

### Being Open and Duty of Candour Policy

#### 1.0 Introduction

- 1.1 This policy creates an infrastructure to promote openness and honesty between staff, service users, their families and / or their carers, specifically for use following a notifiable safety incident.
- 1.2 Adherence to this policy and the associated procedure will help service users, families and / or carers feel confident in the Group's communication and provision of information. It will also help staff to feel supported in delivering it.
- 1.3 The Group's Accident Reporting and Investigation Policy encourages staff to report all service user safety incidents, no matter the level of harm (including any "near misses" where an incident has been prevented). For all incidents, staff should be open and honest. This Duty of Candour Policy specifically relates to those incidents that trigger the thresholds for the Duty of Candour Regulations.
- 1.4 This policy and associated information will be provided to individuals in the format that they request or require it.

#### 2.0 Policy Statement

- 2.1 The Wrekin Housing Group (the 'Group') seeks to promote a culture of openness, which is a prerequisite for improving service user safety and the quality-of-care delivery systems. Adherence to this policy will help ensure that communication between the organisation, care delivery teams, service users and their carers is both honest and timely.
- 2.2 It is the policy of the Group to comply with all national policies and guidance regarding openness and to provide information for service users and their carers in a transparent, non-defensive manner. Openness and honesty towards service users and their carers is actively supported by the organisation.
- 2.3 This policy will aid staff in fulfilling their duty to inform service users who have suffered harm under the Group's care and to investigate the root causes of that harm, providing an explanation to service users.

#### 3.0 Policy Scope

- 3.1 This policy is aimed at staff responsible for the delivery of care. It applies to all staff, both permanent and temporary, employed by the organisation. This policy also applies to students, bank, agency staff and volunteers. Every staff member within the organisation must be open and honest with service users when something goes wrong with their care and/or treatment which causes (or has the potential to cause) harm or distress.

3.2 The Duty of Candour applies to all service user safety incidents which have an actual impact of moderate harm, or where the incident resulted in severe harm, prolonged pain or death which is directly related to the incident and not the natural cause of the service user's illness or underlying conditions.

#### 4.0 Definitions

4.1 '**Candour**' - Any person harmed by the provision of care or treatment is informed and an appropriate remedy offered, regardless of whether a complaint has been made or a question asked.

4.2 '**Being Open**' - involves allowing information about the truth about performance to be shared and questions asked to be answered.

4.3 '**Notifiable Safety Incident**' (Grades and Definitions) - A notifiable safety incident means any unintended or unexpected incident that occurred in respect of a service user during the provision of care and treatment that in the reasonable opinion of a healthcare professional could result in, or appear to have resulted in:

- The death of a service user, where the death relates directly to the incident rather than to the natural cause of the service user's illness or underlying condition.
- Severe harm, moderate harm, prolonged psychological harm, pain and/or impairment of the sensory or intellectual functions of the service user.

#### 5.0 Roles and Responsibilities

5.1 The **Wrekin Housing Group Board** and **Group Chief Executive** have overall governance responsibility for the implementation of the policy, its effectiveness and compliance with statutory requirements. The Group Board will be accountable for ensuring that there are robust systems, policies and processes in place across the organisation for the management of the Duty of Candour. They have a responsibility to actively promote an open and fair culture that fosters support and discourages the attribution of blame. The Head of Care Operations will provide assurance to the Board that the organisation is complying with its responsibility in respect of this duty via the role as Chair of the Care & Support Monitoring Board.

5.2 The **Nominated Individual** is the responsible person for CQC prosecutions for failing to provide care and treatment in a safe way.

5.3 **Senior Managers** are responsible for supporting all managers responsible for regulated activity in the implementation of this policy. They are responsible for ensuring that all incidents are managed, external reports are made as necessary, investigations are undertaken appropriately, and that the Duty of Candour process is fully implemented as part of the incident management process.

