



Case-Based Discussion – 13th December 2023 (Ref 341)

Discussion - Capacity and consent, falls and referrals

The first patient discussed was an 80-year-old man who was being treated at 6 weekly intervals for generalised spinal stiffness and peripheral joint aches and pains. The treatment consisted of soft tissue massage and articulatory techniques.

It was evident that the patient's memory was deteriorating, especially over the course of this year, when he was struggling to recall what he had been doing, where he had been, and often repeating sentences or jokes at intervals during the treatment; his wife emailed in September to confirm that a diagnosis of Alzheimer's disease had been made.

The primary focus of the discussion on this patient was his capacity to give consent. NCOR offer an example conversation on consent, with questions such as, "how have you been getting on since I last saw you?", or "how did you feel immediately after and in the few days following the treatment?" and in this scenario, it would be doubtful if the patient could remember.

If you look at the [GOsC Guidelines](#), a patient will be deemed to lack capacity if he or she is not able to understand and retain information; weigh the treatment options; or communicate their decision.

The [GCC Guidelines](#) on obtaining valid consent state that the patient should be capable of using and weighing up the information provided and has the capacity to give consent. Capacity refers to the ability of the patient to:

- Understand and retain the information provided
- Use and weigh up information that is relevant to their health needs
- Communicate their wishes to the chiropractic professional

It was suggested that the patient's wife should apply for a lasting power of attorney. It was also pointed out that the key to a positive outcome here was good communication, picking up on non-verbal cues, and recording consent clearly in the notes, even though it would be unlikely for this patient to have a sudden adverse reaction to the type of treatment being given.

The second part of the discussion focused on head trauma leading to delayed intracranial haemorrhage. All of the patients discussed were female, around 70 years of age, therefore more at risk of developing symptoms after a trauma. The lucid period can be several weeks, and observation of physical, mental or emotional changes, or memory loss is vital.

The NICE Guidelines suggest medical referral if no one is able to observe the injured person at home, but in two of the four cases discussed, the patients refused to go to hospital as it was just too difficult these days!

Linking this case with the OPS Themes

A – Communication and patient partnership

A1 You must listen to patients and respect their individuality, concerns and preferences. You must be polite and considerate with patients and treat them with dignity and courtesy.

A2 You must work in partnership with patients, adapting your communication approach to take into account their particular needs and supporting patients in expressing to you what is important to them.

A3 You must give patients the information they want or need to know in a way they can understand.

A4 You must receive valid consent for all aspects of examination and treatment and record this as appropriate.

A5 You must support patients in caring for themselves to improve and maintain their own health and wellbeing.

B - Knowledge, skills and performance

B1 You must have and be able to apply sufficient and appropriate knowledge and skills to support your work as an osteopath.

B2 You must recognise and work within the limits of your training and competence

B3 You must keep your professional knowledge and skills up to date.

B4 You must be able to analyse and reflect upon information related to your practice in order to enhance patient care.

C - Safety and quality in practice

C1 You must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to your patients.

C2 You must ensure that your patient records are comprehensive, accurate, legible and completed promptly.

D – Professionalism

D10 You must consider the contributions of other health and care professionals, to optimise patient care.

Linking this case with the Chiropractic Code

Principle A – Put the health interests of the patient first

A1 Show respect, compassion, care by listening/acknowledging views decisions.

Principle C – Provide a good standard of clinical care and practice

C5 Develop, apply and document a plan of care in full agreement with the patient.

Principle D – Establish and maintain a clear professional relationship with patients

D4 Consider the need, during the assessment and care, for another person to be present to act as chaperone, particularly if the assessment or care might be considered intimate or where the patient is a child or vulnerable adult.

Principle E – Obtain informed consent for all aspects of patient care

E1 Share with the patient accurate, relevant and clear information to enable the patient to make informed decisions about their health needs and relevant care options. You must also take into consideration a patient's capacity to understand.

E2 Obtain and record consent from a patient prior to starting their care and for the plan of care.

E3 Check with the patient that they continue to give their consent to assessments and care.

E4 Ensure the consent of a patient is voluntary and not under any form of pressure or undue influence.

Principle F – Communicate properly and effectively with patients, colleagues and other healthcare professionals

F1 Explore care options, risks and benefits with patients, encouraging them to ask questions.

F3 Involve other healthcare professionals in discussions on patient's care, with the patient's consent, if this means the patient's health needs will be met more effectively.

F4 Take account of patient communication needs and preferences.

Principle G – Maintain, develop and work within your professional knowledge and skills

G1 Keep your knowledge and skills up to date, taking part in relevant and regular learning and professional development activities that aim to maintain and develop your competence and improve your performance and the quality of your work.

G3 Recognise and work within the limits of your own knowledge, skills and competence.

G5 Refer to, or seek expertise from, other chiropractors or healthcare professionals, when needed.