

## Summary points

Performance managed healthcare settings encourage gaming and “creative accounting” of data

Creative accounting is driven by three dominant factors—attracting additional resources, meeting performance related targets, and improving position in league tables

Additional resources may be obtained through fraudulent claims, inducements, self referrals, and “DRG creep”

The non-clinical performance targets that lend themselves most readily to creative accounting are hospital waiting times

Position in clinical league tables may be enhanced by “coding creep,” choice of risk adjustment method, transfer of patients, change of operating class, denial of treatment, and “cream skimming” of healthier patients

- Farthing M, Lock S, Wells F. *Fraud and misconduct in biomedical research*. 3rd ed. London: BMJ Books, 2001.
- United Kingdom Parliament. House of Commons Select Committee on Public Administration. 30 January 2003: 942. [www.parliament.the-stationery-office.co.uk/pa/cm200203/cmselect/cmpubadm/uc62-ix/uc6202.htm](http://www.parliament.the-stationery-office.co.uk/pa/cm200203/cmselect/cmpubadm/uc62-ix/uc6202.htm) (accessed 15 Aug 2003).
- House of Commons Committee of Public Accounts. *Inappropriate adjustments to NHS waiting lists. Forty-sixth report of session 2001-2002*. London: Stationery Office, 2002. [www.publications.parliament.uk/pa/cm200102/cmselect/cmpubacc/517/517.pdf](http://www.publications.parliament.uk/pa/cm200102/cmselect/cmpubacc/517/517.pdf) (accessed 10 Dec 2003).
- BBC News. NHS managers 'fiddle figures.' 7 October 2002. <http://news.bbc.co.uk/1/hi/health/2299291.stm> (accessed 15 Aug 2003).
- BBC News. Transcript of BBC1 programme *Panorama: Fiddling the figures*. 29 June 2003. <http://news.bbc.co.uk/nol/shared/spl/hi/programmes/panorama/transcripts/fiddlingthefigures.txt> (accessed 15 Aug 2003).
- Auditor General, Audit Scotland. *Review of the management of waiting lists in Scotland*. Edinburgh: Auditor General, 2002. [www.audit-scotland.gov.uk/publications/pdf/2002/02p03ag.pdf](http://www.audit-scotland.gov.uk/publications/pdf/2002/02p03ag.pdf) (accessed 10 Dec 2003).
- Revill J. Hospitals faking cuts in casualty wait times—operations axed to rig targets, documents reveal. *Observer*, 11 May 2003. <http://observer.guardian.co.uk/nhs/story/0,1480,953395,00.html> (accessed 15 Aug 2003).
- BMA. *BMA survey of A&E waiting times*. May 2003. [www.bma.org.uk/apnsf/Content/AESurvey/\\$file/AESurvey.pdf](http://www.bma.org.uk/apnsf/Content/AESurvey/$file/AESurvey.pdf) (accessed 15 Aug 2003).
- Gulland A. NHS staff cheat to hit government targets, MPs say [News]. *BMJ* 2003;327:179.
- Mehigan BJ, Monson JRT, Hartley JE. Stapling procedure for haemorrhoids versus Milligan-Morgan haemorrhoidectomy: randomised controlled trial. *Lancet* 2000;355:782-5.
- Helmy MA. Stapling procedure for hemorrhoids versus conventional haemorrhoidectomy. *J Egypt Soc Parasitol* 2000;30:951-8.
- Kalb PE. Health care fraud and abuse. *JAMA* 1999;282:1183-8.
- Simbourg DW. DRG creep: a new hospital-acquired disease. *N Engl J Med* 1981;304:1602-4.
- Wynia MK, Cummins DS, VanGeest JB, Wilson IB. Physician manipulation of reimbursement rules for patients: between a rock and a hard place. *JAMA* 2000;283:1858-65.
- Hyman DA. Health care fraud and abuse: market change, social norms, and the trust “reposed on the workmen.” *J Legal Studies* 2001;30:531-67.
- Green J, Wintfeld N. Report cards on cardiac surgeons: assessing New York state's approach. *N Engl J Med* 1995;332:1229-32.
- Iezzoni LI. The risks of risk adjustment. *JAMA* 1997;278:1600-7.
- Nightingale F. *Notes on hospitals*. 3rd ed. London: Longman, 1863.
- BBC News. Stoke and Staffordshire local news. Hospital blames 'lack of hospice care.' 15 October 2002. [www.bbc.co.uk/stoke/news/2002/10/121002.shtml](http://www.bbc.co.uk/stoke/news/2002/10/121002.shtml) (accessed 15 Aug 2003).
- Jones RH. In search of the optimal surgical mortality. *Circulation* 1989;79(6 Pt 2):1132-6.
- Cutrone M, Grimalt R. The true and the false: pixel-byte syndrome. *Pediatr Dermatol* 2001;18:523-6.
- Burack JH, Impellizzeri P, Homel P, Cunningham JN Jr. Public reporting of surgical mortality: a survey of New York State cardiothoracic surgeons. *Ann Thorac Surg* 1999;68:1195-200.
- World Bank Institute. Flagship program on health sector reform and sustainable financing. Glossary to distance learning module 1—Basics of health economics. [www.worldbank.org/wbi/healthflagship/dl\\_glossary.html](http://www.worldbank.org/wbi/healthflagship/dl_glossary.html) (accessed 15 Aug 2003).
- Hofer TP, Hayward RA, Greenfield S, Wagner EH, Kaplan SH, Manning WG. The unreliability of individual physician “report cards” for assessing the costs and quality of care of a chronic disease. *JAMA* 1999;281:2098-105.
- Bucher HC, Weinbacher M, Gyr K. Influence of method of reporting study results on decision of physicians to prescribe drugs to lower cholesterol concentration. *BMJ* 1994;309:761-4.
- Fahey T, Griffiths S, Peters TJ. Evidence based purchasing: understanding results of clinical trials and systematic reviews. *BMJ* 1995;311:1056-9.

