

## 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

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## 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.

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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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## Rules

1. The setting of Get Peered! (GP) is the scientific research community. Life and progression in the community are represented by a green, yellow, and red chequered board. If you land on a red square, you loose points or go back; on a green square you gain points or go forward. On the yellow squares nothing happens; you are presumably drafting a manuscript, doing some literature searching, reviewing someone else's manuscript, or just down the pub.
2. The main currency of GP is the Impact Factor (IF) score. You can collect IF points either because you've actually written something or you've had authorship bestowed on you.
3. The aim of GP is to beat other players (fellow researchers) to a peerage, progressing through several stages in your career: senior researcher, professor, head of a National Institute of Clinical Evidence (NICE) committee, Nobel prize, knight of the realm. The game ends when the first player has won 40 IF points or has reached the last square (whichever comes first). This player is awarded the title of Lord (or Lady) Salami Slicing of Vancouver, and is then invested into the House of Lords and declared the winner. (Investiture ceremonies are at the discretion of the players involved.)
4. Negative IF scores are allowed and are considered a handicap to be redeemed by the accrual of IF points. To win by landing on the House of Lords square, a player needs to throw the exact number. If this does not happen, bounce-back (moving the token backwards again from the final square) must take place until the exact number is reached.
5. Progress through the board is via a throw of one dice. (Note: "die" is the singular form, but the *Concise Oxford Dictionary* says "dice" has become the norm for both the plural and the singular and we'd hate you to think we were being pedantic.) The order of play is established by the highest dice score before the start of the game.
6. Four or five players are optimal, but fewer or more can play at one time. The players can play independently or form coalitions (called citation cartels) to facilitate each other's careers. Cartels make up their own rules. The only important thing is winning the game.





