British Society of Interventional Radiology (BSIR) Statement on Duty of Candour

The British Society of Interventional Radiology fully supports the principles of openness and transparency in relations between doctors and patients. In particular, we recognise the responsibility of all health professionals to be honest with patients when things have gone wrong. Candour and openness are a fundamental part of what it means to be a healthcare professional. The Duty of Candour for those performing Interventional Radiology (IR) procedures are essential to maintain the trust of our patients, being honest about mistakes to quickly deal with errors and learn from them, as well as drive up standards.

This is set out in the General Medical Council's (GMC) Professional Duty of Candour. 1,2

The professional duty of candour

"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."

This means that healthcare professionals must:

- tell the patient (or, where appropriate, the patient's advocate, carer or family) when something has gone wrong
- apologise to the patient (or, where appropriate, the patient's advocate, carer or family)
- offer an appropriate remedy or support to put matters right (if possible)
- explain fully to the patient (or, where appropriate, the patient's advocate, carer or family) the short and long term effects of what has happened.

Healthcare professionals must also be open and honest with their colleagues, employers and relevant organisations, and take part in reviews and investigations when requested. They must also be open and honest with their regulators, raising concerns where appropriate. They must support and encourage each other to be open and honest, and not stop someone from raising concerns.

Many members of the BSIR will also have a Duty of Candour for their Diagnostic Radiology practice as set out by the Royal College of Radiologists^{3,4} and should rely on this for this part of their practice. The rest of this statement focuses on the *Interventional Radiology practice* of BSIR members.

BSIR members provide interventional radiology services as set out in the combined RCR/BSIR document published in 2014. Such procedures are generally minimally invasive treatments performed under imaging guidance. Though they are minimally invasive and aim to replace more invasive conventional surgical approaches, there remains a risk of harm from the procedures carried out.

One of the issues is at what level of harm should the duty of candour threshold be set? We believe that any unexpected event leading to moderate, major or catastrophic harm to a patient should be disclosed, and NHS organisations now have a statutory Duty of Candour to ensure that as an organisation they harbour an open and honest culture for reporting and learning from such incidents. Those healthcare organisations registered with the Care Quality Commission (CQC) have a moral and legal obligation to disclose openly events that led to moderate, major or catastrophic harm to a patient.

The introduction of a statutory Duty of Candour was a major step towards implementing a key recommendation from the Mid Staffordshire NHS Foundation Trust Public Inquiry (The Francis Inquiry, 2013).⁶

References and Links:

1. NMC and GMC. (2015) Openness and Honesty when things go wrong: the professional duty of candour

At http://www.gmc-uk.org/DoC guidance englsih.pdf 61618688.pdf

2. Care Quality Commission (2015) Duty of Candour: information for all providers: NHS bodies, adult social care, primary medical and dental care and independent healthcare.

Available at:

http://www.cqc.org.uk/sites/default/files/20150327 duty of candour guidance final.pdf

3. The Royal College of Radiologists. *Duty of candour in relation to diagnostic radiology:* position statement.

Available at: https://www.rcr.ac.uk/posts/duty-candour-relation-diagnostic-radiology-position-statement

4. The Royal College of Radiologists. (2014) *Standards for Learning from Discrepancies Meetings.*

Available at: https://www.rcr.ac.uk/publication/standards-learning-discrepancies-meetings

5. The Royal College of Radiologists and the British Society of Interventional Radiology. (2014) *Provision of interventional radiology services*.

Available at: https://www.rcr.ac.uk/sites/default/files/publication/BFCR(14)12 POIR.pdf

6. Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry; Chaired by Robert Francis QC.

Available at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/279124/0947.pdf

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