



Informed Consent Policy

Date of Origin: March 2012

Modification Date(s):

Date of Last Review: 11/12/24

I. Purpose

To outline policy and procedures related to informed consent for services provided by UCP of Maine.

II. Policy

It is the policy of United Cerebral Palsy (UCP) of Maine to ensure that informed consent has been obtained from the legal guardian for all medical, medication, and therapy related treatment. UCP of Maine will obtain permission from the legal guardian to arrange for all scheduled and unscheduled medical, and therapy treatment appointments and emergencies.

A guardian may utilize a Power of Attorney to represent them during absences and unavailability. The P.O.A. may be used to authorize unplanned or emergency treatment. Any record of the delegation of a P.O.A by the guardian needs to be on file in the legal section of the individual's client file. The procedure for obtaining informed consent from the P.O.A. is the same.

Informed consent by the legal guardian is required for all medical, dental, medication, and therapy related treatment. Informed consent is defined as the understanding of the facts, implications, and positive or negative consequences of an action or treatment. Informed consent shall not be obtained under pressure and all decisions are to be made freely by the guardian. The guardian must participate in determining the choices and decisions regarding health care options, medication and treatment. This policy is intended to define when informed consent is to be obtained and applied, how it will be implemented and documented, what needs to happen when informed consent cannot be obtained and how UCP of Maine will monitor itself for compliance with this policy.

III. Procedure

A. Obtaining Informed Consents for Planned and Unplanned Appointments and in Emergencies:

1. UCP of Maine must obtain consent from the guardian to arrange and schedule all planned medical, and therapy treatment appointments.

2. UCP of Maine must further obtain guardian consent prior to following through with any treatment prescribed (accompanied by doctor's orders) by the treating professional (related to medication, additional services required, plans to implement at the program, etc.)
3. The legal guardian will be given prompt notification of all unscheduled or emergency appointments and every effort will be made to obtain their consent prior to the appointment.
4. UCP of Maine will make every reasonable effort to coordinate the scheduling of appointments and accommodate the expressed intent of the legal guardian to attend the appointment.
5. When the legal guardian is unable or chooses not to participate in an appointment, UCP of Maine will request that the medical provider contact the legal guardian directly and discuss the outcome and treatment recommendations (i.e. medication changes, etc.). When direct contact is not possible the medical provider will be requested by UCP of Maine to make other reasonable accommodations. UCP of Maine may offer assistance in contacting the guardian.
6. All efforts to contact and/or actual contact of the guardian will be documented in accordance with this policy.

B. When Informed Consent Cannot Be Obtained:

1. When UCP of Maine has made every attempt but is unable to secure guardian consent prior to treatment for unplanned or emergency appointments from the guardian- treatment will be sought and notification of the guardian will be completed following treatment. UCP of Maine will maintain annually signed medical releases for these instances. In the event the circumstances are of a serious nature, the treating medical providers will be responsible for obtaining informed consent or making the judgment to treat without prior consent.
2. In any instance when prior informed consent cannot be obtained, UCP of Maine will continue to attempt to reach the guardian, up to and including notifying the guardian following treatment.
3. UCP of Maine will document all guardian contact attempts made, actions taken and outcomes as described in this policy.

C. Documentation of Informed Consent:

1. All written documentation of informed consent will be filed in the UCP of Maine client file. Documentation shall include those informed verbal consents so noted and witnessed as appropriate.
2. UCP of Maine will document all activities related to informed consent, permission to schedule appointments, and notification of emergencies in the client file. Documentation will include the name of the guardian, the request, the time, the outcome, the provider, and if the guardian was available or unavailable to provide consent.
3. When a guardian is unavailable to provide informed consent, the UCP of Maine staff member will document each attempt to contact them in the UCP of Maine. It may become necessary for UCP of Maine or the medical provider to notify DHHS of any persistent unavailability of a guardian.

4. UCP of Maine staff will document in the client files, all information specific to medical appointments and the outcome of those appointments.

III. Quality Assurance and Tracking of this Policy:

1. The Quality Assurance Department will conduct audits of the programs and client files to determine compliance with the required content and the accuracy of the documentation involving informed consent and medical appointments.
2. The Quality Assurance Department will conduct periodic audits of the individual files to ensure that documented informed consent obtained by medical providers is properly recorded and that releases are current.
3. The providing staff will be responsible for ensuring the proper documentation of all treatment recommendations, and guardian contact in the client files.
4. All medication orders, and other physician orders will be updated and filed in the client files as applicable.
5. All Medication Administration Records except for the current month will be maintained in the client files.
6. The Plan of Care will be referenced to determine that specific needs, requests and accommodations regarding advanced consent by the guardian were recorded. In some instances, it may be acceptable for some routine appointments (i.e. routine blood draws, blood pressure checks, weekly counseling appointments, allergy shots, etc.) to be agreed upon in advance for the year, and then would only require guardian consent should the nature of the appointments change, or changes in treatment are recommended.
7. The Plan of Care will be sent to appropriate providers as requested with the consent of the client/guardian.



Scott Tash, CEO



Date

