

Duty of Candour Annual Report

Year: 2024 - 2025

Every healthcare professional must be open and honest with patients when something goes wrong or has the potential to cause, harm or distress during their treatment or care. 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 trigger duty of Candour within our service.

Name & address of service:	Alpha Hospital Group 16 Carden Place Aberdeen, AB10 1FX 01224232428
Description of services:	HIS Registered Private Hospital specialising in day case plastic surgery and non-surgical aesthetics.
Date of report:	08 January 2026
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? How have you done this?	Yes The values and attitude of our care, excellence, integrity, innovation, and patient safety underpin the founding principles of Alpha Hospital Group. All staff are aware of the importance of their Duty of Candour through the development, training and implementation of all Alpha Hospital Group applicable policies. Duty of Candour underpins our communication with service users, regulators and other stakeholders following every incident, whether it requires any action or mitigation. Staff are introduced to the process from the moment of induction to the organization and complete further training modules on Skills for Health Staff Training, Clinical Governance Meetings, Incident Investigation
Do you have a Duty of Candour Policy or written duty of candour procedure?	YES

Regulated by:



How many times have you/your service implemented the duty of candour procedure this 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 January 2024–January 2025
A person died	None
A person incurred permanent lessening of bodily, sensory, motor, physiologic or intellectual functions	None
A person's treatment increased	None
The structure of a person's body changed	None
A person's life expectancy shortened	None
A person's sensory, motor or intellectual functions was impaired for 28 days or more	None
A person experienced pain or psychological harm for 28 days or more	None
A person needed health treatment in order to prevent them dying	None
A person needing health treatment in order to prevent other injuries as listed above	None
Total	None

Did the responsible person for triggering duty of candour appropriately follow the procedure? If not, did this result in any under or over reporting of duty of candour?	There have been no instances of implementing Duty of Candour in the above-noted circumstances. However, all healthcare professionals have a professional responsibility to report incidents, be honest and communicate effectively when things may go wrong.
What lessons did you learn?	There are no incidents to report. However, following any incident a review is completed on IMS and where applicable an investigation is carried out. As an outcome of incident reviews, the risk assessments and care plans are updated as appropriate.
What learning & improvements have been put in place as a result?	Where applicable continual learning from each incident is shared within services and corporately to ensure improvements are made
Did this result in a change / update to your duty of candour policy / procedure?	N/A

Regulated by:



<p>How did you share lessons learned and who with?</p>	<p>All lessons learned are shared within each service during staff meetings. There is a wider care governance meeting for all managers of the services which includes lessons learnt. The information is cascaded through e-mail and internal communications.</p>
<p>Could any further improvements be made?</p>	<p>None that has been raised or proven a barrier to the care delivery of service users</p>
<p>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>	<p>Following policy, the person providing an apology and the investigation is a qualified nurse or doctor, this person is supported by their line manager through supervision both clinical and managerial. There are templates in place to assist the investigating officer to ensure the person is kept at the centre of the Duty of Candour investigation.</p>
<p>What support do you have available for people involved in invoking the procedure and those who might be affected?</p>	<p>The staff involved in the process will be provided with a person to contact for questions and updates, this includes support. The service user and their families would be signposted to support networks both within the company and externally for example advocacy services</p>
<p>Please note anything else that you feel may be applicable to report.</p>	<p>The process will continue to be reviewed and updated to ensure adequacy. Lessons learnt will continue to be shared with further the training and development of the staff involved in the Duty of Candour process continuing in order to ensure Alpha Hospital Group are providing a high level of quality care and support to the individuals they are trusted to care for.</p>

Regulated by:

