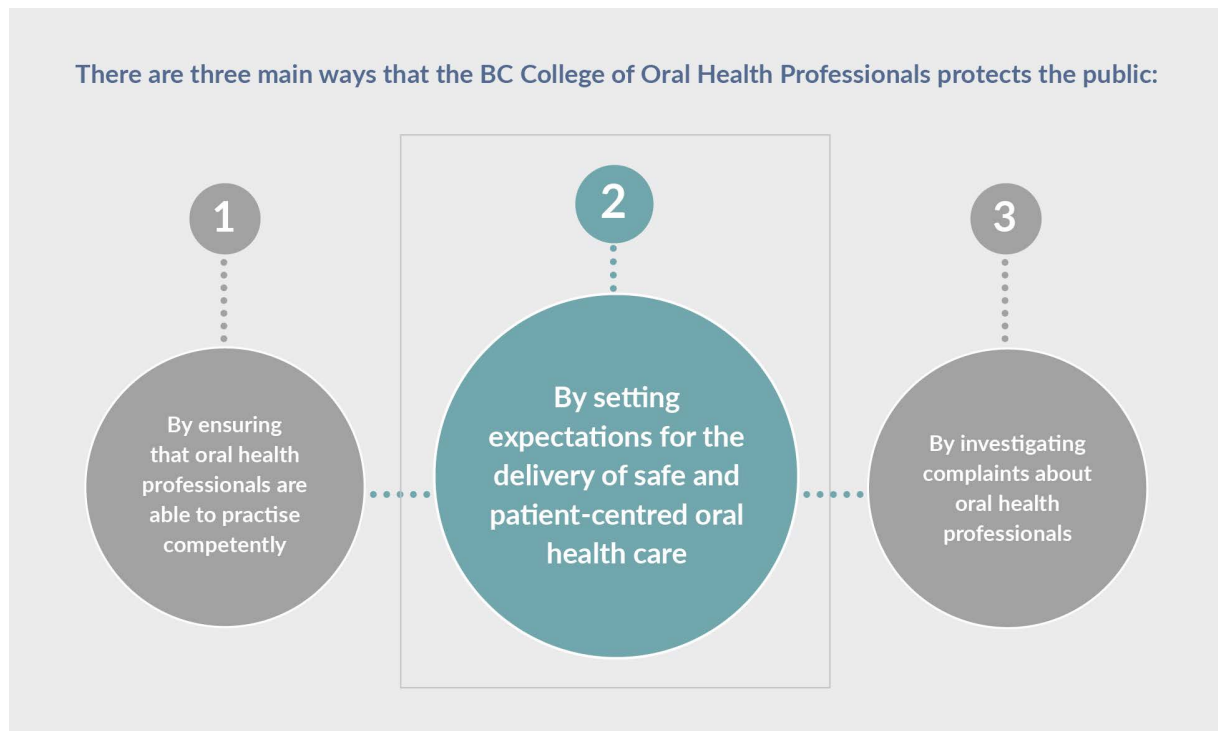


Expectations for clinical and ethical practice

Interpretation Guidelines: Informed Refusal to Consent

Applies to Dental Hygienists

There are three main ways that the BC College of Oral Health Professionals protects the public:



The British Columbia College of Oral Health Professionals (BCCOHP) was created on September 1, 2022 through the amalgamation of four health regulatory colleges: the College of Dental Hygienists of BC, the College of Dental Surgeons of BC, the College of Dental Technicians of BC, and the College of Denturists of BC. All current requirements for standards of clinical and ethical practice issued by the four colleges remain in place upon amalgamation. This document was created by the College of Dental Hygienists of British Columbia and will be updated to reflect the amalgamation.



INFORMED REFUSAL TO CONSENT

PURPOSE

To provide guidelines on informed refusal to consent to dental hygiene care or aspects of dental hygiene care.

BACKGROUND

Section 6 of the *Health Care (Consent) and Care Facility (Admission) Act* states that specific criteria should exist in order for a client to give informed consent or refusal to treatment as follows:

- a) the consent relates to the proposed health care
- b) the consent is given voluntarily
- c) the consent is not obtained by fraud or misrepresentation
- d) the adult is capable of making a decision about whether to give or refuse consent to the proposed health care
- e) the health care provider gives the adult the information a reasonable person would require to understand the proposed health care and to make a decision including information about:
 - i. the condition for which the health care is proposed,
 - ii. the nature of the proposed health care,
 - iii. the risks and benefits of the proposed health care that a reasonable person would expect to be told about, and
 - iv. alternative courses of health care, and
- f) the adult has an opportunity to ask questions and receive answers about the proposed health care

The *Health Care (Consent) and Care Faculty (Admission) Act* provides further information on the client's rights to decline proposed treatments. Section 4 of the *Act* states that:

- (4) Every adult who is capable of giving or refusing consent to health care has
 - a. the right to give consent or to refuse consent on any grounds, including moral or religious grounds, even if the refusal will result in death,
 - b. the right to select a particular form of available health care on any grounds, including moral or religious grounds,
 - c. the right to revoke consent,
 - d. the right to expect that a decision to give, refuse or revoke consent will be respected, and
 - e. the right to be involved to the greatest degree possible in all case planning and decision making.

The law upholds an individual's right to refuse treatment except when the choice goes against provincial law or threatens the well-being of others. In addition to the criteria above, the following points should be considered:

Proper disclosure of information must include informing the client what is likely to

happen to them if they decide to refuse a proposed procedure. This also includes ensuring that the client understands the likely problems that could be encountered in the future as a result of declining a specific procedure (an interpreter must be used if necessary; the interpreter should be asked to sign a declaration stating that they have relayed the dental hygienist's information as accurately as possible).

- Refusal to consent to a proposed procedure must be clearly documented in the client's records and must include the specific refusal, date and the dental hygienist's initials.

Refusal to consent to a particular treatment should be reviewed periodically in a friendly and helpful manner. This information should be documented in the client's record, dated, and initialed by the dental hygienist.

The CDHBC Code of Ethics and Practice Standards state that dental hygienists must respect the client's right to **informed** refusal for a proposed procedure and subsequently must document this **informed** refusal to consent in the client's record. Informed refusal to consent follows the ethical principle of a client's right to autonomy as it is ultimately the client's decision to make an **informed choice** on any treatments or procedures related to their oral healthcare options.

POLICY

If a client refuses to consent to any aspects of clinical dental hygiene care, the dental hygienist must ensure that the client or their representative fully understands the treatment or process being recommended and the likely consequences of refusing the treatment at this time, and over time.

All client questions must be answered. The dental hygienist must document the specific refusal and date in the client's record, and initial the entry. An interpreter must be used if there is any chance that the client may not fully understand the choice they are making. Refusal to consent should be reviewed regularly; the record entry should include the dental hygienist's initials and the date.

REFERENCES

- Government of British Columbia. Health Care (Consent) and Care Facility (Admission) Act. Victoria: Queen's Printer; 2013. Available from: http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96181_01
- CDHBC Code of Ethics. Victoria: College of Dental Hygienists of British Columbia; 2013.
- CDHBC Practice Standards and Practice Standard Policies. Victoria: College of Dental Hygienists of British Columbia; 2013.

*Added to Interpretation Guidelines: Prior to June 2004
Updated: September 2013*