CONSENT POLICY AND PROCEDURE

Primus PLUS
Healthcare

PRIMUS PLUS HEALTHCARE

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1. PURPOSE

The purpose of this Consent Policy and Procedure is to ensure that Primus Plus Healthcare meets its legal and regulatory obligations in obtaining and managing informed consent from individuals who use our supported living services. The policy aims to establish clear and consistent practices for seeking, recording, and respecting consent, in line with the requirements of the Care Quality Commission (CQC) and relevant legislation, including the Mental Capacity Act 2005. The policy will also ensure that all service users, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions, are provided with person-centred care that respects their autonomy and decision-making rights.

This policy covers all aspects of obtaining consent for care, treatment, and any other interventions, and ensures that service users' rights are respected, especially in circumstances where they may have specific needs or challenges in understanding and making decisions. In particular, this policy aims to:

1. Ensure Informed Consent: This policy provides clear guidelines on how Primus Plus Healthcare will ensure that service users are given all necessary information in an accessible format to make informed decisions about their care and treatment.
2. Comply with CQC Regulations: The policy aligns with CQC Regulation 9: Person-Centred Care, Regulation 11: Need for Consent, and Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment. It establishes the processes for seeking consent from service users in a way that respects their dignity and autonomy while safeguarding their rights.
3. Support Vulnerable Individuals: Given that our service users often have learning disabilities, mental health needs, and autism spectrum conditions, we recognize the necessity of providing support for decision-making through advocacy services when appropriate, as well as making the consent process accessible and understandable.
4. Ensure Compliance with the Mental Capacity Act (MCA) 2005: This policy adheres to the principles of the Mental Capacity Act 2005, ensuring that service users who may lack capacity are supported to make decisions to the best of their ability. The policy will also detail how and when assessments of mental capacity will be made, by whom, and under what circumstances.
5. Safeguard Service Users' Rights: We will ensure that service users' decisions regarding consent are respected, and provide guidance on what happens if a service user withdraws or refuses consent. We will also ensure that individuals are aware of their rights and how they can challenge or appeal decisions.
6. Adherence to Relevant Legislation:
    - Deprivation of Liberty Safeguards (DoLS): Where applicable, we will address how the DoLS or Community Deprivation of Liberty measures will be applied for individuals who may be deprived of their liberty in accordance with the Mental Capacity (Deprivation of Liberty) Act 2005.
    - Powers of Attorney and Legal Representatives: The policy will outline when and how Powers of Attorney or legally appointed deputies will be involved in decision-

making, ensuring that legal representatives are engaged appropriately when service users are unable to make decisions for themselves.

7. Accessible Information: The policy will meet the Accessible Information Standard by ensuring that service users are provided with information about their care and consent processes in formats they can easily understand, considering any communication needs.
8. Equality and Non-Discrimination: This policy will adhere to the Equality Act 2010, ensuring that all service users, regardless of their learning disabilities, mental health needs, or autism spectrum conditions, are treated with equality and dignity. This includes ensuring the consent process is accessible and free from discrimination.
9. Compliance with Data Protection Regulations: As part of ensuring informed consent, Primus Plus Healthcare will comply with the UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018, ensuring that consent is obtained for the processing of personal and sensitive data, and that service users have clear rights regarding their data.
10. Specialist Services for Autistic People and Individuals with Learning Disabilities: Given the nature of our service user bands, the policy will provide specific guidance on how Primus Plus Healthcare will meet the needs of autistic people and those with learning disabilities. This includes ensuring that our consent processes are designed to be fully inclusive and accessible for these individuals. The policy will explain how we have considered the specific needs of these groups and how they can access and use the policy to ensure their rights are upheld.

Key Regulations and Legislation Covered by This Policy:

- CQC Regulation 9: Person-centred care
- CQC Regulation 11: Need for consent
- CQC Regulation 13: Safeguarding service users from abuse and improper treatment
- Mental Capacity Act 2005: Including the five principles of the MCA and guidance on assessing mental capacity
- Deprivation of Liberty Safeguards (DoLS): Application of safeguards where individuals may be deprived of their liberty
- The Accessible Information Standard: Ensuring information is provided in a way that service users can understand
- Equality Act 2010: Non-discriminatory treatment and access to information
- UK GDPR and Data Protection Act 2018: Ensuring lawful processing of personal data and rights of individuals

Primus Plus Healthcare is committed to ensuring that the consent process is transparent, supportive, and respectful of the individual's rights, with particular focus on those who may face barriers to understanding or decision-making due to learning disabilities, mental health issues, or autism spectrum conditions. Through the implementation of this policy, we aim to foster a service

environment where every individual's autonomy is respected, and their right to make informed decisions is upheld in every aspect of their care and treatment.

2. SCOPE

This Consent Policy and Procedure applies to all aspects of care, treatment, and services provided by Primus Plus Healthcare within the Supported Living without Personal Care Service. It ensures that we meet the legal and regulatory requirements set out by national bodies, including the Care Quality Commission (CQC), and comply with key legislation, such as the Mental Capacity Act 2005 (MCA), General Data Protection Regulation (GDPR), and the Equality Act 2010.

As part of our service offering, Primus Plus Healthcare provides support to adults with learning disabilities, mental health needs, and autism spectrum conditions. The scope of this policy covers the following:

1. Consent in Supported Living without Personal Care

This policy specifically applies to individuals in supported living environments where they may require assistance with managing aspects of daily life, but do not receive personal care. Primus Plus Healthcare ensures that these individuals, who often have complex needs, are fully informed and supported in giving consent for any treatment, support, or services offered. The policy is designed to ensure that care planning and decision-making are person-centred, and it adheres to the principles outlined in Regulation 9 of the CQC, which emphasizes the provision of person-centred care.

2. Consent Process

The policy outlines how Primus Plus Healthcare will:

- Seek Consent: This includes the specific situations when consent will be sought, such as for any medical treatment, participation in activities, or involvement in any research.
- Informed Consent: A clear and accessible process will be followed to ensure that service users understand the nature, risks, and benefits of their decisions. The policy outlines how information will be provided in formats suitable to service users, such as easy-read documents, visual aids, or other forms of communication to cater to the needs of individuals with learning disabilities, mental health needs, and autism spectrum conditions.
- Withdrawal or Refusal of Consent: If a service user chooses to withdraw or refuse consent, the policy outlines the steps to respect that decision, and the potential consequences, ensuring that no service user is pressured or coerced into agreeing to any treatment or intervention.

3. Advocacy Services

In situations where service users may have difficulty in understanding or making informed decisions, Primus Plus Healthcare will utilize advocacy services. This ensures that individuals are supported to make decisions in their best interests and that their voice is heard. Advocacy services will be used where necessary, particularly for those who may struggle with understanding complex care or treatment options due to cognitive or communication difficulties.

4. Deprivation of Liberty Safeguards (DoLS) and Community Deprivation of Liberty

As part of the service, the policy will address Deprivation of Liberty Safeguards (DoLS) or Community Deprivation of Liberty, ensuring that service users are not deprived of their liberty without proper safeguards. This will be relevant when there are concerns about individuals who lack capacity and who may require restrictive measures as part of their care. The process will ensure that we meet the requirements of the Mental Capacity (Deprivation of Liberty) Act 2005 and comply with CQC Regulation 11: Need for Consent.

5. Legal Representatives and Powers of Attorney

The policy outlines how Primus Plus Healthcare will involve Powers of Attorney and legally appointed deputies when necessary. This includes situations where individuals may lack the mental capacity to make decisions for themselves and require legal representation for making decisions about their care, treatment, or support.

- Powers of Attorney: When a service user has a legally appointed Power of Attorney, this individual will be involved in decision-making on behalf of the service user, particularly for those who may be unable to provide informed consent due to mental capacity issues.
- Legally Appointed Deputies: For individuals under the Mental Capacity Act 2005, the policy specifies when and how legally appointed deputies will be involved in making decisions about care and treatment.

6. Mental Capacity Act 2005 (MCA)

The policy ensures that Primus Plus Healthcare meets its responsibilities under the Mental Capacity Act 2005 by adhering to the following:

- Principles of the MCA: The policy will outline how the five key principles of the MCA will be applied in decision-making processes. These principles are:
    1. Presumption of capacity: Every service user is assumed to have the capacity to make decisions unless proven otherwise.
    2. Right to make unwise decisions: Service users have the right to make decisions that others may view as unwise, as long as they have the capacity to make those decisions.
    3. Support to make decisions: Service users will be provided with the necessary support to make their own decisions.
    4. Best interests: When a service user lacks capacity, decisions will be made in their best interests, involving relevant individuals, such as family members or legal representatives.
    5. Least restrictive option: Any decision made should be the least restrictive option for the service user, in line with their human rights.
- Assessment of Mental Capacity: The policy specifies how mental capacity will be assessed, including when assessments will occur, who will conduct them, and the criteria for determining whether a person has capacity to make a specific decision. This may involve healthcare professionals, social workers, or other relevant individuals.

7. Accessibility and Equality

The policy reflects Primus Plus Healthcare's commitment to ensuring that our services are fully inclusive and accessible to all service users, including those with autism, learning disabilities, and mental health needs. The policy ensures:

- Accessible Information: In line with the Accessible Information Standard, service users will be provided with information about the consent process in formats they can understand, whether through easy-read documents, visual aids, or communication tools appropriate to their needs.
- Equality Act 2010: The policy ensures that the consent process is non-discriminatory and that service users are treated with dignity and respect, in compliance with the Equality Act 2010. This includes ensuring that all individuals, regardless of their condition, are given equal opportunities to make decisions regarding their care and treatment.

8. Compliance with Data Protection Laws

The policy ensures that Primus Plus Healthcare complies with UK GDPR and the Data Protection Act 2018. Service users' consent will be obtained for the collection and processing of their personal data, including sensitive data (such as health information). The policy will detail:

- Data Protection Principles: How we ensure the lawful, transparent, and fair processing of personal data.
- Service Users' Rights: How service users can access, correct, or withdraw their consent for data processing, and how their privacy is safeguarded.

3. POLICY STATEMENT

At Primus Plus Healthcare, we are committed to upholding the highest standards of care and ensuring that the consent process is consistently followed for all individuals who use our Supported Living without Personal Care Service. We understand that informed, voluntary, and competent consent is fundamental to delivering person-centred care and safeguarding the rights, dignity, and autonomy of the individuals we support. This policy reflects our dedication to ensuring that all individuals, particularly those with learning disabilities, mental health needs, and autism spectrum conditions, are given the support and respect they deserve in making decisions about their care and treatment.

In line with the Care Quality Commission (CQC) requirements and national legislation, including the Mental Capacity Act 2005, General Data Protection Regulation (GDPR), Equality Act 2010, and Deprivation of Liberty Safeguards (DoLS), this policy outlines the procedures for obtaining, managing, and reviewing consent. Our approach focuses on ensuring that each individual's care is tailored to their specific needs and preferences, supporting their right to make decisions while protecting them from abuse, neglect, and improper treatment.

This policy applies to all aspects of our service, and we are committed to ensuring compliance with the following principles:

1. Person-Centred Care (CQC Regulation 9)

Primus Plus Healthcare will ensure that all care and services provided are centred around the individual's preferences, needs, and values. Consent is a vital part of the care planning process, and we will always strive to ensure that the individual's voice is heard and respected. Our approach is based on the understanding that care must be provided in a way that upholds the dignity and autonomy of the individual while also meeting their specific needs, especially for those with learning disabilities, mental health needs, or autism spectrum conditions. This means:

- Actively involving the service user in decisions about their care.
- Providing accessible information that is tailored to their understanding.
- Ensuring that any treatment or care is agreed upon voluntarily and informed by the individual's choices.

2. Need for Consent (CQC Regulation 11)

We recognise that obtaining valid consent is not just a formality, but an essential part of providing respectful and appropriate care. Primus Plus Healthcare will ensure that:

- Consent is always obtained before any treatment or service is provided, including medical treatments, personal care, or any other support services.
- Consent will be recorded and maintained in line with legal and regulatory requirements.
- The process for seeking consent will be clear, transparent, and non-coercive.
- We will respect service users' rights to withdraw or refuse consent at any time, without prejudice or negative consequences.

3. Safeguarding Service Users (CQC Regulation 13)

At Primus Plus Healthcare, we are fully committed to safeguarding individuals from abuse, neglect, or improper treatment. This includes:

- Ensuring that service users are given all necessary support to understand the consequences of their decisions, particularly when they may be vulnerable due to learning disabilities, mental health conditions, or autism spectrum disorders.
- Providing clear information about their rights and how they can report concerns if they feel that their consent has not been properly obtained or if they feel pressured into agreeing to something against their will.
- Using advocacy services where necessary to ensure that service users are supported to make decisions in their best interests.

4. Informed Consent

Informed consent is the cornerstone of this policy. Primus Plus Healthcare will ensure that:

- All service users receive clear, accurate, and accessible information about their care, treatment options, and the risks and benefits involved.
- We will use plain language, visual aids, or other tools to ensure that service users with communication challenges, such as those with learning disabilities or autism, fully understand the information provided.

