

Unit one Powerpoint® Slides

Youth Friendly General Practice:
Advanced Skills in Youth Health Care

Unit One - Medicolegal Issues in Youth Health



NSW Centre for the Advancement of Adolescent Health
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- Welcome and introduction of facilitators
- CPD points - must attend all 3 Units of the module and complete predisposing and reinforcing activities to receive points for ALM

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Youth Friendly General Practice:
Advanced Skills in Youth Health Care

This learning module consists of three units:

- Unit One - Medicolegal Issues in Youth Health
- Unit Two - Intervention Strategies and Management of Key Health Problems
- Unit Three - Creating a Youth Friendly and Culturally Sensitive Practice

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Icebreaker!

- Please introduce yourselves!
- *What are your goals and expectations of this ALM?*

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Goal of this module

To increase the capacity of GPs to deliver youth-friendly health services to young people by equipping them with the necessary knowledge, attitudes and skills to effectively engage young people, assess and identify their health issues and concerns and provide appropriate intervention and management for their health problems

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Learning objective - Unit One

To understand and apply medicolegal principles relevant to the medical treatment of young people, in particular those under 18 years

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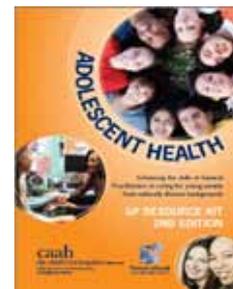
Program outline - Unit One

- 1 Workshop introduction - housekeeping
- 2 Understanding medicolegal principles in the medical treatment of young people
- 3 Knowledge and application of key medicolegal issues
 - Capacity of minors to consent to treatment
 - Confidentiality
 - Privacy and medical records
 - Child protection and mandatory reporting
 - Documenting competency assessment
- 4 Case Discussion
 - Dealing with risk behaviours - e.g. sexuality; prescription of contraception
 - Dealing with parents
 - Cultural considerations



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Information not advice

- Material in this unit is intended to give information about general principles and is not a substitute for specific advice
- Contact your medical defence provider if you require specific advice



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Predisposing activity review



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Small group reflection activity

Choose a scribe, spokesperson and story teller.
 The story teller describes a recent consultation with a young person aged 12-17

•What medicolegal issues were put into practice during this consultation (consciously or subconsciously)?

•Did the patient's age (being under 18 years) make medicolegal issues more prominent during or after the consultation, and why or why not?



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Medicolegal principles

- Legal and ethical issues are fundamental to professional conduct and practice in any area of health care
- Working with young people involves additional considerations in day-to-day practice because of their legal status and their stage of development
- The law is not clear-cut in many aspects relating to young people under 18 years



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Medicolegal issues pertinent to young people under 18 years

- The capacity of a minor (someone under 18 years) to consent to their own medical treatment
- The young person's legal right to confidential health care
- Privacy and Medical Records
- Child Protection and Mandatory Reporting

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Activity - the application of 4 key medicolegal issues

- 4 case scenarios
- After each scenario, answer quickly without discussion and note number for each answer
- Answer: yes/no/don't know/depends

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Scenario 1- 16 year old girl

- Answer: depends
- In South Australia, she can consent on her own
- In NSW, it is reasonable to assume she can consent on her own
- In all other jurisdictions you must make a competency assessment

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Making a competency assessment

- A minor may be legally competent to consent to medical treatment if he or she 'achieves a sufficient understanding and intelligence to enable him or her to understand fully what is proposed'
- Ensure that language is not a barrier
- Consider age, level of independence, level of schooling, maturity, ability to express own wishes
- Consider cultural factors and cultural differences between you and the young person

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Scenario 2 - 15 year old boy

- Answer - no
- However it is reasonable and clinically appropriate to talk to the boy about discussing your concerns with his mother and asking his permission

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Scenario 3 - 13 and 17 year old adolescents

- Answer - depends
- Minors can exercise their own privacy choices if they are competent to consent

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Scenario 4 - 14 year old boy

- Answer - depends
- The legal obligation of a doctor to report this scenario depends on the jurisdiction.
- The ethical and clinical issues and obligations still need to be considered and managed



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Documenting competency assessment

- Age
 - Intelligence
 - Education
 - Health
 - Level of independence from parental care
- Ability to explain the problem for which they have sought assistance
- Has attended surgery on own and requested advice/ treatment
 - Type and risks of the proposed treatment
 - Alternatives available to the proposed treatment
 - Consequences of the proposed treatment
- Relevant treatment and corollary health education and information +/- written information
- Consequences of not having the proposed treatment
- Encouraged to discuss treatment with parents, document if unwilling to involve parents, requests confidentiality be maintained. Offered to assist with communicating with parents at any time.
- I have assessed this person regarding the above areas and on due consideration we have decided to proceed with this management

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Activity - Yasmin case discussion

- In small groups of 4 or 5, choose a narrator who has the Unit One resource for Yasmin case discussion
- 5 minutes for each question, then move on

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Case discussion - Yasmin

- Competence to consent to contraception and to chlamydia testing
- Confidentiality and chlamydia
- Exploring personal, family and cultural beliefs about sexuality
- Assessing children at risk of harm
- Making a report to a child protection authority



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Exploring personal, family and cultural beliefs about sexuality

Be aware of your own cultural beliefs and how these could influence your interaction with Yasmin - this includes your gender, as well as personal beliefs and cultural background

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Assessing abuse

It is useful to reiterate the limits of confidentiality:

Yasmin as you know there are some situations where I cannot keep confidentiality, including where I believe there are children being abused or hurt.

I'm very concerned about what you have told me and would like to know more about your safety at home, and the safety of your brothers and sisters.

I might need to act on this information but if I do I will explain the process to you. The ultimate goal is to make sure that home is a safe place for you and your family.

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How to make a report

- <https://aifs.gov.au/cfca/publications/reporting-abuse-and-neglect>



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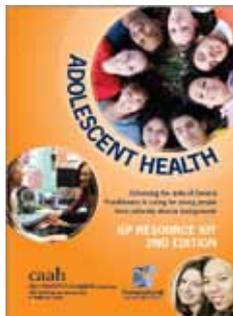
Conclusion

- The laws pertaining to the majority of primary care consultations with young people take into account the significant developmental changes occurring during adolescence - allowing for privacy, confidentiality and the capacity to allow a young person to make their own decisions about health care
- This must be balanced with the need to protect young people from harm, the central role that parents/ adult carers play in the lives of most young people, and family and cultural background



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