Follow Imperial's lead to honour Amin Abdullah's memory

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**Through its new disciplinary policy, Imperial College Healthcare Trust aims to create a system that promotes fairness and compassion towards its staff, say Narinder Kapur, Christian Harkensee and Terry Skitmore**

The new disciplinary policy of Imperial College Healthcare Trust was developed in the light of the findings of the [2018 inquiry into the self-immolation of nurse Amin Abdulla](https://www.bbc.co.uk/news/uk-england-london-45117083)h. It goes a long way to producing a fairer system for NHS staff, a system that will also save the trust money in avoiding needless legal claims and associated damage to their reputation.

The inquiry into Mr Abdullah’s case, and the subsequent recommendations for all NHS trusts produced by NHS Improvement, brought to light a distressing state of affairs of how disciplinary cases are managed in the NHS. There was an “apartheid” system, with one policy for doctors and dentists, and another much less fairer policy for other healthcare staff.

The latter readily allowed the setting up of “[kangaroo courts](https://www.hsj.co.uk/policy-and-regulation/kangaroo-courts-shame-the-nhs/7023119.article)” in which clinical staff in management roles played a key part. The apparent absence of accountability of staff managing these cases permitted behaviour which can only be described as the worst form of bullying. It is vulnerable groups, such as black and minority ethnic staff and whistleblowers, who suffer the most when unfair systems are in place.

**New policy**

The [new Imperial policy](https://www.imperial.nhs.uk/about-us/how-we-work) was put together over a four year period as a collaborative effort between senior trust leadership including chief executive Professor Tim Orchard, director of people and organisation development Kevin Croft and divisional director of people. Fiona Percival, and two of us (Narinder Kapur, Terry Skitmore). There was wide consultation within Imperial College Trust during the formulation of the new policy, with unions closely consulted, and the policy was approved by the executive board.

Imperial set up a dedicated Investigations Unit to look at serious staff issues as part of the development of its new policy. We also consulted widely, not only considering HR and investigative science resources, but also the work of bodies such as the Cabinet Office Behavioural Insights Team, the UCL Centre for Behaviour Change, and the British Association of Physicians of Indian Origin. We also reviewed guidance from ACAS and the scheme run for doctors and dentists, *Maintaining High Professional Standards*.

The new Imperial policy is unique in that it includes sections governing the composition of panels who make major decisions about staff and the requirement that dismissals must have executive board approval. Dedicated training for those on panels is also part of the new policy. Enforcement of the policy will be monitored by senior leadership both within people management and on the executive board.

Other NHS trusts should follow the excellent lead set by Imperial College Healthcare Trust and put in place a similar system which promotes fairness, excellence and compassion.

At a national level, we would like to see five other actions:

* All NHS organisations – including the Department of Health and Social Care, the Care Quality Commission, and individual trusts – should reflect on past failings involving staff wellbeing, conclude what lessons can be learned, and offer an apology and practical redress to those who have suffered.
* The government should create a Staff Wellbeing Investigation Board, to learn lessons from major staff adverse events, such as work-related suicides, which should be classed as “staff Never Events”.
* The CQC or similar body should be charged to ensure that fair people management systems are in place in all NHS trusts and then enforced. Current NHS Freedom-to-Speak-Up Guardians should have their roles expanded, be totally independent of trusts, and be called Fairness Guardians.
* Health Education England should set up a dedicated training and accreditation scheme so that managers, and clinicians in management roles, are properly trained to ensure excellence and to avoid conscious and unconscious bias in people management settings.
* Professional and regulatory bodies should as a matter of urgency respond to the November 2019 call from the NHS Chief People Officer to produce guidance for their members on codes of conduct in people management settings.

When patient care crises occur, such as the covid-19 pandemic, the NHS has shown that it can act at speed, with all necessary funding and resources immediately made available. Research by Professor Michael West and others has shown the close link between staff wellbeing and patient care. We owe it to the memory of Amin Abdullah to show the same urgency and readily make available resources to deal with issues, which affect staff wellbeing.

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***Terry Skitmore is the partner of the late Amin Abdullah.***

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