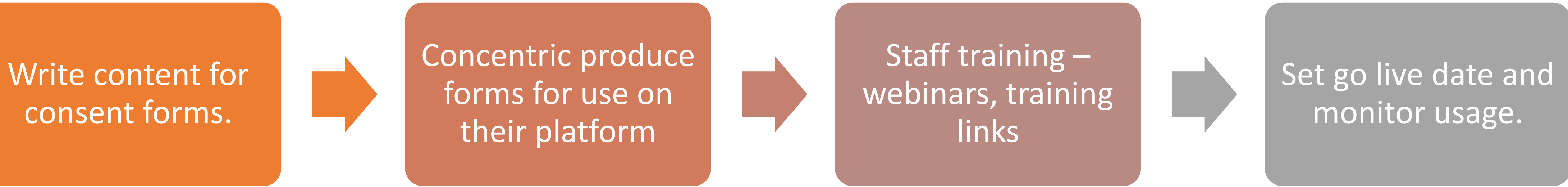


Introduction of Digital Consent for Gynaecological Surgery; A Review of the first year.

1. N Dixon, Locum Consultant Obstetrics and Gynaecology, Chelsea and Westminster NHS Trust
2. S Guha, Consultant Obstetrics and Gynaecology, Chelsea and Westminster NHS Trust
3. H Powell, Trainee Obstetrics and Gynaecology, Imperial College NHS Trust

Informed consent and shared decision making (SDM) are now cornerstones of modern surgical practice. The 2015 Montgomery ruling magnified the importance of an informed and personalised consent process. (Box 1)
Chelsea and Westminster trust moved to introduce digital consent in 2021. This poster outlines the roll out and uptake of digital consent for elective gynaecological surgery within the trust over the first 12 months (January 2022 – January 2023).
The platform used was ‘Concentric Health’. This is a UK company which has developed an SDM and consent tool which has been adapted to function within the NHS. Concentric is a web-accessible digital consent application that allows clinicians to provide tailored consent forms with risk profiles explained in suitable language and coupled with visual representations of risk. It also outlines alternatives to treatment and anaesthetic options. Patient information leaflets can also be attached to the consent form.
The expected benefits of digital consent are that the consent process will have increased transparency and will meet the expectations outlined by the Montgomery ruling. (below)

