

The Nursing and Midwifery Council (NMC) are aptly abbreviated when they have people referred to them by malicious employers that target nurses who raise concerns in care homes. They really are

Not Much Cop

I write to pick up on Whistle blower B's story and the fact that raising concerns always has been part of the NMC code of conduct.

I raised concerns at a Sussex care home where I worked for three months in 2013. During that time I saw neglect of residents, unsafe care and falsified record keeping by the care staff. As the registered nurse on duty I was accountable for all of this. As per the whistleblowing policy and the NMC code I went to my line manager Mrs X.

I would like to name and shame in this statement as this woman is to be avoided by any credible nurse or organisation but there are ongoing legal proceedings at the high court which prevents this at this time.

The response from her to my concerns was to do nothing. Her deputy, who she worked closely with, then sent a memo round to all staff identifying me as reporting concerns! As a result I was ostracised and bullied.

I started putting my concerns in writing when I found a lady dead (and clearly had been for a while as she was getting cold) yet only three minutes earlier the care staff had falsely documented her as checked and asleep.

The response from Mrs X was to alter and further falsify the care records.

I asked to be removed from night duty as nobody had control over this situation and I was not going to be held accountable. The response from management was to make me attend an open meeting where I was humiliated in front of approx 20 subordinate staff. They made my position untenable and I resigned immediately afterwards.

So much for following PIDA guidelines and being protected.

On leaving I did two things, I went to the CQC re my concerns as per PIDA requirements. As they had recently been to the home and rated it "good" they then chose to listen to the allegations of Mrs X saying I was being malicious and nothing I said was true. They did nothing for nine months leaving 64 vulnerable adults at risk but apparently were "monitoring" the home.

Right under the gaze of this “intelligent monitoring” the safeguarding issues were stacking up under Mrs X's leadership. The CQC were finally forced to act in January 2014 when the NMC kicked the CQC off their regulatory behinds.

So much for reporting concerns to the prescribed authority and expecting them to be acted upon.

I also raised an employment tribunal claim under the public interest disclosure act (PIDA). I was unrepresented legally and unsupported by witnesses. It ranks as one of the worst experiences of my life.

My then ex managers colluded in telling lies and employed a highly paid barrister to put those lies to a tribunal panel at a full merits hearing. That was their defence, to try and trash the claimant. For five days I had to sit through all this and also try and legally cross examine these people under a lot of duress and whilst on medication for depression and anxiety.

Somehow I won damages against these people and their insurance policy paid out. The Judge also uplifted the amount by the maximum discretionary amount due to their complete failure to follow their own policies and the ACAS code of practice.

I then won partial costs due to the dishonest conduct of these managers when submitting and giving evidence. They should have been prosecuted for perjury as they gave evidence on oath and swore their discredited witness statements as true.

I should be grateful I “won” damages in my case in such a warped system. I'm not as I have lost my nursing career. I don't ever want to be put in the position of having to choose whether I protect vulnerable adults or myself ever again and that is what the code demands of it's registrant's

The NMC's handling of all of this

In May 2013 this vindictive manager, aided by her deputy, referred me to the NMC with a raft of totally false allegations and even complained I was making frequent complaints about the care given by others! Those would be the complaints that were subsequently upheld by the CQC and a tribunal judge found both nurse managers “had made no concerted efforts to deal with”

What did the NMC do when made aware of their failures to manage risk.....precisely nothing.

Ms X fabricated a drug error that never happened and could not evidence that it

had. She also complained I had failed to lay out the body of a resident subject to Coroner input....that's a standard procedure.

The NMC employ people who don't think at the screening end of the NMC fitness to practice directorate. If an employer tells them the world is flat they automatically launch an investigation to try and prove this employer right which makes them look busy discharging their regulatory function. Their lawyers are doing god knows what as it certainly is not looking at any evidence to the contrary or even a lack of evidence completely. Their admin assistants AKA case officers are only focused on meeting their key performance indicators.

