Complaints against doctors in child protection work have increased fivefold

Zosia Kmietowicz *London*

The threat of complaints and ruined reputations is driving paediatricians away from fulfilling their role in child protection, leaving vulnerable children at risk of abuse, says the Royal College of Paediatrics and Child Health.

A survey of college members, to which almost 80% of the country's 6072 paediatricians replied, has shown that the number of complaints made against doctors involved in child protection has risen fivefold in the last seven years.

And while complaints have risen, paediatricians have turned their backs on child protection work. Currently 30% of posts where paediatricians take a lead in child protection are unfilled.

The catalyst for the increase in complaints has been the publicity surrounding two high profile cases, said Professor Neil McIntosh, vice president of science and research at the college. The first was that of paediatrician Professor David Southall, who was suspended in 1999 while North Staffordshire Hospital NHS Trust investigated complaints about his research and child protection work (*BMJ* 2000;320:9) but was reinstated

two years later after no evidence was found against him (*BMJ* 2001;323:885). The second was that of an accused mother, Sally Clarke, who was convicted of smothering her two infants in 1999 but was freed by the Court of Appeal last year (*BMJ* 2003;326:304).

Professor McIntosh said: "The incredible response rate to the survey reflects how agonised paediatricians feel about this issue. The fact is that paediatricians are ducking out of child protection because of the flak they get from the media."

Between 1995 and 2003 the number of complaints against paediatricians rose from 20 a year to 100 a year, the survey shows. Seventy eight of the 732 complaints detailed are still ongoing, but of the remainder only 3% have been upheld.

However, the effect of the publicity has eroded the public's confidence in the profession and led to a reluctance among paediatricians to take a lead role in cases of suspected child abuse, said Dr McIntosh.

"Complaints in such cases are hot news, but the doctor involved cannot comment both because of issues of patient con-

fidentiality and because the case is sub judice," said Dr McIntosh. "This not does not prevent comment by family or the media. By the time the complaint has been shown worthless the reputation of the paediatrician has been damaged; the issue is no longer newsworthy. Retractions and apologies are almost unknown."

The college plans to examine a sample of the complaints more closely to see what they were for and how they were dealt with. Dr McIntosh hopes this will help to identify the problem areas of child protection work so that the college can develop supportive measures to encourage paediatricians to take on responsibilities for children at risk. However, this is likely to take at least nine months, he said.

Penny Mellor, a campaigner who supported parents in recent

high-profile cases including that of Angela Cannings, said there was no orchestrated campaign against paediatricians. "There are a really small handful of five paediatricians that we have concerns about," she said on BBC Radio's *Today* programme.

"As to the rest of the world of paediatrics, we do not have any concerns with their work."

A Department of Health spokesperson said they recognised child protection work could be extremely stressful for staff.

"Paediatricians play an essential role in child protection. A consultant has a clear responsibility to make a referral to social services in any case where he or she has 'reasonable cause to suspect that a child is suffering or likely to suffer significant harm'." □

Southall is cleared by GMC but faces new charges

Owen Dyer *London*

Professor David Southall, one of Britain's best known paediatricians, has been cleared by the General Medical Council of conducting neonatal research without proper consent but still faces GMC hearings relating to two separate investigations.

The GMC's preliminary proceedings committee found no grounds to pursue complaints that Professor Southall had acted without consent, or had

forged patients' signatures, when conducting research on a new type of ventilator at the University Hospital of North Staffordshire in Stoke on Trent between 1990 and 1993. But the committee referred a second complaint to the council's professional conduct committee, which already plans to hear another complaint against Professor Southall this summer. The GMC would not give details on the outstanding complaints.

The research, which was scrutinised by the GMC, was designed to assess whether continuous negative extrathoracic pressure (CNEP) ventilation could reduce the need for, and problems associated with, tracheal intubation and positive pressure ventilation.

The first GMC complaint

arose four years after the trial's end. Carl and Deborah Henshall, of Clayton, North Staffordshire, claim they had never given consent to the involvement of their daughter, a child with neurological damage, in the CNEP trial. The GMC refuses to say how many other complaints it has received from parents whose children were involved in the CNEP trial.

Professor Southall said he could not comment on the outstanding GMC cases, which relate to his child protection work, but he said that in the case of the CNEP research a group of individuals "latched on to the concerns of a vulnerable group of parents whose babies had either died or become damaged as a result of premature birth."

There was incontrovertible

evidence that at least two members of a campaign group "helped grieving parents make complaints that could not be ignored," he said.

Professor Southall, who attracted national press coverage in 1997 when it emerged he had secretly videotaped parents in the paediatric ward, says he is the subject of a campaign to discredit him by a group of parents accused of child abuse. Pressure groups such as Mothers Against Munchausen by Proxy Allegations accuse him of assuming child abuse as a default diagnosis.

The GMC investigated and rejected complaints about forged signatures and lack of informed consent in the CNEP trial two years ago, but it re-examined the issue after further complaints. (See p 649.) □