ENSURING AN OPEN NHS CULTURE

In his report last week into the appalling events that occurred at Mid Staffordshire NHS Foundation Trust, Robert Francis highlighted the critical importance of fostering and sustaining an open culture in which concerns about care can be raised, investigated and acted upon. He said:

“Insufficient openness, transparency and candour lead to delays in victims learning the truth, obstruct the learning process, deter disclosure of information about concerns, and cause regulation and commissioning to be undertaken on inaccurate information and understanding. This Inquiry has shown that, desirable though the principle of openness, transparency and candour may be, it is frequently not observed. This has had serious consequences.”

You will all have seen the media coverage this week of allegations of some NHS bodies using legal processes apparently to frustrate the efforts of staff to ensure that problems are properly aired and action taken to ensure safe, effective and compassionate care for patients.

Last year, Sir David Nicholson wrote to every organisation in the NHS reminding them of their legal responsibilities in this respect and the Department’s long-standing guidance on “gagging clauses” and the need for genuine consideration of concerns when they are raised (attached).
I know that many NHS organisations follow not just the letter but the spirit of that guidance. Fostering a culture of openness and transparency is essential if we are to ensure we never repeat the mistakes of Mid Staffs - which means creating a climate where it is easy for staff, present and former, to come forward with any concerns they have relating to patient safety.

For those working in the many organisations that do exactly that, I would like to thank you and commend you for your efforts. But others may recognise in their own behaviour an element of the institutional self-defence that prevents honest acknowledgement of failure followed by swift corrective action to put things right.

So I would ask you to check that the confidentiality clauses in your contracts (and compromise agreements with departing employees) do indeed embrace the spirit of this guidance. I would also ask you to pay very serious heed to the warning from Mid Staffordshire that a culture which is legalistic and defensive in responding to reasonable challenges and concerns can all too easily permit the persistence of poor and unacceptable care.

Raising concerns can be a brave thing to do, even in an open culture, so when our staff have the courage and professional integrity to raise concerns in the patient interest, we need to recognise and celebrate that behaviour, listen to their concerns and take action to ensure any problems are properly addressed. I know many organisations already have such an approach, but I would ask you to work with colleagues across the system to ensure this happens consistently across the NHS.

JEREMY HUNT