



Medical Directives & Controlled Acts

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Overview

1. Controlled Acts
2. Delegation
3. Medical Directives
 - Legal issues
 - Policy and supporting tools
 - Preconditions
 - Content
 - Use
 - Accountabilities

Controlled Acts

- Defined by the *Regulated Health Professions Act* (“RHPA”) → “risk of harm”
- Cannot be performed in course of providing health care unless:
 - a) Member of health profession authorized to perform
OR
 - b) Delegated by (a)
- 13 in total (s. 27); psychotherapy to be added
- Subject to certain exceptions/exemptions under RHPA and regulations

Performance of Controlled Acts

- RHPA → ordering, authorizing, delegating
 - Performance may be dependent on act being ordered or authorized by member of another profession
 - Regulated health professional may delegate a controlled act authorized to his/her profession, subject to any applicable regulations
 - Act can be delegated to another regulated professional or unregulated practitioner
 - Delegating professional is accountable for decision to delegate

... Performance

- Profession-specific
 - for performance, delegating, accepting delegation
 - Defined by legislation (e.g. *Medicine Act*, *Nursing Act*, etc.); regulatory College expectations
- Facility-specific
 - Legislation (*Public Hospitals Act*)
 - Policies/procedures

Delegation

- Mechanism for extending authority to perform controlled acts, other procedures within existing legislative frameworks
- RHPA s. 28(a) delegation by a member must be per regulation under the member specific Act
- s. 28(b) delegation to a member must be per regulation under the member specific Act
- Regulatory expectations
 - FHRCO Interprofessional Guide (2007)
 - Individual College policies, guidelines, expectations

. . . Delegation

- Must usually occur in context of established provider-patient relationship between the authorizer and the patient
 - Very limited circumstances where can occur without
- Where a controlled act is delegated, it remains the responsibility of the health care professional who authorized it

. . . Delegation

- Can occur directly or indirectly
- Direct Order – specific act/procedure for specific patient on assessment by authorized health professional
 - Usually written, may also be verbal
 - Authorizer must have ordering authority + delegating authority
 - Decision to implement remains solely with the authorizer
 - Prescriptions, requisitions, order set etc.

. . . Delegation

- Designation - by authorizer who does not have ordering authority
- Medical Directive - blanket instructions/ orders re: any patient where identified conditions are met
 - Given in advance without need for direct assessment
 - Type of order
 - Authorizer must have ordering + delegating authority
 - Directive must have integrity of direct order

Medical Directives: Legal Issues

- Need for policy to drive process
- Selection of clinical activity
- Approval of a medical directive
- Appropriate use
- Accountabilities

Policy

- Important for ensuring appropriate development, approvals, use, review/revision
- Reflective of legal and professional requirements for medical directives
- Supported by appropriate tools for development and implementation

... Policy

- Overarching principles and values informing medical directive
- Parameters for identifying need for directive
- Procedure for development
- Requisite content
- Accountabilities
- Expectations for initiation and implementation
- Approval, review and evaluation processes

Preconditions for Medical Directive

- Performance readiness
 - Do authorizers and implementers have appropriate competencies to authorize and implement the procedure/treatment and manage outcomes?
- Authority for medical directive
 - Ordering and delegating authority
- Clinical appropriateness

Content of Medical Directives

- Description of procedure, treatment, intervention being ordered
- Specific patient condition(s), circumstances that must be met before the directive can be initiated and implemented
- Contraindications for implementation of directive

. . . Content

- Identification of who can authorize, who can implement
- Education and supervision requirements
- Communication mechanism(s) for clarifying elements of medical directive
- Documentation requirements
- Monitoring mechanism(s)
- Sign-offs
 - Administrative approval(s) (date, signature)
 - Authorizer(s), Implementer(s) (name, signature)

Relying on a Medical Directive

- Conditions, circumstances for medical directive met?
- Does authorizer have requisite competencies?
- Does implementer have knowledge, skill and judgment
 - To perform the procedure, treatment or intervention?
 - To make all decisions required during procedure?
 - To manage all possible outcomes?
- Sufficient resources available to intervene as required in the event of a complication?

Accountabilities: Authorizer

- Accountable for ensuring the procedure s/he is authorizing will be performed competently, including:
 - That individual to whom the act is being delegated has the appropriate knowledge, skill and judgment to perform it
 - Analyzing potential harm(s) to ensure delegation does not increase risk to patient
 - Predictability of outcomes

. . . Accountabilities: Authorizer

- Knowing the predictability of the outcomes associated with the procedure
 - Ensuring ongoing monitoring and evaluation of the delegation for quality assurance
 - Ensuring that appropriate medical resources are available to intervene as required
- Authorization in best interests of patient
 - Ultimately accountable for care of patient

Accountabilities: Implementer

- Must be satisfied that:
 - authorization has been made appropriately
 - The procedure is warranted
 - s/he is competent to perform the procedure and manage outcomes given the circumstances in the situation
 - Risks to patient, potential outcomes
 - Has knowledge, skill & judgment for implementation, management of outcomes
- Know how to get clarification
- Consent

Accountabilities: Employer/Facility

- Responsible for ensuring care is provided in accordance with applicable standards and corporate expectations
- Can be increased risk/liability – direct and/or vicarious
- Have appropriate framework for development of medical directives, approval, monitoring, review/revision
- Adequate insurance coverage

Appropriate Delegation/Medical Directives

- Ensure appropriate, co-ordinated care and patient safety
- Support multi-disciplinary, team-based care
- Must appropriately manage risk

Questions?



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