

Endorsed By:	Chief Executive Officer	Document Owner:	Chief Clinical Governance & Experience Officer
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1 Preamble

DPV Health provides clients with access to a wide range of services related to their health and wellbeing. It is the responsibility of DPV Health employees to gain the appropriate consent of the client as part of the client's engagement with a DPV Health service or program. All employees are responsible for understanding and abiding by the relevant consent requirements. This policy outlines confirms situations where gaining consent is necessary.

2 Policy Statement

All employees at DPV Health must be aware of their responsibilities and duties of care regarding consent.

A simple workflow of understanding adult consent can be viewed at the [Office of the Public Advocate](#), or appendix 1 below.

The Health Records Act 2001 is the guiding legislation which outlines the legal requirements for obtaining and recording a client's consent as part of their engagement with a health service. Responsibility for ensuring that the appropriate consent has been discussed and obtained is primarily the responsibility of the employee providing direct support to the client and taking responsibility for the management of the client's health record. These employees are referred to as a Key Worker, Practitioner and/or Clinician at the individual program level.

DPV Health recognise there are a wide variety of consents that may need to be obtained over a client's journey to ensure a smooth healthcare experience and to ensure their health information is being used only for the purposes they have agreed to.

- For consent to be provided, it must be both valid and informed, even in cases where consent is implied or provided verbally.
- All consents must be recorded on a client health record, even where consent is provided verbally.

2.1 Valid Consent

For a person's consent to be deemed valid, it must be:

- **Voluntary:** People must have genuine choice and control over decisions related to consent. Consent must be freely given by the person.
- **Specific:** Consent should be specific to a particular purpose. Consent is not all encompassing.
- **Current:**
 - Verbal and written consent are considered valid for 12 months from the date obtained, unless otherwise stated.
 - All consent, including implied consent, will re-inform people every 12 months, or when conditions impacting the consent significantly change (e.g. change in information database holding personal information).
 - All consents can be withdrawn or changed by the client. Any change or withdrawal of consent must be recorded in the Client health record.
- **Competent/Given by a person with the capacity to do so:**
 - The person giving consent must be competent to provide consent, otherwise consent must be obtained from a recognised guardian or authorised decision maker.
 - Competency to provide consent may be impacted by alcohol and other drugs.
- **Informed:** Individuals must be appropriately informed about what they are consenting to. Refer to section 2.2

2.2 Informed Consent

- Any type of consent obtained should be fully explained to the client and/or decision maker so they are aware how their information may be used or what is going to take place.
- Before providing DPV Health with any personal or sensitive information, clients must be informed how their information will be handled and possibly used. The following points are to be communicated:
 - All personal and sensitive information collected by DPV Health is subject to the Health Records Act 2001 and will be treated as a health record.
 - Health Record information will be kept securely by DPV Health and only accessed by people with a lawful reason to do so.
 - Some programs funded by state or federal governments may require us to send through certain information to these bodies in order for you to receive a service.
 - You may choose to decline to share information (i.e. remain anonymous), however this may limit the services or support DPV Health are able to offer you.

2.3 Consent to Data Collection and Storage

- Clients must consent to their personal and health information being collected and securely stored in order to receive a service from DPV Health.
- Services can be provided where a client chooses to remain anonymous, or not provide their consent for personal and health related information to be collected, used and stored.
- DPV Health's Privacy Policy details how data is collected, used and stored appropriately in line with the Australian Privacy Principles and Health Privacy Principles guidelines.
- DPV Health consider continued agreement to receive services as implied consent for data collection and storage.

2.4 Consent to Refer

- Consent to refer to another health service (within DPV Health, or externally) requires consent to be gained from the referring clinician.
- Consent to refer can be obtained verbally or in writing.
- Consent to refer must be recorded and provided to the service receiving the referral.

2.5 Consent to Share Personal and Health Information

- Consent must be gained in order to share personal or health information with a related DPV Health service, an external service or a third party including family members etc.
- Consent to share personal and health information is not required for a legal guardian.
- Consent to share must be obtained in writing and can be altered at the client / guardian's request at any time.
- There are limited exceptions to this requirement, as guided by information sharing legislation aimed at protecting an individual's safety. Refer to the Exclusions listed below (section 4).

2.6 Consent to Participate

- Consent to participate provides evidence of an informed decision for a person to participate in a service or activity hosted by DPV Health.
- Some clients may access services involving physical activities such as swimming or exercise, or participate in community outings, social networks or focus group conversations. Information about the activity is to be provided so the client can make an informed decision; however consent may be implied, verbal or written depending on the circumstance.
- DPV Health's community engagement and participation activities are required to obtain informed consent to participate. This may be supported by a confidentiality agreement (depending on the nature of the engagement).
- Common community engagement related activities include:
 - Consultations (interviews, focus groups, surveys etc.)
 - Codesign workshops, project teams
 - Service evaluation workshops, project teams

- Community Advisory roles
- Consumer Representative roles

2.7 Consent to Treatment

- By attending our sites and engaging with our services, consent to treatment is implied, but not all-encompassing. In the event of any invasive procedure, course of therapy or treatment that contains any element of risk to the client, the attending clinician/physician or medical/allied health professional must gain valid and informed consent to treatment from the client.
- Consent to treatment must involve the provision of information and a discussion of planned interventions, potential outcomes and potential risks involved.
- Consent to treatment must be recorded and can be withdrawn at any time by the client.