- The individual's understanding of the information will be confirmed, ensuring that consent is not only obtained but is informed and voluntary.
- Service users are provided with enough time to make decisions and are not pressured into giving consent.

5. Advocacy Services

In cases where a service user has difficulty understanding or making decisions about their care, Primus Plus Healthcare will provide access to independent advocacy services. Advocacy will be used when necessary to:

- Support service users who may struggle to communicate their preferences or fully understand the implications of their decisions.
- Ensure that service users' views are heard, especially for those who are vulnerable or have complex needs.
- Help the individual make decisions in their best interests, particularly in situations where they are unable to consent independently due to mental incapacity.

6. Deprivation of Liberty Safeguards (DoLS) and Community Deprivation of Liberty

We will adhere to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS) to ensure that service users are not deprived of their liberty without proper legal safeguards. This includes:

- Assessing whether any service user is being deprived of their liberty, and if so, ensuring the proper procedures are followed under the DoLS or Community Deprivation of Liberty framework.
- Applying for DoLS authorization where necessary, ensuring the process is carried out in the best interests of the service user, and ensuring that the least restrictive option is always considered.
- Offering service users the opportunity to be involved in decisions about their care and to challenge any restrictions imposed upon them.

7. Legal Representatives: Powers of Attorney and Deputies

When a service user is unable to make decisions for themselves, Primus Plus Healthcare will involve Powers of Attorney and legally appointed deputies to ensure that decisions are made in the individual's best interests. This includes:

- Ensuring that Powers of Attorney or legally appointed deputies are consulted when making decisions about care, treatment, or finances on behalf of a service user.
- Ensuring that any legal representatives understand their role and the scope of their authority in making decisions for the service user.

8. Mental Capacity Act 2005

In line with our commitment to person-centred care, Primus Plus Healthcare will comply with the Mental Capacity Act 2005 (MCA) and apply the five key principles of the MCA:

1. Presumption of Capacity: Service users will be presumed to have capacity unless proven otherwise.
2. Right to Make Unwise Decisions: Service users have the right to make decisions that others may consider unwise, as long as they have the capacity to make them.
3. Support to Make Decisions: We will ensure that service users are supported to make decisions by providing them with clear, understandable information.
4. Best Interests: When service users lack capacity, decisions will be made in their best interests, involving family members or other relevant individuals.
5. Least Restrictive Option: Any decision made on behalf of a service user will be the least restrictive option, ensuring their freedom and dignity are upheld.

Primus Plus Healthcare will also:

- Assess Mental Capacity: Where there is doubt about a service user's capacity to make a specific decision, an assessment will be carried out. This will be done by an appropriate professional, such as a healthcare provider or social worker, to ensure that decisions are made in the best interests of the individual.

9. Legal Compliance

Primus Plus Healthcare will ensure compliance with all relevant legal and regulatory requirements, including:

- The Accessible Information Standard: We will ensure that service users receive information in an accessible format that they can understand, based on their individual communication needs.
- The Equality Act 2010: We will ensure that our consent process is free from discrimination and accessible to everyone, including those with learning disabilities, mental health needs, and autism.
- UK General Data Protection Regulation (GDPR) and Data Protection Act 2018: We will comply with data protection regulations, ensuring that service users' personal data is collected, stored, and processed in accordance with the law.

4. OBJECTIVES

The primary objective of this Consent Policy and Procedure is to ensure that Primus Plus Healthcare adheres to the CQC regulations, relevant UK legislation, and best practices for obtaining, managing, and respecting consent from individuals receiving support through our Supported Living Without Personal Care Service. We are committed to delivering person-centred care that respects the autonomy and dignity of each individual, particularly those with learning disabilities, mental health needs, and autism spectrum conditions. This policy aims to meet the following key objectives:

1. Compliance with CQC Regulations

- Regulation 9: Person-centred Care: The policy ensures that care is planned and delivered based on the needs, preferences, and choices of each individual, with full respect for their ability to make decisions. This involves actively involving service users in discussions about their care, ensuring that consent is obtained in a way that reflects their preferences and promotes their rights.
- Regulation 11: Need for Consent: The policy outlines how Primus Plus Healthcare will consistently seek valid consent from service users before providing any care, treatment, or interventions. We will ensure that consent is obtained voluntarily and is based on a clear understanding of the treatment or service being provided.
- Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment: This policy is designed to safeguard the service user's right to make informed choices about their care and treatment, and to protect them from any form of abuse or coercion. It includes processes for ensuring that consent is always freely given, and that service users are aware of their rights and the option to withdraw consent at any time without negative consequences.

2. Clear and Transparent Consent Processes

- To ensure compliance with Regulation 11 and the principles of the Mental Capacity Act 2005, we will establish a clear process for obtaining and documenting consent from all service users. This will include:
    - How and when consent will be sought, with a focus on providing accessible information in formats that suit the needs of individuals with learning disabilities, mental health needs, and autism spectrum conditions.
    - Clear guidance on what will happen if a service user refuses or withdraws consent, ensuring that their rights are respected and that they are not coerced into any decision-making.
    - Processes to ensure that service users understand the implications of the care or treatment they are consenting to, and how we will support them in making decisions.

3. Ensuring Informed Consent

- Primus Plus Healthcare will ensure that consent is fully informed by:
    - Providing clear, accessible, and understandable information in formats that suit the service user's communication needs (e.g., easy-read, visual aids, videos, or supported decision-making strategies).
    - Giving service users the time and space to process information and ask any questions about their care.
    - Ensuring that all decisions are based on an understanding of the treatment or service offered, and that the risks, benefits, and alternatives are explained in a way that the service user can comprehend.

4. Use of Advocacy Services

- In cases where service users may have difficulty understanding the consent process or making decisions due to cognitive or communication challenges, Primus Plus Healthcare will involve advocacy services. This is particularly important for individuals with learning disabilities, mental health conditions, or autism spectrum disorders. The objectives in this area are:
    - Ensuring that the voice of the service user is heard and that they are fully supported in decision-making.
    - Providing individuals with a neutral, independent advocate to help ensure that their rights are respected and that they have all necessary support to make informed choices.

5. Deprivation of Liberty Safeguards (DoLS) and Community Deprivation of Liberty

- This policy will ensure compliance with Deprivation of Liberty Safeguards (DoLS) for service users who may be deprived of their liberty. We will:
    - Ensure that service users who lack mental capacity and may be at risk of being deprived of their liberty are supported by the necessary legal safeguards.
    - Follow the appropriate steps to apply for DoLS authorization when necessary, and ensure that any restrictions are the least restrictive option and are made in the service user's best interests.
    - Provide service users with information about DoLS and how they can challenge any restrictions imposed.

6. Involvement of Legal Representatives, Powers of Attorney, and Deputies

- Primus Plus Healthcare will comply with the Mental Capacity Act 2005 by involving Powers of Attorney and legally appointed deputies when necessary. The objectives are to:
    - Ensure that legal representatives are involved in decision-making when a service user lacks capacity to consent to their care, treatment, or support.
    - Define when and how these representatives will be engaged in the consent process, and how we will ensure that decisions are made in the best interests of the service user.
    - Recognize the rights of legal representatives, while ensuring that the service user's preferences and dignity are upheld wherever possible.

7. Mental Capacity Act 2005 Compliance

- The policy will outline how Primus Plus Healthcare will meet our responsibilities under the Mental Capacity Act 2005, ensuring that:
    - We apply the five principles of the MCA: presumption of capacity, the right to make unwise decisions, support to make decisions, best interests, and the least restrictive option.
    - Mental capacity assessments will be conducted by appropriately qualified staff when a service user's capacity to make a specific decision is in question.

- Decisions regarding care and treatment will be made in line with the principles of the MCA, ensuring that service users who lack capacity are supported and that the care provided is in their best interests.

8. Compliance with Additional Legal Requirements

- Primus Plus Healthcare will ensure full compliance with additional legal requirements, including:
  - The Accessible Information Standard: All information provided to service users will be clear, accessible, and tailored to their individual communication needs, ensuring they are fully informed and able to give consent.
  - The Equality Act 2010: The consent process will be inclusive, ensuring that service users with learning disabilities, autism, and mental health conditions are not discriminated against and have equal opportunities to make decisions about their care.
  - UK General Data Protection Regulation (GDPR) and Data Protection Act 2018: Service users' personal data will be processed in compliance with data protection laws, and their consent will be sought for the processing of sensitive data related to their care.

9. Services for Autistic People and People with Learning Disabilities

- As part of our commitment to providing high-quality, inclusive care, Primus Plus Healthcare will ensure that our services are fully accessible to autistic people and individuals with learning disabilities. This will involve:
  - Tailoring the consent process to meet the specific needs of these individuals, ensuring that information is provided in an accessible format and that their decision-making processes are supported appropriately.
  - Ensuring that service users with autism or learning disabilities are empowered to participate in decisions regarding their care, and that advocacy and communication support are available when needed.

5. DEFINITIONS

In order to ensure clarity and consistency, the following definitions are provided for key terms, abbreviations, and acronyms used in this Consent Policy and Procedure. These terms are aligned with CQC regulations, relevant UK legislation, and best practices in supported living without personal care services. The definitions aim to ensure that service users, their families, carers, and all staff at Primus Plus Healthcare have a shared understanding of the language used throughout this policy.

1. Consent

Consent is the voluntary, informed, and specific agreement to a proposed treatment, care plan, procedure, or service. It must be given freely and without coercion, and the individual must have the capacity to understand the information provided and the implications of the decision. Consent can be written, verbal, or implied, depending on the situation.

- Informed Consent: Consent that is given after an individual has been provided with clear, accurate, and comprehensible information about the nature, risks, benefits, and alternatives to the proposed treatment or care.

2. Mental Capacity

Mental capacity refers to an individual's ability to make decisions for themselves, understanding the nature and consequences of the decisions they are making. Under the Mental Capacity Act 2005, an individual is presumed to have capacity unless it is demonstrated otherwise.

- Mental Capacity Act (MCA) 2005: A UK law that provides a framework for making decisions on behalf of individuals who lack the mental capacity to make decisions for themselves. The Act outlines the five core principles which ensure that decisions made for individuals lacking capacity are in their best interests and least restrictive.

3. Deprivation of Liberty Safeguards (DoLS)

The Deprivation of Liberty Safeguards (DoLS) are part of the Mental Capacity Act 2005 and provide a legal framework for ensuring that individuals who may be deprived of their liberty, particularly those with learning disabilities or mental health needs, are not unlawfully detained. These safeguards protect the rights of service users who may be at risk of being deprived of their liberty in a care setting.

- Community Deprivation of Liberty: A form of DoLS for individuals living in the community who may be deprived of their liberty due to care arrangements.

4. Person-Centred Care

Person-centred care is an approach that focuses on the needs, preferences, and rights of individuals, ensuring that care, treatment, and decisions are tailored to their specific needs and circumstances. This approach is a central tenet of CQC Regulation 9 and requires that services be delivered in a way that respects the dignity and autonomy of each person.

- CQC Regulation 9 (Person-Centred Care): A requirement that healthcare services must provide care that is respectful, individualized, and tailored to each service user's needs, preferences, and choices.

5. Advocacy

Advocacy refers to the support provided to service users who need assistance in making decisions about their care and treatment. Advocates can help individuals understand their rights, provide information in an accessible way, and support them in expressing their views, particularly for those with learning disabilities, mental health needs, or autism spectrum conditions.

- Independent Advocacy: Advocacy that is provided by an independent person or organization who is not involved in the service user's care. This ensures that the individual's rights are protected and that they are supported in making informed decisions.

6. Power of Attorney (POA)

A Power of Attorney (POA) is a legal document that allows an individual (the "donor") to appoint another person (the "attorney") to make decisions on their behalf if they lose the ability to do so themselves. There are two types of POA relevant to care and consent:

- Health and Welfare POA: This allows someone to make decisions about an individual's healthcare and medical treatments if the individual is unable to make those decisions themselves.
- Property and Financial Affairs POA: This gives an attorney the authority to manage financial matters on behalf of the individual.
- Legally Appointed Deputies: If a person lacks mental capacity and has not made a POA, a deputy may be appointed by the Court of Protection to make decisions on their behalf.

7. GDPR (General Data Protection Regulation)

The General Data Protection Regulation (GDPR) is a regulation in UK law (implemented through the Data Protection Act 2018) that governs how personal data must be collected, stored, and processed. It applies to Primus Plus Healthcare when handling personal data, including sensitive information like health records, to ensure that service users' privacy rights are respected.

- Data Processing: Refers to any action involving personal data, including the collection, storage, alteration, or sharing of data.

8. High-Risk Treatments

High-risk treatments are medical or care interventions that have a higher probability of causing significant harm or complications. These may include surgeries, invasive procedures, or complex care plans that carry substantial risks.

