Onus on whistleblowers to name names could be counterproductive

The whistleblower who made allegations of abuse at a hospital for people with learning disabilities said last week that the nurse regulator wants him to identify nurses who may have failed to report poor care.

Terry Bryan, who raised concerns about standards of care at Winterbourne View in Bristol to BBC Panorama, told Nursing Standard: ‘The Nursing and Midwifery Council (NMC) wants me to give a witness statement on the people there who may have watched it happen. Nurses need to know the onus is on them to act.’

The move comes as MPs warned nurses they face serious sanctions if they do not raise concerns about colleagues. In a major review of the NMC’s work, the Commons health committee told the regulator to send a clear signal to registrants about exposing unacceptable behaviour of fellow nurses.

Members were concerned that standards of basic nursing care were slipping, particularly for older people in acute hospitals and care homes.

Cases such as Winterbourne View and deaths at Mid Staffordshire NHS Foundation Trust demonstrate where nurses have failed to speak up, it said.

However the RCN and Unison said adding to pressure on nurses could be counterproductive. Francesca West, policy director at whistleblowing organisation Public Concern at Work, warned it could lead to a witch hunt.

‘Nurses need to know the onus is on them to act’

RCN head of policy Howard Catton called for a new, independent organisation where nurses could raise concerns without fear of ramifications.

The committee will explore the issue of nurses who are punished by their employers if they do report poor care, chair Stephen Dorrell said.

The NMC said it will develop an action plan on how it will address the committee’s concerns. Chief executive Dickon Weir-Hughes said: ‘We will also seek to update the committee at regular intervals throughout the coming year.’

HCA VOLUNTARY REGISTER ‘FLAWED’

Pressure is mounting on the government to regulate healthcare assistants after an influential group of MPs criticised plans for a voluntary register.

The Commons health committee said mandatory regulation was needed for unregulated staff who provide hands-on patient care, adding that this was the only way to protect the public.

The recommendation was made in the committee’s report on the work of the Nursing and Midwifery Council (NMC) published last week.

The RCN, Unison, Patients Association and the NMC have called for mandatory registration of healthcare assistants (HCAs).

RCN head of policy Howard Catton said: ‘It is hugely significant that the committee has rejected the government’s voluntary approach. I support its recommendation fully.’

In written evidence to the committee, the NMC said HCAs are increasingly carrying out work for which they have not been trained and can be supervised by a non-registered member of staff, such as a general manager.

NMC chief executive Dickon Weir-Hughes said: ‘We welcome the committee’s support of our position and recognise the need to work closely with the government and stakeholders.’

The Department of Health said it has a ‘comprehensive strategy’ to ensure the safety of healthcare staff and will respond to the committee’s recommendations at a later date.

NMC to start holding data on ethnicity

The ethnicity of registrants accused of misconduct is not known to the Nursing and Midwifery Council (NMC).

The regulator was criticised by the Commons health committee last week for failing to collect diversity data on nurses facing fitness to practise (FTP) proceedings. The committee, which reported on the accountability of the NMC, said analysis of General Medical Council’s ethnicity data found doctors who trained overseas were over-represented in FTP cases. The findings are being analysed.

The NMC began asking for ethnic data through a voluntary questionnaire in 2009, but plans to begin collecting data on FTP shortly.