

patient safety

and justice

# A vision of what a "just culture" should look like for patients and healthcare staff

This draft document has been developed by Action against Medical Accidents (AvMA) in consultation with both people from a patient/family and a health professional background. We want to develop it further in partnership with a wider range of stakeholders in order to develop an agreed national vision of what a just culture should look like both for patients and health professionals.

# 1. Why is having a just culture in healthcare so important?

- 1.1 In healthcare, a truly just culture must be fair for patients and for health staff both are equally important.
- 1.2 Having a just and learning culture is a vital part of patient safety. It helps prevent things going wrong as well as ensuring people are treated honestly and fairly if they do
- 1.3 Staff who work in a just culture are more likely to do their job well and achieve good outcomes for patients
- 1.4 Patients and those close to them fare better after incidents in organisations where there is a just culture and are less likely to complain or take legal action after an incident

#### 2. Culture starts at the top

- 2.1 National policies set the tone for culture in healthcare and can either help, or seriously hinder attempts to achieve a just culture
- 2.2 Healthcare policies should be risk assessed for whether they are conducive to the agreed definition of just culture before they are put forward

#### 3. When things go wrong

- 3.1 When things do go wrong and cause harm, it is very rare that this is because individuals deliberately depart from good practice or act maliciously. However, if that were the case, the individuals need to be held to account.
- 3.2 Individual members of staff should never be singled out for blame or be made scapegoats for something going wrong which is due to system failure.
- 3.3 Experiencing avoidable harm in healthcare often has a devastating effect on peoples' lives. How an organisation responds to patients/those close to them after such incidents can itself cause serious harm if it is done badly.
- 3.4 Patients are entitled to know what has happened in their healthcare. There must be full openness and transparency and the patient/those close to them must be enabled to be involved in investigations if they want to be
- 3.5 The Duty of Candour must be fully complied with but also with compassion. Fear of consequences such as litigation, complaints etc is no excuse for not being open and honest.
- 3.6 Staff involved in an incident which causes avoidable harm can themselves be traumatised by it. They should also be treated fairly and with compassion. Suitable support should be put in place for them.

### 4. Accountability

- 4.1 Senior management are responsible for creating and maintaining the right culture in their organisations. Organisations should be held to account if they do not nurture a just culture or do not demonstrate that they learn and take necessary action over failures in patient safety.
- 4.2 Staff should be listened to, supported and helped to learn and improve (if necessary), rather than blamed/punished.
- 4.3 In rare cases of intentional unsafe practice or incompetence that are proven, individuals do need to be held to account. Blame should not be avoided at all costs.
- 4.4 Failure, by either by organisations or by individuals, to comply with the Duty of Candour which applies to them is unacceptable and should always have serious repercussions.
- 4.5 Patients or those close to them have a perfectly reasonable right to raise concerns or complaints or to seek compensation and accountability through taking legal action if they need to. They should not be stigmatised for doing so, and their healthcare needs should never be compromised as a result.

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