



Fishermoss Nursery
Duty of Candour Report
February 2022 – February 2023

All health and social care services in Scotland have a duty of candour. This is a legal requirement which means that when things go wrong and mistakes happen, the people affected understand what has happened, receive an apology, and that organisations learn how to improve in the future.

An important part of this duty is that we provide an annual report about the duty of candour in our service, Fishermoss Nursery. This short report describes how our care service has operated the duty of candour during the time between **February 2022** and **February 2023**. We hope you find this report useful.

1. How many incidents happened to which the duty of candour applies?

In the last year, there have been no incidents to which the duty of candour applied.

2. Information about our policies and procedures

Where something has happened that triggers the duty of candour, our staff report this to the Senior Management Team who have responsibility for ensuring that the duty of candour procedure is followed. The management team records the incident and reports as necessary to the Care Inspectorate. When an incident has happened, the senior management team and staff set up a learning review. This allows everyone involved to review what happened and identify changes for the future.

All new staff learn about the duty of candour at their induction. We know that serious mistakes can be distressing for staff as well as people who use care and their families. We have occupational welfare support in place for our staff if they have been affected by a duty of candour incident.

Where parents or children are affected by the duty of candour, we have arrangements in place to provide welfare support as necessary.

If you would like more information about the duty of candour in Fishermoss Nursery please speak with a member of staff or look on our website.

Completed by
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Early Years Senior Practitioner

Appendix 1

Incidents that trigger Duty of Candour

Type of unexpected or unintended incident	Number of times this happened
Someone has died	0
Someone has permanently less bodily, sensory, motor, physiologic or intellectual functions	0
Someone's treatment has increased because of harm	0
The structure of someone's body changed because of harm	0
Someone's sensory, motor or intellectual functions is impaired for 28 days or more	0
Someone experienced pain or psychological harm for 28 days or more	0
A person needed health treatment in order to prevent them dying	0
A person needed health treatment in order to prevent other injuries	0