- Informed Consent for High-Risk Treatments: A detailed and thorough process for obtaining consent for treatments that involve significant risks to the service user's health or wellbeing, ensuring that they understand the risks, benefits, and alternatives.

9. Safeguarding

Safeguarding refers to the process of protecting vulnerable individuals from abuse, neglect, and exploitation, particularly in care environments. It includes ensuring that service users are protected from abuse or improper treatment, as outlined in CQC Regulation 13.

- Abuse: Any form of mistreatment or harm that is inflicted on a person, including physical, emotional, sexual, or financial abuse.
- Safeguarding Policy: The procedures and protocols put in place to prevent and respond to allegations of abuse, ensuring the safety and well-being of service users.

10. Implied Consent

Implied consent is the assumption that consent is given based on a person's actions or behaviour. This type of consent is generally used in situations where consent is inferred from the individual's conduct, such as attending a medical consultation.

- Informed Implied Consent: A form of consent where the individual is assumed to agree to a course of action based on their behaviour or participation, provided that they have been adequately informed about the nature of the action.

11. Capacity

Capacity refers to a person's ability to make decisions for themselves about their care, treatment, or personal affairs. This is assessed using the Mental Capacity Act 2005.

- Capacity Assessment: The process of evaluating whether an individual is able to make a specific decision based on their understanding of the information provided, and whether they can appreciate the consequences of their decision.

12. Service User

A service user is an individual who receives care or services from Primus Plus Healthcare. This term includes adults with learning disabilities, mental health needs, autism spectrum conditions, or other individuals who are in receipt of supported living without personal care services.

13. Best Interests

The Best Interests principle is a key element of the Mental Capacity Act 2005, which dictates that decisions made on behalf of individuals who lack the capacity to consent should be made in their best interests. This includes considering the individual's wishes, feelings, beliefs, and values.

Key Acronyms and Abbreviations

- CQC: Care Quality Commission
- MCA: Mental Capacity Act 2005
- POA: Power of Attorney
- DoLS: Deprivation of Liberty Safeguards
- GDPR: General Data Protection Regulation
- ICO: Information Commissioner's Office
- HRA: Health Research Authority
- RCN: Royal College of Nursing
- MOJ: Ministry of Justice

6 LEGAL AND REGULATORY FRAMEWORK

The Consent Policy and Procedure at Primus Plus Healthcare is designed to comply with all relevant UK legislation and regulatory requirements governing the provision of care and treatment in supported living without personal care services. This policy outlines how we will ensure that the consent process is fully compliant with CQC regulations, the Mental Capacity Act 2005, and other applicable laws, to provide high-quality care for individuals with learning disabilities, mental health needs, and autism spectrum conditions. The legal and regulatory framework for this policy is as follows:

1. Care Quality Commission (CQC) Regulations

Primus Plus Healthcare is committed to complying with the CQC regulations, particularly those relating to person-centred care, consent, and safeguarding. The following CQC regulations are integral to our approach:

- Regulation 9: Person-centred care
  This regulation requires services to be delivered in a way that is tailored to the needs and preferences of individuals, ensuring that care is both appropriate and effective. Primus Plus Healthcare will ensure that consent is obtained in a manner that is consistent with person-centred care principles, ensuring that each service user's voice is heard and their preferences are central to care planning.
- Regulation 11: Need for Consent
  The policy ensures that we will always seek consent from individuals before providing care or treatment, ensuring that all consent is informed and voluntary. Service users will have the opportunity to make decisions about their care and treatment, and will not be coerced or unduly influenced in any way.
- Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment
  This regulation mandates that service users are protected from abuse, neglect, and improper treatment. Our consent policy ensures that individuals are informed of their rights, are able to refuse or withdraw consent at any time, and are fully supported when making decisions. Additionally, if a service user's consent is not properly obtained or respected, they will be safeguarded from any potential abuse or improper treatment.

2. Mental Capacity Act 2005 (MCA)

The Mental Capacity Act 2005 (MCA) is a key piece of legislation that governs how consent is obtained from individuals who may have impaired mental capacity, including those with learning disabilities, mental health conditions, or autism spectrum disorders. Primus Plus Healthcare will ensure compliance with the MCA by:

- Applying the Five Principles of the MCA:
  1. Presumption of Capacity: We will presume that every individual has the capacity to make their own decisions unless proven otherwise.
  2. Right to Make Unwise Decisions: Service users will have the right to make decisions that may seem unwise to others, provided they have the mental capacity to do so.
  3. Support to Make Decisions: We will provide service users with the necessary support to help them make decisions, using communication aids or involving an advocate where necessary.
  4. Best Interests: When service users lack capacity, decisions will be made in their best interests, with the involvement of those who are close to the individual, including family members and legally appointed representatives.
  5. Least Restrictive Option: We will ensure that any decision made for a service user who lacks capacity will be the least restrictive option, preserving their rights and freedom as much as possible.

- Assessing Mental Capacity: We will conduct assessments of mental capacity in accordance with the MCA to determine if a service user has the ability to make decisions about their care and treatment. These assessments will be conducted by qualified professionals and will involve the service user as much as possible. The assessment will take place at the point of decision-making and will consider the individual's ability to understand, retain, and weigh up information before making a decision.

3. Deprivation of Liberty Safeguards (DoLS) and Community Deprivation of Liberty

For individuals who may be deprived of their liberty, either within a care setting or in the community, Primus Plus Healthcare will ensure full compliance with Deprivation of Liberty Safeguards (DoLS), which are part of the Mental Capacity Act 2005.

- DoLS Application: If a service user lacks the capacity to consent and is at risk of being deprived of their liberty, we will apply for DoLS authorization, ensuring that the process is transparent and legally compliant. We will ensure that any restrictions placed on the service user are in their best interests and are the least restrictive possible.
- Community Deprivation of Liberty: For individuals living in the community, we will ensure that any deprivation of liberty is fully authorized under the applicable legal framework and that the individual's rights are upheld.

4. Powers of Attorney and Legally Appointed Deputies

In cases where a service user is unable to make decisions about their care due to mental incapacity, we will engage with Powers of Attorney (POA) and legally appointed deputies in accordance with the Mental Capacity Act 2005.

- Powers of Attorney: If a service user has appointed someone to act on their behalf under a Health and Welfare Power of Attorney, we will involve this person in the consent process when the individual is unable to make decisions themselves. The Power of Attorney will have the legal authority to make decisions in the service user's best interests regarding care and treatment.
- Legally Appointed Deputies: For service users under the Court of Protection, who have a legally appointed deputy, we will work closely with the deputy to ensure decisions about care and treatment are made in the service user's best interests and with their dignity and rights preserved.

5. Data Protection Laws: GDPR and Data Protection Act 2018

Primus Plus Healthcare will comply with the UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018 to ensure that personal and sensitive data is handled with the utmost care. We will:

- Obtain explicit consent from service users for the collection, processing, and storage of their personal data, particularly in relation to health and care information.
- Ensure that all service users have access to clear information about how their data will be used and their rights to withdraw consent for data processing.
- Store and manage all service user data in a secure and confidential manner, ensuring compliance with GDPR principles of data minimization, accuracy, and security.

6. Accessible Information Standard and Equality Act 2010

Primus Plus Healthcare will ensure that all consent processes are inclusive and accessible to service users, especially those with learning disabilities, mental health needs, and autism spectrum conditions. This will include:

- Accessible Information: We will comply with the Accessible Information Standard, providing service users with information about their care, treatment, and the consent process in formats that are understandable to them. This may include easy-read materials, visual aids, communication support, or using advocates or family members to facilitate understanding.
- Equality Act 2010: We will ensure that the consent process does not discriminate against any service user based on their disability or any other protected characteristic. This includes providing reasonable adjustments to ensure that individuals with disabilities are not placed at a disadvantage when providing consent.

7. TYPES OF CONSENT

The Consent Policy and Procedure at Primus Plus Healthcare recognizes that consent is a vital aspect of delivering care and treatment that respects the dignity, autonomy, and rights of each service user, particularly those in our Supported Living Without Personal Care Service. Given the diverse needs of our service users, including adults with learning disabilities, mental health needs, and autism spectrum conditions, this policy outlines the different types of consent we may seek and the processes we will follow to ensure all consent is valid, informed, and freely given. Our approach aligns with CQC regulations, the Mental Capacity Act 2005, and other relevant legislation.

The following types of consent are recognized and defined in this policy:

1. Informed Consent

Informed Consent is the process through which individuals are provided with all the information necessary to make an informed decision about their care or treatment. This includes the nature, purpose, potential risks, and benefits of the treatment or service. Service users must understand the information and have the capacity to make decisions before consenting.

- Primus Plus Healthcare will ensure that informed consent is obtained before any care, treatment, or procedure is provided.
- Service users will be given clear and accessible information in a format that meets their communication needs (e.g., easy-read documents, visual aids, or supported decision-making methods).
- Service users will be informed of their right to withdraw consent at any time without any repercussions or negative consequences.
- This process will be tailored to ensure that individuals with learning disabilities, autism spectrum conditions, and mental health needs are fully supported in understanding the information.

In accordance with CQC Regulation 11 (Need for Consent), informed consent must be sought and documented for all interventions, treatments, or services provided to individuals.

2. Implied Consent

Implied Consent occurs when an individual's actions or behaviours indicate their agreement, even without verbal or written acknowledgment. This type of consent is often inferred in situations where an individual voluntarily engages in an activity or accepts an offer without explicitly stating consent.

- In the context of Primus Plus Healthcare, implied consent may be assumed for low-risk activities or non-invasive support (e.g., attending a planned care meeting or participating in social activities).
- However, Primus Plus Healthcare will ensure that clear verbal or written consent is obtained for more complex or high-risk treatments and procedures.
- Implied consent will always be assessed to ensure that it is given voluntarily, and service users' autonomy and rights will be respected.

While implied consent may be valid in specific, routine situations, it will not replace the need for informed consent when there is a higher risk or more complex decision-making involved.

3. Written Consent

Written Consent is required in situations where a clear, formal record of consent is necessary to ensure that the service user's decision is legally documented. This is often required for high-risk treatments, invasive procedures, or when the law mandates written documentation.

- Primus Plus Healthcare will seek written consent for medical treatments, surgeries, participation in research studies, or any procedures involving significant risk to the individual.
- Written consent will include detailed information about the nature of the treatment or care being provided, any associated risks, and the service user's right to refuse or withdraw consent.
- A written record will be made of all decisions and consent forms will be signed by the service user, their legal representative, or an advocate, where applicable.

This aligns with CQC Regulation 11: Need for Consent, ensuring that the process of obtaining consent is documented and compliant with legal requirements.

4. Verbal Consent

Verbal Consent may be appropriate for less invasive interventions or situations where written consent is not required. However, Primus Plus Healthcare will ensure that verbal consent is always documented in the service user's care record, noting the circumstances under which consent was given and the information provided.

- Verbal consent is appropriate in situations where the risk is minimal and the service user can clearly express their agreement.

- For example, verbal consent may be sought for simple activities such as agreeing to a daily routine or participating in non-medical activities.
- Service users will be informed of their right to withdraw verbal consent at any time and this will be documented as part of the service user's care record.

While verbal consent is valid, it will only be used in situations where there are minimal risks or complexities, and appropriate documentation will be made in the service user's file.

5. Parental/Guardian Consent (for Service Users Under 18 or With Limited Capacity)

In cases where service users are under the age of 18 or have limited mental capacity to make decisions about their care and treatment, Primus Plus Healthcare will ensure that consent is sought from parents, guardians, or legally appointed representatives (e.g., a Power of Attorney or Deputy under the Mental Capacity Act 2005).

- Parental or Guardian Consent will be required for service users under the age of 18 before any care, treatment, or services are provided.
- Guardians or legal representatives will be involved in decisions for service users who are unable to make informed decisions due to their mental capacity limitations.
- The consent of the guardian or legal representative will be documented, ensuring that the service user's best interests are represented.
- In line with Regulation 11 (Need for Consent), this ensures that the service user's rights are protected, and the care provided is in their best interests.

6. Mental Capacity and Best Interests (Mental Capacity Act 2005)

For individuals who may lack capacity to make decisions about their care, treatment, or services, Primus Plus Healthcare will ensure that the Mental Capacity Act 2005 (MCA) principles are followed. This involves assessing whether a service user has the capacity to consent and making decisions in their best interests where necessary.

- Mental Capacity Assessments will be conducted when there is doubt about an individual's capacity to make decisions. These assessments will be carried out by qualified professionals such as healthcare providers, social workers, or mental health professionals.
- If a service user lacks capacity to make a decision, decisions will be made in their best interests according to the MCA. This may involve consulting family members, guardians, or advocates.
- All decisions made on behalf of service users will comply with the least restrictive option principle, ensuring that the individual's rights and freedoms are respected.