## Get Peered!

Tom Jefferson, Karen Shashok, Elizabeth Wager

We present a new board game for *BMJ* readers who would like to become members of the House of Lords the hard way: by climbing the greasy pole of science. As it is Christmas, you may enjoy playing the game with family and friends huddled round a roaring log fire in the certainty that the situations described in each square are completely imaginary.

All you will need is a copy of the board, dice, and your own tokens. Beer bottle tops will do nicely, if you can't bring yourself to use your Royal College cuff links or the earrings you bought on your most recent drug company trip to Monte Carlo. You will also need your Big Pharma Company fake gold pen and headed notepaper to keep a tally of the scores.

Contributors: The idea for Get Peered! surfaced in an email from KS to TJ during the 2002-3 Christmas season. TJ and EW drafted the rules and the content of the squares, with additional contributions from KS. Sadly, none of the authors could think of a suitably eminent guest author to join the line-up, and all three authors are too poor to employ a ghost writer; however,

all three had more fun developing the game than a yacht full of grant reviewers for NICE at a drinks party in the Seychelles. Stefano Jefferson devised an early version of the board, which was then road tested by technical editors Margaret Cooter, Julia Thompson, Richard Hurley, Karl Sharrock, Barbara Squire, and Greg Cotton and brought to life by Malcolm Willett.

Sources of funding: TJ, KS, and EW were supported by benevolent funds from the FLCPR Foundation, a fictitious NGO for freelancers concerned about peer review.

Competing interests: TJ co-edited the book *Peer Review in Health Sciences* and co-authored the book *How to Survive Peer Review*. EW published two chapters in the book *Peer Review in Health Sciences* and co-authored the book *How to Survive Peer Review*. Drawing attention to peer review could enhance sales of both books and benefit the authors financially. EW also runs courses about peer review; Get Peered might either make such training redundant or suggest to potential customers that she doesn't take the subject seriously enough. KS is a science publishing consultant, so drawing attention to peer review could attract potential clients and benefit her financially—although it could also scare them away. All authors are active peer reviewers and have published articles in peer reviewed journals.

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<p>You bring an article on the limitations of peer review to the attention of a government adviser</p>  <p>Lose 5 IF points or go back to Start</p>	<p>Your paper is reviewed by your arch enemy</p>  <p>Go back 3 squares</p>	<p>You are promoted to senior researcher</p>  <p>Collect 3 IF points for 2 gift authorships</p>	<p>You have a brilliant idea</p> 
<p>You leave your laptop on a train</p>  <p>Miss a turn</p>	<p>You chair a NICE committee</p>  <p>Collect 2 IF points and anticipate delaying approval of your rivals' grant applications</p>	<p>You finally finish writing your book</p>  <p>Lose 2 IF points (the hourly rate works out worse than the hospital cleaners')</p>	<p>Your paper is plagiarised by a referee</p>  <p>Lose 3 IF points</p>
<p>Enter the House of Lords!</p> <p>Lord Salami Slicing of Vancouver</p> <p><b>Get Peered!</b></p> 		<p>The Big Pharma Company sends you first class to a meeting in the Seychelles</p>  <p>Collect 3 IF points</p>	<p>Paper accepted by Really Boring Medical Journal</p>  <p>Collect 1 IF point</p>
<p>Your mobile goes dead and you miss a crucial call from 10 Downing Street</p>  <p>Miss a turn</p>	<p>You publish a scary vaccine study. Everyone criticises you but quotes the study</p>  <p>Collect 20 IF points</p>	<p>Caught in traffic on your way to the Ministry of Health</p>  <p>Miss a turn</p>	<p>Coffee break</p> 
<p>Down the pub</p> 	<p>Your application for funds to the Foundation for Social Liaisons for Improved Care Experiences (SLICES Foundation) is accepted</p>  <p>Collect 4 IF points</p>	<p>You successfully salami slice your data</p>  <p>Advance 3 squares</p>	<p>Journal loses your paper</p>  <p>Miss a turn</p>