2.8 Consent to record, store and share digital Images

- Consent to record, store and share digital images is required for any images containing clients (or clients referred) to a DPV Health related service or in attendance at an event hosted by DPV Health.
- Where a digital image is taken to support a clinical assessment or treatment (e.g. photo of a wound), the digital image should be recorded and stored on the Client Health record.
- Depending on circumstance, this may be implied consent (attending a DPV Health function), verbal consent (obtained when taking the photo) or written consent (signing a form for photos taken during service delivery). Events where implied consent is being applied must acknowledge that photos or images will be used for this purpose and provide the opportunity for people to “opt out” and not have their images used.

2.9 Consent for Marketing

- Consent for DPV Health to use obtained contact details to communicate with people around new products, services or opportunities to participate in focus groups, feedback or discussion.
- All marketing related communications must include an “opt out” link or contact instruction with an opt out register maintained by the Marketing team. Client’s that have chosen to “opt out” must only be contacted for reasons directly relating to the provision of service.
- DPV Health is committed to collaborating with service user for the purpose of improving services and will offer clients the ability to be contacted and participate at the level they wish to. DPV Health collects the following marketing consents:
 - New products & services (opt out)
 - Experience Surveys (opt out)

2.10 Consent to Research

- If any personal or health information is to be used for research purposes, including medical images, proper and appropriate consent must be gained.

When asking for consent, these elements must also be considered:

- People from culturally and linguistically diverse backgrounds may lack understanding (be it cultural or linguistic) surrounding referrals, procedures and due process. This can be mitigated by ensuring that a translation service has been offered / recommended / organised in order to gain consent.
- Religious or cultural beliefs: consent can be refused on religious or cultural grounds and this must be respected.
- Telehealth: prior to any telehealth appointment, consent to participate must be gained. In the event of an emergency, consent does not have to be gained.

3 Target Audience

This policy applies to:

- Employees
- Volunteers
- Students including clinical students
- Contractors

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4 Exclusions

In the following instances informed consent is not required:

- Emergency treatment
 - Mandatory reporting obligations or information sharing schemes where there is an assessed risk to a child/persons wellbeing or safety.
 - Where a valid refusal of treatment (Advanced Care Plan) is in existence
- Treatment mandated by law, such as:
 - Involuntary patient for mental illness under the Mental Health Act 1986
 - Taking of blood samples from involved parties in a motor vehicle accident under the Road Safety Act
 - Orders made by the Chief Health Officer under Division 2 of Part 8 of the Public Health and Wellbeing Act 2008

5 Role & Delegations

Role	Responsibilities and Accountabilities
Executive Management	<ul style="list-style-type: none"> ✓ Set organisational expectations around consent practice and ensure that consent practice is understood. ✓ Review client file audit information on a regular basis to ensure any non-conformance with this policy is addressed in a timely fashion.
Team Leaders and Line Mangers	<ul style="list-style-type: none"> ✓ Undertake regular audits and reviews of client record information to ensure all consent is current and accounted for. ✓ Support staff with identifying if a particular consent is required for an activity or service to proceed.
Marketing Team	<ul style="list-style-type: none"> ✓ Maintain a system identifying clients that have “opted out” of receiving marketing communications, or participating in experience surveys.
Teams hosting community engagement activities	<ul style="list-style-type: none"> ✓ Maintain a system identifying people who are interested in, or participate in, service coproduction activities (e.g. focus groups, community advisors or consumer representatives etc).
Key Worker, Clinician or Practitioner	<ul style="list-style-type: none"> ✓ Maintaining all aspects of the health record, including obtaining the relevant consents. ✓ Updating or revoking specific consents as per the client’s wishes. ✓ Advising clients of the purpose of the consent, and how it will impact or prevent their service delivery if the consent is not obtained.

6 Definitions

Word, Abbreviation, Acronym or Term	Definition
Valid Consent	Consent is valid if these elements have been satisfied: <ol style="list-style-type: none"> 1. Specific 2. Current 3. Competent/Given by a person with the capacity to do so 5. Voluntary: The consent is freely given 5. Informed
Informed Consent	In addition to meeting the requirements for obtaining valid consent, the person must be provided with sufficient information for them to have a genuine understanding of the nature of why the information is being collected or the treatment / service is taking place. The person must receive

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Word, Abbreviation, Acronym or Term	Definition
	information and discussion on risks, benefits and alternatives prior to providing consent.
Implied Consent	Consent that is agreed to through the nature of the service, procedure or their continued participation. For example, recording certain data is required for people to access government funded services, therefore accessing that service implies they are ok for that data to be recorded. This should still be explained to the person so they are aware what information is being recorded and why.
Verbal Consent	Consent that is obtained from the person informally and recorded within the case note or otherwise recorded in their file.
Written Consent	Consent that is usually recorded on an official form or electronic record outlining the specific consent that has been agreed to. Written consent is required when you need to demonstrate that the client or person has agreed, such as consent to share (who they have agreed to share with) or consent to treatment for invasive procedures.

