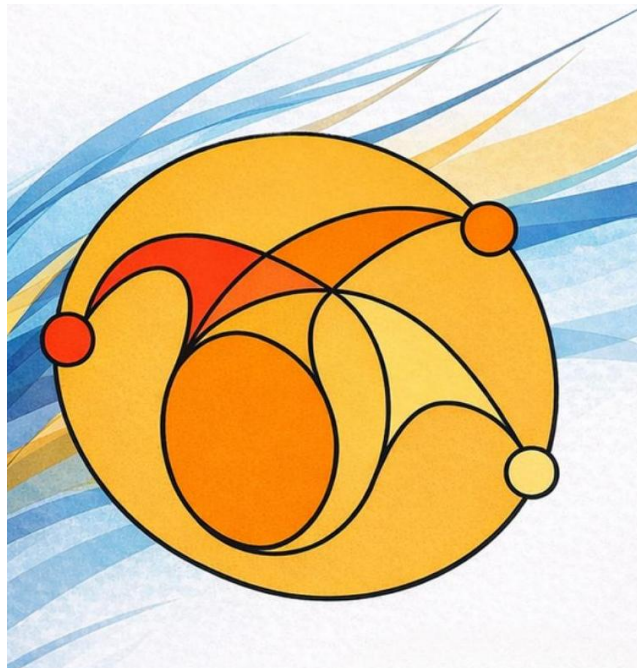


THE
PROVOCATIVE CHANGE
WORKS

DUTY OF CANDOUR POLICY





Contents

Contents	1
Duty of Candour Policy	3
Summary	3
Policy Statement.....	3
Definitions.....	4
RCA Qualifying Incidents.....	4
Non-RCA Qualifying Incidents	5
Purpose.....	5
Scope	5
Key Principles	6
Practitioner Obligations	6
Incident Reporting and Investigation.....	7
Reporting Procedure	7
Investigation Process	7
Outcome and Communication	8
Examples of Possible Incidents	8
Documentation Requirements	8
Preventive Measures	8
Consequences of Non-Compliance	9
Client Rights	9
Complaint Procedure	10
Support for Practitioners	10
Review and Amendments	10
Appendix 1: Non-RCA Incident Reporting Form	12
Appendix 2: RCA Incident Reporting Form.....	14
Five Whys Analysis	14
Root Cause(s)	15



Corrective Actions	15
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Duty of Candour Policy

THE ASSOCIATION FOR PCW PRACTITIONERS

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Summary

The Duty of Candour Policy outlines the responsibilities of practitioners registered with The Association for PCW Practitioners to uphold honesty, transparency, and integrity in all professional interactions. This policy ensures that clients are promptly informed of incidents or errors during PCW services, with appropriate explanations, apologies, and corrective measures provided. Practitioners are expected to prioritise client safety and well-being, aligning their practices with the Association's core values of trust, integrity, accountability, and client-centred care.

Policy Statement

The Association for PCW Practitioners is dedicated to fostering an environment of openness and trust in delivering PCW services. Practitioners must maintain integrity in their relationships with clients by promptly addressing any clinical errors, ethical concerns, or incidents that may affect client well-being. This policy ensures that practitioners meet their ethical and legal obligations by:

- ☐ Communicating incidents openly and honestly.
- ☐ Protecting clients' rights and well-being through transparent actions and accountability.
- ☐ Promoting professional standards and reflective practice.



Definitions

Duty of Candour: The ethical and legal obligation to be open and honest with clients, particularly when incidents or errors occur.

Incident: Any event or action during a PCW session that may negatively impact a client's well-being.

Adverse Event: An occurrence during a PCW session that results in unintended harm to the client.

Risk of Harm: Any potential adverse effects on the client's health, safety, or well-being.

Apology: A sincere expression of regret offered to the client, acknowledging the impact of an incident without implying legal liability.

Reflective Practice: A method by which practitioners critically analyse their actions and decisions to improve their professional practice. It involves continuous self-assessment and learning from experiences to enhance effectiveness and prevent future incidents.

Peer Consultation: A collaborative process where practitioners discuss cases, challenges, and concerns with colleagues to gain insights, support, and alternative perspectives. This practice helps in identifying potential risks and fostering a culture of accountability and continuous improvement.

Root Cause Analysis (RCA): A structured method to investigate significant incidents, identify systemic improvements, and prevent recurrence. RCA focuses on uncovering underlying issues through methods such as the Five Whys (see Appendix 2).

RCA Qualifying Incidents

Incidents requiring RCA include:

Significant Harm: Severe emotional, physical, or psychological harm.

Safety Risks: Compromised client safety.

Confidentiality Breaches: Data protection or privacy violations.

Systemic Failures: Recurring issues indicating procedural gaps.

Legal/Ethical Implications: Potential for regulatory or legal action.



Non-RCA Qualifying Incidents

Incidents addressed without RCA include:

Minor Disruptions: Issues causing negligible or no harm.

