

Duty of Candour Policy

1. Purpose: The purpose of this policy is to ensure that:

- People are informed openly and honestly when a notifiable safety incident has occurred
- Appropriate apologies are given
- Clear explanations are provided about what happened and why
- Reasonable support is offered
- Learning is embedded to reduce the risk of recurrence

2. Statutory guidance: This policy is informed by:

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – Regulation 20
- Care Quality Commission (CQC) Fundamental Standards
- NHS and Social Care Duty of Candour guidance
- Organisational policies on safeguarding, complaints, incident reporting, and whistleblowing

3. Policy Statement:

Ambitious about Autism is committed to acting in an open, transparent and honest manner when things go wrong. We recognise our statutory Duty of Candour and aim to ensure that residents, families, and other relevant persons are treated with respect, compassion, and honesty at all times.

This policy sets out how Ambitious about Autism meets its obligations under the **statutory Duty of Candour (Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014)** and promotes a culture of openness, learning, and continuous improvement.

4. Key principles:

4a: Duty of Candour – is a legal requirement for providers to act in an open and transparent way with people receiving care or their representatives when a notifiable safety incident occurs.

4b: Notifiable Safety Incident is an unintended or unexpected incident that occurs during the provision of a regulated activity, and results in death, severe harm, moderate harm, or prolonged psychological harm

Our Commitment:

Ambitious about Autism commits to:

- Being open and honest when things go wrong
- Saying sorry when appropriate (an apology is not an admission of liability)

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- Providing clear, factual information in a timely manner
- Treating people and their families with empathy and respect
- Supporting staff involved in incidents
- Using incidents as learning opportunities to improve quality and safety

Monitoring and Governance:

Compliance with this policy will be monitored through:

- Incident and accident reporting
- Complaints and feedback analysis
- Audits and quality reviews
- Governance and leadership oversight

Learning from incidents will be shared appropriately to promote continuous improvement.

5. Roles and Responsibilities:

a. Governors/Trustees/ELT/SMT are accountable for:

- Ensuring compliance with the Duty of Candour
- Promoting a culture of openness and learning
- Ensuring that notifiable incidents are internally and externally reported as required
- Monitoring incidents and learning through governance structures

b. Registered Manager / Head of Service are accountable for:

- Ensure this policy is implemented effectively
- Makes informed decision as to whether an incident meets the threshold for Duty of Candour and ensures prompt escalation of potential notifiable safety incidents
- Ensures incidents are reported to relevant external bodies where required
- Supports staff in identifying and reporting incidents
- Participate in investigations and learning reviews
- Ensures appropriate communication, apologies, and follow-up actions occur

c. Staff are accountable for:

- Reporting incidents, errors, or near misses promptly
- Being open and honest in line with this policy
- Participating in investigations and learning reviews

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- Participating in learning and improvement actions

6. Other key policies:

This policy should be read alongside the following other policies, which can be found on the St. John's website, or requested:

- Safeguarding Policy
- Complaints Policy
- Incident Reporting Policy
- Whistleblowing Policy
- Record Keeping and Confidentiality Policy
- Unexpected Death Policy

7. Further details found in Appendix:

The following additional details can be found in the appendix below:

- Procedure: Responding to a Notifiable Safety Incident

8. Monitoring Arrangements:

This policy shall be reviewed by the Head of Residential and approved by the Education and Care Committee on a bi-annual basis

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Appendix 1:

Procedure: Responding to a Notifiable Safety Incident: Where a notifiable safety incident is identified, the following steps must be taken:

Step 1: Immediate Response

1. Ensure the safety and wellbeing of the individual
2. Seek medical or professional support where required
3. Preserve evidence / scene and record the incident accurately. In the unlikely event that death occurs, please follow the Unexpected Death Policy

Step 2: Initial Notification

1. Notify the Registered Manager or a senior leader without delay i.e verbally
2. Registered Manager / senior lead to attend site / scene and determine whether the incident meets Duty of Candour thresholds, immediate actions
3. Registered Manager / senior lead to begin chronology of events from point of attendance.

Step 3: Open Communication. As soon as reasonably practicable:

1. Registered Manager / senior lead will escalate to the Director of Education and Care and in absence to the CEO / Deputy CEO or in their absence a member of the Executive Leadership Team
2. Registered Manager / senior lead will inform the affected person (or their representative) that an incident has occurred and ensure that there is relevant support offered / available
3. Registered Manager / senior lead will ensure that staff have clearly recorded and documented on the incident logging system and documented in the individual's records where appropriate - storing in line with data protection and confidentiality requirements
4. Registered Manager / Senior Lead will ensure that there is relevant support to staff involved in the incident.
5. The Director of Education and Care with the Registered Manager / senior lead will identify an investigating officer to undertake an internal investigation where this is permitted noting that where external agencies are involved i.e. coroners and police, they will decide on whether this should be internal / external investigation.
6. Registered Manager / senior lead will provide staff with relevant time to provide detailed and truthful account of all known facts.
7. Upon completion of an investigation the report will be shared with the Director of Education and Care and Executive Leadership Team. All parties, including the Registered Manager and senior leaders, will review recommendations, action plan, and agree a communications plan to include sincere apologies and an offer to explain what further enquiries or investigations will take place. The written follow-up will include:

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- o The facts known at the time
- o Investigation outcomes (when completed)
- o Actions taken to reduce future risk
- o An apology

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Appendix 2
Recording Form for a notifiable Safety Incident

Action	Completed Y/N	By Whom
Immediate Response		
1 Ensure the safety and wellbeing of the individual		
2 Seek medical or professional support where required		
3 Preserve evidence / scene and record the incident accurately. In the unlikely event that death occurs, please follow the Unexpected Death Policy		
Initial Notification	Date/Time/Who	Notes
1 Notify the Registered Manager or a senior leader without delay i.e verbally		
2 Registered Manager / senior lead to attend site / scene and determine whether the incident meets Duty of Candour		

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thresholds, immediate actions		
3 Registered Manager / senior lead to begin chronology of events from point of attendance.		

Open Communication	Date/Time/Who was notified/who completed	Notes
1 Registered Manager / senior lead will escalate to the Director of Education and Care and in absence to the CEO / Deputy CEO or in their absence a member of the Executive Leadership Team		
2 Registered Manager / senior lead will inform the affected person (or their representative) that an incident has occurred and ensure that there is relevant support offered / available		
3 Registered Manager / senior lead will ensure that staff have clearly recorded and		

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<p>documented on the incident logging system and documented in the individual's records where appropriate - storing in line with data protection and confidentiality requirements</p>		
<p>4 Registered Manager / Senior Lead will ensure that there is relevant support to staff involved in the incident.</p>		
<p>5 The Director of Education and Care with the Registered Manager / senior lead will identify an investigating officer to undertake an internal investigation where this is permitted noting that where external agencies are involved i.e. coroners and police, they will decide on whether this should be internal / external investigation.</p>		
<p>6 Registered Manager / senior lead will</p>		

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<p>provide staff with relevant time to provide detailed and truthful account of all known facts.</p>		
<p>7 Upon completion of an investigation the report will be shared with the Director of Education and Care and Executive Leadership Team. All parties, including the Registered Manager and senior leaders, will review recommendations, action plan, and agree a communications plan to include sincere apologies and an offer to explain what further enquiries or investigations will take place. The written follow-up will include:</p> <ul style="list-style-type: none"> o The facts of the incident when first reported o Investigation outcomes (when completed) o Actions taken to reduce future risk o An apology 		

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