



Eurachem

A Focus for Analytical Chemistry in Europe

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Report from WG 3



Collusion or falsification of results in PT/EQA Why does it happen and how can it be prevented?

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Questions to be answered

1. Extent of the problem

1. Do you have personal experience of collusion or falsification of results in PT/EQA?
2. Do you perceive a trend in time regarding collusion/falsification (about the same/more/less frequent)? What can explain this trend?
3. Are you aware whether collusion/falsification is more frequently driven by operators or at management level?
4. Is there a difference in collusion/falsification occurrence depending on the purpose of the PT/EQA?

2. Reasons driving the problem

Based on your experience:

1. What are the main reasons behind collusion/falsification?
2. Does the likelihood of collusion/falsification depend on the economic pressure (e.g. risk of losing a licence to carry out certain types of work) on participants in the PT/EQA?

3. Identifying the problem

1. As a PT/EQA provider, how can you identify collusion/falsification?
2. As an accreditation body, how do you review collusion/falsification of results in PT/EQA during an assessment of a laboratory?
3. To what extent should the PT/EQA provider investigate or sanction suspected collusion/falsification?

4. Preventing the problem

1. As a PT/EQA provider, what practices can you put in place to prevent collusion/falsification?
2. As an accreditation body, what elements do you consider in evaluating the PT/EQA provider strategies to prevent collusion/falsification amongst participants?
3. Should it be the duty of PT/EQA provider's duty to prevent it, as stated in ISO/IEC 17043?



Where do you come from?

- Participants
 - PT provider – most participants
 - Accreditation body - 3
 - Private laboratory - 1
 - Academia - 3
 - Governmental institution - 7
 - PT Software -1
 - Testkit Manufacturer - 2



1. Extent of the Problem

a) Do you have personal experience of collusion or falsification of results in PT/EQA?

- yes
 - discussions followed between participants
 - suspicious data identified; falsified assessment
 - internal discussions in a lab that communication with other participants is common practice
 - customer of test kit manufacturer asked for participation in the same scheme
 - virtual samples posted on social media, to ask for comments
 - Intracompany PT scheme – the lab managers talk to each other
 - similar remarks from two different participants – high probability that they spoke to each other
- Difficult to prove



1. Extent of the Problem

b) Do you perceive a trend in time regarding collusion/falsification (about the same/more/less frequent)? What can explain this trend?

- we don't really know if it happens more frequent
- communication between labs is easier now
- Less and bigger companies buying other labs
- maybe the risk for collusion is higher, if there is a chance to loose accreditation or if there are other serious consequences - more participants could take the risk to be caught
- the consequences of identified collusion should be much more serious than for failing in the PT



1. Extent of the Problem

c) Are you aware whether collusion/falsification is more frequently driven by operators or at management level?

- fear to fail comes from the management
- might be the operator, but difficult to identify
- management in principle should be trained to a code of business conduct, so they should be aware that this is not correct



1. Extent of the Problem

d) Is there a difference in collusion/falsification occurrence depending on the purpose of the PT/EQA?

definitely yes



2. Reasons driving the problem

Based on your experience

a) What are the main reasons behind collusion/falsification?

- pressure to pass, risks of suspension, consequences not performing well
- too less consequences if you are getting caught
- wrong understanding – failing could be a chance for improvement; failing might be the wrong word?
- if there is a bonus system for payment of lab managers when they pass a PT this would be contraproductive
- PT should just one tool amongst others



2. Reasons driving the problem

Based on your experience

b) Does the likelihood of collusion/falsification depend on the economic pressure (e.g. risk of losing a licence to carry out certain types of work) on participants in the PT/EQA?

YES YES YES



3. Identifying the problem

- a) As a PT/EQA provider, how can you identify collusion/falsification?
- if they do it properly you don't have a chance
 - you can find evidence, but you cannot prove it
 - it is usually not the task of the PT provider to prove that



3. Identifying the problem

b) As an accreditation body, how do you review collusion/falsification of results in PT/EQA during an assessment of a laboratory?

- it is difficult unless there is already evidence



3. Identifying the problem

c) To what extent should the PT/EQA provider investigate or sanction suspected collusion/falsification?

- exclusion from the PT assessment
- reporting to accreditation body is difficult without breaching confidentiality; do I need this to be signed by the lab beforehand
- with low numbers of participants you may need every participants



4. Preventing the problem

- a) As a PT/EQA provider, what practices can you put in place to prevent collusion/falsification?
 - nice overview in Matthews presentation
 - e.g encrypting samples to prevent collusion (works only for big schemes)
 - it should be noted in the PT registration/contract that collusion is not acceptable
 - Participants should understand that it is a tool to improve



4. Preventing the problem

b) As an accreditation body, what elements do you consider in evaluating the PT/EQA provider strategies to prevent collusion/falsification amongst participants?

- looking just what elements are in place
- decision left to the assessor - no guidance known
- collusion is only the problem for the PT provider if the assigned value is affected
- mainly it should be the problem of the AB to identify collusion



4. Preventing the problem

c) Should it be the PT/EQA provider's duty to prevent it, as stated in ISO/IEC 17043?

- There has to be “something” at the PT provider - a plan to restrict collusion
- “the PT provider should not make it too easy”
- The PT provider is not be the only one responsible
- The PT provider could assist in corrective actions to reduce the fear to fail