



**Policy & Procedure Manual**

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**CONSENT/DECISION MAKING – AD-I-9**

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**POLICY:**

Individuals will be encouraged to make their own decisions whenever possible. Under no circumstances will the staff of OPTIONS provide consent for treatment or finances or give/sign authorization on behalf of the clients we support.

**PURPOSE:**

To ensure that the individual who is capable has the opportunity to make treatment, financial and personal decisions and to sign consent/give authorization when required.

To ensure that the person is supported to understand and make informed decisions.

To ensure staff do not consent or refuse treatment on behalf of a client.

**GENERAL INFORMATION:**

Consent/authorization is given by capable individuals (sixteen years of age and older), and by a parent or legal guardian in the case of a child.

**PROCEDURE:**

1. Provide support to individuals who are making personal and financial decisions and decisions related to all aspects of their plan of care.
2. Involve the individual whenever possible giving them all information required to make an informed decision communicating at their level and in a manner they can understand.
3. Use whatever form of communication you believe the person will understand (e.g. pictures, symbols, gestures). Involve others who know the person best such as family members or other staff to facilitate the individual's understanding.
4. Allow sufficient time for the individual to understand, consider the information and ask questions. If the individual requests additional information, it is important that a response be provided in a timely manner.



Personal Support Services

**POLICY: AD-I-9**  
**DEPARTMENT:** Administration  
**CATEGORY:** General  
**EFFECTIVE DATE:** November 2011  
**SUPERSEDES VERSION DATED:** N/A  
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5. If a Health Care Practitioner determines that consent is required for treatment, the consent must be informed which means the procedure performed and its implications and possible complications must be explained. It is the responsibility of the Health Care Practitioner to determine the client's capacity to understand the information and to obtain the consent as defined in accordance with the Health Care Consent Act. Under no circumstances is it staff's responsibility to obtain consent on behalf of the Health Care Practitioner.

**Note: In emergency situations when an individual is experiencing severe suffering or who is at risk, if the treatment is not administered promptly, of sustaining serious bodily harm and to save life or prevent serious damage to health the Health Care Practitioner may make the decision to treat.**

6. If the individual is deemed incapable of giving consent/authorization, it must be obtained from the highest eligible person identified in the hierarchy set out in the provincial regulations (see appendix A).
7. The name, address and telephone number of the person(s) responsible to give consent/authorization for treatment and financial decisions will be available on the Admission/Discharge Summary at the front of each individual's casebook and will be provided to the Health Care Practitioner as required.

**RECOMMENDED BY:** Administration

**APPENDICES:** 1

**OPERATIONAL ACCOUNTABILITY:** Administration, Finance, Client Services  
Administration, Client Services, Human Resources, Community Resource Team

**ORIGINAL POLICY DATE:** November 2011

**AUTHORIZED BY:** Executive Director

**SIGNATURE:**

## Hierarchy for Substitute Decision Making

If the individual is incapable of giving consent, identify the current Substitute Decision Maker (SDM). Consent must be obtained from the highest eligible person identified in the hierarchy set out in the provincial regulations. This person is the Substitute Decision Maker (SDM) who makes treatment, financial and other decisions requiring consent/authorization on behalf of an incapable individual and in Ontario this is as follows:

- Guardian of the person (under the *Substitute Decision Act*) with authority to consent or refuse consent to treatment, admission and Power of Attorney (POA) for Personal Care Services. [Note: May be different person than Power of Attorney for property]
- Legally appointed Power of Attorney for Personal Care
- Legally appointed Power of Attorney for Property
- Representative appointed by the Consent and Capacity Board
- Spouse/Partner
- Child/custodial parent or Children's Aid Society
- Parent with right of access
- Sibling
- Any other relative (related by blood, marriage or adoption)
- Public Guardian and Trustee for Treatment and Financial Decisions

A *paid* care provider cannot function as a SDM, although they can come to appointments and convey information.