

Message

From: Rees Karen (COUNTESS OF CHESTER HOSPITAL NHS FOUNDATION TRUST) [/O=MAIL/OU=NHSFB08/CN=RECIPIENTS/CN=KFSLW55N]
Sent: 09/09/2016 06:49:53
To: KELLY, Alison (COUNTESS OF CHESTER HOSPITAL NHS FOUNDATION TRUST) [alison.kelly9@I&S]; Hodkinson Sue (COUNTESS OF CHESTER HOSPITAL NHS FOUNDATION TRUST) [sue.hodkinson@I&S]
Subject: My view

Dear Both

Following on from our meeting earlier, I feel I have to write to you, to explain how I feel.

I have serious reservations about the decision to delay LL transfer back to the NNU. Having had a recent external review into the concerns raised and previous internal reviews about the number of Neonatal deaths on the unit, not one of these reviews identified or proved that there were any issues with the clinical practice of this individual. Yet, the Executive decision is still to keep LL out of the NNU.

It is my opinion that this decision is wrong and immoral. Based on a senior Clinician having a 'gut feeling' with no evidence (except that LL has been present at a number of these neonatal deaths), an individual is removed from her clinical practice, as it is believed that she may be purposefully harming babies that are under her care. This allegation is massive and if this Clinician and anyone else is of this belief, then why have the Police not be called?

This allegation has not been yet be made known to LL. I have met regularly with LL and she is keen to return to the NNU. It is admirable and she should be commended that she has remained in work and not gone off sick with stress....because I can see how this decision appears to be affecting her and still we are planning to delay any decision until we have the written report. It is my opinion that this is a delay tactic and we are going to face this problem in 4-6 weeks' time, with no further clear decision as to next steps.

I am led to believe that two of the Clinicians do not want LL back on the NNU despite what the external report may or may not say, so my question to you both is why are we prolonging the agony and stress that LL appears to be presently under? Why is a senior Clinician allowed to destroy someone's career, without any clear evidence? We know that if LL goes off sick (and I am worried for her health and wellbeing) or leaves and claims constructive dismissal, LL career in health care is finished. I cannot tell you how upsetting this is for me, considering she is at the beginning of her career, at 26yrs of age. This is not right!

Please let me assure you that I am not at all concerned with conversing with LL or explaining the decisions that have been made. I just have to inform you that morally this does not sit comfortable with me.

There is also the impact, not only for the NNU but for the rest of the organisation and the message that this sends out - a Clinician is being listened to and supported, with potential devastating consequences for a nurse.

How are the nurses on the NNU going to react? I have already witnessed that senior nurses on that unit, do not even want to answer the telephone to that particular Consultant, who is making these allegations and making clear of his personal view.

It was a sad day for me yesterday. The frustration and emotion of not being able to change the decisions that have been made, compounded by the unfairness of it all, makes me sad to think that we still appear to hold Clinicians in high regard...the same not afforded to nurses.

I will continue to work in the Professional way that is expected of me, however, I had to say how I feel.

Kind regards
Karen