

Member Resource: Informed Consent Checklist

In Ontario, clients and/or, as applicable, their substitute decision-makers (SDMs) have the right to make their own choices about their health and wellbeing, including how their personal information is collected and shared with others. As a founding principle of ethical health care, informed consent is both an ethical and legal concept, requiring that health professionals abide by related laws, professional obligations, and standards of practice.

This checklist summarizes key components of the informed consent process that are described in the *Informed Consent Workbook*. The information provided in this checklist is not intended to replace education and training, nor is it a substitute for the competencies that enable a Member to engage a client in an appropriate informed consent process. Despite any information provided here, members must rely on their professional judgment and assume responsibility for their decisions and actions.

Guiding Principles

1. Members must seek clients' informed consent before engaging in assessment or treatment.

- Consent is considered informed if the person making the decision received all the information that a reasonable person in the same circumstances would require in order to make such a decision, before voluntarily agreeing to the intervention.
- While some clients may not be capable of providing consent for all aspects of treatment, including consent to the terms of service and the financial arrangements, they must be provided the opportunity to consent to any aspects of their care for which their consent can be provided.

2. Consent is an ongoing process.

- There will be instances in the therapeutic process where it may be necessary or advisable to seek or reaffirm a client's consent, e.g. where changes to the therapeutic plan are proposed, where therapeutic goals have shifted.

3. Clients have the right to withdraw consent for some or all aspects of treatment at any time.

4. Clients can communicate consent in a number of ways.

- Standards of practice and the particular circumstances will inform which type of consent is most appropriate, whether is written, spoken or manual (e.g. American Sign Language), or implied.

5. The consent process is documented.

- Relevant observations about the client's capacity to provide consent.
- Information shared with the client.
- Client questions or concerns.
- Which aspects of the therapy the client consented to or refused.
- Instances throughout the course of therapy where the member sought the client's consent, and whether the client provided consent or refused.

More Information

- [Professional Practice Standard 3.2: Consent](#)
- [Informed Consent Workbook](#)

Checklist for the Initial Informed Consent Process

1. Consider the client's capacity to provide informed consent including:

- Relevant aspects of the client's profile, mainly age and capacity.
- For clients 16 and older, you may presume that the client is capable of providing consent, unless you have reason to believe otherwise.
- For clients under 16 years of age, you should assess the client's capacity to provide consent.
- If the client is not capable of providing informed consent to one or more aspects of the treatment, engage the SDM appropriately.

- Financial and contractual aspects of your practice, as applicable (e.g. terms of service and financial arrangements).
- A client may be capable of consenting to treatment, while being incapable of consenting to payment arrangements and/or some aspects of the terms of service (e.g. a minor who is financially dependent on their parent or guardian).
- If the client is not capable of providing informed consent to the contractual and/or financial aspects of the therapy, engage the SDM appropriately.

2. Engage in the initial informed consent process with the client and/or the SDM by seeking consent for any services you intend to provide to the client. Also seek the client's consent for the collection, use and/or disclosure of the client's personal health information.

- Represent yourself and your services accurately.
- CRPO requires that Members represent their qualifications and services transparently and accurately in interactions with clients, and more broadly, when working in a professional capacity.

Describe to the client:

- The terms of service.
- Relevant practice policies.
- Any limitations on the services.
- Any other details that would be relevant.
- Provide CRPO's contact information upon request.

- Discuss the collection, use and disclosure of the client's personal health information.

Describe to the client:

- The information ordinarily collected as part of the clinical record throughout the course of the therapeutic process.
- How you will use that information.
- Your duty to maintain a clinical record.
- Your duty to maintain confidentiality.
- Any limits to confidentiality.

You may wish to provide the following information as part of your informed consent discussion or circumstances may render it necessary provide some or all of this information:

- The client's right to consent to the disclosure of their personal health information, and your ordinary practice for seeking the client's consent in such cases.
- The client's right to place personal health information in a "lock-box."
- The client's right access the clinical record, to request amendments, etc.
- The client's right to contact the Information Privacy Commissioner of Ontario or CRPO with any concerns.

Provide information to the client before engaging in assessment or treatment.

Note: this is not intended to preclude a member from gathering general impressions about a client, responding sensitively and therapeutically to a client's immediate distress or acting in emergency situations.

At a minimum, provide the following information to the client:

- Nature and purpose of the proposed treatment and/or assessment.
- Benefits.
- Material risks, including foreseeable costs, any limitations to the treatment or assessment, and any other relevant info.
- Effects of the treatment or assessment, particularly those that a client might consider uncomfortable or undesirable.
- Alternative options.
- Consequences associated with refusing the treatment or assessment.

3. Include any other information that may be relevant to the informed consent process. For example, if using communications technologies for any aspect of the therapy, the client's explicit consent is required.

If providing psychotherapy services using communications technologies, it is necessary to engage the client in an informed consent process, obtaining the client's consent before using any proposed technology.

Seek and obtain the client's explicit consent before using the technology. Discuss:

- The intended use of the technology.
- The information ordinarily relayed and any limitations to the type of information that should be relayed using the technology.
- Measures taken to ensure the confidentiality of the client's personal health information.
- The risks and benefits of using the technology.
- Measures the client can employ to protect their own confidentiality.