Client Rights and Consent:

The LAMP & EMCHC Service Agreement

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| **Issue Date:** | **Effective Date:** | | **Approved By:** |
| July 2000 | May 2016 | | Management Team |
| **Next Review Date:** May 2019 | | **By:** Management Team | |

## – Purpose

The purpose of this Policy is to ensure that employees are to explain the Service Agreement and obtain consent from LAMP’s clients and participants.

## – Scope

All Programs and Services include:

1. EMCHC

* Dental Programs
* Physiotherapy
* Primary Health Care
* Social Work
* Health Promotion
* Community Programs
* Chiropody

1. Clinical Programs

* Data Management
* Occupational Health Program
* Primary Health Care
* Social Work

1. Community Programs

* ASK! Community Information
* Youth Programs (Street Level, SEYA, RAY)
* Community Development
* Health Promotion
* Early Years Program
* Volunteer Program
* Adult Programs (Among Friends, HARM Reduction)
* Adult Learning

1. Allied Health Programs

* Chiropody
* Community Dietitian
* Diabetes Education Program
* Physiotherapy

## – Policy

**3.1** All clients who register for one or more LAMP programs are considered to be LAMP clients. Employees will explain the Service Agreement and obtain consent from LAMP clients. By participating in LAMP programs, they have the following rights:

* To be treated with dignity and respect.
* To ask questions and make informed decisions about their health.
* To have access to all of LAMP’s programs for which they are eligible if available.
* To receive quality service.
* To privacy and confidentiality. (see Confidentiality clause in the Service Agreement)
* To see their records at LAMP
* To make a complaint
* To suggest how to improve our services.
* To participate in LAMP activities in building a healthy community.

**3.2** LAMP clients are expected to work in partnership with LAMP to meet their needs.

## – Responsibility

**4.1** Act and operate within the limitations and scope as defined in the **Regulation Health Professions Act**.

**4.2** To be valid, consent must be specific to the proposed treatment or course of treatment, informed and voluntary. The person must be mentally capable of making the treatment decision, able to understand the information and to appreciate the consequences of accepting or refusing treatment. There is no fixed age for consent, and the mental capacity needed will vary with the complexity or risk of the treatment proposed.

**4.3** If language barriers and the complexity of the decision cause doubt that the person can understand well enough to consent, then a cultural interpreter must be used.

**4.4** Each health service area will adhere to their program-specific policies to obtained informed consent.

## – References

Regulation Health Professions Act

<https://www.ontario.ca/laws/statute/91r18>