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# **BEING AN OPEN AND BLAME FREE ORGANISATION POLICY**

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# 1 Introduction

## 1.1 Policy statement

An open and blame-free culture can only exist where all employees believe that management fully support their endeavors at work and where management believes that employees are committed to performing their duties to the best of their abilities in working towards the goals of the organisation.

Where trust exists, employees will not fear raising concerns because they know that genuinely made mistakes will not be held against them.

The purpose of this policy is to set out the rationale for having an open and blame-free culture and the underpinning principles that establish and promote such a culture within the organisation.

The intention is that there is a culture of openness and truthfulness towards improving the safety of patients, staff and visitors to the organisation as well as raising the quality of healthcare systems.

It is also intended to improve communication between colleagues, employees and management and help to ensure that openness; honesty and timeliness underpin responses to any incidents.

## 1.2 Principles

The organisation encourages a culture where all incidents and “near misses” are reported, that allows for such events to be reviewed and any learning opportunities taken on board. In this way, the organisation seeks to continuously improve and avoid repeated mistakes.

In order to promote a working environment where talent can grow, the organisation management understands that employees must be allowed to learn from their mistakes, examine and reflect upon their errors and be encouraged to establish new ways of working that will support and promote best practice, thereby reducing the likelihood of further occurrences.

A culture which is open and free from blame is fundamental to the organisation’s relationships with (and between) patients, the public, staff and other healthcare organisations.

This premise links directly with the organisation’s commitment to the Duty of Candour – which is the contractual requirement to ensure that the being open process is followed when an incident that affects patient safety, results in moderate or severe harm or death. This is set out in the organisation’s Duty of Candour policy.

## 1.3 Status

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the Equality Act 2010 (updated 2015).

<https://www.gov.uk/guidance/equality-act-2010-guidance>

Consideration has been given to the impact this policy might have in respect to the individual protected characteristics of those to whom it applies.

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of a contract of employment.

#### **1.4 Training and support**

The organisation will provide guidance and support as far as is reasonable to help those to whom it applies understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

## **2 Scope**

### **2.1 Who it applies to**

This document applies to all employees, partners and directors of the organisation. Other individuals performing functions in relation to the organisation, such as agency workers, locums and contractors are encouraged to use it.

### **2.2 Why and how it applies to them**

Employees need to be aware that their health and safety and that of all patients and visitors to the organisation, relies on compliance with a set of comprehensive policies, protocols, procedures and systems, plus equipment that is properly designed, installed, maintained and operated.

An open and blame-free culture, however, does not negate the need for professional and regulatory control or clinical accountability. These control measures must be prioritised and staff should fully understand the professional and regulatory constraints under which they operate.

Speaking up about any concern an employee has at work is important. In fact, it is vital because it will help the organisation to keep improving its services for all patients and the working environment for staff.

Raising concerns can sometimes feel like “complaining” or going behind others’ backs and this can sometimes prevent people from speaking up but employees should not be put off. The organisation is committed to an open and honest culture and we will investigate what an employee says and will ensure they have access to the support they need.

The organisation is committed to listening to its staff, learning lessons and improving patient care. If an employee is a healthcare professional, they may have a professional duty to report a concern. If in doubt, they should raise it.

An employee who raises a concern (or makes a protected disclosure or “blows the whistle”) has the right not to be dismissed, subjected to any other detriment or victimised because they have made a disclosure. This means that their continued employment and opportunities for future promotion or training will not be prejudiced because they have raised a legitimate

concern. Victimisation of a worker for raising a qualified disclosure will be a disciplinary offence.

### **3 Operating protocols**

#### **3.1 Reporting incidents**

All incidents must be reported immediately by each person involved/present at the time and reported through normal line-management channels to enable an initial review to be undertaken in order to bring about any immediate response that is necessary/appropriate.

Advice may be sought by management where there is any concern that there may be regulatory or other significant reporting issues involved. In this regard they may suspend the normal review process and seek advice from external bodies and/or the GP partners.

If, after the initial review, it is considered by management that the normal review process applies, all employees involved will be briefed and the following actions will be initiated:

- Each employee involved will be asked to make an open and honest report of the incident and the circumstances leading up to it
- Employees will be encouraged to identify issues that they see within policies, protocols, procedures and systems that may have contributed to the incident
- Employees will be encouraged to suggest possible improvements to policies, protocols, procedures and systems for management consideration that will mean further incidents are less likely to occur
- Employees involved will be invited to suggest any additional developments or mentoring that would assist them in safeguarding against further incidents

Management will then review all contributions, make additional contributions where necessary and document all the improvements to be made.

#### **3.2 Learning and actions**

All suggested improvements should then be agreed by the organisation partners and an implementation plan developed and agreed.

The action plan will include:

- Responsibilities for actions
- Timeframes
- Monitoring and review arrangements
- Communications to support the implementation process

Individual employees' learning needs and actions will be discussed with them privately and recorded on their personnel file.

Depending on the circumstances, this may be through informal or formal procedures with the purpose of enabling the employee to learn from any mistake and establish correct and/or improved working practices.

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