

EXAMPLE PROJECT ON AUDITING THE CONSENT PROCESS IN ENDODONTICS

11.1 Background

Endodontics is a challenging and complex treatment modality that raises issues for risk management.

To complete endodontic treatment to a high standard requires technical ability and skill, however complaints arising may not exclusively relate to clinical situations and are often due to issues in patient management and communication factors.

To undertake an audit on consent it should be noted that three elements must be present for valid consent:

- The patient demonstrates capacity.
- Consent is given voluntarily.
- Information is disclosed to the patient necessary for them to make a decision.

11.2. Informed consent

“ An adult person of sound mind is entitled to decide which, if any, of the available treatments to undergo, and their consent must be obtained before treatment interfering with bodily integrity is undertaken “

Montgomery v Lanarkshire

<http://www.medicalprotection.org/uk/for-members/news/news/2015/03/20/new-judgment-on-patient-consent>

Clinicians must take reasonable care to ensure that patients are made aware of any material risks involved in recommended treatment and of any reasonable alternatives

Materiality of risk:

Nature of the risk.

Effect of the risk occurring.

Importance of the beneficial aim of the treatment to the patient.

The test of materiality is whether, in the circumstances of the particular case,

either; A reasonable person in the patients position would likely to attach significance to the risk.

or; The clinician is or should reasonably be aware that the particular person would likely to attach significance to it.

11.3 Aim

To measure the current standard of consent, regarding the provision of endodontic treatment against FGDP UK Standards, with the aim of identifying any shortcomings and subsequent learning, and action necessary to pursue constant improvement.

The primary benefit is to the patient who should enjoy a bespoke dialogue regarding their specific treatment and concerns, with the dentist allowing them to share in the decision and foster a positive working relationship including rapport and trust.

The audit should review:

The structure to support consent.

Reviewing the resources available to support consent.

The process to support consent.

Reviewing the disclosure to the patient in regards to discussed information that has been recorded in the patients clinical records.

11.4 The outcome

Reviewing the patients understanding of their received treatment in the format of a patient questionnaire.

When undertaking an audit it is necessary to set a standard against which you can compare yourself. This standard can be determined or aspirational, it can be **best practice standard i.e 100%**. This audit suggests that you determine your standard target.

When auditing the Process and the Outcome of consent in this audit it is suggested that you set a standard for comparison and measurement.

Method:

1. To audit the resources available to support the consent process.

Review four areas in your practice using the data capture sheet.
(Data Capture Sheet 1.)

2. To review the process used to support consent.

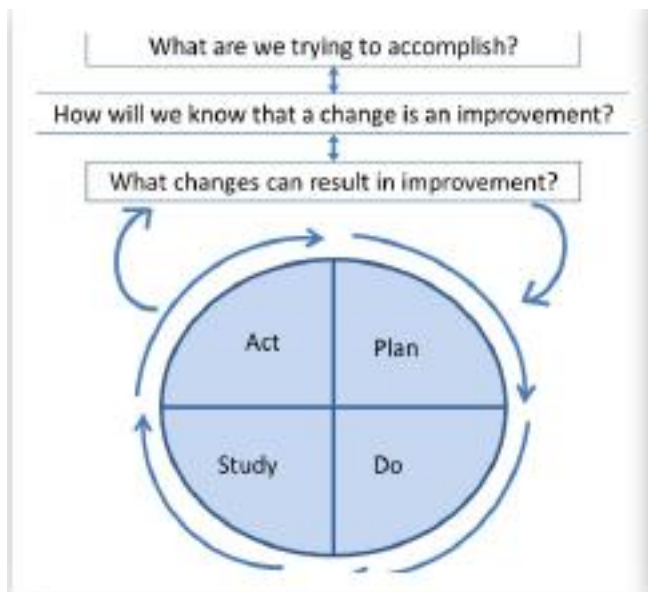
Select 10 random retrospective patients who have received endodontic treatment and collect information using the audit sheet .(Data Capture Sheet 2.) These patients might not have necessarily been treated by yourself however this is an improvement exercise for the team. Using the audit determination score system.

- 0- no recorded information.
- 1- Minimal discussion.
- 2- Comprehensive discussion.

Add the scores and calculate the percentages of positive scores.

Compare against the standard you set, make observations and consider how to make an improvement **utilizing you dental team.**

- Create an Action plan and Make a change.
- Set a re-audit date and re-record your results.
- Analyse your results and ask yourself should your change be **Adopted, Adapted or Abandoned.**



11.5 To review the Outcome of consent.

This audit will monitor the level of patient satisfaction with their treatment and the consent process.

Benefits of treatment discussed										
Material Risks of alternative treatment discussed										
Benefits of Alternative treatment discussed										
Consequences of no treatment discussed										
Cost £										
Details of follow up treatment										

Analysis of results.

Remember to use the audit determination key.

- 0- no recorded information.
- 1- Minimal discussion.
- 2- Comprehensive discussion.

This means that if scoring 2s for 10 patient maximum score is 20.
100% would be 20.

Provide your Actual score as a percentage.

Provide your Target score for comparison

Data Capture Sheet 3

Reviewing Outcome of consent process

WE VALUE YOUR OPINION.

We would like your opinion on our consent process.

The consent process is what we do to help you make a decision about whether to have treatment and which option to choose.

Now that you have completed your treatment with us, we would like you reflect upon your time when we discussed your treatment and answer the following questions.

	Yes	No			Comments
1. Did you have enough time to make a decision on your treatment options?					
2. Did we provide you with enough information on your treatment?					
3. Was the information easy to understand?					
	Very Good	Good	Fair	Poor	
4. How would you rate the end result of your treatment?					
	Yes exactly	Mostly	Only a little	Not at all	
5. Did your treatment proceed as expected?					

References.

1. Toy, A .2015. The Clinical Governance of Consent .*Primary Dental Journal* 4(1); 26-29
2. Patel.S, D'Cruz.L 2016 .Endodontic risk management: A Dento-Legal perspective . *Primary Dental Journal* 5(2) 24-28.
3. FGDP (UK) 2016 Clinical Examination Standards
4. GDC Standards.