



**CHUMS**

**Mental Health and  
Emotional Wellbeing  
Service for Children  
and Young People**

Duty of Candour Policy

Implementation Date: May 2017

Review Date: May 2019

**CHUMS**  
**Mental Health & Emotional Wellbeing Service**  
**For Children & Young People**  
*Duty of Candour*



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Duty of Candour and what it means to service users:

**What is Duty of Candour?**

New rules to toughen transparency in NHS organisations and to increase patient confidence within the delivery of care has resulted in the Government creating Statutory Regulations relating to Duty of Candour. **Candour means frankness, openness and honesty.**

The aim of the regulation is to ensure that providers of healthcare, like hospitals, are open and honest with patients when things go wrong with their care and treatment.

To meet the requirements of the regulation, a provider has to:

- Make sure it has an open and honest culture across and at all levels within its organisation
- Tell service users in a timely manner when particular incidents have occurred
- Provide in writing a truthful account of the incident and an explanation about the enquiries and investigations that the organisation will carry out
- Offer an apology in writing
- Provide reasonable support to the person after the incident

The regulations apply to the service user themselves and in certain situations, to people acting on their behalf, for example when something happens to a child - or to a person over the age of 16 who lacks the capacity to make decisions about their care.

**What led to Duty of Candour?**

The Francis 2 Report tells the story about incidents that took place at Mid Staffordshire Hospitals NHS Foundation Trust.

The report highlighted the serious failure on the part of their trust board who did not listen sufficiently to its patients and staff or ensure the correction of deficiencies brought to the trust's attention. Above all, it failed to tackle a tolerance of poor standards and a disengagement from managerial and leadership responsibilities.

The Duty of Candour was one of the recommendations in the report to help ensure that NHS organisations are open and honest about their actions and that incidents are properly reported – and ensures that patients are also told about them.

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**How do staff at CHUMS comply with Duty of Candour?**

CHUMS is not a public body registered with the Care Quality Commission and therefore is *not obliged by law* to comply with Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 20, which states:

The intention of this regulation is to ensure that providers are open and transparent with people who use services and other 'relevant persons' (people acting lawfully on their behalf) in general in relation to care and treatment. It also sets out some specific requirements that providers must follow when things go wrong with care and treatment, including informing people about the incident, providing reasonable support, providing truthful information and an apology when things go wrong.

However CHUMS Mental Health and Wellbeing Service for Children and Young People is an organisation which has at its very core such visions and value and believes that all children and young people deserve the best we can give.

CHUMS therefore has developed a Duty of Candour as part of this core value and Best Practice:

1. They will tell someone if they have been involved in and/or observed where a service user may have been harmed or had the potential to be harmed by something not being done
2. They will report the actual and or potential incident on our Incident Reporting Tracker (our integrated risk management system) in accordance with the CHUMS Adverse Incident and Serious Incident Reporting Policy. By doing this, they will inform others and allow for a level of investigation to take place to see what/how/why something happened and to learn to ensure what occurred does not happen again

**What we have done to ensure that Duty of Candour takes place**

For incidents that may lead to moderate harm and or severe permanent harm and or death:

1. We ensure service users and family are supported to deal with the consequences and have a key contact identified for the incident
2. We ensure there is an appropriate level of investigation
3. We ensure that the service user/family/service user representative is informed within 10 working days of the decision that the incident is a moderate/permanent harm incident
4. We ensure that the initial notification should be face to face and this is accompanied with an offer of a written notification

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5. We ensure an apology is provided and documented in the service user notes
6. We ensure that a step by step explanation is offered as soon as possible pending the investigation
7. We ensure full written documentation of all meetings are kept with the service user/family and filed for future reference
8. We ensure full written documentation is kept of all staff interviews and meetings about the incident and filed in the incident/complaint file
9. We ensure the final investigation will be shared with the patient/family/patient representative within 10 days of approval
10. CHUMS will be monitored by the Commissioners as part of our Contract around any contractual obligations to comply with Duty of Candour

**What happens if CHUMS fails to meet the standards required for the Duty of Candour?**

Each failure to notify and report incidents up through CHUMS Governance procedures which leads to CHUMS failing to notify our Commissioners of a suspected or actual moderate/severe harm/death service user safety incident will lead to the Commissioners recovering the cost of the patient's episode of care - or **£10,000** if the cost of the episode of care is unknown. In addition the Care Quality Commission can prosecute the trust.

If you have any questions about Duty of Candour you can contact the Operations and Service Development Director via 01525 863924.

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**Governance Committee Authorisation**

Signature \*

A handwritten signature in black ink, appearing to read 'Hannah Baron', is written over a horizontal line.

Name Print: Hannah Baron

Position/Role: Senior Clinical Psychologist

Date: May 2017

Date of Review: May 2017

- Authorised signatory must be the chair (or deputising chair) of Governance Committee