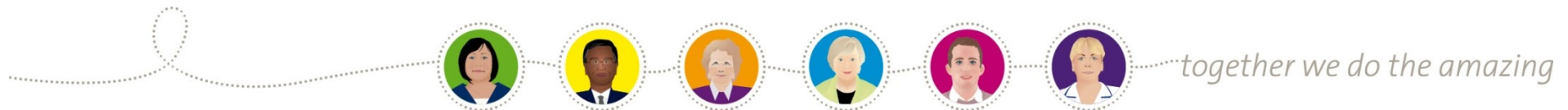


Improving Documentation of Patient Consent

‘A Sticker System’

Victoria Davidson

Transfusion Practitioner, South Tees Hospitals NHS Foundation Trust

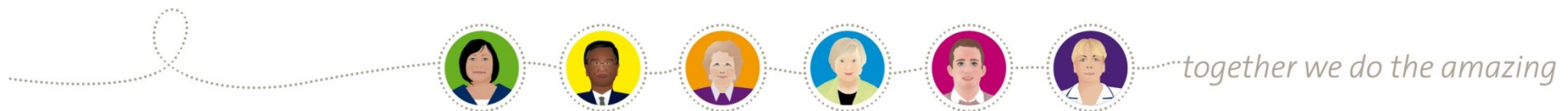


Consent for Transfusion

- It is an accepted principle that a patient should give valid consent before receiving medical treatment, and this includes when they receive a blood transfusion¹
- The Government advisory committee for the Safety of Blood, Tissues and Organs (**SaBTO**)² carried out a public consultation in March 2010

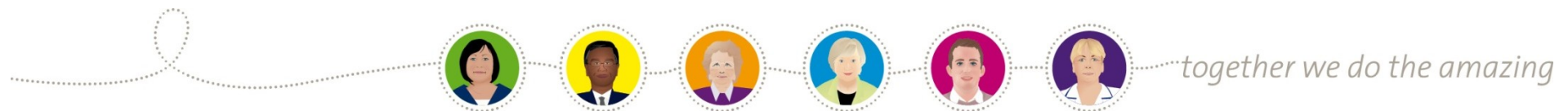
1 <https://www.gov.uk/government/publications/patient-consent-for-blood-transfusion> [Accessed 23/09/15]

2 <https://www.gov.uk/government/groups/advisory-committee-on-the-safety-of-blood-tissues-and-organs> [Accessed 29/09/15]



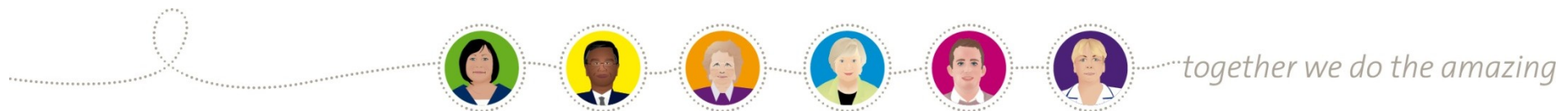
SaBTO

- The SaBTO consultation resulted in a total of 14 recommendations which included:
 - Valid consent for blood transfusion should be obtained and documented in the patient's clinical record by the healthcare professional
 - There should be a modified form of consent for long term multi-transfused patients, details of which should be explicit in an organisation's consent policy
 - Patients who have received a blood transfusion and who were not able to give valid consent prior to the transfusion should be provided with information retrospectively



SaBTO

- Audits presented to SaBTO identified that the practice of obtaining any form of valid consent for blood transfusion is highly variable in the UK.
- The following issues were identified by SaBTO:
 - Patients are not always given information on the risks, benefits, and alternatives to transfusion, or the right to refuse transfusion
 - Patients are not always made aware that they have received a transfusion
 - Patients who are unaware that they have received a transfusion may go on to donate blood when they should not



SaBTO

Advisory Committee on the Safety of
Blood, Tissues and Organs

GUIDANCE FOR CLINICAL STAFF
TO SUPPORT PATIENT CONSENT FOR BLOOD TRANSFUSION

Patient may require Blood / Blood Component Transfusion

Patients receiving a blood transfusion (red cells, platelets or plasma) whether for a medical or surgical cause should be informed of the indication for the transfusion including risks, benefits and alternatives. A record of this discussion should be documented in the patient's clinical records.

Ideally the decision to transfuse should be made with the patient or parent/carer in advance of any planned transfusion.

In the emergency setting, the information will need to be given retrospectively.

Prospective Information

Valid consent* should be obtained prior to any planned transfusion and documented in the patient's clinical record.

