



Obtaining Client Consent Policy

Background

In obtaining consumer consent for the collection of personal and sensitive information Healthy Living NT (HLNT) broadly specifies the use of the information to be:

- Provision of education and information services
- Reporting back to health professionals (where required)
- Use in non-identifiable statistics for reporting to funders and for internal service/program evaluation (internal and externally contracted services)
- Consent may also apply to individual procedures or activities

Aim

Consent is a client's permission to receive education:

- Diabetes services
- Cardiac services
- Nutrition services
- Health Promotion Programs

This policy aims to aid health professional staff when obtaining client consent.

Policy Statement

HLNT is legally required to obtain client consent prior to providing services. It is the health professionals or program leaders responsibility to ensure that a client is provided with sufficient information to understand all benefits and possible risks or consequences when accessing services offered by HLNT. It is for the client to determine what is in their best interest and make a decision about their consent or refusal to receive proposed services. HLNT staff should not seek to coerce or pressure a client into providing consent.

Scope

This policy relates to all clients accessing Healthy Living NT education services and applies to all staff providing services to clients on behalf of HLNT. This policy also applies to third party providers whilst conducting business with or for HLNT.

What is Consent?

Consent in the context of health care refers to a client agreeing to receive a form of treatment they have discussed with their health professional. As HLNT is an education service, medical treatments are generally not performed. HLNT staff still need to seek client consent prior to providing services.

There are three types of consent:

Implied	where a client indicates their agreement through their actions, e.g. a client holds out their arm to allow for a blood glucose level test.
Verbal	a client clearly expresses their consent to a procedure, e.g. 'Yes, you can take my blood pressure.'
Written	the client signs a declaration of consent on a document.



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The most common way of obtaining client consent is written with the client signing a consent form. Written consent however may not always be considered valid despite their signature on the form. Consent is valid if it is:

- **voluntary** – the client alone makes the decision to consent or not to consent and should not be coerced or pressured by staff
- **informed** – the client was provided with sufficient information and has acquired an understanding of their condition/diagnosis and benefits and risks of proposed health care options/treatment
- given by a client with legal **capacity** to consent – e.g. a person under the age of 18 does not have legal capacity except for some special circumstances. Capacity may also be uncertain due to an illness or substance abuse.
- **current** – consent is an ongoing process and change in circumstances require review of previously received client consent

How to obtain consent

It is mostly the health professional’s and program staff’s responsibility to seek valid consent from a client. This involves providing the client with sufficient information regarding proposed education services or activity programs and explaining benefits and risk. When obtaining valid consent the following must be considered:

- the client’s knowledge base
 - literacy skills
 - English as a second language
 - Western health literacy
- effective choice of communication
 - verbal and/or written
 - interpreter services required
- awareness of cultural sensitivities
- providing sufficient information to ensure an informed decision
- verifying a clients understanding

All discussions should be recorded regardless of client consent. Where the clients consent has been obtained it is important to remember that they have the right to withdraw their consent at any time. This includes clients having partially completed a course or program at HLNT.

Remote/External Services NOTE:

HLNT is contracted to provide education to external clinics in remote locations. This policy does not directly apply to these services and HLNT consent forms are not used for Remote Services unless special circumstances apply. HLNT staff are considered a third party provider at external clinics and their policies apply. It is however expected that HLNT staff collect verbal consent from clients when providing remote services and act according to best practice guidelines.

Related documents:

- *HLNT Privacy Policy*
- *Client Rights and Responsibilities*
- *Consumer Charter*
- *Obtaining Client Consent Policy*

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