Consent for Immunisation

The Challenging Process Of Informed Consent

There is no simple ‘one size fits all’ guide to obtaining consent for immunisation and the following are background and suggestions to assist individual practices in formulating their own ‘tailor made’ policy.

Consent

Consent is a defence to what otherwise would be the civil wrong of assault….(which is) trespass to the person" *(Staunton & Whyburn, 1993)*

The elements of consent

- Given freely, no undue influence or duress
- Must cover the act/procedure to be performed
- Legal capacity to give consent must exist

Informed decision-making for Consent

Obtaining informed consent is a three-part process.

1.Explanation and disclosure

A failure to provide a patient with relevant information about the procedure in question may expose a medical professional to an action in negligence.

Informed decision making for consent

The medical professional should ensure that patients are given appropriate information regarding:

- The need for the procedure;
- The way in which the procedure is to be undertaken; and
- All possible risks and side effects about which a reasonable person would wish to be informed.
  (This can include reasonable alternatives including risk and benefits of not having procedure.)

Informed decision making for consent

2. Ensuring that the patient understands what has been explained.

If the patient indicates that they have specific concerns, the patient should be given all necessary information relevant to those concerns that will enable an informed decision to be made.

Informed decision making for consent

3. Patient acceptance of risk and consent to proceed.

Documentation of the consent

The How

Explanation and disclosure

Written information on immunisation

- *Understanding Childhood Immunisation*
- *DHS Fact Sheets*
- *Comparison risk of disease vs immunisation*

translated if necessary

The How

Explanation and disclosure cont.

- Recommend ASVS
- Advise NIP options
- Pre vaccination assessment

The How

Ensuring that the patient understands what has been explained.

- Opportunity for parents to discuss concerns
- Further information if parent requests it

The How

Patient acceptance of risk and consent to proceed

- For immunisation, parental choices of vaccines to be given should be documented.
- Document who gave consent.

Consent for Immunisation given by parent/guardian

Handouts given to and read by parent /guardian	**Delete appropriate**
Understanding Childhood Immunisation booklet	**Yes/No**
DHS Immunisation Fact sheets	**Yes/No**
Comparison of Effects of Vaccines and Diseases	**Yes/No**

Discussion with parent/guardian

National Immunisation Program (funded)	**Yes/No**
Australian Vaccination schedule (unfunded)	**Yes/No**
Potential adverse effects	**Yes/No**
Pre vaccination Questionnaire	**Yes/No**