Single Occurrence: Isolated incidents unlikely to recur.

Low-Risk Issues: Events resolved quickly without systemic concerns.

Purpose

This policy aims to:

- ☐ Define responsibilities of PCW practitioners regarding candour: clarifying expectations for maintaining openness and honesty in their professional interactions.
- ☐ Promote transparency, particularly in cases of risk or harm: ensuring practitioners communicate openly with clients when there is a potential or actual adverse outcome.
- ☐ Safeguard clients' rights and well-being: establishing a framework for incident management and communication that aligns with ethical standards and relevant laws governing professional practice. This approach underscores the importance of trust, ethical responsibility, and accountability in PCW practice.

Scope

This policy applies to all PCW practitioners registered with The Association for PCW Practitioners. It encompasses all formal and informal interactions with clients, including PCW sessions, communications (email, text, phone), and any professional activities where clinical errors, ethical concerns, or adverse incidents may impact client well-being.

This policy does not apply to informal conversations outside the context of professional PCW sessions unless they pertain to the aforementioned incidents or errors.



Key Principles

Openness and Transparency: Practitioners must be fully transparent with clients, disclosing any known risks, limitations, or potential outcomes of PCW, both positive and negative, before and throughout the work. Practitioners must be candid and forthright from the outset regarding the benefits and any potential risks associated with PCW.

Timely Communication: In the event of an error or adverse occurrence, practitioners must inform the client as soon as reasonably possible, ensuring clients are aware of any potential impact on their well-being.

Apology: Practitioners are required to offer a genuine apology if an incident negatively impacts the client, while clarifying that the apology does not denote legal liability. This apology should be compassionate, sincere, and centred on the client's experience.

Explanation: Practitioners must provide a clear and honest explanation of what occurred, the underlying reasons, and the steps being taken to address the incident.

Support: Practitioners must ensure that clients receive appropriate support following an adverse incident, including referrals or additional resources as needed.

Cultural Sensitivity: Practitioners must ensure that communications and disclosures are culturally sensitive and respectful of each client's background, acknowledging that cultural influences may affect clients' perceptions and processing of information.

Practitioner Obligations

PCW Practitioners are expected to:

- ☐ **Acknowledge Mistakes:** Inform clients immediately of any adverse incidents or risks during the work, especially if there is harm or risk to health and well-being.



- ❑ **Provide Information:** Clearly explain the nature of the incident, potential consequences, and corrective actions being undertaken.
- ❑ **Apologise:** Offer a meaningful and sincere apology to acknowledge the incident and express empathy without implying legal liability.
- ❑ **Document and Report the Incident:** Record and report the incident using the appropriate reporting template (see Appendix 1 for Non-RCA and Appendix 2 for RCA) and notify any relevant regulatory bodies as required by law and professional guidelines.
- ❑ **Implement Corrective Actions:** Take necessary actions to prevent similar incidents from recurring and keep the client informed of corrective measures and progress.
- ❑ **Engage in Supervision:** Practitioners are encouraged to bring any incidents to supervision to support reflective practice, ensuring thorough and responsible handling of the issue while prioritising client safety and well-being.

Incident Reporting and Investigation

Reporting Procedure

Practitioners must report any adverse incidents or errors to The Association for PCW Practitioners within 24 hours of occurrence. Reports should be submitted using the appropriate template (Appendix 1 for Non-RCA incidents or Appendix 2 for RCA incidents) and must include:

Incident Details: A factual description of what occurred.

Client Information: Anonymised client identifier to ensure confidentiality.

Immediate Actions Taken: Steps taken to address the incident at the time.

Investigation Process

Upon receiving a report, the Association will:

Assign an impartial investigator within 5 working days to conduct a fair and transparent review.

The review process may include:

Practitioner interviews to clarify the circumstances.



Examination of incident documentation and related records.
Feedback or additional input from clients, if necessary and appropriate.

Outcome and Communication

The Association will inform the client of the investigation's findings and any corrective actions within 30 days of the report's submission. The client will also be provided with resources or referrals as needed to ensure ongoing support.

Examples of Possible Incidents

Common examples of incidents include misunderstandings or miscommunications during PCW sessions, accidental disclosure of information, IT security breaches, or loss of client records. Practitioners are expected to respond to all incidents with openness, integrity, and professionalism, ensuring alignment with the Duty of Candour Policy.

Documentation Requirements

All incidents must be documented using the Association's standardised templates.

- ☐ Non-RCA Template (Appendix 1): For minor incidents, practitioners must include a factual description, immediate actions taken, and follow-up measures.
- ☐ RCA Template (Appendix 2): For significant incidents, RCA findings must be detailed, including identified causes and corrective actions. All documentation must preserve confidentiality and comply with data protection regulations.

Preventive Measures

The Association encourages practitioners to adopt proactive measures to prevent incidents, such as:

- ☐ Reflective Practice: Regular self-assessment to evaluate actions and mitigate potential risks.



