



HEALTHCARE RIGHTS, COMMUNICATION & PATIENT SAFETY

Duty of Candour

Openness and honesty when something goes wrong in care

The key idea

The duty of candour requires openness and transparency with people receiving care. When a notifiable safety incident occurs, the statutory duty adds specific requirements including notification, a truthful account, an apology, reasonable support and written follow-up.

What is the duty of candour?

Candour means being open and honest. In England, Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 places a statutory duty of candour on CQC-regulated providers. Registered providers and registered managers must act openly and transparently with people receiving care or treatment.

In everyday language

People should not be kept in the dark about their care. If something goes wrong, the service should be honest about what is known, explain what will happen next and support the person affected.

There is a general duty and a specific process

The general duty is to act openly and transparently. When an event meets the legal definition of a 'notifiable safety incident', additional steps are required. These include telling the relevant person as soon as reasonably practicable, giving a truthful account of the known facts, explaining further enquiries, apologising and providing reasonable support.

Key distinction

Not every mistake, complaint or unwanted outcome is automatically a notifiable safety incident. The regulations contain defined criteria and harm thresholds. Even where the specific notification process is not triggered, the wider expectation of openness and transparency still applies.

What is a notifiable safety incident?

The legal definition differs depending on the type of registered provider. Broadly, it concerns an unintended or unexpected incident during regulated care that appears to have resulted in, or could meet specified criteria relating to, significant harm. Providers should use the statutory definition and CQC guidance rather than assuming every adverse event either does or does not meet the threshold.

Who should be told?

The regulations refer to the 'relevant person'. This is usually the person receiving care. In some circumstances it may be a person lawfully acting on their behalf. Services need to consider capacity, representation, communication needs and confidentiality when deciding how information should be shared.

What should the notification include?

For a notifiable safety incident, the provider must give an account that is true to the best of its knowledge at that time, explain what further enquiries it considers appropriate, include an apology and provide reasonable support. The notification must then be followed by written notification containing the required information.

Important to know

An apology is not the same as admitting legal liability. CQC guidance is explicit that providers must apologise for the harm caused, regardless of fault, and that saying sorry is an important part of candour.

What does 'as soon as reasonably practicable' mean?

The statutory notification should not be unnecessarily delayed while every detail is investigated. Early communication can explain what is currently known and what remains uncertain. Further information can follow as enquiries progress.

What if the facts change?

Candour is an ongoing process rather than a single conversation. Early information should be accurate to the best of the provider's knowledge at the time. If later enquiries clarify or change the understanding of what happened, the person should receive appropriate updated information.

What this might look like

A patient is harmed during treatment and the incident meets the statutory threshold. The service speaks with the patient or relevant representative promptly, explains the known facts, says sorry, outlines the investigation and support available, and follows the conversation in writing. Further findings are shared as appropriate.

Statutory duty and professional duty are different

The statutory duty applies to CQC-regulated providers and registered managers. Individual regulated professionals may also have a professional duty of candour through bodies such as the General Medical Council or Nursing and Midwifery Council. The aims overlap, but meeting a professional duty alone does not necessarily satisfy the provider's statutory requirements.

Key distinction

CQC regulates the statutory duty of candour. Professional regulators oversee duties applying to individual professionals. A single incident can therefore involve organisational responsibilities and separate professional responsibilities.

What support should be offered?

The statutory process requires reasonable support for the relevant person. What is reasonable will depend on the circumstances and the person's needs. This can include making communication accessible, explaining the process clearly, identifying a contact person and signposting to further support.

Accessible candour matters

A technically correct explanation is not enough if the person cannot understand or use it. Communication may need Easy Read information, an interpreter, British Sign Language, alternative or augmentative communication, extra processing time, support from someone the person trusts, or another reasonable adjustment.

Does duty of candour replace a complaint or investigation?

No. Candour is about openness with the person affected. It does not replace the provider's incident response, a complaint, safeguarding action, coroner involvement, regulatory processes or a clinical-negligence claim where those are relevant. These processes can run alongside one another.

Important to know

CQC regulates whether registered providers meet Regulation 20, but it does not investigate every individual notifiable safety incident. The provider remains responsible for responding to the incident and meeting the duty.

If you think the duty has not been followed

You can ask the provider whether the event was considered under the duty of candour, who is responsible for the response, what is currently known, what enquiries are taking place and when you will receive further information. You can also use the provider's complaints process. CQC can receive information about concerns and regulates provider compliance, although it does not resolve individual complaints in the same way as a complaints service.

For professionals

Candour should be supported by a culture in which staff can report incidents and speak openly. Providers need policies, systems and training that help staff recognise notifiable safety incidents, communicate sensitively and accurately, document the required steps and support people affected.

Practical check

Have you been told what is known so far? Has uncertainty been explained rather than hidden? If the incident meets the statutory threshold, have you received an apology, information about further enquiries, reasonable support and written follow-up? Do you know who to contact with questions?

Scope of this guide

This guide focuses on the statutory duty of candour regulated by the Care Quality Commission in England. Other UK nations have their own legal and policy arrangements, so the applicable framework should be checked where care is provided outside England.

References & Further Resources

The legal threshold for a notifiable safety incident is detailed and provider-specific. The sources below should be used for the precise statutory wording and current regulatory guidance.

CQC - Regulation 20: Duty of candour

Current regulatory guidance explaining the general duty, notifiable safety incidents, statutory and professional duties, apologies and provider responsibilities.

CQC - How we regulate the duty

Explains CQC's approach to monitoring, assessment, enforcement and the provider's responsibility for implementing the duty.

Health and Social Care Act Regulations

Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 contains the statutory requirements for openness, notification, support, apology and written follow-up.

NHS Resolution - Saying Sorry

Practical guidance on apologising when something goes wrong, including the principle that an apology is not an admission of liability.

Professional regulators

Healthcare professionals should also follow the candour standards and guidance of their own regulator, such as the GMC, NMC or GDC, where applicable.

How to use these resources

Use CQC guidance alongside the legislation when deciding whether the statutory notification requirements apply. The exact legal definition of a notifiable safety incident should not be replaced by a simplified checklist. For concerns about an individual event, ask the provider to explain how it has applied Regulation 20 and what other incident, complaints or support processes are available.