Parent/guardian choice

National Immunisation program only	**Yes/No**

Combination vaccine ***Insert Name***_____

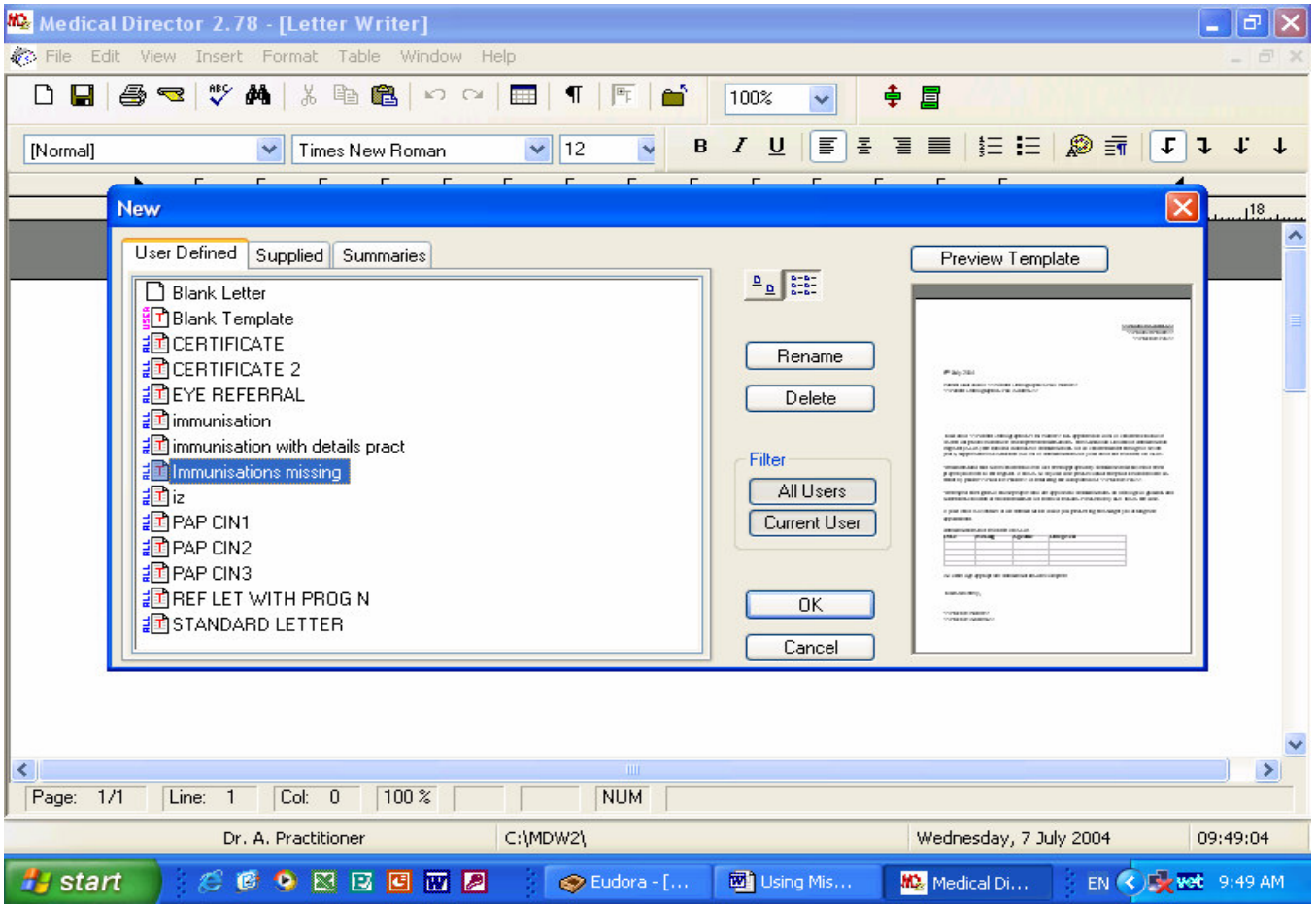
Other Choices ***Insert Name***_____

Consent given by ***Insert Name***_____

Possible Reactions to Immunisations given	**Yes/No**
Routine vaccination procedures followed	**Yes/No**
Documentation in Child Health Book/Personal Immunisation record	**Yes/No**

Using Consent for Immunisation Template In Medical Director

- In relevant patient file
- Click on File and then New and this screen should appear



Using Consent for Immunisation Template In Medical Director

- Double click on file Consent for Immunisation
- You should then have the template
- Delete relevant YES/NO
- Once letter is finished print and save to patient file

Myths and Facts About Informed Consent

Myth:

Informed consent is designed primarily to protect the legal interests of the medical professional.

Reality:

The purpose of the process is to protect the clients by providing access to knowledge that can help them make an informed choice.

Myths and Facts About Informed Consent

Myth:

The most important part of this process is signing the informed consent document.

Reality:

The focal point of this process is an ongoing interaction and discussions with the medical professional before, during, and after treatment. The consent document is designed to get this conversation started.

Myths and Facts About Informed Consent

Myth:

The medical professional knows best; he or she can tell the client whether or not they should consent to treatment.

Reality:

The medical professional is a valuable source of advice and information, but only the client can make the decision. The informed consent process is designed to help the client weigh up all of the information and make the right choice for themselves or their child.

Myths and Facts About Informed Consent

Myth:

Once the client signs the consent form, they have to have the procedure.

Reality:

Even after signing the form, the client is free to change their mind and decide not to have the procedure. They also have the right to discontinue treatment at any time for any reason, without prejudicing access to other treatment.