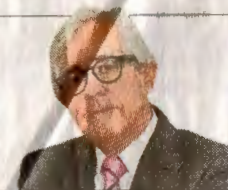


NHS whistleblowers like me need protection

A lifetime of service wasn't enough to save my job, but telling the truth is vital to improve patient care

J MEIRION THOMAS



Wednesday, November 26 2014, remains the worst day of my life. I was a specialist cancer surgeon at The Royal Marsden Hospital with an unblemished track record for service development and research. From early morning that day, I had been in the operating theatre, a place that, after countless hours over a lifetime's career, had become a second home for me. I loved my job, my patients and the teamwork. I was an experienced medical professional at the top of my game.

At work in the operating theatre, I was also blissfully unaware that the forces of political correctness and corporate discipline were massing against me. The first I knew of it was

when I received an aggressive letter that afternoon from the Central Secretariat at Imperial College, where I held the honorary title of Professor of Surgical Oncology. It demanded that I immediately sever all relations with the college and cited as justification a newspaper article in which I had written that GPs "are the problem in the health service and not the solution" and that "the GP service is hopelessly outmoded".

My article, "Why I think GPs are part of the NHS's problem", had been in response to a damning report from the Care Quality Commission, the health standards watchdog. As far as I was concerned, it was my duty as a medical professional to do what I could to help improve patient care by suggesting solutions. Instead, it rapidly became clear that when it came to sharing my opinions about the state of general practice, free speech would not be tolerated.

That letter was merely the start of a concerted campaign against me by the medical establishment, which is why I view Health Secretary Matt Hancock's promise to protect whistleblowers with trepidation, albeit some hope. If somebody in my position, an eminent and respected surgeon, can be gagged for telling the truth, then

what hope does anyone else have of being treated fairly?

The response to my article on social media was incendiary, and a petition was started to have me struck off by the General Medical Council. Then, while I was still coming to terms with the devastating news from Imperial College, I received a message from a senior manager at The Royal Marsden Hospital summoning me to a meeting later that same day. The outcome was immediate: compulsory "authorised leave". I had apparently brought the hospital into disrepute and was not allowed to attend until further notice.

The chief executive of the RMH had also received a letter of complaint from the Professor of General Practice at Imperial College. This included a financial threat, querying why GPs should be expected to refer patients to The Royal Marsden Hospital when there are many others in London with which they had "very good working relationships" with the staff. Then, two days later, I was called to see another Trust manager and told that my Lifetime Achievement Award for 31 years of service at The Royal Marsden Hospital, due to be presented at a ceremony the following evening, was to be withdrawn.

I was finally told that I could return



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to work 10 days later. But even then, it was only on the condition that I signed a document, which stipulated that I could not write any more articles and that if I were to do so, then I would have to show them to the chief executive in advance so she could make sure they wouldn't harm the hospital's reputation.

Two months before I wrote my fateful article I had given my chief executive notice of my plan to retire from the NHS by Easter 2015, by which time I would be almost 69 years of age. I know of very few surgeons who have worked in the NHS until that age, and in her reply letter she wrote: "I would like to take this opportunity to express my deep appreciation for the expert care and devotion you have given your patients over many years. The other mark of a true leader is to recruit young talent and to build a successful team around them and you have certainly done that."

Now I can only hope that my case stands as an example to the health service - both of the importance of protecting whistleblowers and of the daunting scale of the reforms that will be needed to deliver true change.

If Mr Hancock is sincere, and I hope he is, then he has his work cut out.