with a job reference, for instance).

3. Research

Approval for research must be obtained from an independent research ethics committee and you must ensure that patients have given fully informed consent.

4. Financial and commercial dealings

- Patients should not be subject to pressure to accept private treatment and should be fully informed about any fees. Similarly, patients should not be pressed to donate money or gifts, whether personal or to a project or organisation.
- Income, for instance for a project, should be kept separate from personal income and be spent how it was intended.
- Declarations of interest must always be made, and conflicts of interest avoided.

Issues of probity may be referred to:

- The police and thence the Crown Prosecution Service
- The employer, who may seek advice from the National Clinical Advisory Service and/or use their own disciplinary policy. They can also refer to the National Health Service (NHS) Counter Fraud and Security Management Service
- The GMC

These organisations may discuss with each other whose investigations are most appropriate in the first instance.

Frequently asked questions

Q: How can allegations of offences against probity be prevented?

- Be aware that law-breaking which could give rise to mistrust, even if not apparently connected with your profession, may be grounds for action by your employer or the GMC.
- Be familiar with the GMC's *Good Medical Practice* (2006), which is regularly updated.
- Be familiar with *Maintaining High Professional Standards in the NHS* and how it has been applied by your employer.
- Ensure your job plan is agreed and adhered to.
- Follow procedure on leave applications and claiming expenses, keeping copies.
- Do not do other work when on sick leave.
- Ensure communications are accurate and documented.

Q: What should I do about a potential probity allegation?

- While 'slack' practice is common, 'they do it too' is rarely an acceptable defence, although the person against whom the complaint was made may feel this is unfair.
- Being professional is not about not making mistakes but about how you handle those you do make – be open and

honest, approach concerns on a problem-solving, not adversarial, basis and show insight in dealing with any genuine expressions of concern.

- If you become aware, for instance, of an error you have made, in the first place ask a trusted colleague for advice as to how you may put it right and/or avoid such a circumstance in the future.
- Document this and start keeping a diary of events related to the issue.
- Consider consulting your defence or professional organisation.

Q: What if I receive a formal allegation?

- Reflect as above.
- Ask your defence and professional organisations for advice. They are likely to agree between them who should lead on the issue.
- Document this and start keeping a diary of events related to the issue.
- Gather all the information you can about the nature of the allegation and the formal procedures which are taking place. Your trust's human resources department should be able to help.

Q: What should I avoid doing?

- Do not respond impulsively or aggressively, for instance blaming others.
- Do not attempt to supply, alter or amplify a contemporaneous record. However, a correctly dated addendum may be of use later.

Q: What might happen next?

- This will vary according to the process, but suspension from employment pending investigation is quite a possibility (see the information guide on exclusion, in this series).
- The GMC may view the allegation as possible grounds for erasure for serious professional misconduct and therefore may suspend registration under the Interim Orders procedure, often for 18 months.
- Any formal procedure is likely to be prolonged and stressful, so seek a variety of support and ensure you look after your health. The College's Psychiatrists' Support Service has a list of organisations offering support to doctors, and can also offer contact with senior colleagues.

Sources of further help and support

British Medical Association

BMA House, Tavistock Square

London WC1H 9JP

Tel: 020 7387 4499

www.bma.org.uk

General Medical Council

St James's Buildings, 79 Oxford Street
Manchester M1 6FQ
Tel: 0845 357 8001
www.gmc-uk.org

Hospital Consultants and Specialists Association

1 Kingsclere Road, Overton, Basingstoke,
Hants RG25 3JA
Tel: 012 5677 1777
Email: conspec@hcsa.com

Medical and Dental Defence Union of Scotland

Mackintosh House, 120 Blythswood Street
Glasgow G2 4EA
Tel: 0141 221 5858
www.mddus.co.uk

Medical Defence Union Limited

230 Blackfriars Road
London SE1 8PJ
Tel: 020 7202 1500
www.the-mdu.com

Medical Protection Society

33 Cavendish Square
London W1G 0PS
Tel: 020 7637 0541
www.mps.org.uk

National Clinical Assessment Service (NCAS)

1st Floor, Market Towers, 1 Nine Elms Lane
London SW8 5NQ
Tel: England and Northern Ireland 020 7062 1655,
Wales 029 2044 7540, Scotland 013 1220 8060; 24-hour emergency
contact 020 7062 1655
Email: advice.service@ncas.npsa.nhs.uk
www.ncas.npsa.nhs.uk

NHS Counter Fraud and Security Management Service

Weston House, 246 High Holborn,
London WC1V 7EX
Tel: 020 7895 4500
www.cfsms.nhs.uk

Psychiatrists Support Service

Royal College of Psychiatrists
17 Belgrave Square
London SW1X 8PG
Tel: 020 7245 0412
Email: psychiatristssupportservice@rcpsych.ac.uk

References

GENERAL MEDICAL COUNCIL (2006) *Good Medical Practice. Probity*. GMC (http://www.gmc-uk.org/guidance/good_medical_practice/probity/financial_and_commercial_dealings.asp).

DEPARTMENT OF HEALTH (2005) *Maintaining High Professional Standards in the Modern NHS*. Department of Health (http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4103586).

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