5.4 The **Registered Managers** and **Care Managers** are responsible for ensuring that this policy is implemented within their sphere of responsibility in a timely manner and that this is monitored through the monthly compliance information

5.5 **The Care & Support Monitoring Board** have responsibility for promoting a 'being open' culture and for seeking assurance that this policy has been applied when reviewing incidents. They are also responsible for ensuring a quarterly compliance audit is undertaken and the findings reported to the relevant groups as well as having overarching responsibility for monitoring implementation and providing assurance to the Group Board via the six-monthly Health and Safety Report.

5.6 **Professionally Registered Staff** are responsible for ensuring the Duty of Candour process is adhered to in line with this policy and their professional body requirements when a notifiable safety incident occurs that results in 'moderate harm', 'severe harm', death, prolonged psychological harm or prolonged pain.

5.7 **All staff** must understand their duty for being open and must demonstrate the principles of being open in their work.

5.8 Further details of these responsibilities are outlined in the Being Open and Duty of Candour procedure.

## 6.0 Background and Context

6.1 All providers of health and social care have a duty under the Health and Social Care Act 2008 (Regulated Activities) Regulation 14, to act in an open and transparent way following any incident occurring because of care and treatment errors or failures. That is any care provided within the organisation, or by the organisation, which has resulted in moderate harm, severe harm, death or prolonged psychological harm. These incidents are referred to as a notifiable safety incident and must be reported to the Care Quality Commission (CQC) under Regulation 18. A failure to comply with the Duty of Candour can result in regulatory sanctions and/or criminal prosecution.

6.2 To meet the Statutory Duty of Candour requirements, the Group will:

- Make sure it acts in an open and transparent way with relevant persons in relation to care and treatment provided to people who use services in carrying on of a regulated activity;
- Tell the relevant person, in person, as soon as reasonably practicable after becoming aware that a notifiable safety incident has occurred and provide support to them in relation to the incident, including when giving the notification;
- Provide an account of the incident which, to the best of the organisation's knowledge, is true of all the facts that the organisation knows about the incident as at the date of the notification;
- Advise the relevant person what further enquiries the organisation believes are appropriate;
- Offer an apology;
- Follow this up by giving the same information in writing and providing an update on the enquiries;
- Keep a written record of all communication with the relevant person.

<b>The Wrekin</b> Housing Group	<b>Policy Control Sheet</b> <b>Being Open and Duty of Candour Policy</b> <b>Policy reference number - 2023/037</b>
<b>Policy Author</b>	Claire Skelton Head of Care Operations
<b>Direct Lead</b>	David Wells Executive Director of Operations
<b>Version</b>	1.0 December 2023
<b>Target audience</b>	All Wrekin Housing Group staff, contractors and third-party providers.
<b>Consultation</b>	Care Managers Care Registered Managers Performance and Compliance Managers Senior Managers Executive Management Group
<b>Date of Equality Impact Assessment</b>	An Equality Impact Assessment was completed on the 21 <sup>st</sup> July 2022 and re-visited on the 1 <sup>st</sup> December 2023.
<b>Date of Data Privacy Impact Assessment</b>	No personal data is processed as part of implementing or the review of this policy.
<b>Approving Body</b>	The Wrekin Housing Group Board
<b>Date of final approval</b>	13 <sup>th</sup> December 2023
<b>Implementation date</b>	December 2023
<b>Monitoring arrangements</b>	Care and Support Teams Executive Management Group
<b>Reporting</b>	Executive Management Group – Monthly Audit & Assurance Committee – Quarterly The Wrekin Housing Group Board – Quarterly
<b>Review date</b>	January 2027
<b>Expiry date</b>	July 2027
<b>Review cycle</b>	Three-year Review Cycle
<b>Policy category</b>	Care and Support
<b>Associated policies and procedures</b>	Being Open and Duty of Candour Procedure Complaints Policy and Procedure Incident Reporting and Investigating Policy and Procedure Safeguarding Policy
<b>Policy location</b>	Sharepoint The Wrekin Housing Group website

### Summary of changes table

Revision history			
Author	Summary of changes	Version	Authorised by & date
Claire Skelton	Policy reviewed in in line with review date	1.0 – December 2023	The Wrekin Housing Group Board – 13.12.23