

BRITISH/ PSYCHOANALYTIC /COUNCIL

Duty of Candour

1. What is the Duty of Candour?

- 1.1. All Healthcare professionals have a professional responsibility to be open, honest, and transparent with patients when things go wrong. This obligation is known as the professional Duty of Candour.
- 1.2. The professional Duty of Candour arose following the response to the findings and recommendations from the Mid-Staffordshire NHS Foundation Trust Public Inquiry into poor patient care at Mid Staffordshire NHS Foundation Trust ('the Francis Inquiry') and the UK Government's response to this Inquiry entitled '*Hard Truths: The Journey to Putting Patients First*' in January 2014.
- 1.3. The Professional Standards Authority, the organisation which accredits the British Psychoanalytic Council, states that "*telling patients openly and honestly that something has gone wrong with their care is an essential part of a healthcare professional's practice*" and that healthcare professionals are "*expected to be candid by the public and regulators*"¹ alike.

2. BPC's Code of Ethics/Ethical Guidance

- 2.1. This Duty of Candour guidance complements the BPC's Code of Ethics ('the Code') and must be followed by BPC registrants.
- 2.2. The relevant parts of the Code are as follows:

Paragraph 1 - *Registrants must at all times act in a way that they reasonably believe to be in the best interests of their patients. At all times the welfare of the patient must be paramount and every care taken to ensure that the patient is not exploited in any way.*

Paragraph 8 - *Registrants must, at the beginning of treatment, make clear to the patient, or whoever holds legal parental responsibility for a child in treatment, the principles and practicalities of the treatment offered and assure that as far as possible they are maintained.*

Paragraph 10 - *Registrants must convey the Terms and Conditions of practice at the outset of therapy, so that the patient or whoever has legal parental responsibility for a child can understand the nature of the treatment and agree to it.*

¹ [telling-patients-the-truth-when-something-goes-wrong---how-have-professional-regulators-encouraged-professionals-to-be-candid-to-patients.pdf](https://www.professionalstandards.org.uk/telling-patients-the-truth-when-something-goes-wrong---how-have-professional-regulators-encouraged-professionals-to-be-candid-to-patients.pdf) (professionalstandards.org.uk)

Paragraph 13 - Registrants must carry out their duties in a professional and ethical way and maintain appropriate and professional boundaries with patients at all times, so that they are not exploited in any way.

2.3. The BPC's Ethical Guidelines should also be viewed in conjunction with the above-stated Code provisions for further information and guidance.

2.4. The Duty of Candour applies throughout the patient relationship, from beginning to the end of treatment. However, the Duty of Candour is particularly relevant when things go wrong during the therapeutic relationship.

3. What could go wrong during the therapeutic relationship?

3.1. As BPC registrants will be aware, not all therapeutic relationships with patients are straightforward and sometimes the therapeutic relationship can break down.

3.2. Given the specific nature of the therapeutic relationship, it is possible that registrants may:

- Misunderstand or mis-hear something a patient says during a session which is not corrected in dialogue;
- Encounter IT security issues or mis-send an email to an incorrect patient which cannot be rectified at that precise moment;
- Lose or accidentally leave paper patient records on a train or in a public place which cannot be recovered.

4. What if things do go wrong?

4.1. If something goes wrong with a patient, you must:

- Tell the patient;
- Apologise to the patient;
- Offer the appropriate support or remedy to put the matters right, where possible;
- Explain fully the short- and long-term effects of what has happened

4.2. Being candid with a patient not only alerts the patient but minimises and prevents further harm being caused to the patient. By telling the patient, a registrant is maintaining the level of trust and confidence placed in them by the patient and the profession.

4.3. Being candid with a patient should not be misunderstood as admitting liability or wrongdoing nor should it be confused with complaint handling. The Duty of Candour applies irrespective of whether a complaint or concern has been raised by a patient and any action taken should always be in the best interests of the patient.

4.4. If you believe that something has gone wrong during the therapeutic relationship, you should speak with your Supervisor during supervision. Supervision extends the protection to patients by virtue of enabling a therapist to discuss what has happened with a senior colleague.

5. Is the Duty of Candour just limited to patients?

5.1. The Duty of Candour is not just limited to patient interactions.

5.2. All Healthcare professionals must be open and honest with their colleagues, employers, and relevant organisations and take part in reviews and investigations when requested.

5.3. Healthcare professionals must also be open and honest with their regulator, raising concerns where appropriate. This is emphasised within paragraphs 4(d) and 5(a) of the BPC's Ethical Guidelines which states as follows:

- *“Registrants are expected to co-operate with any investigation or formal inquiry into their professional conduct or the conduct of other registrants”;*
- *“If registrants suspect misconduct by a professional colleague which cannot be resolved or remedied by discussion with the colleague concerned, they must take steps to bring that misconduct to the attention of the BPC.”*

6. Duty of Candour & Whistleblowing

6.1. The Duty of Candour applies to any concerns a BPC registrant may have regarding fellow practitioners; BPC registrants or other regulated professionals and/or any concerns regarding a patient's safety and welfare.

6.2. If a BPC registrant holds concern(s) regarding a patient's treatment or safety, or a particular clinician's treatment of a patient, they must communicate these concerns to the relevant person or organisation as patient safety is paramount. This could include discussing concerns with a Supervisor during supervision or with a senior colleague. Alternatively, a registrant can contact the Ethics Committee of their Member Institution for further assistance.

6.3. Should a registrant wish to raise concern(s) regarding a fellow BPC registrant, please contact the BPC accordingly on FtPO@bpc.org.uk. If your concerns arise in connection with another regulated Healthcare practitioner, please contact the relevant regulatory body.

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