

Summary Sheet

Consent to Treatment/Procedures(s) Minors / Mature Minors

Who May Give Consent

A Patient under the age of 18 is presumed to be a Minor Patient without Capacity unless they have been deemed to be a Mature Minor.

Legal Representative

Includes the following in relation to a Minor:

- Guardian
- Either the mother or father as authorized by law to consent for his/her child
- Divorced Parent with Custody
- Person appointed by Guardian to act on behalf of the Guardian
- Person authorized to consent to treatment under the *Mental Health Act*
- Any person who is authorized by law to consent for a Minor

Mature Minor

A Minor who can understand and appreciate the nature, risks and consequences of a proposed Treatment/Procedure can provide consent without the input of their Legal Representative. The Mature Minor's Legal Representative cannot override the Mature Minor's decision.

Director of Child, Youth and Family Enhancement Act

- May seek a court order to override the Legal Representative's or Mature Minor's refusal of consent or withdrawal of consent to an essential Treatment/Procedure that is necessary for the Patient's health or well-being.

- May give consent if the Minor's Legal Representative has lost the Capacity to Consent to Treatment/Procedure(s) for the Minor.

Who May Not Give Consent

The following are examples of persons who may not consent to Procedure(s) for the Minor unless they are the Minor's Legal Representative:

- step-parent;
- adult in an adult interdependent relationship (common-law relationship) if the adult is not the father or mother;
- grandparent;
- the parent's girlfriend or boyfriend;
- family friend or neighbour; or
- nanny/babysitter

Disclaimer

This summary sheet is intended to be a guide and is not to replace the content of the AHS policy Consent to Treatment/Procedure(s) and its five related procedures or legal advice. Examples herein are for illustrative purposes only; the application of the AHS policy/procedures and legislation may vary depending on circumstances unique to each situation. Readers are encouraged to view the policy/procedure documents and legislation directly and should consult Professional Practice Consultation Service (PPCS) {practice.consultation@ahs.ca} if in need of clarification.

Mature Minor Assessment

A Patient under the age of 18 may be assessed and determined to be a Mature Minor. Several factors must be considered while assessing whether a Minor can be deemed to be a Mature Minor:

1. Age

Age alone will not determine a Minor's Capacity to provide consent. In exceptional circumstances, a Minor under the age of 14 may be deemed a Mature Minor.

2. Intelligence

The Minor's ability to understand the nature, benefits, risks, consequences and alternatives to medical care and treatment. The Minor's decision making capability and understanding and appreciation of critical information is important.

3. Maturity

The Minor's ability to provide reliable information and to make important decisions.

4. Serious health care related decision

The importance, intrusiveness, complexity and seriousness of a Treatment/Procedure increases the required level of maturity.

5. Informed consent

Minor is provided with the relevant information including risks, alternatives and the consequences of refusal. The Minors' consent must be voluntary and free of coercion.

6. Freedom from parental or Guardian control, self-supporting, married or has children

Indications of independence that may support a Minor's increased level of maturity.

More information regarding Mature Minors can be found at: <http://insite.albertahealthservices.ca/1196.asp#mature>

Emergency Health Care

Emergency health care for a Minor may be provided where a Mature Minor or Legal Representative is unable to provide consent if the Minor has an illness or injury and their life or health is immediately threatened.

AND

There is no knowledge that the Mature Minor or Legal Representative would have objected to the Treatment/Procedure.