

# Negligence

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**Failure** to take proper care over something.

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In recent times, clinical negligence claims against National Health Service hospitals have doubled, with 8% of claims being made due to “failure to warn/informed consent.” This study aimed to assess the current compliance of the neurosurgical division within a large tertiary neuroscience center with the national legal framework and professional guidelines around the issue of surgical consent and to develop strategies to improve the consent process.

**Methods:** Electronic patient records (EPR) were accessed to collect demographic data and information regarding the surgical procedures. Telephone questionnaires were carried out. Neurosurgical registrars were interviewed. The author met with the trust's Legal team, the neuropsychology lead, and the trust's consent lead.

**Results:** Fifty-eight patients were included in the analysis. Of the respondents to the questionnaire, 98% felt that they were adequately informed during the consent process. When consenting patients, all registrars felt that they explained the reason for the procedure, detailed benefits, and major risks, including uncommon and rare risks. However, 50% admitted to not specifically discussing the postoperative recovery time or alternatives. Only 15% admitted to documenting on the EPR or through a letter to the patient's General Practitioner.

**Informed consent** is a delicate moment of communication between a clinician and the patient. Regular training and good communication skills help staff to focus on the most relevant aspects of consent, which should be delivered in an appropriate environment and with family support. Audio-visual aids can support the process but do not replace good communication <sup>1)</sup>

<sup>1)</sup>

Colombo F, McLeod R, Ravindranath Nambiar R, Maye H, Dickens S, George KJ. Informed consent in neurosurgery - Evaluation of current practice and implementation of future strategies. Surg Neurol Int.

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