- ☐ Peer Consultation: Discuss challenging cases with peers to gain insights and prevent incidents.
- ☐ Training and Development: Ongoing education on ethical practices, risk management, and incident communication.
- ☐ Systemic Improvements: Use RCA findings to enhance protocols, techniques, and communication practices.

Consequences of Non-Compliance

Failure to comply with the Duty of Candour may result in:

- ☐ Disciplinary Action: Consequences will vary depending on the severity and frequency of breaches. First-time or minor breaches may result in a written warning, while repeated or serious breaches could lead to suspension or removal from the Association's register.
- ☐ Referral to Regulatory Bodies: In cases of severe or repeated non-compliance, the Association may refer practitioners to relevant regulatory bodies for further action.
- ☐ Legal Consequences: Non-compliance that results in harm to the client may have legal implications under applicable laws governing therapeutic practices.

Client Rights

Clients have the right to:

- ☐ Be promptly and clearly informed of any incidents or errors that affect their PCW sessions.
- ☐ Receive a complete and honest explanation of what happened, along with a sincere apology.
- ☐ Be provided with appropriate support and follow-up resources.
- ☐ File a complaint if they believe their practitioner has not adhered to the Duty of Candour.



Complaint Procedure

Clients may file complaints by completing the complaint form and emailing it to the Association's designated contact:

Complaints Officer: associationforpcw@gmail.com

Complaints will be reviewed within 15 days, and clients will be informed of the resolution process and outcomes.

Clients have the right to receive clear and timely feedback on any incidents, even if they have not raised a formal complaint. The Duty of Candour exists to proactively maintain trust and transparency, separate from the formal complaint process.

Support for Practitioners

The Association for PCW Practitioners is committed to supporting practitioners by:

- ☐ Providing ongoing training on the Duty of Candour, RCA, and incident management.
- ☐ Offering access to counselling or peer support to help practitioners manage the emotional impact of adverse incidents.

Practitioners are encouraged to seek advice and support when faced with complex situations where their Duty of Candour may be required.

Review and Amendments

This policy will be reviewed annually to ensure it remains aligned with legal standards and ethical practices. Additionally, it will be revisited when trends from root cause analyses (RCA) or incident reports reveal systemic issues that need to be addressed.



Feedback from practitioners will also inform the review process, fostering continuous improvement and ensuring the policy remains effective and relevant. Updates will be communicated to all practitioners to maintain compliance and understanding.

This Duty of Candour Policy upholds our commitment to transparency, accountability, and ethical integrity in PCW practice, ensuring the trust and well-being of both clients and practitioners.



Appendix 1: Non-RCA Incident Reporting Form

1. Date and Time of Incident: _____

2. Practitioner Name: _____

3. Client Information _____

Client Identifier (e.g., ID Number or Initials):

Session Number: _____

4. Description of the Incident: [Provide a factual and objective account of what occurred, including the context leading to the incident. Avoid assumptions or speculative language.]

5. Immediate Actions Taken: [Detail the steps you took to address the incident at the time it occurred. Examples include notifying the client, adjusting the session, or providing immediate support.]

6. Impact on Client: [Describe any immediate or potential effects on the client's well-being. For example: emotional distress, confusion, or dissatisfaction.]

7. Follow-Up Actions Taken or Planned: [Outline corrective measures or steps to prevent similar issues in the future. For example: reviewing session goals with the client, updating session protocols, or scheduling additional sessions.]



8. Practitioner Reflections (Optional): [Include a brief reflection on the incident. What did you learn, and how could you adjust your practice to prevent similar incidents?]

Submission Date: _____

Practitioner Signature: _____



Appendix 2: RCA Incident Reporting Form

Date and Time of Incident: _____

Practitioner Name: _____

Client Identifier: _____

Session Number: _____

Description of Incident: [Provide a clear and factual description of the incident, including what happened, when, and where.]

Immediate Impact on Client: [Describe how the incident affected the client, including emotional, physical, or psychological impacts.]

Five Whys Analysis

Why did the incident happen? [Answer]

Why did that cause occur? [Answer]

Why was this factor not identified or addressed earlier? [Answer]

Why did the current process fail to prevent the issue? [Answer]

Why is the process/system inadequate, and what changes are required? [Answer]



Root Cause(s)

[List the main root cause(s) identified through the Five Whys process. Be specific about the systemic or procedural gaps that contributed to the incident.]

Corrective Actions

Immediate Corrective Actions Taken: [Describe what was done to mitigate the incident's impact immediately.]

Long-Term Preventive Measures: [Describe the changes or improvements to prevent recurrence. Examples include updating assessment forms, adjusting protocols, or introducing additional training.]

Practitioner Reflection and Insights (Optional): [Reflect on the incident and what it revealed about your practice. How will this influence your approach in the future?]

Submission Date: _____

Practitioner Signature: _____