Rollout Process



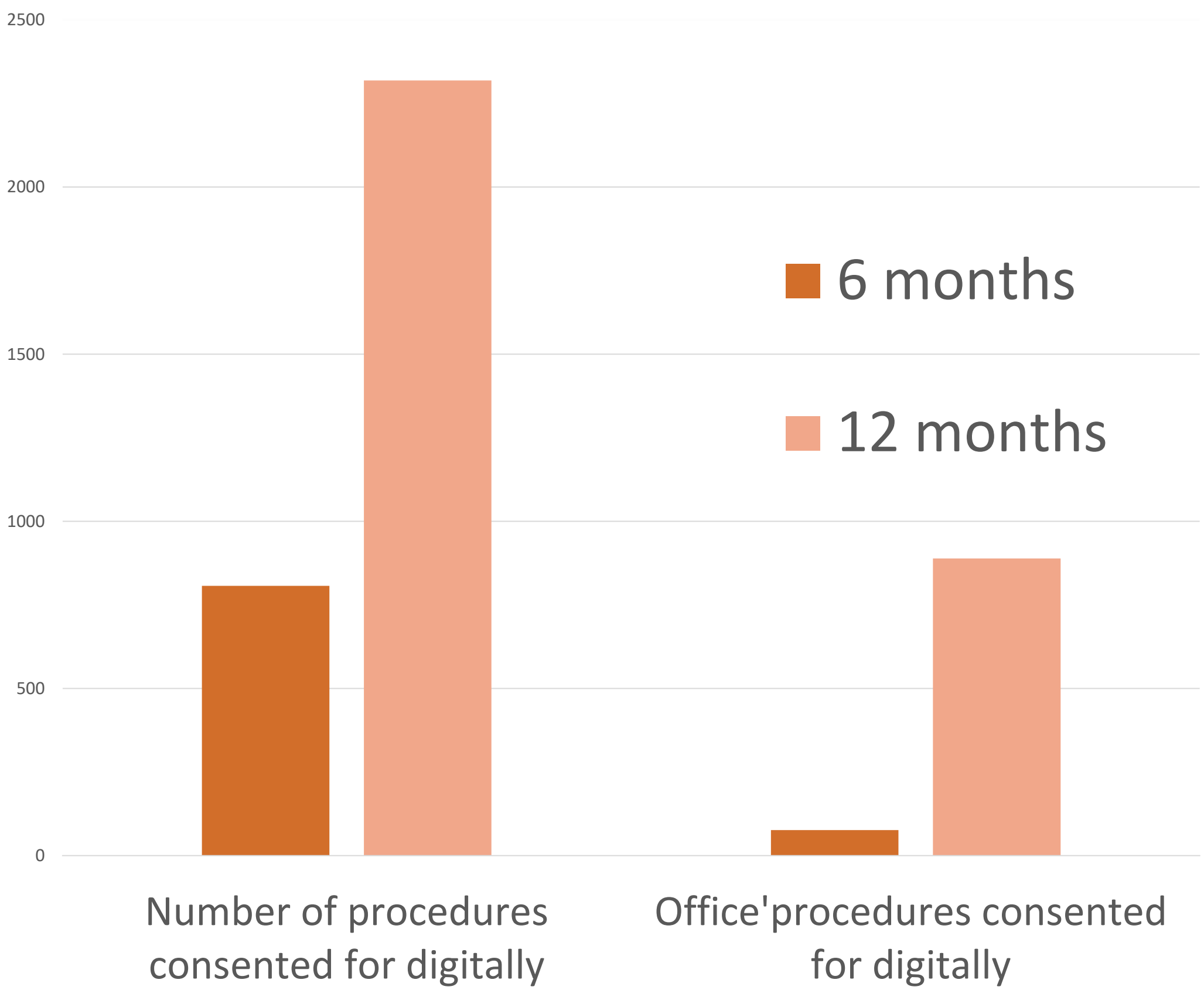
Box 1

- Montgomery 2015, Clinicians must;
- Outline treatment options, including risks and implications
 - Discuss alternatives
 - Discuss consequences of non intervention.
 - Ensure patients have access to high quality information to aid decision making.
 - Give patients time to reflect before making a decision.
 - Clear documentation.

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Usage data at 6 and 12 months



As evidence by above metrics, the uptake was excellent and continued to improve over the 12 months, especially for office procedures which saw a over 10 fold increase between 6 and 12 months.

Feedback

Staff



- Star Rating Digital consent **4.33** / 5 Handwritten Consent **3.28** /5
- 100%** Little or zero negative feedback from patients
 - 78%** Of clinician felt the patients found the system easy to use.
 - 88%** Of clinicians stated digital consent improved efficiency.
 - 44%** Of clinicians felt that concentric was difficult to use for WHO checklists.

Challenges

Although overall uptake and feedback from clinicians has been excellent we have had some problems which required significant work to overcome. Firstly was the incorporation of sensitive disposal (SD) forms for emergency and elective procedures involving pregnancy tissue. The current solution is that the SD form is included in the consent, however the digital consent form needs to be printed and sent with the specimen.

A lack of suitable IT equipment has also been a problem, the trust is now looking in acquiring tablets for use by clinicians and theatre staff to ease problems with access for consent review and signature as well as for use in theatre. This will also be a crucial component as we work towards roll out in Obstetrics, especially for emergency consent on the labour ward.

Conclusion

We have found roll out of digital consent in gynaecology to be straightforward with quick adaptation of staff to new process. The feedback from staff and patients has been excellent. We have seen a significant shift away from ‘on the day’ consent which is often rushed, with possible inadequate understanding for the patient, who may feel pressured to comply with proposed treatment without having enough time for reflection. However we have also found that the face to face discussions in clinic and on the day of the procedure are equally important. Digital consent should be seen as an additional tool in the informed consent process, not as a replacement of traditional consent methods.

Key Metrics

- 883** Total procedures consented digitally in first 6 months
- 4,091** Total procedures consented digitally in first 12 months.
- 69%** of elective gynaecological surgeries consented digitally in first 6 months.
- 93%** of elective gynaecological surgeries consented digitally in first 6 months.
- 56%** of patients consented over 24 hours before scheduled procedure.
- 95** Different gynaecological procedures performed.

Patients

- ‘Brilliant! Time efficient and easy to use and understand.’
‘I think it's good. I really liked it and appreciated having the time to read through everything and watch the videos.’
‘perfect’
‘Coupled with the preliminary discussion with the clinician prior to the emailed information, this seems to be a consenting process that is comprehensive and informative and hopefully will save clinician time too’
‘I like the idea of this if it came in advance of admission it would provide a good level of information. It was good to have the human contact with the Dr as well though’