Primus Plus Healthcare is committed to supporting service users in making decisions to the best of their ability, in line with the five principles of the MCA:

1. Presumption of capacity,
2. Right to make unwise decisions,
3. Support to make decisions,

4. Best interests,
5. Least restrictive option.

7. Consent for Data Processing (UK GDPR & Data Protection Act 2018)

Primus Plus Healthcare will ensure that all service users give their informed consent for the collection, processing, and storage of their personal and sensitive data in compliance with the UK General Data Protection Regulation (GDPR) and Data Protection Act 2018.

- Data Consent: Service users will be informed about the types of personal data we collect, how it will be used, and their rights regarding their data.
- Right to Withdraw: Service users will have the right to withdraw consent for data processing at any time, and they will be informed about how to do so.
- The service user's consent for data collection will be obtained separately from consent for care and treatment, ensuring transparency and clarity about the different types of consent being given.

8. CONSENT PROCESS

At Primus Plus Healthcare, we recognise that obtaining valid, informed, and voluntary consent is a fundamental right of every service user. This Consent Process is designed to ensure that Primus Plus Healthcare complies with CQC regulations, relevant UK legislation, and national guidelines, while meeting the diverse needs of adults with learning disabilities, mental health needs, and autism spectrum conditions who use our Supported Living without Personal Care Service. Our approach is rooted in the principles of person-centred care (Regulation 9), the need for consent (Regulation 11), and safeguarding service users from abuse and improper treatment (Regulation 13).

This section outlines the key steps and processes we will follow to ensure that consent is obtained and managed in a way that is clear, ethical, and legally compliant.

1. Initial and Ongoing Consent

Primus Plus Healthcare will ensure that consent is obtained before any care, treatment, or intervention is provided. Consent will be sought in a manner that is transparent and respectful of the service user's autonomy and preferences. Our process includes:

- Initial Consent: Consent must be obtained prior to the start of any treatment or care. This may be obtained verbally, in writing, or through implied consent, depending on the nature of the intervention.
- Ongoing Consent: Consent is not a one-time event. It will be regularly reviewed and confirmed, particularly in cases of ongoing treatment or where the circumstances change (e.g., a change in treatment plan, or if a service user's capacity to consent is questioned).
- Service User Rights: Service users have the right to withdraw or refuse consent at any time without experiencing negative consequences. We will ensure that individuals understand

their right to change their mind and that any decision to withdraw consent will be respected and documented appropriately.

2. How and When We Seek Consent

Primus Plus Healthcare will seek consent in accordance with the following guidelines:

- How:
    - Consent will be voluntary, meaning it is given freely and without coercion.
    - We will provide clear, understandable information about the care, treatment, or support being offered. This information will be tailored to the individual's needs and may include easy-read documents, visual aids, and/or supported decision-making strategies.
    - Advocacy support may be provided if the individual needs assistance in understanding the information or expressing their preferences.
    - For service users with learning disabilities, autism spectrum conditions, or mental health needs, the information will be provided in a format that meets their communication needs.
- When:
    - Consent will be sought before any treatment or intervention occurs, except in cases of emergency care where it is not possible to obtain consent.
    - Consent will also be obtained for non-medical activities that may involve personal preferences, such as participation in community activities or social events.
    - We will ensure that consent is updated whenever there are significant changes to care plans, treatment options, or when new risks are identified.

3. Ensuring Informed Consent

Primus Plus Healthcare is committed to ensuring that all service users provide informed consent. To meet this obligation, we will ensure the following:

- Comprehensive Information: Service users will be provided with information that is both comprehensive and appropriate to their understanding. This will include details of the care or treatment being proposed, the risks involved, the benefits, and any alternatives available.
- Accessible Information: For service users with communication barriers, information will be provided in an accessible format. This could include easy-read documents, visual aids, interpreters, or advocates as needed.
- Understanding Confirmation: We will confirm that the service user fully understands the information provided. This will be done through discussions, providing opportunities for questions, and using a variety of communication methods.
- Time to Make Decisions: Service users will be given the time and space needed to make decisions at their own pace, ensuring that they are not rushed or pressured.

4. Advocacy Services

In line with CQC Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment), Primus Plus Healthcare will ensure that service users who may have difficulty understanding or making decisions are fully supported through advocacy services. This support may be necessary in the following circumstances:

- Communication Difficulties: If the service user has difficulty understanding the consent process due to their learning disability, autism spectrum condition, or mental health needs, we will offer the support of an independent advocate to help them express their preferences and make informed decisions.
- Vulnerable Adults: For individuals who may be particularly vulnerable, such as those with severe cognitive impairment, advocacy will ensure that their voice is heard, and that their rights are protected during the consent process.

Advocacy will be arranged in cooperation with the service user, their family, or carers, ensuring that the individual is fully supported throughout the decision-making process.

5. Withdrawal or Refusal of Consent

Service users have the right to withdraw or refuse consent at any time. Primus Plus Healthcare will ensure that the process for withdrawing or refusing consent is straightforward and that no service user is made to feel uncomfortable or pressured to change their decision. This will involve:

- Clear Communication: Service users will be informed of their right to withdraw consent and how they can do so. They will be assured that withdrawing consent will not result in negative treatment or any form of reprisal.
- Documentation: Whenever consent is withdrawn, it will be clearly documented, and alternative care arrangements will be discussed if necessary.
- Alternative Support: If a service user withdraws consent for a specific treatment or care plan, we will work with them to explore alternative options that respect their wishes and best interests.

6. Deprivation of Liberty Safeguards (DoLS) or Community Deprivation of Liberty

In accordance with the Mental Capacity Act 2005, Primus Plus Healthcare will follow the required procedures when a service user may be at risk of being deprived of their liberty. This may apply to situations where an individual lacks capacity and restrictive interventions may be required.

- DoLS Applications: If necessary, we will apply for Deprivation of Liberty Safeguards (DoLS) for individuals who may be deprived of their liberty in residential settings. This will ensure that any restrictions on freedom are legally authorized and in the best interests of the individual.
- Community Deprivation of Liberty: For service users in supported living who may not be in a residential care setting but are still subject to restrictions, we will follow the appropriate procedures to ensure that any deprivation of liberty is authorized and meets legal standards.

The least restrictive option will always be considered, and the service user's rights will be respected to the fullest extent possible.

7. Legal Representatives (Powers of Attorney and Deputies)

When a service user is unable to consent due to mental incapacity, Primus Plus Healthcare will involve legally appointed representatives (e.g., Powers of Attorney or legally appointed deputies) as required under the Mental Capacity Act 2005.

- Powers of Attorney: If a service user has a Health and Welfare Power of Attorney, this person will be involved in decision-making on the service user's behalf when they are unable to consent for themselves. This legal representative will be consulted for decisions regarding care, treatment, and personal matters.
- Legally Appointed Deputies: For service users under the Court of Protection, decisions will be made in consultation with the legally appointed deputy, ensuring that all actions taken are in the best interests of the service user.

8. Compliance with Legal and Regulatory Standards

This consent process complies with key regulations and laws, including:

- CQC Regulation 9 (Person-centred Care): Ensuring that care is tailored to the individual's needs and preferences.
- CQC Regulation 11 (Need for Consent): Ensuring that consent is sought and obtained appropriately before any care, treatment, or intervention is provided.
- CQC Regulation 13 (Safeguarding Service Users): Ensuring that service users are protected from abuse and improper treatment and that their consent is always respected.
- Mental Capacity Act 2005: Ensuring that consent is obtained from individuals with capacity and supporting those without capacity to make decisions in their best interests.
- Deprivation of Liberty Safeguards (DoLS): Ensuring that any restrictions on a service user's liberty are legally authorized and in their best interests.

9. CONSENT FOR DATA PROCESSING

At Primus Plus Healthcare, we recognize that data processing is an integral part of the care we provide, especially for individuals in our Supported Living without Personal Care Service. This includes the collection, storage, and use of personal data, particularly sensitive health data, to deliver tailored care. Primus Plus Healthcare is fully committed to ensuring that all data processing activities comply with CQC regulations, relevant UK legislation, and best practices, with a particular focus on service users with learning disabilities, mental health needs, and autism spectrum conditions.

This Consent for Data Processing section outlines how we will obtain and manage consent for the processing of personal data, in accordance with Regulation 9: Person-centred Care, Regulation 11: Need for Consent, and Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment of the CQC, alongside relevant data protection laws such as the General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

1. Understanding the Importance of Consent for Data Processing

Data is essential to providing high-quality, person-centred care. We collect, store, and use personal information to ensure that care is tailored to each individual's needs. This includes sensitive personal data such as health information, care plans, and any other data relevant to their care, treatment, and well-being.

- Service User Rights: Each service user has the right to know how their personal data will be used, and the right to control their data by giving consent for its collection, use, and storage.
- Informed Consent: Consent for data processing must be informed, freely given, and specific. Service users must understand the purpose of the data collection and how it will be used. Information will be presented in a way that meets their communication needs, whether through easy-read formats, visual aids, or support from an advocate.

2. How and When Consent for Data Processing Will Be Sought

Primus Plus Healthcare will seek consent for the processing of personal data in the following manner:

- When:
    - Consent will be sought before any personal or sensitive data is collected or processed.
    - The service user will be informed at the point of data collection about the types of data being collected and the purpose for which it will be used.
    - Ongoing consent: Service users will be regularly reminded about their right to withdraw consent and how to exercise that right.
- How:
    - Informed Consent: We will provide clear, accessible, and understandable information to service users about the data processing activities. This includes explaining the purpose of the data processing, how the data will be used, stored, and shared, and their rights under GDPR.
    - Communication Support: For service users with learning disabilities, mental health needs, or autism spectrum conditions, we will offer additional support in understanding data processing practices. This may include easy-read documents, visual aids, or help from an advocate.
    - Written Consent: In most cases, consent will be obtained in writing to create a clear record. This may include the signing of consent forms or confirmation via secure digital methods.
    - Verbal Consent: In certain situations, verbal consent may be acceptable, provided that it is documented clearly in the service user's record and that they fully understand the nature of the data being collected.

3. Service User Rights Regarding Data Processing

In line with the GDPR and the Data Protection Act 2018, service users have specific rights regarding their personal data. These include:

- Right to Withdraw Consent: Service users can withdraw their consent for data processing at any time. We will ensure that the withdrawal process is clear and simple, and that service users know how to withdraw their consent without negative consequences.
- Right to Access Data: Service users can request access to their personal data. We will provide a clear process for service users to request access to the data we hold about them.
- Right to Rectification: If personal data is inaccurate or incomplete, service users have the right to have it corrected or updated.
- Right to Erasure (Right to be forgotten): In some circumstances, service users may request that their personal data be erased. We will comply with this request where applicable, in line with legal requirements.

4. Data Protection Principles

Primus Plus Healthcare is committed to adhering to the core principles of the GDPR and the Data Protection Act 2018 when processing personal data:

- Lawfulness, Fairness, and Transparency: Data will be processed lawfully and transparently. We will inform service users about the purpose and legal basis for collecting and processing their data.
- Purpose Limitation: Data will only be collected for specific, legitimate purposes and will not be used for anything incompatible with those purposes.
- Data Minimisation: Only the minimum necessary data will be collected, ensuring that we do not process more data than needed for the purpose of providing care.
- Accuracy: We will take all reasonable steps to ensure that the data we collect is accurate and up to date.
- Storage Limitation: Personal data will only be kept for as long as necessary for the purposes it was collected. Service users will be informed of how long their data will be retained.
- Integrity and Confidentiality: Personal data will be processed securely, using appropriate technical and organisational measures to prevent unauthorised access or disclosure.

5. Sharing Personal Data

In certain situations, Primus Plus Healthcare may need to share personal data with other parties, such as healthcare professionals, external agencies, or regulatory bodies. We will ensure that any data sharing is done in compliance with the GDPR and that service users are informed about who their data may be shared with and why.

- Service User Consent: We will seek explicit consent from the service user before sharing personal data with third parties, unless required by law or in an emergency situation.
- Data Sharing Agreements: Where applicable, we will establish clear data-sharing agreements with third parties to ensure that service user data is handled securely and in line with data protection laws.

6. Dealing with Special Categories of Personal Data

Certain categories of personal data are considered more sensitive, such as health data. Under the GDPR, special provisions apply to processing sensitive personal data.

- Health Data Consent: We will seek explicit consent from service users before collecting, storing, or processing sensitive health data.
- Legal Basis for Processing: If explicit consent is not possible, we will ensure that another legal basis for processing sensitive data exists, such as when the processing is necessary for the provision of care or treatment.

7. Training and Awareness

To ensure that all staff at Primus Plus Healthcare comply with GDPR and the Data Protection Act 2018, all relevant staff will undergo regular training on data protection principles, the consent process, and the rights of service users. Staff will be equipped to handle sensitive data securely and to ensure that the service user's consent for data processing is always sought, recorded, and respected.

