

# Consent Another Boring Audit



Terrie Perry & Donna Beckford-Smith – Transfusion Practitioners

Safe & compassionate care,

every time

### Audits are such fun!



#### **Introduction**

• The issue of Consent was specifically tackled by the Advisory Committee on the Safety of Blood, Tissue and Organs (SaBTO) in 2011, in part prompted by inconsistent practice across the UK

• The final recommendations re-enforced the need for valid consent for blood transfusion to be obtained and documented in the patient's clinical record by the healthcare professional

• Late in 2011, in conjunction with the NCA Use of Blood in Adult Medical patients, we seized the opportunity to undertake a local audit, to evaluate the process of documenting consent in our trust

• We audited 58 clinical notes, over a 3 month period, looking for evidence that patient consent was documented and a patient information leaflet had been given

# 2011 Consent Audit of Medical Patients

(N = 58)

	Number Yes	% Yes
Verbal consent documented in the notes?	11	19
Evidence that a patient leaflet was given?	0	0

## Conclusion

• Buckinghamshire Healthcare Trust was pretty dire in relation to the documentation of consent to transfusion

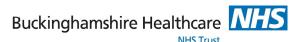


#### Our Reaction

 August 2012 we launched the new and improved Adult Prescription and Care Plan

 This featured an extra column for doctors to sign that they had documented consent in the clinical notes

• It was written in red for Maximum Impact



#### Adult Prescription, Observation Chart and Care Plan for the Transfusion of Blood and/or Blood Products

Patient's N	Name Is Irradiated blood needed? Yes No								
NHS No_									
MRN No Date of		Date of birt	ate of birth Gender _						
Diagnosis	nosis Date Hb taken _								
If there has been a previous transfusion reaction consider giving the following prior to the transfusion.  Chlorphenamine 10 – 20 mg IV and Hydrocortisone 100mg IV  In the event of a transfusion reaction consider giving the following at the time of the reaction.  Chlorphenamine 10 – 20 mg IV and Hydrocortisone 100 mg IV  Furosemide 20 mg may be given orally with 2 or more units of blood. (red cells)  Refer to the Transfusion Policy No. 312  NB  Prescribe and record administration medicines given in conjunction with transfusion on the prescription and administration record chart.							ion with		
Date of Transfusion	Infusion rate	Name of blood/blood product	Doctor's signature	Is verbal Consent documented in the Clinical Notes? Dr's signature	Start time of unit	Blood unit no.	Volume of unit	Administrator's signature	Stop time of unit

#### One of the SaBTO recommendations was

'There should be a modified form of consent for long term multitransfused patients, details of which should be explicit in an organisation's consent policy.'

#### August 2013

- Following much discussion and several drafts we produced a consent form to satisfy this recommendation
- It went to the HTC, where it was welcomed by clinical areas other than Haematology
- It was approved and the journey through the various committees began
- The Transfusion Consent for Medical/Obstetric Patients form went live June 2014

Buckinghamshire Healthcare	NHS
NHS Tourt	

Affix Patient ID label here: Surname Forenames DOB NHS number

NHS Trust	
<u>Transfusion Consent for Medical/Obstetric Patient</u> - to be completed by prescribing clinician	<u>s</u>
For transfusions during a single hospital admission	
Patient expected to be long-term transfusion dependent	
All patients requiring a transfusion must be informed of the risks & benefit prior to the transfusion where possible	ts below, ideally
1. The following information should be discussed:  > Type of blood / blood component  > Reason for and benefits of transfusion  > Possible alternatives to transfusion  > Risks of transfusion (refer to NHSBT patient information leaflet)  > Acute & delayed transfusion reactions: fever, rash, feeling unw  > Circulatory overload: feeling out of breath  > Transfusion transmitted infection  > Importance of correct patient identification  > Is the patient aware of any special transfusion requirements?  eg. known antibodies or requirement for irradiated products  Inform the patient that following a blood transfusion they can no longer b due to the theoretical risk of transmission of vCJD	vell
2. Has written information been provided? (NHSBT patient information leaflet)	
In the <u>emergency</u> setting or if the patient is <u>unconscious</u> , the information will nee to be given retrospectively. Tick here if unable to obtain prior consent*  *Document in clinical notes that information regarding any blood products transfus given to the patient retrospectively where appropriate.	Ш
Tick here if the Mental Capacity act has been invoked* *See Consent policy for advice on mental capacity issues. In these cases the patient would be treated in best interests and their carers involved.	red.
If further information required, contact Transfusion Practitioners: Donna Beck 110 5359 or Terrie Perry WH 120 2313	cford-Smith SMH
I have discussed the above and the patient agrees to proceed with the transfuto obtain consent for reasons above	usion / I am unable
Print name	
Signature	
Grade Date	

