

Deciding With Me, Not For Me

Shared Decision Making in Transfusion

Charis Joyce, Transfusion Practitioner, Better Blood Transfusion Team, Wales
On behalf of the Option Grid Collaborative

Shared Decision Making



- Why is it important?
- Who is involved?
- How is it being done?
- What's next?

Why is it Important?



- Healthcare is changing
- Patient's Rights
- Informed Consent Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO)

What is an Option Grid?

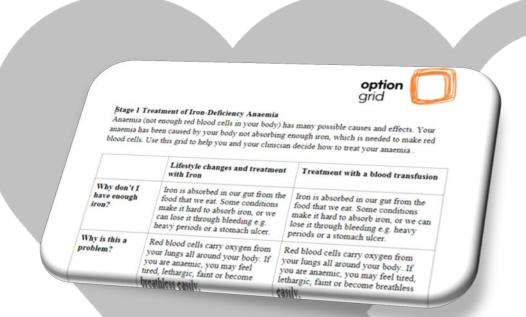


- A tool to enhance the discussion of treatment options between clinician and patient
- Can be used alongside other written material
- Evidence based Frequently Asked Questions (FAQs)
- One side of A4
- Reading age of 10 12 years
- Egs, Breast cancer surgery & Treatment for high cholesterol http://www.optiongrid.co.uk/

Who is Involved?



- MAGIC Programme
- NICE
- Option Grid
 Collaborative





Identify key issue with Principle Investigator



Principle Investigator =

Professor Glyn Elwyn

BA MB BCh MSc FRCGP PhD

Key Issue =

Stage 1 - Blood Transfusion for Anaemia

Comparing not having a blood transfusion and having a blood transfusion

Stage 2 – Iron Tablets or Drip Treatment

- Comparing treatment with oral iron against treatment with IV Iron



Identify key issue with Principle Investigator



Identify Managing Editor

Managing Editor = Myself!



Identify key issue with Principle Investigator



Identify Managing Editor



Identify 'Collaborative' and complete 'Collaborative Agreement'

Collaborative:

- Marie-Anne Durand, University of Hertfordshire
- Ann Benton, Welsh Blood Service
- Karen Shreeve, Welsh Blood Service
- Paul Barr, Queen's University, Belfast
- •Karen Bailie, West of Scotland Transfusion Centre
- Peter Thompson, NHS Blood and Transplant
- •Alison Malcolm, Patient Representative

Collaborative Agreement:

- •MUST be agreed to in writing before starting project.
- •Sets out the 'rules' on funding, support, evidence base of FAQs, reading level, format, quality assurance, publication and intellectual property.



Identify key issue with Principle Investigator



Identify Managing Editor



Identify 'Collaborative' and complete 'Collaborative Agreement'



Where it starts getting complicated!

Clarify and agree relevant FAQs



- Remember:
 - One side of A4
 - Reading age of 10-12 years

- Evidence Document then FAQs??
- FAQs then Evidence Document??

Questions



- Eg...
 - What's wrong with me?OR
 - Why am I feeling unwell?

- What are the risks?OR
- Can it harm me?

Answers

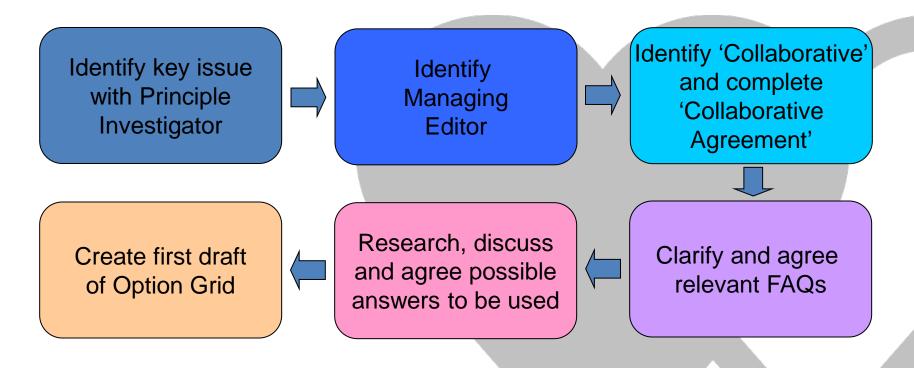


- Eg...
 - Q. How can it be treated?
 - If you are feeling very bad, and your anaemia is affecting you a lot, you may need a blood transfusion

