

Dr N

Dr N (not his real name) is a psychiatrist. He is of Asian British ethnicity and qualified abroad. His case with Practitioner Performance Advice related to an allegation of bullying made against him and is now resolved. His role remains the same, with no restrictions, although he now works for a different organisation.

Case handling

Dr N was told verbally by his former NHS Trust that they had contacted Practitioner Performance Advice. He asked the Trust for written confirmation of this, which they did not give. When Dr N telephoned Practitioner Performance Advice for advice, they did not provide any information about their role in the handling of his case, which he would have liked. They simply said to go along with the Trust's investigation, even though he felt it was unjustified.

"I didn't have any idea of what NCAS [Practitioner Performance Advice] was supposed to do, or how it would help me... They seemed to me like another extension of the Trust because... they just seemed to say, 'Just carry on and go with the flow'... they told me that they would offer me support, but when I called them, they said this was the process I had to go through"

Case management

The Trust's medical director managed Dr N's case. Dr N's union representative advised the medical director to look at his case in the context of wider concerns within his team, and to provide mediation, but he refused. Dr N was not offered any opportunity to discuss the case with his medical director or his line manager; he was told to speak with another named consultant if he needed support. However, the consultant also advised him just to comply with the investigation. To improve the handling of his case, Dr N would have welcomed more intervention from his union and more support from his line manager. He also feels that the Trust should have offered mediation and looked at the case in context.

"I did not even know what I could discuss with the medical director... my union rep... should have been more vocal and insistent at looking at the whole thing and the context... My [line manager] stopped talking to me. There was no discussion of, 'I'm so sorry that someone has made a complaint. Do you want to about how to address it?' ... There was nothing... I got no support, and the version I was given was to just carry on with it"

The involvement of Practitioner Performance Advice

Dr N says that Practitioner Performance Advice had very little input into his case. He feels that the Trust racially discriminated against him when handling his case. This is because the Trust had previously dismissed serious concerns that Dr N and other colleagues had raised about another member of staff (who was white), yet immediately investigated the concerns which were raised about Dr N's conduct (by a white colleague) and told him that he would face a disciplinary panel.

When Dr N reported these allegations of racial discrimination, along with more general concerns about the handling and management of his case, to Practitioner Performance Advice they said they were unable to take any action, without saying why.

Consequently, Dr N feels that Practitioner Performance Advice should have intervened to insist that the Trust considered all the relevant details of his case and ensured that it was handled fairly.

"I did write an email saying I was concerned about how my case was being handled, and there is evidence of racism, and they said they can't actually deal with it, so for me... Practitioner Performance [Advice] was non-existent"

Other support

Dr N received informal support from colleagues, family, and friends, but still needed medication and counselling to help him cope with the trauma of his case. The counselling was helpful as it reassured him that the situation was not his fault. It also highlighted that many other doctors had been put in a similar position to Dr N.

"I self-referred [for counselling]... it gave me some help, because they said they had seen lots of doctors like me who... had been victimised and had mental health problems as a result. Time and time again they said this was not a personal failure... so it was quite good"

Fairness

Dr N describes a fair process as one where there is no blame; where relationships are repaired; but where there is accountability and responsibility. He emphasises that his case cannot be described in these terms because the Trust did not discuss his case with him or offer him any support, advice, or mediation; overlooked ongoing issues within his team that he had previously reported; and racially discriminated against him (and other doctors from ethnic minority backgrounds). The Trust also overlooked the fact that Dr N was newly qualified and had a recent family bereavement. To prevent these situations from arising in future, Dr N says that NHS Trusts should challenge the systemic racism that exists. He also notes that Practitioner Performance Advice should examine and monitor allegations against practitioners from ethnic minority backgrounds more closely.

"I felt it was racist because all those involved were of white ethnicities and [the Trust] made this direct conclusion from this one allegation... All of that could be prevented if they themselves were aware of their privilege and the systematic discrimination that occurs, but because of the lack of awareness and... denial, they were not able to prevent it... surely NCAS [Practitioner Performance Advice] could just raise an alert when they see another BAME doctor subject to investigation?"

Organisational culture within the NHS

Dr N feels that the organisational culture within the NHS perpetuates unfairness, bullying and discrimination instead of challenging it. NHS Trusts do not listen to practitioners or treat them with respect, he says. Furthermore, he alleges that junior doctors are used to bully health professionals who are seen as problematic, which is traumatic and unfair for all involved. Dr N says that the NHS must tackle this issue systematically, which may involve making some difficult political decisions. He also suggests that employment tribunals should be public to make them fairer for practitioners.

"[The culture within the NHS is] really bullying, victimising, racist... very toxic and very patriarchal... The NHS needs to look at it systematically and that might mean the manager or board of directors having to reflect on how they behave... The weather is still very much against doctors, and the NHS has become an institution that will not accept any complaints at all [and] they will try their best to hide every mistake"

Longer term impacts of the case

Dr N had to take time off due to the stress of his case. He has now returned to work part-time but is still traumatised. He only accepts posts that already have a supervisor in place, and is now reluctant to raise patient safety concerns, for fear of a similar situation arising again. Dr N is considering moving abroad to escape the culture within the NHS.

“I now only do temporary jobs only part-time because I can’t cope with full-time jobs and the moment I see in teams that there are problems I leave the job, because... I am just trying to protect my mental health... Even if I see something which I think doesn’t give good patient outcomes, I end up keeping quiet now because I don’t want problems... I think I am too traumatised”