

## The 'duty of candour': your legal obligations

### The duty of candour

The Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016 (The Act) and The Duty of Candour Procedure (Scotland) Regulations 2018 (the Regulations) set out a new Duty of Candour.

The Act and the Regulations require organisations providing health services, care services and social work services in Scotland to follow a formalised procedure when there has been an unintended or unexpected incident that results in death or harm (or additional treatment is required to prevent injury that would result in death or harm).

The purpose of this new duty is to ensure that providers are open, honest, supportive and providing a person-centred approach.

### Duty of Candour Annual Report

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 triggered duty of Candour within our service.

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| Name & address of service:   | Superdrug Nurse Clinics Scotland   |  |
| Date of report:  | 20 <sup>th</sup> April 2025<br>Note this report relates to ALL Superdrug Nurse clinics in Scotland |  |
| 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?<br><br>How have you done this? | Provided all HIS registered clinics with the Duty of Candour policy to re-read.                    |  |
| 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?                           |   |
|---|---|
| Type of unexpected or unintended incidents (not relating to the natural course of someone's illness or underlying conditions) | Number of times this has happened (April 24 - March 25) |
| A person died   | 0   |
| A person incurred permanent lessening of bodily, sensory, motor, physiologic or intellectual functions                        | 0   |
| 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 impaired for 28 days or more  | 0   |
| A person experienced pain or psychological harm for 28 days or more   | 0   |
| A person needed health treatment in order to prevent them dying   | 0   |
| A person needing health treatment in order to prevent other injuries as listed above  | 0   |
| <b>Total</b>  | 0   |

|   |   |
|---|---|
| Did the responsible person for triggering duty of candour appropriately follow the procedure?<br>If not, did this result in any under or over reporting of duty of candour? | N/A   |
| What lessons did you learn?   | N/A   |
| What learning & improvements have been put in place as a result?  | N/A   |
| Did this result in a change / update to your duty of candour policy / procedure?  | N/A   |
| How did you share lessons learned and who with?   | N/A   |
| Could any further improvements be made?   | N/A   |
| What systems do you have in place to support staff to provide an apology in a person-centred way and how do you support staff to enable them to do this?                    | <p>There are several policies and procedures in place such as the Duty of Candour policy, Incident Reporting process and Nurse Clinic Complaints Procedure. These policies and procedures outline that apologies should be provided early in the process and be patient centred as well as detailing the clear escalation channels.</p> <p>Our process for any complaints or serious incidents investigation includes the patient, the nurse directly involved, their line manager (who provides support) and escalation to the Clinical Excellence Team. Depending on the situation the patient would be communicated to in the most suitable way for them e.g. directly from the nurse over the phone or formal written communication from Head Office. Each situation is treated individually.</p> |



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| What support do you have available for people involved in invoking the procedure and those who might be affected? | <p>We have a people advice team, a strong field operations team who line manage all the nurses in the clinics and the head office Clinical Excellence team. They all work closely together to support our healthcare professionals during challenging times.</p> <p>We also have a confidential support line with the retail trust for all colleagues.</p> |
| Please note anything else that you feel may be applicable to report.  | NA   |