

Response from the Royal College of Physicians to the Professional Standards Authority's consultation on the professional duty of candour

About the Royal College of Physicians (RCP)

The RCP plays a leading role in the delivery of high-quality patient care by setting standards of medical practice and promoting clinical excellence. We provide physicians in the UK and overseas with education, training and support throughout their careers. As an independent body representing nearly 34,000 fellows and members worldwide, we advise and work with government, the public, patients and other professions to improve health and healthcare. Our primary interest is in building a health system that delivers high quality care for patients.

The RCP welcomes this opportunity to feedback on this important issue. The RCP supports the principles of a duty of candour and strongly believes in the need to support an open culture in the NHS, addressing any issues which may prevent doctors from reporting concerns.

Summary

It has been reported to the Royal College of Physicians that there have been improvements in transparency, openness and approaches to candour since 2014. Anecdotally, clinicians are more aware of the need to be candid and inform patients when medical errors have occurred. However, in terms of overall progress in transparency, only 31% of doctors surveyed for the RCP report *NHS Reality Check: Update 2018* think their 'freedom to speak up guardian' has improved the culture of transparency and raising concerns¹.

The RCP is aware that levels of candour can vary across the sector. There is still room for improvement through leadership, a culture of openness and support for learning. The Health Service Safety Investigations Bill could be a way to further improve the duty of candour in future.

There is support for the duty of candour and recognition of the role it plays in delivering high-quality care, however some scepticism remains, that the duty is being adhered to everywhere and there is also concern that there are not adequate system processes in place to learn and prevent similar errors from occurring in future.

Through this consultation concerns have also been raised about the impact of recent high-profile cases on attitudes towards candour and the negative impact on doctors' willingness to be open about mistakes, cannot be underestimated. It is important to ensure that a culture of learning and improvement, as opposed to a culture of blame, is fostered and further clarity about accountability and process for candour is needed.

As noted in the consultation, this is difficult to measure and there seems to be some variability in the extent to which attitudes to the duty of candour have changed across NHS trusts. It is clear that we, as a sector, must do more to promote a culture of candour.

Barriers to candour

A number of barriers can prevent doctors from being candid. These include time pressures and workforce shortages, as well as a lack of confidence in communicating candidly with patients.

Also, many clinicians do not know how to report incidents and some feel uncertain about the specific requirements of the duty of candour, which may limit efforts to encourage candid behaviour. In relation to issues of reporting and transparency, a recent survey of RCP members found that just 46% of physicians know who their 'freedom to speak up guardian' isⁱⁱ.

Similarly, systems failures that cause harm to patients may create a sense that negative outcomes are beyond individual control, which may reduce the likelihood that they will be reported or communicated openly to patients.

Many doctors are also concerned that recent high-profile cases will lead to a blame culture and some may be reluctant to be candid due to fear of unknown consequences.

The role of regulators

Regulators should play a significant role in encouraging candour among healthcare professionals. They should provide support to overcome the barriers above, and promote a fair and open culture.

This includes providing guidance and resources to encourage clinicians to behave candidly. In particular, regulators should help their registrants better understand how to respond appropriately to specific types of medical error.

Regulators should also reassure doctors that the aim of the duty of candour is to foster a culture of learning, rather than blame. While it is important that regulators sanction clinicians who do not meet standards required to ensure patient safety, registrants must have confidence that they will be treated justly.

Broader support

A range of organisations may also play a role in encouraging candour among healthcare professionals. This includes sharing examples of its benefits, and providing guidance and training to support doctors in behaving candidly.

The RCP recommends that regulators, professional bodies, NHS trusts and other relevant organisations work collaboratively to share resources and case studies that demonstrate the positive impacts of candour on quality of care and patient outcomes.

Measuring candour

General measurement of the extent to which doctors are complying with the duty of candour may be possible, however this could be limited to qualitative assessment as it may be difficult to quantitatively measure candour in an effective way.

It is also important that this measurement is focussed on improving the quality of care by learning from errors, rather than apportioning blame. Measurement should also include feedback from patients and families on candid behaviour and its impact.

Guidance on candour

Doctors refer to guidance on the duty of candour produced by the GMC, defence unions, journals such as the BMJ, professional societies and medical royal colleges.

Physicians also rely on peer opinion and public commentary on high-profile cases and often seek guidance from their employers, either through trust governance materials or patient safety leads.

Clinicians would benefit from further guidance on how to report and respond to incidents at differing levels of severity as well as some case studies of good practice of candid behaviour.

Encouraging candour

The RCP encourages members to behave candidly in a variety of ways, for example through education programmes and publications on patient safety and quality improvement, many of which provide examples of how adherence to the duty of candour can improve outcomes for patients. The RCP also produces guidance on 'team-working' and encourages Schwartz rounds, as a model that facilitates candour in a positive way. The RCP also believes that it is important to lead by example in behaving candidly.

For further information, please contact policy@rcplondon.ac.uk.

ⁱ Royal College of Physicians (2018) *NHS reality check: Update 2018*. Available at :<https://www.rcplondon.ac.uk/projects/outputs/nhs-reality-check-update-2018>

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