

# The power of attorney law medical essay

Law



Signed Jane Farmer

In this essay I am going to discuss the elements of Consent, Capacity and Welfare Power of attorney, Consent and capacity are interlinked and as healthcare professionals we must understand both. My experience was with an 83 year old woman with a CVA and her 85 year old husband, where consent could not be gained from the patient. The husband lacked the capacity to understand what we needed to do due to other mental health issues. On arrival we found the patient slumped in a chair, Glasgow Coma Scale 3. The carer who was the person to call 999 stated she came in to find the woman slumped in her chair and unresponsive. We immediately realised that we would be unable to gain consent from the patient. Consent is defined as: "The ability to make an informed decision giving the patient the information in an understandable and correct and unbiased way and without coercion." (Joint Royal Colleges Ambulance Liaison Committee, 2006)

Each time as healthcare professionals we need to examine a patient with any equipment you must ask their permission prior to doing the examination. Asking for consent you must give clear and concise information as to what you want to do and explain why you need to do this in a manner that the patient will understand. It is the patient's right to refuse, however if there is any doubt regarding a person's ability to understand then consent cannot be gained as they are lacking in capacity and further advice should be sought regarding this matter, if you feel that not getting treatment will be detrimental to the patient. The doubt about capacity to consent may arise if the patient has taken any substances that affect or alter their mental status e. g. drugs or alcohol then they may not have the capacity to give consent there are other mental health reasons for people being unable to give consent. If you cannot obtain consent then in accordance with Scots law you

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can be charged with assault. There are a few exceptions to the consent rule Emergency consent, Adults lacking capacity, risk to public health, (Joint Royal Colleges Ambulance Liaison Committee, 2006) (Blaber, 2008) in this instance we had to use emergency consent due to the severity and nature of the emergency as it was life threatening and the husband also suffering from dementia and lacked the capacity to fully understand what was happening and what we were asking. Although understandably concerned and anxious for the patient the husband could not answer several questions we asked him. The carer that was there stated that this gentleman had dementia and didn't know but gave us medication and the patients' medical history whilst also saying that the patients' children have power of Attorney. Is the patient on any medication. Does the patient suffer from any illnesses'Is there anyone else that can help us patients' children. We as healthcare professionals sometimes forget that there are effectively two patients the actual patient and the patients husband in this case, who needed as much attention as the patient. The husband although kept well informed seemed not to grasp the severity of the situation fully. When emergency consent is used because as you have a life threatening emergency and you are acting with the patients best interests and prevent serious deterioration and to provide what you believe the patient would have wanted. No other additional treatment apart from life- saving treatment will be allowed by law to be carried out until consent to treatment is given, you must explain fully when the patient has recovered what happened and why it happened in a manner that the patient can understand. In order to give consent you must first have the capacity to consent. The ability to understand and retain the benefits and risks of being treated or the implications of refusing the treatment with <https://assignbuster.com/the-power-of-attorney-law-medical-essay/>

all relevant information given which should be explained in terms that the patient understands and without anyone else's input into the decision. (Joint Royal Colleges Ambulance Liaison Committee, 2006) In Scotland you are deemed to have the capacity to give consent by the age of 16. (Scottish Government, 2008, Office of the Public Guardian Scotland, 2008) When a patient consents to treatment it is their right to remove that consent at any time, they may consent to some part of treatment but refuse other parts the treatment being offered. The ways in which you can gain the patient's consent are; Verbally where the patient agrees to treatment Non-verbal this is where the patient gives you their arm for a blood pressure to be taken Written consent in signing a consent form the patient is agreeing to the treatment that is written out. (Blaber, 2008) (Joint Royal Colleges Ambulance Liaison Committee, 2006) (Pete Gregory and Ian Mursell, 2010) Whilst examining the patient ascertaining what we thought was the medical issue with her we had to expose her chest area to get the 12 lead ECG attached whilst also trying to respect her dignity. We explained to the patient's husband that we had to move his wife to the ambulance and get her to hospital quickly as she was seriously ill. The husband was very unsteady on his feet which proved to be a problem as he couldn't walk far or very fast, we asked if we could help him and if he would go in the chair. He declined the help offered but also said that he was coming with his wife and we were not going without him. We got him to ambulance where it was then explained that he would hear sirens and he was not to worry but we had to get to the hospital as quickly as possible, did he also have numbers for his children and they could meet him there as he was unable to get a hold of them at the house before we left as we believed that it was not in his best interests to be

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left at the hospital without someone else there with him. The patient needed treatment on route to hospital which upset the husband. Everything was explained to the husband about the treatment that was happening to his wife whilst heading to hospital. By the time we reached hospital the husband had become more confused and anxious with the whole situation and although we guided him into the hospital our priority was the patient and we had to get the patient to Resuss, we asked him to wait at the door and asked the policeman standing there just to keep an eye on him so he was safe and we would be back as soon as we could, however events dictated that we had to assist with the patient when we got into Resus and the husband was brought in by the police and put into the family room. We relayed all the information to the hospital staff and the concerns we had for the husband being left on his own we stated that there was phone numbers for the patients children in the husbands jacket and that they had not been able to contact them. Still unable to ascertain if the patients' children had Welfare Power of Attorney which is a written document giving someone else authority to take actions or make decisions on your behalf during a time you become unable to make these decisions." The Power of Attorney (PoA) document contains the name of the person(s) whom you want to help you, and a list of the individual powers that you want that person to have. The powers must be written down individually to make it clear as to what decisions want that person to make on your behalf. The PoA will also include when the named person is to begin acting for you. Welfare Power of Attorney is when Someone's capacity could be impaired gradually or suddenly as a result of an accident or illness". (Scottish Government, 2008, Office of the Public Guardian Scotland, 2008)Capacity and consent are interlinked and you <https://assignbuster.com/the-power-of-attorney-law-medical-essay/>

cannot give consent if you lack capacity whether it is temporarily or permanently. In this case we had two patients effectively as although the husband was medically fine he had other health issues that proved that he lacked the capacity to be able to understand. We also never had any paperwork regarding Welfare Power of Attorney as this was an emergency situation we had to provide the best care and get the patient to on-going care as soon as possible. Once we had ascertained the severity of the situation after a few tests we needed to go but due to the husband's lack of mobility this took longer. We had to assist the husband without causing him any more agitation.