* Valid consent entails the provision of information on risks, benefits and alternatives available before asking the patient to give consent. This does not have to include a signature from the patient.

Retrospective Information

Patients treated in emergency setting where it was not possible to obtain valid consent pre-transfusion.

Patients who were told pre-procedure (e.g. pre-operatively) that they *might* require a transfusion then need to be informed whether they did/did not receive a transfusion.

Key issues to be discussed when obtaining valid consent

1. The following information should be discussed:
 - o Type of blood / blood component
 - o Indication for transfusion
 - o Benefits of the transfusion
 - o Risks of transfusion
 - o Possible alternatives to transfusion
 - o How the transfusion is administered and the importance of correct patient identification
 - o Inform patient that following a blood transfusion they can no longer be a blood donor.
2. Provide written information.
3. Check if patient needs time to consider or requires further information.
Document the discussion in the patient's clinical records.

At discharge

1. If patient has had a transfusion, ensure that they have been informed.
2. Record information about the transfusion in the discharge summary, also stating that the patient has been informed.

Version 1.1

December 2011

Ideally the decision to transfuse should be made with the patient or parent/carer in advance of any planned transfusion. In the emergency setting, the information will need to be given retrospectively.

Prospective/retrospective information

Key issues to be discussed when obtaining valid consent

Ensure patients are informed if they have received a transfusion and document in discharge summary

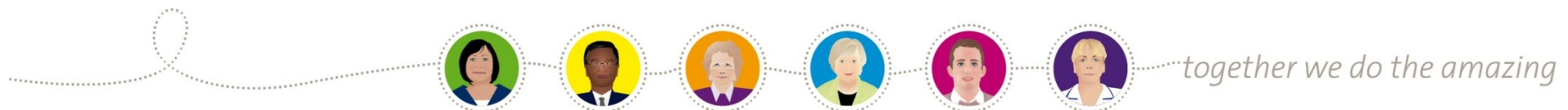


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Remember retrospective information

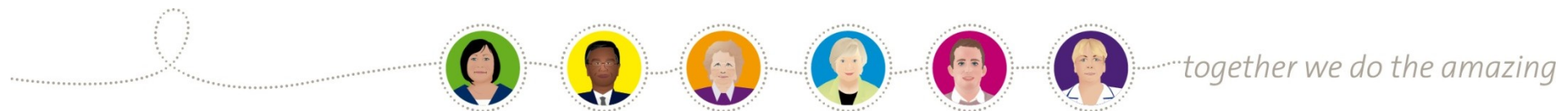


- Perhaps the patient was transfused in an emergency where there was no option for consent prior to transfusion
- Important to take reasonable measures to make sure the patient does not have an objection to transfusion, even in an emergency



“Valid consent for blood transfusion should be obtained and documented in the patient's clinical record by the healthcare professional”

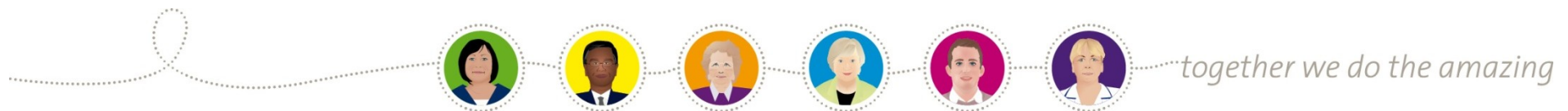
Simple right?!



NCA of Blood Transfusion 2014

Audit of Patient Information & Consent

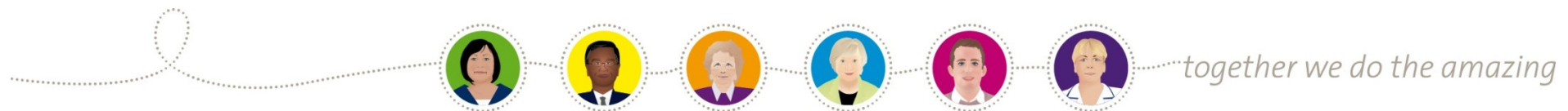
- The largest UK audit to date of practice around the provision of patient information and consent for blood transfusion.
- Much good work is in evidence, but improvements can be made in areas of policy, training and practice to drive up the disappointingly low results achieved in documenting, for example, the discussion of risks, benefits and alternatives to transfusion.
- 164 sites provided patient data on 2784 cases for the case note documentation audit.



