

Documentation of Consent for Procedures or Interventions during COVID-19

<p>Site:</p> <ul style="list-style-type: none"> • Environment <ul style="list-style-type: none"> ○ Island-Wide ○ All Care Environments 	<p>Scope:</p> <ul style="list-style-type: none"> • Island Health Staff, Care Providers and Affiliated Individuals • Indications: When direct physical contact with the patient is impossible due to droplet precautions, isolation, or other circumstances related to COVID-19 • Exceptions: No exceptions
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Need to know:

- Due the Infection Control Precautions with COVID-19 (see link below) there are temporary changes to the documentation of consent in circumstances where documentation (e.g.: a consent form) is usually signed by the patient/ substitute decision maker (SDM)
- Consent legislation does not detail how consent is to be recorded; Clear documentation written in the patient record is of primary consideration.
- Island Health Clinical Documentation Policy 16.1.3P applies to clinician and providers
- Due to the possible transmission of COVID, the recommendation is to **not** take clipboards, paper, and charts into patient rooms when Infection Control Precautions are in place.

Need to do:

- Signed consent should be obtained when required through established Island Health processes, unless the exceptional circumstances above (e.g.; droplet precautions due to infection risk) are present.
- If it is assessed that there is significant risk (e.g.: a patient is on droplet precautions, is on isolation, direct physical contact is impossible/limited), the appropriate individual needs to have a verbal consent discussion with the patient or SDM. This discussion then needs to be documented appropriately in the patient record.
- It is strongly recommended that documentation take place within the patient’s progress notes include at a minimum:
 - The time and date
 - Specific procedure
 - Explanation of risks

Owner: Professional Practice

Date/Time Issued: 2020-May-08/1454

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COVID-19: Guideline

- Questions or comments
 - Consent provided or refused
 - Name of person providing verbal consent
- In order to ensure that other members of the team responsible for verifying consent are aware, the Provider should also make a note on the consent form indicating that consent was obtained verbally due to infection risk and to refer to the progress note by date where it is recorded.
 - Providers with specific questions about individual cases are advised to consult with Canadian Medical Protective Association, Canadian Nurses Protective Society or British Columbia Midwives Protection Program as appropriate.
 - In circumstances where the patient is not able to make the decision himself or herself then the processes outlined in applicable standards should be followed.

Persons/Groups Consulted:

- Health Information Management
- Learning and Performance Support
- Risk Management and Legal
- Professional Practice
- Medical & Academic Affairs

Resources

Infection Control Precautions

<https://intranet.viha.ca/covid-19/Pages/default.aspx>

Obtaining Consent

https://intranet.viha.ca/departments/advance-care-plan/Pages/obtain_consent.aspx

Consent for Healthcare for Minors

<https://intranet.viha.ca/pnp/pnpdocs/consent-health-care-minor.pdf>

Medical Orders for Scope of Treatment

<https://intranet.viha.ca/departments/advance-care-plan/Pages/MOST.aspx>

Guide for Serious Illness Conversations with high risk COVID-19 Patients

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<https://intranet.viha.ca/departments/advance-care-plan/Documents/guide-for-conversations-with-covid19-patients.pdf>

Policy - 16.1.3P Island Health Clinical Documentation Policy

<https://intranet.viha.ca/pnp/pnpdocs/clinical-documentation-policy.pdf>

Policy – 522 Documentation of Informed Consent

<https://intranet.viha.ca/pnp/pnpdocs/documentation-informed-consent.pdf>

Policy – 9.1.2 Consent to Health Care and Advanced Care Planning

<https://intranet.viha.ca/pnp/pnpdocs/consent-health-care-advance-planning.pdf>

Procedure – 4.1.7 Obtaining and Documenting Consent for Surgical Procedures

<https://intranet.viha.ca/pnp/pnpdocs/obtaining-documenting-consent-surgical-procedures-cdh-vgh-rjh-sph-nrgh.pdf>