



Duty of Candour Annual Report Template

Every healthcare professional must be open and honest with patients when something that goes wrong with their treatment or care causes, or has the potential to cause, harm or distress. Services must tell the patient, apologise, offer appropriate remedy or support and fully explain the effects to the patient.

As part of our responsibilities, we must produce an annual report to provide a summary of the number of times we have trigger duty of Candour within our service.

| Name & address of service: | ADHD Direct LTD Flemington House 110 Flemington Street Glasgow G21 4BF |
|--|--|
| Date of report: | 20/06/2023 |
| How have you made sure that you (and your staff) understand your responsibilities relating to the duty of candour and have systems in place to respond effectively? How have you done this? | We have Implemented a duty of candour system to promote transparency, accountability, and patient safety. This requires healthcare professionals to be open and honest with patients and their families when harm or potential harm has occurred during their care. Here are some systems employed by ADHD Direct to ensure the effective implementation of a duty of candour in a clinical service: |
| | ADHD direct have developed. A comprehensive Policy and Governance Framework which is communicated to all staff members and reflects the legal and regulatory requirements, as well as professional codes of conduct. Staff Education and Training with regular and ongoing education and training programs to ensure that all healthcare professionals are aware of their duty of candour responsibilities. This training covers topics such as effective communication, error disclosure, empathetic handling of adverse events, and the importance of maintaining patient trust. A robust reporting and Incident Management Systems which is easily accessible, user-friendly, and protects the confidentiality of those involved. We encourage a culture of reporting for identifying and addressing potential harm promptly. Clear and standardized Communication Protocols for disclosing adverse events and errors to patients and their families. These protocols outline the necessary steps, including who should be involved, the appropriate timing, and the content of the disclosure. |

| IHC Duty of Candour Template for Providers | Version: 1.0 | Date: 19 February 2019 |
|--|--------------|------------------------|
| Produced by: IHC team | Page 1 of 3 | Review Date: Ongoing |
| Circulation type (internal/external): Both | | |





| | We Emphas | size the imp | ortance of empathetic | | |
|---|--|--|----------------------------------|--|--|
| | communica | tion, active l | istening, and addressing | | |
| | patient concerns during the disclosure process. | | | | |
| | | - | agement provides our Patients | | |
| | | | heir rights and our commitment | | |
| | | | nmunication. Encourage | | |
| | patient feed | back and pa | articipation in adverse event | | |
| | reviews, en | suring their | perspectives are valued and | | |
| | considered | when imple | menting improvements. | | |
| | 6. The Whistle | blowing and | Non-Retaliation Policy, staff | | |
| | members a | re aware of | this policy and understand the | | |
| | | | ses in place for whistleblowers. | | |
| | We create a | a safe enviro | onment for reporting. | | |
| | 7. Performanc | e Monitoring | g and Audit system to assess | | |
| | compliance with the duty of candour system. This includes reviewing incident reports, analyzing | | | | |
| | | | | | |
| | disclosure c | outcomes, a | nd conducting patient | | |
| | | • | e Use these findings to identify | | |
| | | | and develop targeted | | |
| | intervention | - | | | |
| | 8. Strong Leadership support and engagement throughout the organization and Organizational Support. Our Leaders consistently communicate the importance of the duty of candour, model transparent behavior, and hold staff accountable for their actions. We allocate adequate resources and support to | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | • | o fulfill their duty of candour | | |
| | | | o runni then duty of cardour | | |
| | • | obligations effectively. | | | |
| | | Embedding the duty of candour principles within quality improvement framework by encouraging staff | | | |
| | | weight weight weight and work by encouraging stand members to reflect on adverse events, identify system vulnerabilities, and implement strategies to prevent harm in the future. We Foster a culture of learning | | | |
| | | | | | |
| | | | | | |
| | | | best practices to drive | | |
| | | continuous improvement. | | | |
| | | • | bodies and organizations that | | |
| | | | and transparency. Collaborate | | |
| | | with patient groups and professional associations to | | | |
| | share experiences, gather insights, and contribute to the development of best practices. | | | | |
| | | | | | |
| Do you have a Duty of Candour Policy or | | | | | |
| written duty of candour procedure? | YES | | | | |
| | | | | | |

How many times have you/your service implemented the duty of candour procedure this financial year?

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To drive improvement



| Type of unexpected or unintended incidents (not relating to the natural | Number of times this has happened |
|---|-----------------------------------|
| course of someone's illness or underlying conditions) | (April XX - March XX) |
| A person died | 0 |
| A person incurred permanent lessening of bodily, sensory, | 0 |
| motor, physiologic or intellectual functions | |
| A person's treatment increased | 0 |
| The structure of a person's body changed | 0 |
| A person's life expectancy shortened | 0 |
| A person's sensory, motor or intellectual functions was | 0 |
| impaired for 28 days or more | |
| A person experienced pain or psychological harm for 28 | 0 |
| days or more | |
| A person needed health treatment in order to prevent them | 0 |
| dying | |
| A person needing health treatment in order to prevent | 0 |
| other injuries as listed above | |
| Total | 0 |

Completed by

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Clinical Governance Lead

ADHD Direct

20/06/2023

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