NCA of Blood Transfusion 2014

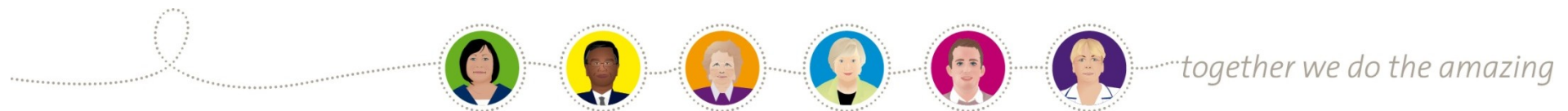
Audit of Patient Information & Consent

- While 85% of staff stated they had explained the reason for transfusion to the patient, only 65% stated that they had documented this
- It was only evident in 37% of notes reviewed that the reason for transfusion had been explained to the patient
- Junior doctors in particular are involved in prescribing blood and this audit highlights an urgent need to strengthen their training in relation to consent and appropriate prescribing



Improving documentation of consent

- The Hospital Transfusion Team at South Tees Hospitals NHS Foundation Trust explored the idea of a ‘sticker’ that could be easily completed and highly visible within the patient records
- The ultimate aim of the sticker is to improve the patient experience and ensure patient’s are engaged in the decision making process for transfusion where possible



Our sticker!

Design based on similar stickers already in use within the Trust

This patient has given their consent to receive a blood transfusion

I have explained the risks and benefits of transfusion and available alternatives

I have provided an NHSBT information booklet 'Will I need a blood transfusion?' and I have answered questions

CONSENT FOR TRANSFUSION

Name:

Date of Birth: ←

Hospital Number:

Or place addressograph label here

Guidance for use:
This sticker must be placed within the clinical notes (on the relevant history sheet), and must not be applied to the front cover.

Date: / / ← Time: ←

This patient has given their consent to receive a blood transfusion.

I have explained the risks and benefits of transfusion and available alternatives.

I have provided an NHSBT information booklet 'Will I need a blood transfusion?' and I have answered any questions. tick if given

Name: ←

Designation:

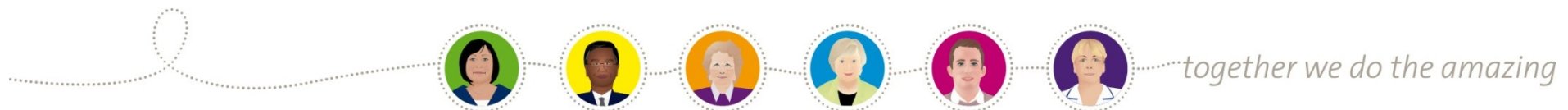
GMC / registration no:

MICB4419 - ISSUED MARCH 2014

Patient details - can use addressograph label

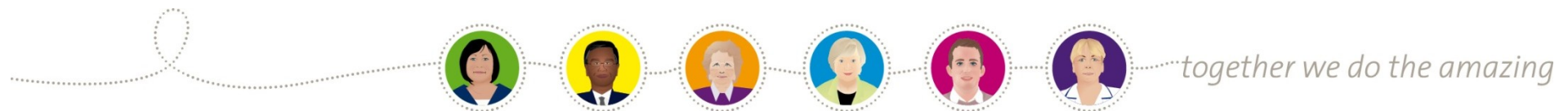
Date and time

Name, designation, and GMC/reg number of consenter



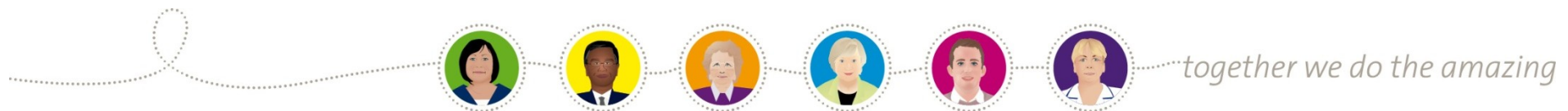
Our Sticker!

- Prompts staff to seek valid consent from patients
- Promotes patient involvement in their care
- Highly visible
- Easy to use
- Effectively documents consent for transfusion



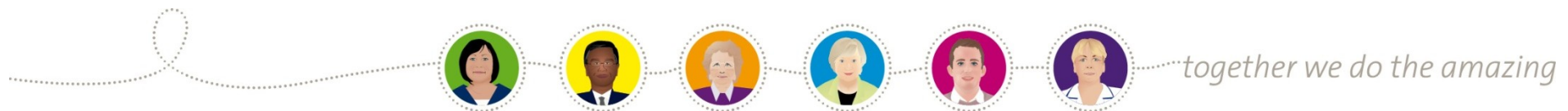
Project Implementation

- Initial idea discussed at HTT
- Sticker designed with Trust graphic design team
- Approved by Medical Records Committee
- **Cost** (250 - £75.00, 500 - £99.00, 1000 - £129.00) and ordering agreed.
- Development discussed at HTC
- Introduced to staff via transfusion mandatory training



