Core Module Manual

Full Care Lifetime

CONSENT POLICY AND PROCEDURE

Full Care Lifetime must gain consent from the participant before sharing any information with family, advocates, other providers and government bodies. Children under the age of 18 will need their family/advocate/guardian's consent to share information with other providers and government bodies. It is the responsibility of all staff to inform participants about their rights regarding the provision of consent.

All efforts should be made to obtain consent. When there are language or communication barriers, staff will ensure that all reasonable efforts have been made to overcome these, using available communication skills and technology, interpreters, relatives/carers and friends etc. Relatives may be consulted about the best ways to communicate or may be requested to assist with establishing the participant's values and preferences if the participant is unable to express these themselves.

Initial consent will be undertaken during their registration at the service. The prime responsibility for obtaining consent lies with the frontline worker who is to carry out the service. Consent can be sought by another individual if they have enough knowledge to give the right information and answer the participant's questions correctly.

Consent is equally valid whether it is expressed verbally, non-verbally (implied) or is written.

- Implied consent is adequate for most of the support provided by the organisation.
- Oral consent is enough for most interventions provided by doctors and other health professionals (such as commencing a manual handling process, use of complex medical procedures). Oral consent should be recorded in the support plan with relevant details of the discussion, the date and time of the entry, together with the name of the staff member legibly written. Oral refusal of consent for any intervention must also be recorded in the support plan in the same manner.
- Written consent should be gained for the use of an advocate or to share information. by both the participant and the healthcare professional. Note: Participants automatically opt-in and must be asked to opt-out during NDIS audit requirements.
- Photography: Written consent will be obtained from any participant having their photograph taken.

POLICY

- Full Care Lifetime recognises the importance of maintaining the privacy and confidentiality of all participants. There are times when it is essential to share information with other parties, such as government bodies and other service providers.
- Full Care Lifetime will not give any information to person or authority without the participant's consent unless the disclosure is a legal requirement.
- Full Care Lifetime will inform all participants (upon entry into the service) about their rights to privacy and confidentiality.
- Full Care Lifetime will notify all participants that they have an opt-out option if their information is requested for audit purposes.

Guiding Principles

- People have the right to make decisions about things that affect their lives.
- People are presumed to have the capacity to make their own decisions and give consent when it is required unless there is evidence otherwise.
- People are supported to make informed decisions when their consent is required.

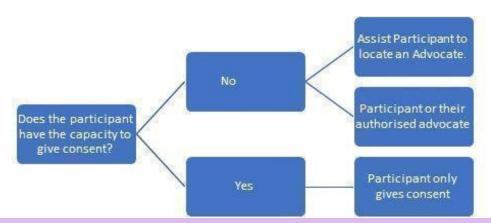
Core Module

Rev. 2 Last updated: 21/03/2025 Page 58 of 195

Core Module Manual

Full Care Lifetime

- Consent is obtained from the person, or a legally appointed guardian, for life decisions such as accommodation, medical treatment, forensic procedures, and behaviour support.
- Consent for financial matters is obtained from the person, or a legally appointed financial manager or the person appointed under a Power of Attorney.
- People are supported to identify opportunities to make decisions about their own lives and to build their decision -making confidence and skills.
- When support to make decisions is wanted or needed by the person, it is provided in ways preferred by the person and by a supporter of their choice.
- Support with decision-making respects the person's cultural, religious and other beliefs.
- If the person wants to be supported by natural supporters, such as family and friends, this is encouraged and facilitated.
- Support is provided in ways that uphold the person's right to self-determination, privacy, and freedom from abuse and neglect.
- Decision-making and self-determination are not limited by the interests, beliefs or values of those providing the decision-making support.
- The amount or type of support required by people to make decisions will depend on the specific decision or the situation.
- People are supported to make decisions that affect their own lives even if other people don't agree with them or regard the decisions as risky.
- People are supported to access opportunities for meaningful participation and active inclusion in their community where they want this.
- Information is provided in formats that everyone can understand, and enables the person, their supporters and other relevant people, such as legally appointed guardians, to communicate effectively with each other.



PROCEDURE

If a participant wishes to give consent to another person or organisation, then the following procedures are required to be undertaken:

- Inform the participant that written or verbal consent is required to share any of their personal information.
- Inform the participant that their consent can be withdrawn at any time.
- Communicate information about the consent in a method relevant to the participant.
- The participant completes a Consent Form.

Core Module

Rev. 2 Last updated: 21/03/2025 Page 59 of 195

Core Module Manual

Full Care Lifetime

- A signed Consent Form is to be placed at the front of the participant's file.
- Relevant staff is informed about the consent.



Rev. 2 Last updated: 21/03/2025 Page 60 of 195