8. Compliance with Legal and Regulatory Standards

Primus Plus Healthcare ensures full compliance with the following legal and regulatory frameworks regarding data processing and consent:

- GDPR (General Data Protection Regulation): Compliance with data protection principles, rights of data subjects, and obligations of data controllers and processors.
- Data Protection Act 2018: Ensuring adherence to the UK's data protection laws, which supplement the GDPR for domestic data protection.
- CQC Regulations: Adhering to the CQC Regulation 11 on obtaining consent and ensuring data is handled in a compliant and ethical manner.
- The Accessible Information Standard: Ensuring all personal data processing information is communicated in formats accessible to service users, particularly for those with learning disabilities or autism.
- Equality Act 2010: Ensuring that the consent process and data collection are non-discriminatory, inclusive, and respectful of the individual's rights and dignity.

10. CONSENT IN HIGH-RISK TREATMENTS

At Primus Plus Healthcare, we recognize that obtaining valid and informed consent is crucial, especially for high-risk treatments and procedures. This is particularly important for individuals in our Supported Living Without Personal Care Service, which includes adults with learning disabilities, mental health needs, and autism spectrum conditions. Our approach is designed to ensure that consent is obtained in a manner that is compliant with CQC regulations, the Mental Capacity Act 2005, and other relevant legislation, while safeguarding service users from harm and ensuring their rights are respected.

1. Definition of High-Risk Treatments

High-risk treatments refer to any care, medical procedure, or intervention that carries significant risks of adverse outcomes for the service user. This may include, but is not limited to:

- Medical treatments: Surgeries, invasive procedures, or other treatments that carry substantial risk of harm or complications.
- Medication management: The use of new or complex medications that may have significant side effects or interactions.
- Psychological interventions: Treatments or therapies that may impact a service user's mental health or emotional well-being.
- Research participation: Involvement in clinical trials or studies that carry potential risks to the individual's health or wellbeing.

2. When and How We Seek Consent for High-Risk Treatments

For high-risk treatments, the process for obtaining consent will follow a rigorous, clear, and structured procedure to ensure that the service user understands the nature of the intervention and is provided with all necessary information. The process includes the following steps:

- Clear, Accessible Information:
    - Service users will be provided with detailed and accessible information about the nature of the treatment, including potential risks, benefits, and alternatives.
    - This information will be tailored to the service user's communication needs, with the use of easy-read documents, visual aids, supported decision-making tools, or the assistance of an advocate where necessary.
- Informed Consent:
    - Primus Plus Healthcare will ensure that the service user fully understands the information provided and has had the opportunity to ask questions. For those with learning disabilities, autism, or mental health needs, this may involve using additional communication strategies or support to ensure full comprehension.
    - In high-risk treatments, written consent will typically be required to ensure a formal record of the decision. This consent will be documented and retained as part of the service user's care record, as per Regulation 11: Need for Consent of the CQC.
- Comprehension and Time for Decision-Making:
    - We will allow service users sufficient time to process the information and make an informed decision, ensuring that they are not rushed into making a decision under pressure.
    - Capacity assessments will be conducted when necessary, in line with the Mental Capacity Act 2005, to ensure that the service user has the mental capacity to understand the risks and benefits involved.
- Voluntary and Coercion-Free Decision:

- Consent for high-risk treatments must be given voluntarily, without any coercion or undue influence. The service user will be reminded that they have the right to withdraw consent at any point without any negative consequences.

3. Special Considerations for Service Users with Learning Disabilities, Mental Health Needs, or Autism Spectrum Conditions

Given the specific needs of individuals with learning disabilities, mental health needs, or autism spectrum conditions, the consent process for high-risk treatments will incorporate the following additional safeguards:

- Adapted Communication: Information about high-risk treatments will be provided in a format that meets the communication needs of the service user. This may include:
  - Easy-read materials
  - Visual aids or diagrams
  - Communication through speech, signs, or symbols
  - Assistance from advocates or support workers to help the service user understand the information
- Use of Advocacy Services: Where necessary, an independent advocate may be involved to help the service user understand the implications of the treatment and support them in making an informed decision. This is particularly important for individuals who may struggle with decision-making due to cognitive or communication challenges.
- Person-Centred Approach: The person-centred care approach will be at the core of the consent process. This involves actively involving the service user in discussions about the high-risk treatment, respecting their preferences, and ensuring that their dignity and autonomy are maintained.

4. Role of Legal Representatives (Powers of Attorney and Legally Appointed Deputies)

For service users who may lack the capacity to consent to high-risk treatments, the involvement of legal representatives is crucial. In accordance with the Mental Capacity Act 2005, Primus Plus Healthcare will involve Powers of Attorney and legally appointed deputies in the consent process when necessary.

- Powers of Attorney: If a service user has appointed a Health and Welfare Power of Attorney, this individual will be consulted regarding high-risk treatments, ensuring that decisions are made in the best interests of the service user.
- Legally Appointed Deputies: For service users who are under the Court of Protection, the appointed deputy will be involved in decisions about high-risk treatments, ensuring that the individual's rights and best interests are considered throughout the process.

5. Mental Capacity Act 2005 (MCA) and High-Risk Treatments

As part of the Mental Capacity Act 2005, Primus Plus Healthcare will assess the mental capacity of service users to make decisions about high-risk treatments, ensuring that decisions are made in line with the MCA's principles.

- Mental Capacity Assessments: If there are concerns about a service user's capacity to consent, we will conduct a formal mental capacity assessment. This will be carried out by a trained professional (e.g., healthcare provider, social worker) to determine if the service user has the capacity to make the specific decision.
- Best Interests Decisions: If the service user lacks the capacity to consent, decisions will be made in their best interests, with input from relevant parties (e.g., family, legal representatives, and healthcare professionals).
- The Least Restrictive Option: The treatment or procedure will be the least restrictive option, in line with the MCA principles, ensuring that the service user's rights and freedom are preserved as much as possible.

6. Documentation and Record Keeping

To ensure full compliance with Regulation 11 (Need for Consent) and to maintain transparency, Primus Plus Healthcare will ensure that the entire consent process for high-risk treatments is documented thoroughly:

- Written Records: Consent for high-risk treatments will be documented in writing. This will include:
    - The service user's understanding of the treatment, risks, and benefits.
    - The method of consent (e.g., verbal or written).
    - The service user's confirmation that they were given sufficient time and support to make an informed decision.
    - Any support provided, such as advocacy or communication aids.
    - The involvement of legal representatives or deputies if applicable.
- Service User's Right to Withdraw: The record will also include details about the service user's right to withdraw consent at any time and the steps to take should they choose to do so.

7. Safeguarding and High-Risk Treatments

Primus Plus Healthcare ensures that all high-risk treatments are conducted with the utmost regard for the safety and well-being of the service user:

- Regular Review: High-risk treatments will be regularly reviewed to assess the ongoing risks and ensure that they are in the best interests of the service user.
- Safeguarding Measures: If there are concerns about the service user's ability to give informed consent due to mental health issues or other vulnerabilities, we will ensure that safeguarding measures are in place to protect them from abuse or improper treatment, as per Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment).

11. SPECIAL CONSIDERATIONS

At Primus Plus Healthcare, we acknowledge that obtaining valid and informed consent is not a one-size-fits-all process, particularly for individuals who may have learning disabilities, mental health needs, or autism spectrum conditions. This Consent Policy and Procedure takes into account the special considerations required for service users in our Supported Living without Personal Care Service. These considerations ensure that all consent processes are fair, inclusive, and responsive to the individual needs of our service users, while remaining fully compliant with CQC regulations, the Mental Capacity Act 2005, GDPR, and other relevant legislation.

This section outlines the special considerations we will apply to the consent process to meet the needs of vulnerable individuals, particularly those who may have difficulty understanding or making decisions about their care.

1. Supporting Individuals with Learning Disabilities

Service users with learning disabilities may face challenges in understanding complex information or making decisions independently. Primus Plus Healthcare is committed to ensuring that these individuals can actively participate in the consent process.

- Accessible Information: Information about care and treatment will be provided in formats that are easy to understand. This may include easy-read documents, visual aids, symbol-based communication, or other tools that make information more accessible.
- Decision-Making Support: We will offer support to service users with learning disabilities by:
    - Using clear and simple language.
    - Breaking down complex decisions into smaller, more manageable parts.
    - Allowing service users to ask questions, express concerns, and have time to think about the information provided.
    - Ensuring that decisions are made at a pace the service user is comfortable with.
- Involvement of Carers and Support Workers: We will involve trusted carers, family members, or support workers in the process, where appropriate, to help the service user understand their options and support their decision-making.

2. Supporting Individuals with Mental Health Needs

Individuals with mental health needs may experience difficulties with decision-making, especially during periods of crisis or when experiencing symptoms related to their condition. Primus Plus Healthcare will ensure that these individuals are supported in making informed decisions about their care.

- Capacity Assessments: For individuals with mental health conditions, we will assess their mental capacity to ensure they understand the information about their care, treatment, or service. These assessments will be conducted in accordance with the Mental Capacity Act 2005, by trained professionals.

- Supportive Environment: We will ensure that the environment is conducive to good decision-making, which may involve:
    - Providing information in a calm, quiet space to reduce stress or anxiety.
    - Allowing additional time for decision-making, especially if the service user's mental health condition impacts their ability to concentrate or process information.
- Mental Health Advocacy: If necessary, we will provide access to an independent advocate who can help the individual understand the decision they are making, ensuring that their rights are protected and their voice is heard.

3. Supporting Individuals with Autism Spectrum Conditions

Individuals with autism spectrum conditions (ASC) may experience challenges with communication, social interaction, and understanding complex information. At Primus Plus Healthcare, we will tailor the consent process to meet the specific needs of people with autism, ensuring that they can fully participate in decisions about their care.

- Communication Support: We will ensure that communication methods are adapted to the needs of the individual, which may include:
    - Visual aids: Diagrams, pictures, or videos that help explain care processes or treatments.
    - Clear and direct language: Avoiding abstract language and using concrete terms that are easy to understand.
    - Consistency: Ensuring that information is presented consistently over time, so that the individual feels confident in their understanding.
- Predictability and Routine: Many individuals with autism benefit from clear routines and predictable environments. We will incorporate these principles into the consent process by:
    - Giving the individual time to process information.
    - Offering the same information in a predictable and consistent manner.
- Use of Trusted Persons: Service users with autism may feel more comfortable when familiar people, such as family members, carers, or trusted support workers, are involved in the decision-making process. We will involve these individuals where appropriate, ensuring that the service user's autonomy is respected, but that they receive the support they need.

4. Use of Advocacy Services

At Primus Plus Healthcare, we recognize that for some service users, particularly those with learning disabilities, mental health needs, or autism spectrum conditions, there may be challenges in fully understanding or participating in the consent process. Advocacy services play a crucial role in supporting service users to express their views and make decisions in their best interests.

- Independent Advocacy: Service users who require additional support will be referred to an independent advocate, particularly when the individual's decision-making capacity is in question, or if they are unable to communicate their preferences effectively.

- Person-Centred Advocacy: Advocates will be involved in a way that is person-centred and respects the individual's rights, autonomy, and preferences. They will work with service users to ensure that they understand the consent process and are fully supported in making decisions about their care.

5. The Role of Legal Representatives

For service users who lack capacity to make decisions regarding high-risk treatments or services, we will work with legal representatives, such as Powers of Attorney and legally appointed deputies, as per the Mental Capacity Act 2005. These representatives will ensure that decisions are made in the service user's best interests.

- Powers of Attorney: If a service user has a Health and Welfare Power of Attorney, this individual will be consulted regarding high-risk decisions and will help ensure that the service user's needs and preferences are central to the decision-making process.
- Legally Appointed Deputies: For service users under the Court of Protection, decisions about care and treatment will be made in consultation with the legally appointed deputy, ensuring that the decisions reflect the service user's best interests.

6. Capacity to Consent in Special Circumstances

In some cases, individuals may have fluctuating mental capacity or may lack capacity for certain decisions but have capacity for others. For these individuals, Primus Plus Healthcare will:

- Ongoing Assessment of Capacity: Regularly assess the service user's capacity to consent, particularly in relation to high-risk treatments, medical interventions, or life-altering decisions. This ensures that the service user is always given the opportunity to make decisions when they have the capacity to do so.
- Best Interests Decisions: For individuals who lack capacity for certain decisions, we will ensure that any decision made is in their best interests, following the Mental Capacity Act 2005. The decision-making process will involve relevant family members, caregivers, or legal representatives where applicable.

7. Addressing Cultural and Religious Sensitivities

Primus Plus Healthcare is committed to ensuring that the consent process respects and accommodates cultural, religious, and personal beliefs. We recognize that these factors can influence an individual's decision-making process, and we will:

- Respect Cultural and Religious Beliefs: Ensure that care and treatment are sensitive to the individual's beliefs, particularly when obtaining consent for certain procedures or treatments. This includes being mindful of cultural practices, religious rituals, and ethical considerations that may affect consent.
- Inclusive Practices: We will work with the service user and their family or support network to understand any cultural or religious factors that may impact their ability to consent or their preferences regarding care.

