



FAQ

Professional Standard: Informed Consent

Introduction

The [Professional Standard: Informed Consent](#) sets out the *minimum* expectations for professionalism and ethical conduct that licensees must meet to support patients or their substitute decision maker in making *informed health care decisions*. It ensures the consent process is safe, transparent, empowering, and centred on individual choice, while remaining-responsive to each person's cultural background and potential history of trauma.

Below are frequently asked questions by licensees.

Q: Can the patient sign a consent form before their appointment?

No. Licensees are responsible for discussing the proposed assessment and treatment plan with the patient and/or their substitute decision maker before **any** assessment or treatment is provided.

Professional Standard: Informed Consent, Principle 1.7 states:

1.7 Ensure that, before the initial treatment of a patient, the patient signs (or provides an electronic indication of consent to) a consent form, and does so only after having an opportunity to ask questions.

Q: Is a new consent form required when a patient sees a different licensee for the first time, even if the licensee is in the same health profession and clinic?

Yes. It is expected for a patient to sign a consent form when seeing a new health care practitioner at the same clinic and practicing the same profession. This provides the patient with the opportunity to *ask questions and provide Informed Consent specific to that health care practitioners' clinical framework.*



Q: Is documentation of a patient's consent required beyond them signing an initial consent form?

Yes. Documentation of consent in a patient's health care record is required beyond the patient's initial written consent.

Professional Standard: Informed Consent, Principle 1.9 states licensees must:

1.9 Document the attainment of consent in the patient health care records, including details concerning:

1.9.1 Receipt, refusal, withdrawal, or modification of consent;

1.9.2 The date and substance of the consent discussion;

1.9.3 Any concerns raised during the consent process, and actions taken to address concerns (e.g. alternative communication methods, interpretation services); and,

1.9.4 If applicable, reasons for determining that a patient was not capable of making an informed decision, and action taken to verify the person authorized as a legal guardian or substitute decision-maker.

Q: Does a licensee need a separate consent form for each therapy that they provide?

It is at the licensee's discretion to determine whether obtaining written consent is required for each specific and/or separate treatment or technique that the licensee provides. In all cases, the receipt of consent and the substance of the discussion on consent must be documented in the patient's health care record.

Q: Can the College provide sample consent forms?

No, the College does not provide sample consent forms. Due to the number and complexity of variables involved, it is the responsibility of each licensee to ensure they are meeting the requirements for Informed Consent that best meets the assessment, treatment, services or procedures they are providing to the patient.