That is what happened in my case. Despite no evidence that I had done anything, other than report concerns which I was legally obliged to do, the NMC then put this out to an external investigation law firm costing thousands. Why do registrant's pay them £120 a year in fees again?

It cost me emotionally and in time to respond to these allegations which I was required to do. However it never occurred to me the NMC would find a case to answer as they were so ludicrous. I told them about everything that had happened in this home. They did not care t that point.

In September 2013 the NMC wrote to me telling me they were recommending I had a case to answer. This would have been laughable if it were not so serious.

*Recognising the complete incompetence here I escalated the matter right to the top of the fitness to practice directorate. I contacted Sarah Page who is the head of the directorate. **I would recommend any nurse who finds themselves in this position to do the same and contact***

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She immediately re opened the investigation and gave it to her deputy to oversee. Within two months the NMC had retracted their recommendation I had a case to answer and closed the matter. They also sent the CQC into the home still being run by Mrs X. Three enforcement notices were issued re all the concerns I had raised nine months previously. What had happened here was that the NMC had been duped into targeting a whistle-blower by a malicious employer. They have no safeguards in place at the referral stage to prevent this.

That was six months of necessary stress for me and a complete waste of money for them.

The NMC also made the following observations about the conduct and motivation of Mrs X and her deputy that is totally contrary to the 2008 code of conduct in force at the time:

In respect of Mrs X's falsification of the care records the NMC state this:

“The evidence contradicts the explanation given by (named registrant) and (named deputy) for (named registrant's) amendment to the care record and suggests this amendment was unjustified”

So what did the NMC do re this dishonest nurse who is an employer who blatantly breached clause 44 of the 2008 code of conduct? Precisely nothing so what sort of messages are they sending out to unscrupulous nurses who work in positions of power, cover up abuse in care homes and target whistleblowers?

When belatedly recommending no case for me to answer the NMC go onto state :

“The NMC is of the view that the allegations in the original referral are primarily employment issues and are not allegations that the registrant's fitness to practice is impaired. As such they are not regulatory matters. In addition the panel may consider that at least some of of the concerns the registrant raised at the home have some basis and she was right to raise them. The NMC considers it may be contrary to the public interest to question the fitness to practice of a registrant on the basis that he or she is raising what he or she considers to be legitimate concerns about patient care”.

So why was this not picked up at the screening stage or at least within the costly external investigation the regulator paid thousands in registrant's fees to conclude?.....the NMC have yet to explain.

And then we have the icing on the cake when they state:

“ the NMC also recognises that the credibility of..... (they name Ms X and her deputy) who are the referrers and the main witnesses is compromised because assertions in their statements are compromised by the contemporaneous evidence.....”

That's polite regulatory speak for these people are liars.

Honesty and integrity are fundamental tenets of the nursing profession and the NMC code of conduct. These people lied at a tribunal and lied to the NMC when targeting a whistle blower.

What have the NMC done about their conduct? Turned a blind eye and done nothing.

This woman's services were dispensed with by her employer following another damning CQC report at an inspection in August 2014 which found yet again she was failing to act on concerns in the home. She was removed from regulatory activity by the registered provider.

The NMC's justification for not acting when I formally brought to their attention? Well she wasn't solely responsible apparently.

She was the registered manager with a nursing registration to boot so if she wasn't responsible then who is?

Instead of referring this woman to the NMC and the DBS the employer negotiates a settlement with her. That includes a reference where they are not allowed to say anything defamatory against her so she can go elsewhere.

And she has!! She has now been promoted to the general manager position in another prestigious care home which has a dementia unit.

If her employers had made a referral when they should the NMC would have acted as they act on anything an employer says. Furthermore a recent FOI bears this out. The NMC website is bursting with hearings where the employer is the referrer yet in the FOI I made out of over two thousand non employer referrals made only twelve got to a conduct hearing.

The NMC really need to wake up here. They are used to target whistleblowing nurses yet they do not deal with the perpetrators of this when it is formally brought to their attention.