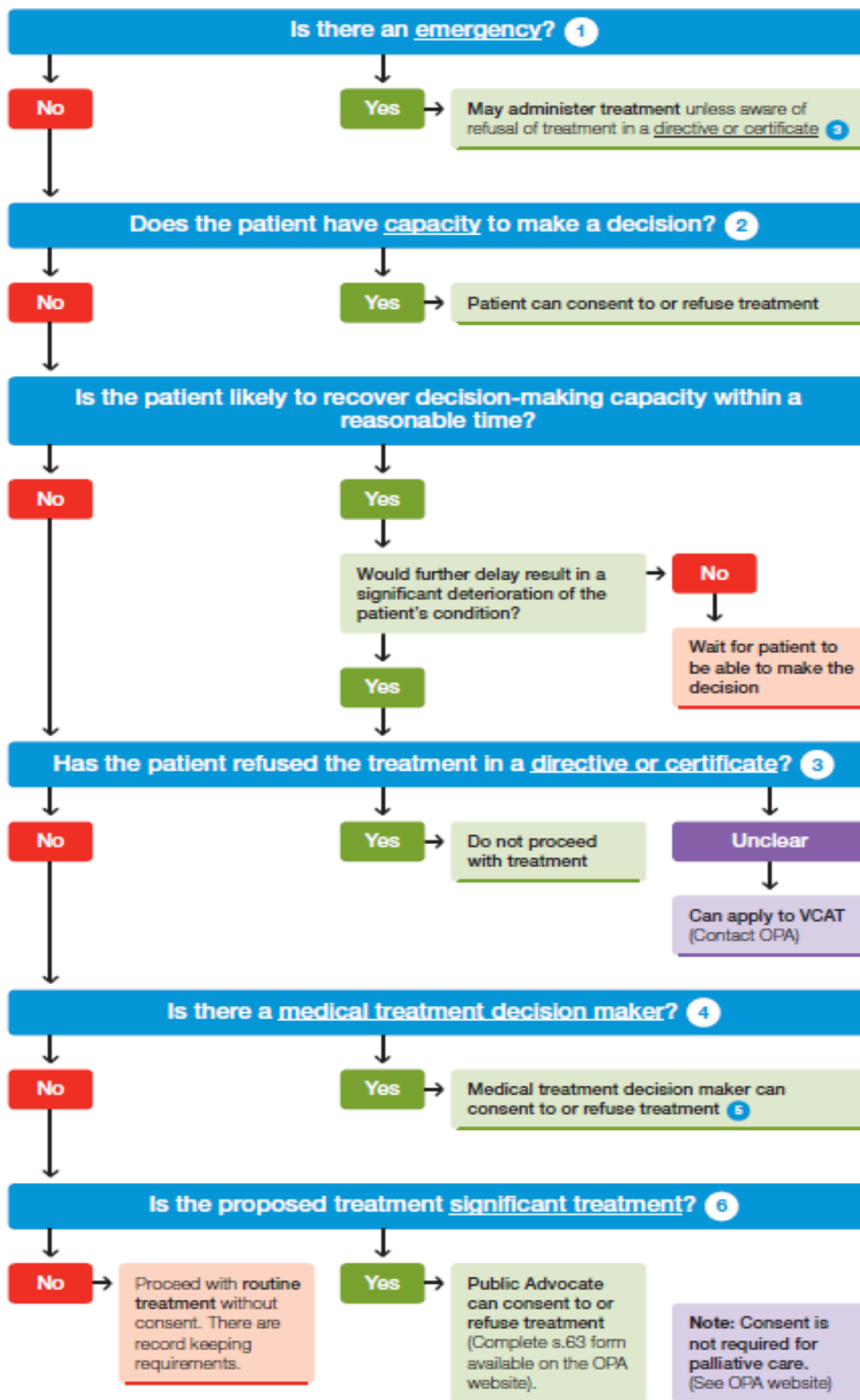
7 Related Documentation

Document Name	Document type
Consent to Treatment Policy	Specific Policy
Consent to Treatment Form	Electronic Form
Telehealth Information & Consent Form	Form
Dry Needling Client Information and Informed Consent	Form
Employee Flu Vaccine Consent and Declaration Form	Form
Consent Information - Medical	Information Sheet

8 Appendices

Appendix 1 – Consent Flowchart

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