“Candour” – Apology and Disclosure
Ethical Obligations to Patients & Family Members

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Introduction

- “Candour” in healthcare is insufficient
- Clinicians are ethically obliged to apologize and disclose
- Sustaining trust & relationships is key goal
- Lack of candour has serious ramifications
- “Cultures of Candour” must become the norm in healthcare settings

Terrain of Patient Safety

- Yearly, millions of patients are harmed and thousands die from healthcare
- Healthcare is inherently hazardous despite benevolent intentions
- Achieving quality is about trust & mutual obligations
- Patients are entitled to apologies/explanations

The Ethical Framework for Quality and Safety

- Partnering is essential to quality outcomes
- Respect for patients/anticipating desires must inform decision-making
- Foundational principles of medical ethics: 1
  - Respect for autonomy and shared decision making
  - Beneficial intentions/actions, avoidance of biases/conflicts of interest
  - Non-maleficence/avoidance of risks/harm

Healthcare “Cultures of Candour” are lacking for many Reasons

- Lack of/insufficiencies in safety/just culture
- Threats/punitive treatment of staff
- Fears of malpractice claims and professional sanctions
- Personal failures by clinicians

How Things Should Happen

The Incident: Chemotherapy overdose

- Infant with Wilms tumour, received overdose of chemotherapy
- Potentially fatal error not discovered for six hours

Apology/Disclosure: Sorrow & regret

- Oncologist apologized and explained what happened
- Assured parents investigation would be done
- Listened to parent’s concerns and offered emotional support

The Outcomes: Resolution & revalidation

- Child survived/cured of tumour
- Therapeutic relationship with family sustained
- Complaint/malpractice claim not lodged
- Oncologist suffered flashbacks as a “second victim”
- Received support from colleagues/mentors
- “Revalidated” by continuing relationship with child and family
- Candour benefited patient/family/institution and oncologist

Consequences of the Lack of Candour

- Loss of trust/therapeutic relationships
- Malpractice claims/law suits
- Adverse publicity/damaged reputation

Benefits of Candour

- Sustained therapeutic relationships
- Reductions in stress for staff/patients/families
- Reductions in malpractice claims/lawsuits/times to resolution

Political Consequences Emerging

- Basis in part was the Mid Staffs crisis
- Mandates candour for deaths and substantial harm
- Focuses on the obligations of institutions, not specifically clinicians
- Criminal statute includes harsh penalties
- May be viewed as failure of moral obligations

Preparing to meet Institutional Obligations

- Establishing “Cultures of Candour”
  - Culture of justice
  - Continuous learning environment
  - Communication training
  - Leadership/clinician engagement key!
  - Formal incident response plans desirable

Conclusions

- The absence of apology/disclosure represents a moral failure of hospital leadership to establish “Cultures of Candour.”
- Quintessential Goal – Sustaining relationships
- Malpractice claims/payments may be reduced
- The Practice of Medicine & the Practice of Candour!