



Consent Policy

The purpose of this policy is to ensure that SCIL recognises best practice on consent and that our policy acts in the best interest of the client at all times. This policy applies to all staff and Service Users of SCIL. Implementation of this policy will ensure that staff are aware of their obligations around obtaining consent and that Service Users are informed of their rights with regards to consent.

Consent

For the purpose of our health care services consent is a Service User's agreement SCIL R23 for a Health Care Worker to provide care in their home at the request of the HSE or contracting authority. Consent may be verbal, non-verbal (for example by nodding/shaking of the head), or in writing. For the consent to be valid, the Service User, or in some cases and under instruction of the HSE in writing and in line with the Care Plan, the carer/next of kin of the person receiving the care, must:

- Be competent to take the particular decision
- Have received sufficient information to accept the care
- Not be acting under duress.

At all times we will endeavour to match client's expectations with a suitable Health Care Worker and this is reviewed on an ongoing basis through our monitoring checks. It is policy within SCIL to seek written consent (SCIL R23), where possible. Service Users may however withdraw consent at any time if they so wish.

If a Service User is mentally competent to give consent but is physically unable to sign a form then SCIL will seek oral or non-verbal consent (such as nodding in agreement) from the client and will record this on the form. If we believe that a Service User is mentally incompetent to give consent or make an informed decision then the relevant person within the HSE must be informed immediately (by telephone and confirmed in writing) by the CEO. Our staff must not make any decision on behalf of the cared for person unless personally directed to do so by the appropriate HSE personnel or in an emergency situation in accordance with best practice. The wishes of the family representative and the Service User's past wishes should be taken into account in such a situation.

Sufficient information must be supplied to the Service User at the earliest possible opportunity and in a manner that he/she can understand so that he/she may make an informed decision on acceptance or refusal of care.

The Service User should be offered access to an advocate with expertise relevant to their condition if they so wish. This might involve an advocate from Citizens Information Centre, Disability Sector, MABS financial advisory service etc contact with a suitable advocate and facilitate this service.

Refusal

In order for the process of consent to be a meaningful one, the Service User must have the option of refusal. A competent adult is entitled to refuse any service. In the case where a Service User refuses consent for SCIL to provide care then this will be documented (SCIL R19) by SCIL and signed off by the Service User.

In the case of a potential Service User refusing consent SCIL will immediately make contact with the HSE and inform them of the situation.

Approved by:

Maria Mulligan, CEO, SCIL

Date: April 2021