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| Blood transfusion consent audit instructions |
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**Background**

The Blood Matters Program assists health services to ensure that blood components and products are administered to patients appropriately and safely. The Australian Commission on Safety and Quality in Healthcare (ACSQHC), National Safety and Quality Health Service (NSQS) Standards emphasise the need to partner with consumers1. Under the Blood Management standard this includes actively involving patients in their own care, meeting their information needs and shared decision making.

Blood stewardship principles include the requirement that informed patient consent is implemented for all patients2.

Blood component and product transfusions are not without risk. Patients should be informed of the potential risks, expected benefits and any available alternatives/strategies to reduce the need for transfusion.

Informed consent is the process by which the patient is provided with information, advice and warnings about the treatment, risks, benefits, and alternatives. The process involves a two-way conversation with the patient, carer and/or medical treatment decision maker that takes into consideration their language and cognitive ability, giving them the opportunity to ask questions and make statements about what is important to them. Provision of written material is also recommended to supplement verbal information3.

**Aims:**

The aims are to identify if health service blood transfusion consent policies are:

* available, understood and practiced
* consistent with the Australian and New Zealand Society of Blood Transfusion (ANZSBT)/Australian College of Nursing (ACN) Guidelines for the administration of blood products 3rd edition (2019).

The blood transfusion consent policy document and subsequent practices should facilitate meeting the NSQS Standard for accreditation against action 7.03 of the Blood Management Standard.

**Objectives:**

To determine if:

* Blood transfusion consent policies and practices have improved since the similar audit in 2012.
* The health service transfusion consent policy aligns with the ANZSBT/ACN Guidelines for administration of blood products 2019.

Consent is undertaken prior to transfusion and all elements are completed, as per guidelines, for a valid consent.

**Method:**

The audit comprises two parts:

Part A – Audit of health service blood transfusion consent policy

Part B – Audit of blood transfusion consent practice

We request that health services complete both part A & B.

**Part A** – Audit of health service blood transfusion consent policy, may be completed at any time within the specified audit timeframe. This is an assessment of the health service blood transfusion consent policy to determine if it is in line with the Australian and New Zealand Society of Blood Transfusion (ANZSBT)/Australian College of Nursing (ACN) Guidelines for the administration of blood products 3rd edition (2019). Part A is to be completed once for each health service.

A health service blood transfusion consent policy may be a stand-alone policy, included as part of the blood transfusion policy or contained within an overall consent/refusal to treatment policy.

**Part B** – Audit of blood transfusion consent practice is to determine the rate and quality of transfusion consent. Part B is to be completed for up to **30 individual**, randomly selected transfused patients who received a transfusion between **1 July 2021 to 30 June 2022**.

The auditor should randomly choose up to 30 patients, that have received any fresh blood components (red cells, platelets, FFP, cryoprecipitate) on any day within the audit timeframe.

**Inclusions**: All patients receiving a routine transfusion of any fresh blood component.

**Exclusions**: Emergency transfusions. Transfusions given in the Emergency Department can be included if they are not emergency transfusions.

For best results please use Microsoft Edge or Chrome.

**Audit is open from 27 June – 12 August 2022.**

Data entry to be completed no later than 12 August 2022.

Data entry is electronic using Lime survey

Part A < [Consent Part A (limequery.com)](https://dhhsvic.limequery.com/996968?newtest=Y&lang=en) >

Part B < [Blood Matters: Consent Part B 2022 (limequery.com)](https://dhhsvic.limequery.com/584131?newtest=Y&lang=en) >

A data entry tool has been provided to assist in the collection of data prior to entry.

When entering data for part B, you may complete some of the 30 responses and return to add further patient data later, but you will need to have completed all questions for those patient episodes entered for it to save.

If experiencing problems entering data or if you have questions, please contact Blood Matters on 03 9694 0102 or email [bloodmatters@redcrossblood.org.au](mailto:bloodmatters@redcrossblood.org.au)

**Definitions:**

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| Term | Definition |
| Blood transfusion consent policy | A health service blood transfusion consent policy maybe a stand-alone policy, included as part of your blood transfusion policy, or contained within an overall consent to treatment policy. |
| Informed consent | Informed consent for blood transfusion means a documented dialogue has occurred between the patient and a prescriber, which includes:  – The reason for the proposed blood product transfusion.  – The nature of the proposed blood product transfusion.  – The risks and benefits of the blood product as well as the risks or consequences of not receiving the product.  – The availability and appropriateness of any other blood management strategies.  – An opportunity to ask questions.  – Use of a competent interpreter when the patient is not fluent in English.  – Use of written information or diagrams where appropriate. |
| Blood components | Refers to fresh blood components such as red blood cells, platelets, fresh frozen plasma, cryoprecipitate. |
| Blood products | Refers to plasma fractionated products such as immunoglobulins, albumin, clotting factors. |
| Emergency transfusion | A transfusion episode that is required to manage life-threatening bleeding or cannot be delayed due to risk of severe morbidity. |

Guidelines/Standards supporting the consent process:

1. Australian Commission on Safety and Quality in Health Care National Safety and Quality Heath Service Standards, Blood Management, Action 7.03 and 7.05.
2. Australian Health Ministers’ Conference – Statement on National Stewardship Expectations for the Supply of Blood and Blood Products – November 2010 <https://www.blood.gov.au/system/files/documents/nba-stewardship-stewardship-statement.pdf>
3. Australian and New Zealand Society of Blood Transfusion (ANZSBT)/ Royal College of Nursing (RCN) – ‘Guidelines for the Administration of Blood Products’ 3rd edition, revised 2019.