

Why is consent required?

Before a medical or dental practitioner provides treatment to a patient the practitioner must obtain consent for the treatment. The consent is valid if the practitioner has told the patient about:

- the nature of the proposed treatment and its effects; and
- the risks associated with the proposed treatment; and
- alternative treatments (their nature, effects and risks); and
- the impact of not undertaking treatment.

The patient must be able to understand the treatment provided and agree to the proposed treatment before the treatment can be started. The patient has a right to refuse or withhold consent to the proposed treatment.

If the patient cannot understand the practitioner's information about the proposed treatment or is unable to communicate whether or not they consent to the proposed treatment, the practitioner may need to seek substitute consent.

This fact sheet does not apply to treatment for a mental illness. For information about substitute consent for treatment of a mental illness please contact the [Mental Health Tribunal](#).

What is substitute consent?

Where a person or agency other than the patient gives consent for medical or dental treatment, it is called 'substitute consent'. This can only occur in accordance with the legislation or an order of the Guardianship and Administration Board (the Board).

Who can give substitute consent for medical or dental treatment?

The following people can give substitute consent to treatment:

- the [Person Responsible](#) (including a [guardian](#)) (refer to [fact sheet 5](#)) and/or
- the Board

When is consent not needed?

There are some instances where consent or substitute consent to medical or dental treatment is not needed to treat a person who is incapable of giving consent:

- **when there is a medical or dental emergency:** This means the treatment is needed to save a person's life, to prevent serious damage to the person's health or to prevent the patient suffering from significant pain or distress.
- **when the treatment is minor:** For example, a visual examination of the person's mouth, eyes, ears or throat, providing first aid or the administration of a nonprescription drug (such as painkillers or an antihistamine) within recommended dosages.

Also, if a person with a disability does not have a 'person responsible' AND is not objecting to treatment, it is lawful to provide necessary treatment to the person if it will promote their health and wellbeing. A medical practitioner must provide a certificate of these circumstances in the person's clinical records. However, this is not acceptable for '**special treatments**' (see below) or '**Regulation 12 treatments**' (see below).

What are Regulation 12 treatments?

Regulation 12 treatments are a list of treatments in the **Guardianship and Administration Regulations 2017**.

The treatments include:

- electroconvulsive therapy (ECT)
- the removal of all or a substantial number of teeth
- treatment with a drug where the primary purpose is to control the conduct of the person to whom it is given
- treatment with a drug of addiction other than in association with the treatment of cancer or palliative care of a terminally ill patient
- the treatment involves a substantial risk of death, brain damage, paralysis, permanent loss of function of any organ or limb, permanent and disfiguring scarring, or extreme pain or distress to the person.

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For these particular treatments, treatment should not proceed without the consent of a capable and informed patient, a 'person responsible' or the Board (unless the treatment is needed in a medical or dental emergency - see above).

What are Special Treatments?

Special Treatments are defined under the *Guardianship and Administration Act 1995* as:

- treatment likely to lead to permanent infertility
- termination of pregnancy
- removal of tissue for transplant
- psychosurgery
- any treatment involving an aversive stimulus

Only the Board can give consent to Special Treatments.

When can the Board give consent to medical or dental treatment?

After hearing an application for consent to medical or dental treatment the Board may consent to the proposed treatment if it is satisfied:

- that the treatment is lawful; and
- that the patient does not have capacity to consent; and
- that the treatment is in the patient's best interests.

The Board can give consent to medical or dental treatment on behalf of a person who is incapable of giving consent in the following circumstances:

- where a patient is objecting to treatment that is necessary to promote their health and well-being but there is no Person Responsible available or willing to make that decision for the patient
- where there is a dispute or uncertainty between the practitioner, Person Responsible and/or the patient about whether or not to proceed with the treatment

- where the treatment proposed is Special Treatment
- where the proposed treatment involves a significant risk

How do I make an application to the Board?

Please refer to the [application form](#).

If the application is urgent, a hearing will be scheduled as soon as possible. If it is not urgent, the Board must give ten (10) days notice to all interested parties.

At the hearing the practitioner, the patient, relatives or friends of the patient and relevant allied health professionals have an opportunity to comment upon the proposed treatment.

The Board must consider:

- the wishes of the patient, if possible; and
- the consequences of not carrying out the treatment; and
- any alternative treatment that may be available; and
- whether the treatment can be postponed until the patient regains the capacity to consent or refuse consent to the treatment themselves; and
- in the case of transplantation of tissue, the relationship between the donor and the donee.

When does a decision of the Board come into effect?

A decision of the Board comes into effect:

- after the 28-day appeal period has expired; or
- if an appeal has been lodged, after the appeal has been set aside, withdrawn or dismissed.

If the need for the treatment is urgent, the Board may give its consent for the treatment to start immediately.

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Guardianship and Administration Board

38 Barrack Street, Hobart Tasmania 7000

Phone: 1300 799 625 / 03 6165 7500

Email: guardianship.board@justice.tas.gov.au

Website: www.guardianship.tas.gov.au