12. ROLES AND RESPONSIBILITIES

At Primus Plus Healthcare, the successful implementation of the Consent Policy and Procedure relies on the active involvement of all staff, ensuring that service users' rights are respected and that the process is conducted in accordance with CQC regulations, Mental Capacity Act 2005, GDPR, and other relevant legal frameworks. To ensure the process is clear, transparent, and compliant with all regulatory and legal obligations, we have outlined the key roles and responsibilities within this policy. These roles cover all levels of the organization, from frontline staff to senior management.

1. Senior Management / Board of Directors

Senior management holds ultimate responsibility for ensuring that Primus Plus Healthcare complies with all relevant legislation and regulations concerning consent. They are responsible for the overall direction, compliance, and oversight of the Consent Policy and Procedure.

- Accountability for Compliance: Senior management must ensure that the organization meets CQC standards, including Regulation 9: Person-Centred Care, Regulation 11: Need for Consent, and Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment.
- Policy Approval and Review: Senior management is responsible for approving the Consent Policy and Procedure and for overseeing its regular review to ensure it remains up-to-date with any changes to legislation, regulations, or best practice.
- Training and Resources: Senior management ensures that the organization has the resources, including funding, staff training, and time, to implement and maintain the policy effectively.

2. Consent Process Lead

The Consent Process Lead is responsible for overseeing the implementation and management of the Consent Policy and Procedure across the service. This individual ensures that all aspects of consent are carried out in line with best practice and legal requirements.

- Implementation and Monitoring: The Consent Process Lead ensures the effective application of the consent policy, including regular audits and checks to monitor compliance across the service.
- Staff Support and Guidance: They will provide support and guidance to staff regarding complex consent scenarios, particularly in cases involving high-risk treatments or individuals with fluctuating capacity.
- Advocacy Services Liaison: The Consent Process Lead ensures that advocacy services are made available and utilized when appropriate, particularly for service users with learning disabilities, mental health needs, or autism spectrum conditions.

3. Healthcare Providers (Doctors, Nurses, Therapists, Support Workers)

Healthcare providers, including doctors, nurses, therapists, and support workers, are directly involved in obtaining consent for care and treatment. They are responsible for ensuring that all consent is obtained in line with the CQC regulations and the Mental Capacity Act 2005.

- Obtaining Consent: Healthcare providers will ensure that service users are provided with clear, accessible, and comprehensive information about the care or treatment they are consenting to, in line with Regulation 11: Need for Consent.
- Capacity Assessments: Healthcare professionals will assess the mental capacity of service users when required, following the Mental Capacity Act 2005, and will document these assessments clearly.
- Ensuring Voluntary Consent: Healthcare providers must ensure that service users' consent is voluntary and not obtained through coercion or pressure. They must also respect the service user's right to withdraw or refuse consent at any time without negative consequences.
- Documentation: Healthcare providers will document the consent process in the service user's records, including the type of consent given (verbal, written, implied) and any relevant circumstances around the consent decision.

4. Social Workers / Case Managers

Social workers and case managers play a crucial role in the person-centred care approach, especially for individuals with learning disabilities, mental health needs, or autism spectrum conditions. They ensure that service users' preferences and choices are central to the decision-making process.

- Supporting Informed Consent: Social workers will help service users understand their rights and options, particularly for individuals who may have communication barriers.
- Referral for Advocacy: They will identify when an advocate is needed and facilitate access to independent advocacy services for service users who need support in understanding the consent process.
- Advocacy and Legal Representatives: In cases where individuals lack the capacity to make decisions independently, social workers will work with legal representatives (such as Powers of Attorney and legally appointed deputies) to ensure that decisions are made in the service user's best interests.

5. Compliance Officer

The Compliance Officer ensures that Primus Plus Healthcare adheres to all data protection regulations under GDPR and Data Protection Act 2018. They play a vital role in managing data consent and ensuring service users' personal data is handled with the highest standards of security and privacy.

- Data Consent Management: The Compliance Officer will oversee the process of obtaining and managing data consent from service users, ensuring that they are fully informed about the collection and processing of their data.
- Data Privacy and Security: They will ensure that all personal data, particularly sensitive health data, is processed in line with GDPR principles of data minimization, security, and accountability.

- Training on Data Protection: The Compliance Officer will coordinate training for staff on how to handle personal data appropriately and ensure compliance with data protection laws.

6. Care Coordinators

Care coordinators are responsible for ensuring that the consent process is consistent and properly documented across the service user's care journey. They coordinate care plans, ensuring that all aspects of care and treatment, including consent, are addressed and properly managed.

- Care Planning: Care coordinators will ensure that care plans reflect the service user's consent choices, and that these plans are updated if consent is withdrawn or modified.
- Monitoring and Review: They will regularly review care plans and ensure that consent is sought for any new treatments or changes in care.
- Advocacy and Support: Care coordinators will facilitate advocacy services when necessary, and ensure that service users with complex needs receive the support they need to make informed decisions.

7. All Staff Members

Every staff member at Primus Plus Healthcare has a role to play in ensuring that consent is obtained and respected. All staff members are required to adhere to the guidelines and responsibilities set out in this Consent Policy and Procedure.

- Awareness and Adherence to Policy: All staff are expected to be familiar with the Consent Policy and its key principles, ensuring that consent is obtained in line with CQC regulations and legal requirements.
- Respect for Service Users' Rights: Staff will ensure that service users' right to withdraw consent is respected at all times, and they will assist in the documentation of consent, as required.
- Reporting and Escalation: If any staff member has concerns regarding the validity of consent or feels that consent has not been properly obtained, they are responsible for raising these concerns with senior management or the Consent Process Lead.

8. Training and Development Manager

The Training and Development Manager ensures that all staff are provided with the appropriate training and development opportunities to understand and implement the Consent Policy and Procedure effectively.

- Consent Training: The Training and Development Manager will ensure that all staff receive regular training on the principles of informed consent, mental capacity, advocacy, and data protection.
- Updates and Refresher Training: The manager will coordinate regular refresher training and updates whenever there are changes to the Mental Capacity Act 2005, CQC regulations, or any other relevant legislation.

13. TRAINING AND AWARENESS

At Primus Plus Healthcare, we recognize that effective implementation of our Consent Policy and Procedure requires a strong commitment to training and awareness across all levels of the organization. The Training and Awareness program ensures that all staff, regardless of their role, are equipped with the knowledge, skills, and resources to understand and apply the policy effectively. This section outlines the training and awareness strategies we have in place to ensure compliance with CQC regulations, relevant UK legislation, and to meet the specific needs of individuals in our Supported Living without Personal Care Service, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions.

1. Training Objectives

The primary objectives of our training program are to:

- Ensure Compliance: Ensure that all staff understand and adhere to CQC regulations, Mental Capacity Act 2005, GDPR, and other relevant laws regarding consent, safeguarding, and data protection.
- Promote Person-Centred Care: Ensure that staff are equipped to provide care that is aligned with Regulation 9 of the CQC, which emphasizes person-centred care, by understanding the importance of consent in service users' decision-making.
- Enhance Informed Consent: Ensure that all staff are capable of obtaining informed consent by providing clear, accessible information to service users, especially those with learning disabilities, mental health needs, and autism spectrum conditions.
- Facilitate Effective Communication: Equip staff with the skills to communicate effectively with individuals who have communication challenges, ensuring they can fully participate in the consent process.
- Identify and Address Safeguarding Concerns: Train staff to recognize when a service user may be at risk of abuse or improper treatment, ensuring that any concerns regarding Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment) are promptly addressed.

2. Core Training Areas

The training program will cover the following core areas to ensure that all staff understand and can effectively apply the Consent Policy and Procedure:

1. Understanding Consent and Legal Requirements
    - The Need for Consent: Training will ensure staff understand the legal requirement to seek consent before providing care, as outlined in Regulation 11: Need for Consent of the CQC regulations.
    - Mental Capacity Act 2005: Staff will receive detailed training on how to assess mental capacity, the five principles of the Mental Capacity Act, and the procedures to follow when an individual lacks capacity to make decisions about their care.

- The Equality Act 2010: Training will cover how to provide care that is non-discriminatory and accessible, ensuring that individuals with disabilities or communication challenges are not disadvantaged when it comes to consenting.

2. Person-Centred Approach to Consent
    - Staff will be trained on how to deliver person-centred care in line with Regulation 9 of the CQC. This will include:
        - Understanding the importance of respecting the autonomy and preferences of individuals when obtaining consent.
        - Recognizing the need to tailor the consent process to each individual, particularly for those with learning disabilities, mental health needs, or autism spectrum conditions.
3. Informed Consent and Communication Skills
    - Accessible Information: Staff will be trained in how to provide information in formats that are accessible and understandable for all service users, including easy-read formats, visual aids, and the use of communication tools that cater to individuals with learning disabilities, autism, or mental health needs.
    - Communication Techniques: Staff will learn how to communicate complex information in ways that promote understanding, including the use of plain language and alternative communication methods such as pictures, symbols, or sign language when necessary.
    - Assessing Understanding: Training will ensure that staff know how to assess whether the service user has understood the information provided and can make an informed decision.
4. Safeguarding and Consent
    - Recognizing and Reporting Abuse: Staff will receive training on how to identify signs of abuse or improper treatment, as per Regulation 13 of the CQC regulations, and how to act on concerns to safeguard service users.
    - Protecting Vulnerable Service Users: Training will also focus on how to protect individuals who may have communication difficulties or mental health conditions that may make them more vulnerable to exploitation or coercion in the consent process.
5. Advocacy and Legal Representatives
    - Role of Advocates: Staff will be trained in how to identify when a service user may require an advocate to support them in the consent process, especially for those with learning disabilities, mental health needs, or autism spectrum conditions.
    - Involving Legal Representatives: Training will cover when and how to involve Powers of Attorney and legally appointed deputies in the consent process, particularly for individuals who may lack capacity to make decisions.
6. Data Protection and Consent for Data Processing

- GDPR Compliance: Staff will be trained on how to obtain informed consent for the collection and processing of personal and sensitive data in compliance with the UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018.
- Service User Rights: Training will ensure that staff understand the rights of service users regarding their personal data, including the right to withdraw consent and request access to or deletion of their data.

3. Training Delivery Methods

To ensure that training is effective and accessible to all staff, Primus Plus Healthcare will use a variety of training delivery methods:

- Induction Training: All new staff will undergo mandatory induction training that includes an introduction to the Consent Policy and the Legal and Regulatory Framework for consent.
- Regular Refresher Training: Ongoing training sessions will be held annually, or as needed, to ensure staff are up-to-date with any changes in regulations, legislation, or best practices.
- Online Learning Modules: Staff who are unable to attend in-person training sessions will have access to online learning modules covering key aspects of the Consent Policy, including interactive assessments and case studies.
- Practical Workshops: Staff will participate in practical workshops to practice consent processes in real-life scenarios, particularly for those working directly with vulnerable service users, such as those with learning disabilities, mental health needs, or autism spectrum conditions.
- Role-Specific Training: Specific training will be provided based on roles within the organization (e.g., healthcare providers, social workers, compliance officers) to ensure that the information is relevant to their specific responsibilities.

4. Monitoring and Evaluation

To ensure that training is effective and that staff are adhering to the Consent Policy and Procedure, Primus Plus Healthcare will implement the following:

- Audit and Compliance Checks: The Consent Process Lead will conduct regular audits to review how well the consent process is being implemented and ensure that it aligns with the CQC regulations and legal requirements.
- Feedback and Improvement: We will gather feedback from staff after each training session to evaluate its effectiveness and make necessary improvements.
- Ongoing Support: Staff will have access to ongoing support and guidance from senior management, the Consent Process Lead, and other experts in the field to ensure they are confident in applying the Consent Policy in their daily work.

5. Accountability for Training

Accountability for training and awareness lies with the Training and Development Manager, in collaboration with senior management, the Consent Process Lead, and relevant department heads. Their responsibilities include:

- Ensuring Adequate Resources: The Training and Development Manager is responsible for ensuring that appropriate resources, including training materials, funding, and expert facilitators, are available to deliver the training program.
- Monitoring Training Participation: They will ensure that all staff are required to complete mandatory training and refresher courses and will monitor participation and completion rates.
- Documentation and Records: Detailed records of training attendance, progress, and assessments will be maintained to ensure that the organization meets its compliance obligations.

14. MONITORING AND AUDITING

At Primus Plus Healthcare, we are committed to maintaining high standards of care and ensuring that the Consent Policy and Procedure is consistently followed across all services, particularly within our Supported Living without Personal Care Service. The Monitoring and Auditing section of this policy outlines the methods and processes we will use to assess the effectiveness of the policy, ensure compliance with CQC regulations, and meet the needs of our service users, including those with learning disabilities, mental health needs, and autism spectrum conditions.

Monitoring and auditing are critical to ensuring that consent is obtained appropriately, service users' rights are respected, and all staff adhere to best practices and legal requirements. This section outlines how Primus Plus Healthcare will monitor and audit consent practices to uphold the principles of person-centred care (Regulation 9), the need for consent (Regulation 11), and safeguarding service users from abuse and improper treatment (Regulation 13).

