

THE MEDICAL PRACTICE AT 48 WIMPOLE STREET

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PRACTICE POLICY ON CONSENT FOR TREATMENT

- Every patient over the age of 18 (and most 16 – 17 year olds as they are treated as adults) is assumed to have the capacity to decide whether they consent to having medical treatment or not, unless they are known to be unable to understand medical information which has been presented clearly
- Consent can last for an indefinite time but any new information must be passed on to the patient so as to allow to patient to reassess their situation
- No one else is allowed to consent to the examination or treatment of an adult who is capable of making a decision

When a patient does not have the capacity:

- If a patient's choice appears irrational and is not, in the doctor's view, in the patient's **best interest** all the information should be reviewed again with the patient to identify any areas where they require more information
- If a patient's capacity to make a decision requires assessment then professional guidance would be sought from the BMA. The High Court can also give ruling on these matters
- When a patient has difficulty retaining information or is not fully competent to make a decision we give as much assistance as possible for them to reach an informed decision and any decisions made while they were competent recorded at any intermittent stages before treatment is started
- A mentally incapacitated patient's ability to make an informed decision must be assessed first and if they lack the capacity to decide the doctor can carry out the investigation or treatment, including for their mental disorder, as long as they comply. If they do not comply treatment can still be carried out under the guidelines laid down by the Mental Health Act 1983 and the Code of Practice of the Mental Health Commission.

Living wills:

- A patient who has lost capacity to consent or refuse treatment may have made a 'living will' or 'advance directive' which will be applied. This cannot be overridden
- The living will is stored electronically in the patients clinical records with an automatic prompt

Children:

- Children under 16 have to show that are competent to give consent
- A child's capacity to decide to consent of refuse treatment is assessed before any action is taken
- The child must be able to understand the type of care and treatment and consequences of non-treatment presented in a clear manner
- When a competent child refuses treatment, a parent or guardian or court may authorise investigation or treatment
- When a child lacks the capacity to consent, consent can be given by someone with parental responsibility of the court and must be excised keeping the child's welfare and best interests as paramount

References: General Medical Council 'Seeking patients' consent: the ethical considerations'
Department of Health 'Reference guide to consent for examination or treatment'
Medical Protection Society: Consent – A complete guide for GPs