Happiness is the best medicine, grumpy doctors and nurses told

Chris Smyth, Times, 10 October 2016

Doctors, nurses and other NHS staff need to be more positive at work, the new whistleblowing chief for the health service has said.

Henrietta Hughes said that low-level grumpiness could harm patients and contribute to a mistrustful “toxic environment” in which staff were reluctant to speak out. She said that “every single person” in the health service had to help to make it a happier place to work and end a culture of bullying and poor care.

The NHS needed more of the “trust and joy and love” hormone oxytocin, Dr Hughes said, citing the happy embraces of reunited families at the start of the Hugh Grant film Love Actually.

“If you think about that scene in Love Actually where everybody is meeting at the airport, that’s the oxytocin feeling. So wouldn’t it be better if oxytocin was the predominant neurotransmitter in the NHS?”

In her first interview as national guardian for speaking-up, Dr Hughes urged staff to “start living . . . the NHS that they want to work in”.

Whistleblowers have criticised her “utopian” approach. They said that staff would not be safe until bosses who bullied them were held to account.

The national guardian role was created in response to a report by Sir Robert Francis that found “horrific” victimisation of staff who pointed out poor care. It demanded an end to a climate of fear in the NHS. Each hospital is also appointing local whistleblowing guardians. Dr Hughes, a GP, said that her job was “to create a really positive culture in the NHS so that all staff feel safe to speak up”.

She added: “Staff are seeing things which could potentially be a risk to patient safety and they don’t feel safe to speak up about it. That’s a real worry.”

Dismissing concerns that her job had few formal powers, she said that change could happen “just like that” if staff always acted as they would on a good day. “If you bring a positive attitude to work with you then you start seeing all those benefits of working well as a team,” she said. “If you come to work feeling distrustful, you’re going to transfer that emotion on to the way you deal with your patients.”

Staff should not sit back and let others try to solve the problem, she added. “It’s about every single person seeing this as their responsibility . . . If you’re a consultant and you’re responsible for ensuring the safe care of your patients, then it’s your duty
to have good relationships with your colleagues. And if you’re struggling with that, do something about it.”

She said: “At the farthest extreme, if you’ve got someone who’s responsible for the safer surgical checklist and they don’t see it as something they need to be involved in, you could end up having the wrong leg taken off.”

Some critics have said that her office can achieve little without formal investigatory powers, but she insisted that most people in the NHS wanted to improve and a lot could be done by helping them. “I’m really hoping to work in partnership as a supportive and developmental arm rather than something which is seen as punitive,” she said.

Dr Hughes said there were still “two big barriers” for staff raising concerns in the NHS: fear of being victimised and the expectation that no one would do anything about the problem. Her ambition was that when people saw the NHS logo “that brand should carry with it the confidence for patients and the public that if something has been identified as a problem, the organisation is doing something about it”.

Kim Holt, of the whistleblowers’ organisation Patients First, said: “It’s all fine and well going with a positive attitude but if you’re subjected to relentless attack and hostility nobody is going to be happy and positive and smiling. It would be lovely to think that the world was full of people who all behaved in an appropriate way, but there are people who have been allowed to continue with negative behaviour in the workplace and that needs to be rooted out.”

Dr Holt said that too much emphasis on positivity was “a bit utopian”, adding: “It needs to be backed up by your manager and by your organisation. When the workforce sees that they are supported for speaking out rather than driven out, that’s what makes the difference.”

Anthea Mowat, of the British Medical Association, called for an end to the climate of fear in the health service. “Everyone in the NHS, especially those in managerial and leadership positions, must lead by example to make this a reality”, she said, adding that high workloads and stretching staff too thinly needed to be addressed.