







**Issued by JPAC:** 05 May 2015 **Implementation:** To be determined by each Service

## Change Notification UK National Blood Services No. 11 - 2015

### Communication Difficulties

### Applies to the Whole Blood and Components Donor Selection Guidelines only

#### **Obligatory**

#### 1. All donors must:

- a) Fully understand the donation process.
- b) Give their informed consent to the process and to the testing of their blood for diseases that may affect its suitability for use.

#### 2. Third party interpreters:

If they are to be present at any part of the selection procedure where there is an exchange of confidential information between the donor and the qualified health professional, they must:

- a) Understand the requirements of the Blood Safety and Quality Regulations (BSQR) relevant to the donation process and provide an accurate and truthful translation and interpretation of all information provided to enable the Blood Service to comply with these regulations.
- b) Not be personally known to the donor.
- c) Fully understand their duty of confidentiality and the confidential nature of any information obtained from the donor

#### See if Relevant

Central Nervous System Disease

<u>Disabled Donor</u>

Neurobehavioral Disorders

## Additional Information

The Blood and Tissue Services are aware of their duties under Race Relations and Disability Discrimination Legislation and will, whenever and wherever reasonable, try to provide facilities for individuals whose first language is not English, or who have other difficulties in communicating. Potential donors with such difficulties are advised to seek advice from their local Blood Service Help Line before attending a donor session to see if their needs can be met. It is however important to note the following.

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Tel: 0114 358 4903

Fax: 0114 358 4494









# To comply with Part 2 of the Blood Safety and Quality Regulations 2005 (BSQR) every donor must:

- a) Be provided with accurate educational materials, which are written in terms which can be understood by members of the general public (Part A 1-13).
- b) Complete a health and medical history questionnaire and undergo a personal interview performed by a health professional (defined in the BSQR as a doctor, a nurse or a donor carer) trained and qualified in the requirements of the BSQR (Part B 15).
- c) Provide written informed consent to proceed with the donation process which must be countersigned by the qualified health professional responsible for obtaining the health history (Part B 16 (a) (f)).

A qualified health professional may assist a donor in the completion of the health and medical history questionnaire and in understanding the consent statement and any other information provided by the Blood Service. To facilitate comprehension it is permissible to use alternative formats (e.g. a language other than English, audio, computer, Braille) for the donor information leaflets, the health and medical history questionnaire and consent statements. The donor must be able to clearly demonstrate they have understood this material. At present there is no standardized way of assessing comprehension so this will be a personal judgement made by the qualified health professional.

#### Use of third party interpreters.

It is permissible for any third party to act as an enabler by helping to reassure the donor and to assist in establishing effective communication between the donor and the qualified health professional. The third party **must not** however be present during any exchange of confidential information, unless they are **not** personally known to the donor, understand the requirements of that part of the BSQR relevant to the donation process and provide an accurate and truthful interpretation of all information, including personal and confidential information, provided to enable the Blood Service to comply with these regulations. Confidential parts of the process include the evaluation of the health and medical history questionnaire, the medical interview and the obtaining of valid consent. Any third party, with the permission of the donor, may accompany the donor through other parts of the donation process that do not include the exchange of confidential information.

#### Rationale.

There is concern that the use of third parties during any exchange of confidential information between the donor and the qualified health professional may compromise the confidentiality of the donor and the safety of the blood supply. Interpreters are often part of a close community, or a family member, and this may inhibit or embarrass the potential donor in any confidential exchange of information. This may result in the non-disclosure of sensitive information that

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Tel: 0114 358 4903

Fax: 0114 358 4494

Email: caroline.smith@nhsbt.nhs.uk









Tel: 0114 358 4903

Fax: 0114 358 4494

Email: caroline.smith@nhsbt.nhs.uk

could affect the individual's eligibility to donate. If a third party is not fully aware of the relevant aspects of the BSQR and the need to provide an accurate and truthful interpretation of all information, including personal and confidential information, provided by the donor this may make the interpretation of information incomplete and potentially put both the donor and the blood supply at risk. There is also a requirement to communicate the results of any testing performed by the Blood Services that may be of relevance to the donor's health in a way that protects their confidentiality. The continuing availability of an independent interpreter, to maintain donor confidentiality, should be taken into account when deciding if an individual donor may be accepted.

To comply with both the BSQR and Health and Safety Regulations no donor can be accepted if it unnecessarily puts their own safety or the safety of others at risk.

**Information** Part of this entry is a requirement of the Blood Safety and Quality Regulations

2005.

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Reason for change This has been updated to clarify the role of a third party interpreter and to bring it

in line with the Tissue donor Guidelines.

Dr Sheila MacLennan

**Professional Director** - Joint UKBTS Professional Advisory Committee

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