1. Monitoring Processes

Primus Plus Healthcare will establish and implement a robust system to monitor the consent process regularly. The monitoring process will focus on ensuring that consent is being obtained in a legally compliant, transparent, and respectful manner that aligns with the needs and preferences of the service users.

- Regular Audits: Routine audits will be conducted to assess the consent process across all services. These audits will include:
    - Checking the documentation of consent.
    - Verifying that consent has been sought for all treatments and services provided.
    - Ensuring that consent is documented correctly, including the type of consent (written, verbal, implied) and whether the service user understood the information.
- Audit Focus Areas:
    - Compliance with CQC Regulation 11: Need for Consent, ensuring that valid consent has been obtained for all care and treatment decisions.
    - Monitoring of high-risk treatments to ensure that specific consent procedures are followed.

    - Ensuring that advocacy services are appropriately offered to individuals who need additional support, especially those with learning disabilities, mental health needs, or autism spectrum conditions.
    - Monitoring the involvement of legal representatives, such as Powers of Attorney and legally appointed deputies, when service users lack capacity to consent independently.
- Data Tracking and Review: All consent-related data will be reviewed regularly to identify trends and ensure that consent processes are being adhered to across the organization. This data will be tracked through care records, and relevant findings will be shared with senior management.
- Feedback from Service Users: Service users will be given the opportunity to provide feedback on their experience of the consent process, ensuring that their voice is heard in relation to how consent is obtained and whether they feel fully supported.

2. Auditing Consent Records

The audit of consent records will be a key part of monitoring to ensure that documentation is complete and compliant with relevant regulations, including CQC guidelines and GDPR.

- Consent Documentation Checks: The Consent Process Lead and the Compliance Officer will oversee regular reviews of care records to ensure that:
    - All consent forms are appropriately signed, dated, and documented.
    - There is clear evidence that service users have been provided with sufficient information in a format that is accessible to them.
    - Consent records reflect the voluntary nature of the consent, with no evidence of coercion or undue pressure.
    - Mental capacity assessments are completed when needed, and decisions are made in line with the Mental Capacity Act 2005.
- Documentation Compliance: The Compliance Officer will ensure that records are kept secure and that personal data, particularly sensitive data such as health records, is handled in compliance with GDPR and the Data Protection Act 2018. This includes ensuring that consent forms are easily accessible for audits and that they are retained for the legally required time period.

3. Role of Auditors

- Internal Auditors: Primus Plus Healthcare will designate internal auditors to carry out regular monitoring of consent practices. The Consent Process Lead will work with auditors to ensure that audit findings are reviewed, corrective actions are taken where necessary, and compliance with legal and regulatory requirements is maintained.
- External Auditors: If necessary, external audits may be conducted to assess compliance with CQC regulations, GDPR, and other relevant legislation, particularly where specialized care or high-risk treatments are involved. External auditors may provide an independent assessment of our policies and procedures.

4. Corrective Actions and Continuous Improvement

Based on the findings of audits and monitoring activities, Primus Plus Healthcare will take corrective actions as needed to address any issues identified and to improve consent practices.

- Identifying Non-Compliance: If any issues related to non-compliance with consent procedures are identified, corrective actions will be taken immediately. These may include:
    - Retraining staff on the proper consent processes.
    - Revising consent documentation or processes to improve clarity or accessibility.
    - Offering additional support or advocacy for service users who may not fully understand the consent process.
- Improvement Plans: Based on audit results, Primus Plus Healthcare will develop and implement improvement plans to address gaps in consent procedures. These plans will be tailored to ensure that any identified issues are resolved quickly, and that service users continue to receive high-quality, person-centred care.
- Review and Updates: The Consent Process Lead will review audit findings and feedback regularly to identify areas where the Consent Policy and related procedures may need to be updated. The policy will be revised as necessary to reflect changes in legislation, regulations, or organizational practices.

5. Staff Accountability and Responsibility

It is essential that all staff members are held accountable for complying with the Consent Policy and Procedure. The following mechanisms will be implemented:

- Supervision and Monitoring: Regular supervision and monitoring sessions will ensure that staff members adhere to the policy when obtaining and documenting consent.
- Performance Reviews: Staff performance will be evaluated based on their adherence to consent processes, and areas for improvement will be identified during performance reviews.
- Non-Compliance Procedures: In cases of repeated non-compliance with consent procedures, additional training or disciplinary action may be taken to ensure that all staff understand and follow the policy effectively.

6. External Compliance Audits and Feedback

To ensure that Primus Plus Healthcare remains compliant with all CQC regulations and national legislation, external audits may be conducted by regulatory bodies, such as the CQC, to assess the organization's adherence to Regulation 9, Regulation 11, and Regulation 13, among others. These audits will evaluate the following:

- Person-Centred Care: Ensuring that the consent process is tailored to the individual needs of service users, including those with learning disabilities, mental health needs, and autism spectrum conditions.
- Safeguarding: Assessing whether service users are protected from abuse or improper treatment during the consent process.

- Informed Consent: Ensuring that service users are fully informed and have the capacity to consent to their care and treatment.

Additionally, feedback will be solicited from external stakeholders, including service users, families, and advocacy services, to ensure that the consent process is working as intended and that any issues or concerns are addressed promptly.

15. COMPLAINTS AND DISPUTE RESOLUTION

At Primus Plus Healthcare, we are committed to providing a service that is transparent, accountable, and respectful of the rights and choices of all service users, including adults with learning disabilities, mental health needs, and autism spectrum conditions. We recognize that there may be occasions when a service user or their representative is dissatisfied with the Consent Policy or its implementation. The Complaints and Dispute Resolution process is designed to ensure that any concerns or complaints related to consent, care, treatment, or service delivery are addressed promptly, fairly, and in compliance with relevant CQC regulations, legal requirements, and best practices.

This section outlines the procedures for raising complaints, resolving disputes, and ensuring that any issues are handled in a way that promotes person-centred care, respects service users' autonomy, and aligns with Regulation 9 (Person-Centred Care), Regulation 11 (Need for Consent), and Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment) of the CQC regulations, as well as the Mental Capacity Act 2005 and GDPR.

1. Complaints Process

The complaints process provides a structured, accessible, and transparent way for service users and their representatives to express concerns about the consent process, care delivery, or any other aspect of the service they receive.

- How to Make a Complaint:
    - Service users or their legal representatives, advocates, or family members may make a complaint about the consent process by contacting Primus Plus Healthcare via multiple channels, including:
        - In person: Directly to any staff member, care coordinator, or manager.
        - By phone: Calling the designated complaints phone line.
        - In writing: Sending an email or letter to the designated complaints email or address.
        - Online: Via the service user portal or an online complaints form on the website.
    - Accessible Formats: To ensure that all individuals can access this process, Primus Plus Healthcare will provide complaint forms in easy-read formats, use sign language interpreters, or offer advocacy services when necessary to support individuals with learning disabilities, mental health needs, or autism spectrum conditions.

- Acknowledgment of Complaints:
    - Complaints will be acknowledged within 48 hours of receipt, and the complainant will be informed of the steps in the process.
    - If necessary, an advocate will be appointed to support the service user through the complaints process, particularly if the service user has difficulty expressing their concerns or understanding the process due to communication challenges.
- Investigation of Complaints:
    - All complaints will be investigated promptly and thoroughly. A dedicated team member or manager will review the complaint, gather relevant information, and interview the parties involved. If the complaint involves a potential breach of CQC regulations or GDPR, the relevant regulatory bodies will be notified.
    - If the complaint concerns the consent process, an independent staff member may be appointed to conduct the investigation to ensure an unbiased review.
- Outcome and Resolution:
    - Primus Plus Healthcare will provide a written response to the complainant, outlining the findings of the investigation, any corrective actions taken, and steps to prevent similar issues in the future. This response will be delivered within 20 working days of the acknowledgment of the complaint.
    - If the complainant is not satisfied with the outcome or resolution, they will be advised of their right to escalate the complaint to external bodies, such as the CQC or the Information Commissioner's Office (ICO) if it involves data protection concerns.

2. Dispute Resolution Process

Disputes may arise when there are differences of opinion or disagreements regarding consent, particularly for individuals who may have mental health needs, learning disabilities, or autism spectrum conditions. To resolve such disputes fairly and amicably, the following dispute resolution process will be implemented.

- Initial Discussion and Mediation:
    - Primus Plus Healthcare will encourage early resolution of disputes through open discussions and mediation. Service users and staff are encouraged to discuss disagreements in a non-confrontational manner.
    - A neutral mediator (e.g., a care coordinator, supervisor, or independent staff member) may be appointed to facilitate the discussion and ensure that both sides are heard and understood.
    - If the dispute involves mental capacity or high-risk treatments, a Mental Capacity Act 2005 assessment will be conducted, and the dispute will be handled according to the individual's capacity and legal requirements.
- Escalation Process:

- If the dispute cannot be resolved through mediation, it will be escalated to a senior member of staff or management. In cases involving the Mental Capacity Act 2005, or where an individual's consent is in question, the Consent Process Lead or a legal representative may be involved in ensuring that the correct procedures are followed.
- If a satisfactory resolution is not reached internally, the dispute can be referred to external organizations, including:
    - Care Quality Commission (CQC) for regulatory concerns.
    - Ombudsman Services for disputes that cannot be resolved at the provider level.

3. Safeguarding and Protection from Abuse

In line with Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment, any complaint or dispute that involves allegations of abuse, neglect, or improper treatment during the consent process or in relation to care services will be treated as a priority safeguarding issue.

- Immediate Action:
    - If a service user reports or raises concerns about potential abuse or improper treatment related to consent, immediate action will be taken to protect the individual. This may include:
        - Temporary suspension of the staff involved pending investigation.
        - Referrals to safeguarding authorities, including local adult safeguarding boards and regulatory bodies.
    - Protection of Service Users: Primus Plus Healthcare will ensure that any service user who raises a safeguarding concern is supported and protected throughout the complaint or dispute resolution process, with appropriate advocacy and support services provided.

4. Legal and Regulatory Requirements

Primus Plus Healthcare is committed to ensuring that all complaints and disputes are handled in compliance with relevant legal and regulatory frameworks. These include:

- CQC Regulations: Compliance with Regulation 9 (Person-Centred Care), Regulation 11 (Need for Consent), and Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment) is essential to ensure that consent is obtained appropriately, and service users are protected from harm.
- Mental Capacity Act 2005: The five principles of the Mental Capacity Act will be applied in situations where a service user's capacity to consent is questioned or disputed. This includes ensuring that decisions are made in the best interests of individuals who may lack mental capacity.
- GDPR and Data Protection: Any complaint or dispute involving data protection or the consent process must comply with GDPR and the Data Protection Act 2018, ensuring that service users' personal and sensitive data is handled appropriately.

- Equality Act 2010: All complaints and disputes will be addressed in a manner that is non-discriminatory and respects the rights of service users under the Equality Act 2010.

5. Ensuring Access and Accessibility

To ensure that all service users, particularly those with learning disabilities, mental health needs, or autism spectrum conditions, can access the complaints and dispute resolution process, Primus Plus Healthcare will:

- Provide Accessible Formats: Complaints and dispute resolution information will be available in easy-read formats, sign language, and other accessible forms of communication to support individuals who may have communication challenges.
- Advocacy Support: For service users who may need additional help in understanding or navigating the complaints process, an advocate will be provided to assist them in raising their concerns.

16. REVIEW AND UPDATES

At Primus Plus Healthcare, we are committed to maintaining high standards of care, and we recognize that the Consent Policy and Procedure must be regularly reviewed and updated to reflect evolving legal, regulatory, and best practice standards. We understand that the needs of service users, particularly those with learning disabilities, mental health needs, and autism spectrum conditions, are dynamic and require policies that are adaptable and responsive to changes in law, best practice, and the specific needs of our service users.

The Review and Updates section of this policy ensures that our consent processes remain relevant, compliant, and effective. This section outlines the procedures for the periodic review and necessary updates to the Consent Policy and Procedure, in line with CQC regulations, the Mental Capacity Act 2005, GDPR, and other relevant legislation and guidelines.

1. Frequency of Reviews

The Consent Policy and Procedure will undergo a formal review on an annual basis or sooner if required by changes in legislation, regulatory requirements, or organizational needs. This review will be conducted by senior management in collaboration with the Consent Process Lead, Compliance Officer, and other relevant stakeholders to ensure that the policy continues to meet legal and regulatory standards.

- Annual Review: Every year, a full review of the policy will be carried out to assess whether it aligns with current CQC regulations (Regulation 9, Regulation 11, Regulation 13), Mental Capacity Act 2005, GDPR, and any other changes in national or local legislation that affect consent practices in healthcare and supported living services.
- Ad Hoc Reviews: In addition to the annual review, the policy may be updated more frequently in response to significant changes in legislation, feedback from audits, complaints, or major incidents involving consent or safeguarding.

