The NHS Long Term Plan – Putting People First

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Abstract
New guidance from NHS Improvement will help to focus minds on establishing an NHS that regards people management procedures which impact staff wellbeing with the same urgency as it regards patient safety. I outline a culture which values and promotes Fairness, Accountability, Compassion and Excellence (‘FACE’). I also offer some advice for doctors in difficulty.

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The Long-Term NHS Plan states (2019, p. 86) ‘The NHS draws on a remarkably rich diversity of people to provide care to our patients. But we fall short in valuing their contributions and ensuring fair treatment and respect’. Mental distress, up to the point of suicide, has been highlighted as a major concern for doctors in their workplace, and this may be particularly evident when doctors face investigations and disciplinary hearings.¹⁻³ BME staff appear to be especially vulnerable to unfair treatment. The case of an award-winning nurse, Amin Abdullah, who burned himself to death outside Kensington Palace following an unfair dismissal in 2016, has led to key Recommendations from an NHS Improvement (NHSI) Advisory Group. The Recommendations call for alternatives other than dismissal and suspension to be fully explored, independent expert input to disciplinary processes, the principle of plurality to be inherent in key decision making, and accountability for those who treated staff unfairly. The Recommendations, together with a YouTube video of Amin Abdullah’s story, A Nurse’s Tragic Journey, are available at www.abetternhs.com.

How can we create a better NHS culture to prevent such tragedies in the future?

My views can be summarised in an acronym, FACE, which derives from four basic principles –
• Having Fairness as a key standard for how staff are treated, with the CQC introducing ‘Fairness’ as a new inspection domain.
• Ensuring that there is Accountability for staff who make decisions which adversely affect staff wellbeing.
• Showing Compassion to staff in ways which show that their wellbeing is held to be as critically important as that of patients.
• Promoting Excellence, underpinned by effective learning of lessons when mistakes are made.

There is a general concern about how NHS staff are treated when being investigated or disciplined. The Care Quality Commission needs to ensure that the NHSI Recommendations are implemented, with sanctions if they are not properly implemented. We also need to ensure both excellence and accountability for healthcare staff in management roles, something that health secretaries have prioritised.

Specific further steps include –
1. NHS England should introduce a Redeployment Scheme to enable staff working in toxic environments, or who were unfairly suspended or dismissed, to work in another environment to help them return to clinical practice in a fulfilling role. A similar scheme has been successfully run by NHS Wales for a number of years.
2. There should be awards to recognize the bravery of staff who become whistleblowers and speak out at great personal cost when they see wrongdoing and unfairness in the workplace.
3. Other areas where staff may be unfairly treated, such as selection, promotion/merit awards, change in working conditions, bullying, etc, need to be covered in future NHSI recommendations.
4. It is sometimes healthcare professionals in management roles who contribute to a culture of unfairness. Professional bodies, such as the Royal Colleges and the BMA, and regulatory bodies such as the GMC, should develop relevant guidance for their members; guidance proposed for psychologists may be helpful.
5. Relevant aspects of NHS management should be part of healthcare professional training, and induction programmes for NHS employees.
6. Trust Executive Boards should sanction every case of dismissal or suspension of a healthcare professional.
7. Healthcare professional bodies, such as the Royal Colleges, should re-introduce forms of accreditation for services, including management roles assumed by members.
8. Many Trusts have ‘Equality & diversity officers’ and their role should be expanded to become ‘Equality, Diversity & Fairness’ Officers.
9. The Healthcare Safety Investigation Branch exists to learn lessons from mistakes in patient care. An equivalent body, a Healthcare Staff Wellbeing Investigation Branch, should be set up to learn lessons from mistakes in people management.
10. Before nurse Amin Abdullah’s life was sacrificed there were repeated failures to listen to concerns and learn lessons. The Department of Health, NHSI, the CQC and NHS Employers should each reflect on why lessons were not learned, and publish their reflections. It is now clear that staff wellbeing and morale are closely linked to quality of patient care.
For healthcare staff in difficulty my key advice is –
• Look after your physical and mental wellbeing, and that of your family
• Always seek external, expert advice
• Stay calm at times of stress; do not act on impulse; avoid scoring ‘own-goals’. Remember
  the three P’s – Be Patient, stay Positive, and show Perseverance.

Further tips and also my wellbeing booklet can be found on my website, 

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