NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES

POLICY AND PROCEDURE

SUBJECT: INFORMED CONSENT FOR MEDICATION

NUMBER: NN-RI-10

ORIGINAL DATE: 10/13/88

REVIEW/REVISE DATE: 02/21/90, 08/28/91, 08/22/95, 11/19/98, 04/01/99, 09/04/03, 03/06/08, 2/17/11

APPROVAL: Rosalyne Reynolds {s}, Agency Director

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I. PURPOSE

The purpose of this policy is to establish procedures for obtaining and documenting informed consent from consumers for use of medication as a part of prescribed treatment at this Northern Nevada Adult Mental Health Services (NNAMHS).

II. POLICY

Approved medication may be prescribed by all prescribing clinicians at Northern Nevada Adult Mental Health Services (NNAMHS) as indicated by the diagnosis and reasonable standards of medical practice. Written informed consent shall be obtained in keeping with this policy, and consent will be renewed annually.
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III. REFERENCES

1. NRS 433.484: Rights concerning care, treatment and training.
2. NRS 433.003: Declaration of legislative intent.
3. NRS 433A.460: Legal capacity of consumer unimpaired unless adjudicated incompetent.
4. NNAMHS Form # MR-127, Consent for Medication (Desktop Link).
5. NNAMHS Policy and #NN-RI-09, Involuntarily Administration of Medication.
6. NNAMHS Policy #PC-PL-04, Guardianship Application.

IV. DEFINITIONS

Legally effective informed consent implies fulfillment of three basic requirements:

1. Competency to grant consent:
   a. Competency to grant informed consent implies the consumer has the legal capacity to do so. For example, children and those adjudicated incompetent lack legal capacity and therefore require the consent of a guardian. Assessing competency is not a service that NNAMHS provides.
2. Provision of adequate data:
   a. A fair explanation of the medication and/or procedure proposed.
   b. A description of risks, possible adverse effects both common and uncommon as documented in NNAMHS Consent for Medication form MR 127, which requires both the consumer and prescribing clinician signature, date and time.
   c. A description of benefits reasonably expected.
   d. Disclosure of medically reasonable alternatives to the proposed medication (i.e., psychotherapy).
   e. An offer to answer questions concerning the medication and procedure.
   f. Explanation of the consumer's freedom to withdraw consent without prejudice.
   g. Assurance of confidentiality.

3. The consent must be given voluntarily. This means it is given by choice without fraud, coercion or undue influence.

V. PROCEDURE

1. Nothing herein shall be considered to prevent emergency medical care or treatment to any consumer if within a reasonable degree of medical certainty delay would endanger the consumer's health. Express and informed consent is not a requirement under such circumstances (NRS 433.484 applies). When the emergency subsides, compliance with these instructions is required.
2. Consumers may refuse medications. Before medications are administered over the consumer's objection, the requirement of NNAMHS Policy #NN-RI-09, Involuntary Administration of Medication must be fulfilled.
3. The assigned prescribing clinician will ordinarily attempt to obtain the consent. Any other prescribing clinician will do so when clinically appropriate to the circumstances, for example, while covering for an absent prescribing clinician.
4. Appropriate significant persons to grant consent are:
   a. A competent adult consumer age eighteen or over consenting for themselves.
   b. The legal guardian of a consumer who lacks mental or legal capacity.
   c. A parent or guardian for a consumer under the age of eighteen.
   d. Emancipated minor for them.
5. A signed Informed Consent shall be on NNAMHS form, MR-127.
6. Explain in simple language to the consumer or other significant party the expected benefits, potential side effects, complications, alternatives, and consequences of not using medication in keeping with all of Section II Definitions above.
7. Request the consumer (or, if applicable the guardian) to voluntarily sign the appropriate form. NNAMHS Form - MR-127 is for general use of psychotropic and other medication and must be witnessed by the prescribing clinician.

8. Reasonable effort will be made by all staff to help the consumer understand and obtain the consumer's consent.
9. To obtain a guardian, refer to NNAMHS Policy PC-PL-04, Guardianship Application.
10. Place all signed consent forms on the consumer's chart.
11. Prescribing clinician's progress notes will document ongoing monitoring and follow-up.
12. The prescribing clinician reviews the consent on a yearly basis with the consumer and notes this in the progress note. Major changes should be reflected by completing a new consent and recording a supporting progress note.