



BSIR Duty of Candour Statement

1. Introduction

The British Society of Interventional Radiology (BSIR) is committed to fostering a culture of openness, honesty, and transparency in all areas of clinical practice, governance, and leadership. This Duty of Candour Statement outlines the Society's stance on ethical obligations to patients, the legal framework governing candour in healthcare, and expectations for interventional radiologists practicing in the United Kingdom.

The statutory Duty of Candour, established by Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014¹, requires that healthcare providers must act in an open and honest manner when things go wrong in patient care. This regulation applies equally to NHS and independent sector services.

2. Commitment to Transparency and Ethical Practice

The BSIR fully supports the principles of candour and believes that openness is essential to maintaining trust between patients and healthcare professionals. Interventional radiology, by its nature, involves procedural interventions with inherent risks. It is imperative that interventional radiologists are forthright about complications, adverse events or near misses that occur under their care.

The Society encourages all members to:

- Inform patients and/or their carers or advocates as soon as reasonably practicable when an incident that has caused (or may cause) moderate harm, severe harm, or death occurs.
- Provide a truthful and clear account of the facts, known at the time, in a way the patient or their family can understand.
- Offer a sincere apology and explanation, regardless of whether harm was caused through fault or unavoidable circumstances.
- Provide appropriate remedial action, support, and follow-up.

3. Legal and Regulatory Framework

Under Regulation 20 of the Health and Social Care Act 2008¹, providers must:

- Notify the relevant person as soon as reasonably practicable after becoming aware that a notifiable safety incident has occurred.





- Provide reasonable support to the relevant person, including when giving an apology.
- Maintain a written record of the notification given and a copy of the correspondence provided.

The General Medical Council (GMC) also upholds this principle in *Good Medical Practice*², which states: "You must be open and honest with patients when something goes wrong with their care or treatment." (GMC, 2024).

The Care Quality Commission (CQC)⁴ regulates this statutory duty and assesses compliance during inspections and investigations.

4. Application in Interventional Radiology

Interventional radiologists must exercise particular diligence in applying the Duty of Candour due to the complexity and potential risk of the procedures performed.

Complications of a procedure, including recognised complications for which the patient was appropriately consented, are included in the definition of an event and if harm is caused should be discussed and documented³.

The BSIR provides guidance, professional development, and audit frameworks to support best practice and quality improvement, including through the National Vascular Registry (NVR).

5. Organisational and Individual Responsibilities

The BSIR urges all healthcare organisations employing interventional radiologists to embed the Duty of Candour in clinical governance frameworks, including:

- Training for staff on communicating with patients following incidents.
- Establishing clear incident reporting and escalation pathways.
- Supporting clinicians in delivering apologies with empathy and professionalism.

Individually, BSIR members are expected to uphold the highest ethical standards and report any barriers to candour, including organisational culture, fear of litigation, or reputational concerns.

6. Fostering a Just Culture

Promoting candour goes hand-in-hand with developing a just culture—where learning, not blame, is the primary goal of error disclosure. The BSIR believes this creates safer





environments for patients and more supportive conditions for healthcare professionals. The Society endorses the recommendations of the Francis Report (2013)⁵, which emphasised that candour must be embedded in clinical leadership and patient engagement.

7. Conclusion

The British Society of Interventional Radiology is committed to the principles of openness, accountability, and patient-centred care. The Duty of Candour is seen as a moral as well as a legal obligation. Through guidance, education, and advocacy, the BSIR will continue to support its members in honouring this duty and contributing to a culture of safety and trust within UK healthcare.

References:

1. Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Regulation 20: Duty of Candour.
<https://www.legislation.gov.uk/ukxi/2014/2936/regulation/20/made>
2. General Medical Council (2024). *Good Medical Practice*.
<https://www.gmc-uk.org>
3. Royal College of Radiologists (2022) *Professional Duty of Candour – Guidance for radiologists*.
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4. Care Quality Commission. (2023). *Guidance on the Duty of Candour*.
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5. Francis, R. (2013). *Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry*.
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