



Policy and Procedure - Patient Consent to Treatment

Policy Statement:

Patients have a fundamental legal, ethical and moral right to determine what happens to their own bodies. This is a fundamental aspect of the proper provision of dental care. Seeking consent is also a matter of common courtesy between the Practice and its patients.

Trust is a key factor in our relationship with our patients. To establish this, trust our employees respect the autonomy of our patients and recognise their right to decide whether or not to undergo treatment. Our patients are given sufficient information, in a way that they understand to enable them to exercise their right to make an informed decision about their treatments. Our starting point is to find out what our patients ought to and want to know about their condition and available treatment.

Patients have a right to information about their condition and the treatment options available to them. The amount of information we give each patient will vary depending on the nature of the condition, the complexity of the treatment, the risks associated with the treatment or procedure and the patient's own wishes. When it is believed that the patient has been given appropriate and adequate information it is for the patient (parent, guardian, advocate or carer) not the healthcare professional to determine what is in the patient's best interest. However, a healthcare professional can recommend a treatment or course of action to the patient but no pressure should be put on the patient to accept their advice or suggestion for treatment. Where there have been difficulties in making a decision it is appropriate to document such discussions and the rationale for final decision.

The Human Rights Act 1998 came fully into force throughout the UK in October 2000. The Act requires all public authorities, including healthcare professionals to act in accordance with the rights set out in the Act.

The following articles are relevant to this Consent Policy:

- Article 2 – Protection of right to life;
- Article 3 – Prohibition of torture, inhuman or degrading treatment or punishment
- Article 5 – Right to liberty and security
- Article 8 – Right to respect for private and family life
- Article 9 – Freedom of thought, conscience and religion

Whilst the implementation of the Human Rights Act has not created a major change in practice for healthcare professionals, the Act has been used to challenge some medical decisions. It is therefore essential that decisions taken, both about individual patients, take account of the Act, are transparent and can withstand scrutiny. Accurate and detailed recording of both the decision

and the decision-making process also take on added importance. (BMA 2007) –The impact of the Human Rights Act on medical decision-making

Aim of the Policy:

- To ensure that patients retain their autonomy. They are treated with respect and dignity and their rights as individuals are protected.
- To meet the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3) (as amended) (Regulation 11)
- To ensure that consent is obtained from the patient before starting treatment. The relevant options and any costs associated with the treatment to be explained as part of the Consent process
- To ensure that the patient's consent remains valid at each stage of investigation or treatment
- To ensure that the patient (or their representatives) understands the decisions they are being asked to make

General Dental Council – Standard 3 – Obtain Valid Consent

Patients expect to be asked for their consent to treatment before it starts:

- Obtain valid consent before starting treatment, explaining all the relevant options and the possible costs.
- Make sure that patients (or their representatives) understand the decisions they are being asked to make.
- Make sure that the patient's consent remains valid at each stage of investigation or treatment.

Policy:

Within our practice we treat patients with respect and recognise them as an individual. We are aware that every person has a right to make their own decisions and any patient over the age of 16 it is assumed that they can make their decisions independently without fear of restriction or loss of free will. If there are any reasons to believe that the individual lacks capacity, an assessment of capacity to consent will be conducted and recorded in their notes. The requirements under the Mental Health Act 2005 will be adhered to.

We recognise that patients have the right to refuse advice or treatment.

When patients are provided with information relating to their treatment, we will make sure that the verbal information is followed up with written and pictorial information to ensure that the patient and their representatives fully understand the diagnoses, investigations treatment, timescale and any cost implications.

This Policy relates to all patients receiving care through our NHS Contract and Private patients. It also applies to all our employees working within a clinical environment providing care and/or treatment to patients.

What is consent?

Consent is a process rather than a one off decision. The steps in the process include discussions with patients, the giving of verbal and written information and the explanation of risks and benefits. All of these steps are formally documented. A patient is properly informed about the risks, benefits and consequences of any proposed treatment and that of possible alternatives before signing, a consent form. A fully informed patient is less likely to have cause to complain or to resort to litigation. A signature on a consent form is normally the concluding part of the consent process. It is important to realise that if the patient has not been given appropriate information then consent may not be valid despite their signature on the form. Consent forms are evidence of a process not the process itself.

Consent is the voluntary and continuing permission of the patient to receive a particular treatment or procedure based upon adequate knowledge and understanding of:

- The purpose
- The nature
- Any likely effects
- Any significant risks of that treatment including the likelihood of its success and outcomes
- Consequences of either no treatment or alternative treatment

Who should obtain Consent?

It is the responsibility of the competent person providing the treatment, to discuss it with the patient and provide any information necessary to enable the patient's understanding and to obtain consent.

Whoever is seeking a patient's consent and ensuring the completion of the consent form should:

- Have sufficient knowledge of the proposed investigation or treatment (including knowledge of the risk involved)
- Act in full accordance with this Consent Policy and available professional guidance

Regardless of who has provided the information and obtained consent, all discussions and consent should be recorded in the patient's records. It remains the responsibility of the person performing the procedure to ensure:

- That the patient has been given sufficient time and information to make an informed decision
- That all the other requirements of this Consent policy have been met

Where a patient has consented for treatment and/or investigation they have the right to withdraw consent at any time. This is inclusive of where a patient has given consent to a course of treatment and is partly through the treatment.

Practice Procedure when obtaining consent from a patient

- Information is given to the patient concerning their proposed treatment, including risks and alternative treatments
- This information is given in a way that patients understand and this understanding is checked
- The patient is given a clear indication which treatment is provided under the NHS, and which is not
- The patient knows how much treatment will cost, and has a written Treatment Plan which is adjusted if treatment alters part way through
- Consent is checked with the patient at all stages, not just at the beginning
- Communication is assured, through identification of communication need at the first visit to the Practice and provision of support to meet the patient's needs
- The patient is given time to agree to treatment and is not pressurised in any way
- The clinical staff will respond to questions concerning treatment at any stage
- The patient must make the decision
- Everyone is aware that the patient can refuse consent at any point. If this happens, the decision is respected. Information however may be given as to what refusal may mean in terms of risk
- Consent is taken from every patient for every treatment

Records for clinical activity

- Evidence of valid consent to treatment is obtained and is recorded in the patient's notes.
- The record contains evidence of the information given to the patient and or their representative about the reason for and nature of the treatment.
- Evidence is recorded relating to the information leaflets given to a patient to support their communication needs about different treatment and what they involve.
- We record the information relating to the discussion with the patient and their views before the treatment starts
- We record the information relating to the options available and the advantages/disadvantages of each option if symptoms are not improving
- A record of the information discussed with the patient on Information Sharing and Confidentiality is maintained within the patient's records and where it is agreed that the information of a child can be shared with a parent – the consent to share information is evidenced within the patient records.

Training:

Training is included in the induction training for all new employees. Updating and knowledge testing of understanding this Policy is conducted at least annually.

Training includes:

- Legislation relating to Consent
- The general principles of consent
- What happens before the age of consent and what can be done when consent is refused?
- It also looks at consent in the case of people with learning difficulties,
- The needs of vulnerable people and guidance for employees working with them
- Policies and procedures associated with consent for examination, investigation or treatment