

Apologies

Apologising when things go wrong is an essential part of practice and can assist in maintaining good patient relationships. Apologies can demonstrate insight and professionalism and do not of themselves amount to admissions of liability.

Basic Considerations

There is a professional duty of candour to be open and honest with patients. This includes offering a suitable apology when things go wrong and, in some circumstances, when there has been a near miss. There is also a statutory duty of candour that applies to Healthcare Organisations. The professional duty obliges clinicians to assist their Healthcare Organisation to comply with this statutory duty.

When a patient has suffered because of a failure an apology should address four issues sometimes referred to as the 4R's:

- A clear expression of **regret** that shows empathy and and acknowledges the effect on the person
- Acceptance of **responsibility**
- A clear explanation of what happened (the **reason**)
- Details of steps taken to **rectify** the situation or prevent it from happening again.

It is important to use language the patient understands.

Remember that the patient (who may feel very vulnerable at this time) may need ongoing advice, support and clinical care. They should be advised how to access this. Make a note of the apology in the clinical record to include the information given to the patient.

Saying sorry

- A genuine apology using "I am sorry..." is better than using third-party terms such as "the practice is sorry" or more complicated or ambiguous language.
- The patient may be upset by the prevailing circumstances, therefore consider privacy when making an apology face to face.
- If offering an apology face-to-face, check if the patient wants to have someone with them, especially if the apology is regarding a potentially serious outcome for them.
- An apology is not an admission of liability.
- Fear of litigation should not prevent a clear and honest apology when a patient has been harmed or upset when something has gone wrong in their care.

Key points

- Saying sorry is not an admission of guilt or liability.
- Doctors should avoid acting defensively when a mistake has been made.
- Explain to patients what went wrong and listen to their concerns.

Further guidance

- Apologies (Scotland) Act 2018: <http://www.legislation.gov.uk/asp/2016/5/contents/enacted>
- General Medical Council. *Openness and honesty when things go wrong: The professional duty of candour*: <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/candour---openness-and-honesty-when-things-go-wrong>
- General Dental Council. *Being open and honest with patients when something goes wrong [The professional duty of candour]*: <https://www.gdc-uk.org/api/files/duty%20of%20Candour.pdf>
- <https://www.spsos.org.uk/sites/spsos/files/csa/ApologyGuide.pdf>

MDDUS Training & CPD resources: <https://www.mddus.com/training-and-cpd>