Project progress

- Transfusion policy amended to incorporate sticker
- Roll-out via clinical Centres, working with governance leads
- Encouraged central ordering with ward clerks to reduce costs and to support low transfusion areas



Posters for clinical areas/ staff rooms

South Tees Hospitals 
NHS Foundation Trust

Implementation of a 'sticker system' to document consent for blood transfusion

Following guidelines set out by the Department of Health's Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO, 2011), South Tees Hospitals NHS Foundation Trust is keen to introduce a system that allows clinicians to easily and effectively document when they have spoken with the patient about the risks and benefits of transfusion, gained the patient's consent and, where appropriate, provided the patient with an information leaflet.



A red consent form titled 'CONSENT FOR TRANSFUSION'. It includes fields for Name, Date of birth, Date of transfusion, and Date of consent. Below these are checkboxes for 'I have given my consent to receive a blood transfusion', 'I have explained the risks and benefits of transfusion and asked for alternatives', 'I have received an expert information booklet 'Will I need a blood transfusion?' and I have answered any questions', and 'I have signed this consent form'. There are also fields for Name, Designation, and GMC / registration no.



All patients receiving elective (non-emergency) transfusions should have a sticker placed in their medical records to demonstrate they have given their consent to receive the transfusion, have had the risks and benefits of the transfusion explained to them and, where appropriate, have been provided with an information booklet.

The stickers are to be placed in the patient's clinical records (clinical history sheet) on completion.

NB. Stickers must NEVER be placed on the front cover of clinical records.

Please remember, this project is designed to ensure we are following recommended best practice. It is hoped to be as user friendly as possible for busy clinicians and, above all, to ensure that patients benefit from receiving timely information about the risks and benefits of transfusion before giving their consent.

For further details, or any queries, please contact:
Vicki Davidson, Transfusion Specialist Nurse
victoriadavidson@tees.nhs.uk
01642 282802
(X52802)

For further details on the SaBTO recommendations please see
<http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/ab/sabto/index.htm>

- Policy update
- Available via intranet
- Contact details
- Information regarding standard information leaflet and use of sticker

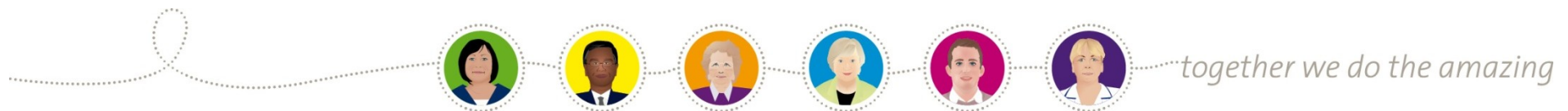


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Project progress

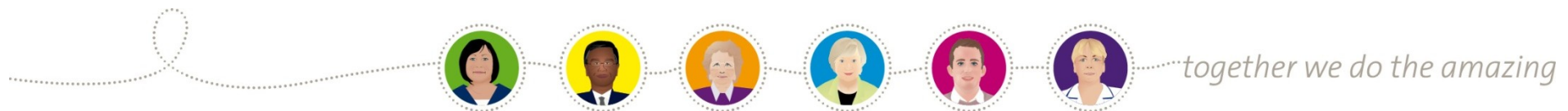
- Continued education, especially junior doctors
- Audit and evaluation

- Target education for areas of poor compliance



Further Information

- Gov.uk Independent Report. 'Patient Consent for Blood Transfusion'
<https://www.gov.uk/government/publications/patient-consent-for-blood-transfusion>
- Joint United Kingdom (UK) Blood Transfusion and Tissue Transplantation Services Professional Advisory Committee (JPAC)
<http://www.transfusionguidelines.org/transfusion-practice/consent-for-blood-transfusion-1>
- National Comparative Audit <http://hospital.blood.co.uk/audits/national-comparative-audit/>
- Other recommended sources of information for patients;
- A video available on the NHS Choices website ([tinyurl.com/NHS-TransfusionVideo](https://www.tinyurl.com/NHS-TransfusionVideo)) describes why patients might need a transfusion and how blood is tested to reduce the risk of infection
- Patient information on www.blood.co.uk. This features information on blood transfusion including FAQ and alternatives to transfusion
- www.learnbloodtransfusion.org.uk - Module on consent



Any Questions?

Thank you for your attention 😊

