

Referrals/consent pathway – consent for therapy services

Owner:	Benjamin Thomas Physiotherapy and Orthotics Manager
Approved by	Therapies Clinical Governance Approval Group
Approval Date	20 th June 2023
Review Date	20 th June 2026 This is the most current document and should be used until a revised version is in place

Key Amendments

Date	Amendments	Approved by:
25 th January 2023	Document extended to 30 th June 2023 whilst under review.	Dr J Trevelyan/ Benjamin Thomas
23 rd June 2023	Document extended for another 3 months whilst under review.	Benjamin Thomas
June 2023	Document approved for another 3 years.	Benjamin Thomas

Consent is not a form it is a process.

For consent to be valid the patient must have capacity to understand and retain the information given, be under no duress from another person and be given the information necessary to make a reasoned decision.

If the patient is not offered sufficient information needed for them to make their decision, or it is in a form that they cannot understand their consent will not be valid.

Consent is given for an episode of treatment although it may be withdrawn at anytime. Changes to the plan of treatment or modalities used during an episode of care that have not previously been explained necessitate further consent to be obtained.

The therapist/assistant performing the examination/treatment is responsible for ensuring the patient has consented to the intervention. If another member of a multi-disciplinary team has obtained the patients consent, it is the therapist/assistant responsibility to check that consent has been obtained and that the patient is aware that they can refuse examination/treatment by the therapist/assistant.

Refusal of examination/treatment should be documented and the reasons given.

Verbal Consent:

When the patient audibly agrees to the assessment/treatment offered.

Implied or Non-verbal Consent:

When the patient acts in such a way as to indicate consent e.g. changing position to prepare for treatment.

The patient's attendance for an outpatient appointment does not indicate consent.

Written Consent:

When consent is recorded on Consent Form 3 and is signed by the patient. Consent for Driver screening is incorporated into the patient appointment/information letter. A signed consent form does not prove valid consent, it is a record that the appropriate discussions have taken place and of the patient's decision.

Voluntary Consent:

The patient's decisions on examination or treatment must not be the result of coercion by other person including the Therapist. Phrases such as 'you cannot go home until you have done the stairs' should not be used.

Informed Consent:

All treatment options, significant benefits, risks, side effects, material information and the right to refuse treatment or examination is discussed with and understood by the patient or in the case of a minor lacking capacity, with the person holding 'Parental Responsibility'.

Information may be withheld only if it is detrimental to the patient's mental state.