#### July 2014



- Contacted by Jacky Nabb from NHSBT asking for a topic we would like to present at this years Transfusion Bites
- We took this opportunity to re-audit the documentation of consent and the use of the new consent form
- As part of the audit we decided to look retrospectively at the effectiveness of the previously introduced new and improved Adult Prescription and Care Plan

#### Retrospective Audit

We examined the electronic notes of a number of medical patients who had been transfused after the introduction of the care plan for the answers to two questions

- 1. Was consent documented in the clinical notes
  - 2. Had the doctor signed the care plan indicating that consent WAS documented in the notes

# Retrospective Audit of Medical Transfusions During $\frac{\text{Sept/Oct 2013}}{(N = 72)}$

Of the 47 signed prescription forms, 19 did not have any corresponding consent documented in the clinical notes

We were unable to collect any data concerning patient information leaflets

	Numbers Yes	% Yes
Documented in clinical notes?	32	44
Indication of documented consent on the care plan?	47	65

#### Consent Audit

• Our main aim was to see if the introduction of our consent form had improved the documentation of consent

• All transfusions over a 3 week period were audited within 24 hours of the transfusion looking for evidence that a patient information leaflet had been given and that consent for the transfusion had been documented

#### Consent Audit Sept/Oct 2014

(N = 76)

#### We found documented consent in 88% of transfusions

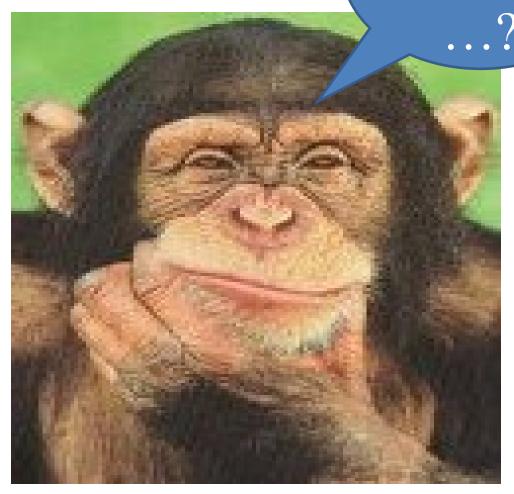
	Consent form	Clinical notes	Surgical consent form	No documentation	Patient information leaflet
Consent form used?	63% (48)				
Other forms of consent?		13% (10)	12% (9)	12% (9)	
Patient information given?					50% (38)

## Comparison

	2011 N = 58	2013 N = 72 Post Care Plan	2014 N = 76 Post Consent Form	National consent audit N = 2784
Was consent documented?	7%	44%	88%	43%
Was patient information given?	0%	No data	50%	19%

We know that the new consent forms are being used but what do our users think of it?





#### SurveyMonkey Results

#### There were 94 responses

- >34% had used the form
- ➤ 76% of those who had used the consent form found it a useful prompt as to what to discuss with the patient
- ➤ 43% said they gave out patient information leaflets
- From those that responded the majority found it a useful tool

### Conclusion

- We have improved the process of consent documentation from 19% in 2011 to 88% in 2014 by the introduction of 2 consent tools
- We will re-audit the use of the Consent Form next year
- We would also like to repeat the SurveyMonkey at the same time but in the light of experience we will refine our questions

Thank you to the staff of Blood
Bank for providing the transfusion data



# So it's goodbye from me & it's goodbye from her. Goodbye