2. Scope of the Review

During the review process, the following elements of the Consent Policy and Procedure will be assessed:

- Compliance with Legislation:
    - Ensure the policy complies with relevant CQC regulations:
        - Regulation 9: Person-Centred Care
        - Regulation 11: Need for Consent
        - Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment
    - Ensure the policy remains aligned with the Mental Capacity Act 2005, particularly the principles related to mental capacity assessments and best interests decisions.
    - Ensure the policy is consistent with GDPR and the Data Protection Act 2018, ensuring that personal data and consent records are handled appropriately.
- Person-Centred Care: Evaluate whether the policy continues to support a person-centred approach in obtaining consent from individuals with learning disabilities, mental health needs, and autism spectrum conditions.
    - Assess whether the policy remains effective in supporting individuals' autonomy and decision-making.
    - Ensure that it reflects the needs of service users, offering flexibility and adaptations to the consent process when needed, such as providing easy-read documents, visual aids, or advocacy services.
- Accessibility and Inclusivity:
    - Review how accessible the consent process is for individuals with learning disabilities, autism spectrum conditions, or mental health needs.
    - Evaluate whether service users are provided with the information they need in a format that meets their communication needs.
- Advocacy and Legal Representation:
    - Assess how effectively advocacy services and legal representatives (such as Powers of Attorney or legally appointed deputies) are integrated into the consent process.
    - Review whether the involvement of these representatives is documented appropriately and whether service users' best interests are clearly protected.
- Staff Training and Awareness:
    - Review the training program to ensure that it aligns with updated legal requirements, regulations, and best practices. This includes ensuring that staff are aware of any policy updates or changes and are provided with necessary training or refresher courses.

3. Updating the Policy

Following the review, any updates required will be made to the Consent Policy and Procedure to address the following:

- Legal and Regulatory Changes:
    - Any amendments to the Mental Capacity Act 2005, CQC regulations, GDPR, or other relevant laws that affect consent and data processing will be incorporated into the policy.
    - Updates will also include changes to the Accessible Information Standard, ensuring that service users with learning disabilities or autism are given the necessary tools and support for understanding consent.
- Best Practice Developments:
    - The policy will be updated to reflect best practices in consent, safeguarding, and person-centred care, particularly in relation to individuals with complex care needs.
    - If new guidelines or practices emerge regarding high-risk treatments, mental capacity assessments, or advocacy services, these will be integrated into the policy.
- Feedback and Continuous Improvement:
    - Feedback from service users, families, advocates, and staff will be taken into account when reviewing and updating the policy. Any areas where the current policy may be lacking in practice or accessibility will be addressed.
    - Complaints and dispute resolution feedback will also be used to improve the policy and its implementation, ensuring it remains effective and responsive to service users' needs.

4. Communication of Updates

Once the Consent Policy and Procedure has been reviewed and updated, the following actions will be taken to ensure that all staff members are aware of the changes:

- Staff Briefings:
    - A staff briefing or training session will be held to communicate any changes to the policy and ensure that staff are equipped to implement the updated procedures effectively.
    - These briefings will be tailored to the different roles within the organization (e.g., healthcare providers, social workers, care coordinators, compliance officers) to ensure that the updates are relevant and understood.
- Updated Documentation:
    - The revised policy will be distributed to all relevant staff, ensuring that they have access to the most current version. This may be done through internal communication channels, such as the staff portal, email updates, or hard copies placed in common areas.
    - Updated consent forms, training materials, and guidelines will be made available to ensure consistency across the service.

- Service User Communication:
    - When relevant, service users will be informed of updates to the consent policy that may affect how consent is obtained or managed. Information will be provided in accessible formats to ensure that all service users understand any changes that may impact them.
    - Family members, carers, and advocates will also be informed of any changes that may affect their involvement in the consent process.

5. External Review and Regulatory Feedback

To ensure continued compliance with CQC regulations and to maintain high standards of care, Primus Plus Healthcare will invite periodic external reviews of the Consent Policy by regulatory bodies, such as the CQC, and professional bodies. This will include:

- CQC Inspections: During CQC inspections, feedback will be solicited regarding the Consent Policy and its effectiveness. The organization will take note of any areas for improvement identified by CQC inspectors.
- External Expert Consultations: Occasionally, external consultants or subject matter experts in consent and safeguarding may be invited to assess and provide feedback on the policy to ensure it is fully aligned with national standards and legislation.

17. FORMS

1. Consent Form for Treatment/Service (General)

This form is used to record service users' consent for treatment or service provision, in accordance with CQC Regulation 11: Need for Consent. It ensures that the consent process is documented and that the service user is fully informed.

Form Layout:

Section 1: Service User Details

- Full Name: _____
- Date of Birth: _____
- Address: _____
- Contact Number: _____

Section 2: Description of Treatment/Service

- Nature of Treatment/Service:
  _____
- Purpose of Treatment/Service: _____
- Alternative Options Available: _____
- Risks and Benefits:
  _____

Section 3: Consent Confirmation

- I, the undersigned, confirm that I have been provided with adequate information about the treatment/service, including the nature, risks, and alternatives. I understand my right to withdraw consent at any time.

- Consent Given: ☐ Yes ☐ No
- Service User's Signature: _____
- Date:

  _____

Section 4: If Service User Lacks Capacity

- Mental Capacity Assessed: ☐ Yes ☐ No (Complete Mental Capacity Form if Yes)
- Legally Appointed Representative/Advocate Involved: ☐ Yes ☐ No (If Yes, include details below)
  - Name of Representative: _____
  - Relationship to Service User: _____

Section 5: Staff Acknowledgment

- Staff Member Name: _____
- Role: _____
- Signature: _____
- Date: _____

2. Mental Capacity Assessment Form

This form is used to assess whether a service user has the capacity to provide informed consent, in accordance with the Mental Capacity Act 2005.

Form Layout:

Section 1: Service User Details

- Full Name: _____
- Date of Birth: _____

Section 2: Capacity Assessment

- Assessment Date: _____
- Assessor Name: _____
- Assessor Role: _____

Section 3: Capacity Assessment Criteria (5 Principles of the Mental Capacity Act)

- Principle 1: The person must be presumed to have capacity unless it is established that they lack it.
    - ☐ Yes, presumed to have capacity
    - ☐ No, lacks capacity
- Principle 2: A person is not to be treated as unable to make a decision merely because they make an unwise decision.
    - ☐ Yes, able to make unwise decisions
    - ☐ No, unable to make decisions
- Principle 3: A person must be supported to make their own decisions.

    - ☐ Yes, support provided
    - ☐ No, unable to support
- Principle 4: Decisions on behalf of people who lack capacity should be made in their best interests.
    - ☐ Yes, best interests considered
    - ☐ No, not considered
- Principle 5: Any decision made for a person who lacks capacity must be the least restrictive option.
    - ☐ Yes, least restrictive
    - ☐ No, more restrictive

Section 4: Final Capacity Determination

- Does the service user have capacity to consent to the proposed treatment/service?
    - ☐ Yes ☐ No

Section 5: Comments

- _____

Section 6: Signatures

- Assessor's Signature: _____
- Date: _____

3. Consent for Data Processing (GDPR)

This form is used to obtain informed consent for the collection, storage, and processing of personal data, in accordance with GDPR and the Data Protection Act 2018.

Form Layout:

Section 1: Service User Details

- Full Name: _____
- Date of Birth: _____

Section 2: Description of Data Processing

- Type of Data Being Processed:
  - ☐ Personal Data (e.g., name, contact details)
  - ☐ Sensitive Data (e.g., health, medical information)
- Purpose of Data Processing:
  - _____
- Duration of Data Retention: _____

Section 3: Consent Confirmation

- I, the undersigned, consent to the processing of my personal data as described above. I understand my rights under GDPR, including the right to withdraw my consent at any time.
  - Consent Given: ☐ Yes ☐ No
  - Service User's Signature: _____
  - Date:
    _____

Section 4: Staff Acknowledgment

- Staff Member Name: _____
- Role: _____
- Signature: _____
- Date: _____

4. Advocacy and Legal Representative Involvement Form

This form is used to document the involvement of advocates or legal representatives in the consent process for individuals who may need additional support in understanding and making decisions about their care or treatment.

Form Layout:

Section 1: Service User Details

- Full Name: _____
- Date of Birth: _____

Section 2: Advocate/Legal Representative Details

- Name of Advocate/Legal Representative: _____
- Relationship to Service User: _____
- Contact Information: _____

Section 3: Role of Advocate/Legal Representative

- ☐ Supporting decision-making process
- ☐ Reviewing consent information
- ☐ Helping with understanding treatment/service risks and benefits
- ☐ Other (please specify): _____

Section 4: Consent Confirmation

- I, the undersigned, confirm that I have been informed about the treatment/service, and I consent to the involvement of the advocate/legal representative in the consent process.
    - Consent Given: ☐ Yes ☐ No
    - Service User's Signature: _____
    - Advocate/Legal Representative's Signature: _____
    - Date:
      _____

5. Consent Withdrawal Form

This form allows service users to formally withdraw their consent for any ongoing treatment, service, or data processing, in compliance with CQC regulations and GDPR.

Form Layout:

Section 1: Service User Details

- Full Name: _____
- Date of Birth: _____

Section 2: Details of Consent Being Withdrawn

- Treatment/Service/Data Processing: _____
- Date Consent Was Initially Given: _____

Section 3: Withdrawal Confirmation

- I, the undersigned, wish to withdraw my consent for the above treatment/service/data processing. I understand that I have the right to withdraw my consent at any time without negative consequences.
    - Withdrawal of Consent: ☐ Yes ☐ No
    - Service User's Signature: _____
    - Date:

      _____

Section 4: Staff Acknowledgment

- Staff Member Name: _____
- Role: _____
- Signature: _____
- Date: _____

6. Consent Process Review and Monitoring Log

This form is used to monitor the implementation of consent procedures, ensuring that all aspects of the Consent Policy are followed and properly documented.

Form Layout:

Section 1: Consent Review Information

- Date of Review: _____
- Service User Name: _____
- Review Conducted By: _____

Section 2: Consent Process Assessment

- Was informed consent obtained? ☐ Yes ☐ No
- Was the service user provided with accessible information? ☐ Yes ☐ No
- Was advocacy used where necessary? ☐ Yes ☐ No
- Was legal representation involved where needed? ☐ Yes ☐ No
- Was the service user's mental capacity assessed where necessary? ☐ Yes ☐ No

Section 3: Monitoring Outcome

- Issues Identified: _____
- Actions Taken: _____

Section 4: Staff Member Feedback

- _____

18. REFERENCES AND RELATED DOCUMENTS

1. Care Quality Commission (CQC). (2021). *Regulations for Health and Social Care Services*. Available at: https://www.cqc.org.uk
2. Information Commissioner's Office (ICO). (2018). *Guide to the General Data Protection Regulation (GDPR)*. Available at: https://ico.org.uk
3. Mental Capacity Act 2005. *Legislation.gov.uk*. Available at: https://www.legislation.gov.uk
4. Department of Health and Social Care (DHSC). (2018). *The Accessible Information Standard: Implementation Guidance*. Available at: https://www.gov.uk
5. The Equality Act 2010. *Legislation.gov.uk*. Available at: https://www.legislation.gov.uk
6. General Data Protection Regulation (GDPR). (2016). *European Union Law*. Available at: https://gdpr.eu
7. Health Research Authority (HRA). (2021). *Guidance on Consent for Medical Research*. Available at: https://www.hra.nhs.uk
8. Royal College of Nursing (RCN). (2020). *Nursing Guidance on Informed Consent*. Available at: https://www.rcn.org.uk
9. Law Commission. (2017). *Mental Capacity and Deprivation of Liberty: Consultation Paper*. Available at: https://www.lawcom.gov.uk
10. The Human Fertilisation and Embryology Authority (HFEA). (2020). *Consent for Fertility Treatment and Research*. Available at: https://www.hfea.gov.uk

Additional References and Resources

1. National Health Service (NHS). (2021). *Consent to Treatment: NHS Guidelines*. Available at: https://www.nhs.uk
2. NHS Digital. (2020). *The Accessible Information Standard: Guidance for Providers*. Available at: https://digital.nhs.uk
3. Ministry of Justice (MOJ). (2020). *Deprivation of Liberty Safeguards (DoLS)*. Available at: https://www.gov.uk
4. The Law Society. (2021). *Power of Attorney and Mental Capacity*. Available at: https://www.lawsociety.org.uk
5. Public Health England. (2019). *Health Inequalities and Consent: Key Considerations for Care Providers*. Available at: https://www.gov.uk
6. The National Autistic Society. (2021). *Guidance on Supporting Autistic Individuals with Consent*. Available at: https://www.autism.org.uk
7. The Royal College of Psychiatrists. (2020). *Mental Health and Capacity: Guidance for Clinicians*. Available at: https://www.rcpsych.ac.uk