OR

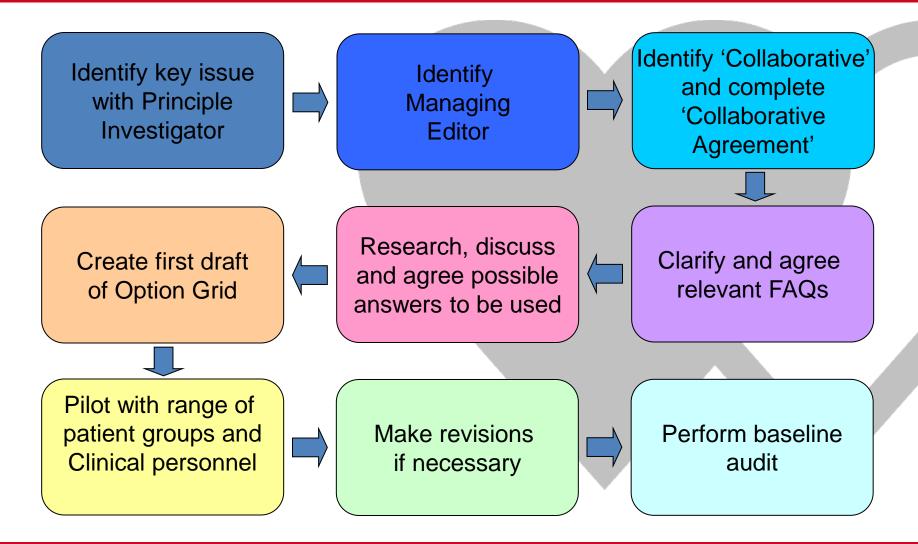
 If you are feeling very bad, and your anaemia is affecting you a lot, a blood transfusion may make you feel better quicker





Where we are up to!







Agreement by Collaborative and sign-off by Lead

Implementation/ Publicity plan

Option Grid published on website

What's Next?



- Roll out Where?
- Re-audit practice at 6 months to assess impact
- Review and update according to MAGIC Programme schedule

Challenges & Perceived Benefits



- Evidence Base very little published material for blood transfusion
- Hard to explain transfusion in basic language
- Practicalities of coordinating the group

- Simple document that leads clinicians to evidence base
- Helps patients frame the questions
- Supports informed consent process

Your Thoughts...



- Where would it be suitable to use it in your areas?
- Will it actually help aid discussion between Doctor and patient?
- What other treatments would benefit from an Option Grid?



Thank you for listening!

Any questions?





Stage 1 Treatment of Iron-Deficiency Anaemia

Anaemia (not enough red blood cells in your body) has many possible causes and effects. Your anaemia has been caused by your body not absorbing enough iron, which is needed to make red blood cells. Use this grid to help you and your clinician decide how to treat your anaemia

	Lifestyle changes and treatment with Iron	Treatment with a blood transfusion
Why don't I have enough iron?	Iron is absorbed in our gut from it food that we eat. Some conditions make it hard to absorb iron, or we can lose it through bleeding e.g. heavy periods or a stomach ulcer.	leo Iron is absorbed in our gut from the food that we eat. Some conditions make it hard to absorb iron, or we can lose it through bleeding e.g. heavy periods or a stomach ulcer.
hy is this a oblem?	breathless easily	Red blood cells carry oxygen from your lungs all around your body. If you are anaemic, you may feel ured, chargic, faint or become breathless