

South Australia

Consent to Medical Treatment and Palliative Care Regulations 2014

under the *Consent to Medical Treatment and Palliative Care Act 1995*

Contents

- 1 Short title
- 2 Commencement
- 3 Interpretation
- 4 Health practitioners
- 5 Consent of person responsible
- 6 Resolution of disputes by Public Advocate
- 7 Referral of matters to Public Advocate
- 8 Fees

Schedule 1—Fees

Schedule 2—Revocation of *Consent to Medical Treatment and Palliative Care Regulations 2004*

- 1 Revocation of *Consent to Medical Treatment and Palliative Care Regulations 2004*

Legislative history

1—Short title

These regulations may be cited as the *Consent to Medical Treatment and Palliative Care Regulations 2014*.

2—Commencement

These regulations will come into operation on 1 July 2014.

3—Interpretation

In these regulations—

Act means the *Consent to Medical Treatment and Palliative Care Act 1995*.

4—Health practitioners

- (1) For the purposes of the definition of *health practitioner* in section 14(1) of the Act, the following professions and practices are declared to be included in the ambit of that definition:
 - (a) the provision of an ambulance service and medical treatment by a member of the staff of SAAS;
 - (b) paramedic.

(2) In this regulation—

ambulance service, medical treatment and *SAAS* have the same meanings as in the *Health Care Act 2008*.

5—Consent of person responsible

Pursuant to section 14B(2) of the Act, the following provisions apply in relation to the giving of consent by a person responsible for a patient for the purposes of the Act:

- (a) the person responsible must make and keep such records relating to the giving of consent as may be required under a scheme determined from time to time by the Minister and published in the Gazette;
- (b) a person responsible for a patient contemplated by paragraph (d) of the definition of *person responsible* in section 14(1) of the Act cannot consent to the administration of medical treatment consisting of the administration of drugs (whether of a sedating nature or otherwise) principally for the purpose of controlling the behaviour of the patient.

Note—

This practice is commonly referred to as the chemical restraint of a patient.

6—Resolution of disputes by Public Advocate

- (1) For the purposes of section 18C of the Act, and despite section 23 of the *Guardianship and Administration Act 1993*, the Public Advocate may only delegate a function or power under that section relating to mediation to a person if the Public Advocate is satisfied that the person has suitable qualifications and expertise in mediation.
- (2) A mediator to whom the Public Advocate has delegated a function or power under section 18C of the Act has, for the purposes of that section, the same privileges and immunities as a member of the Guardianship Board under the *Guardianship and Administration Act 1993*.

7—Referral of matters to Public Advocate

For the purposes of section 18F of the Act, the Guardianship Board may not refer a matter to the Public Advocate if the matter has already been the subject of mediation under section 18C of the Act.

8—Fees

The fees for the purposes of the Act are as set out in Schedule 1.

Schedule 1—Fees

Description of fee	Fee
Application under section 18C of the Act	nil
Application under section 18E of the Act	nil

Schedule 2—Revocation of *Consent to Medical Treatment and Palliative Care Regulations 2004*

1—Revocation of *Consent to Medical Treatment and Palliative Care Regulations 2004*

The *Consent to Medical Treatment and Palliative Care Regulations 2004* are revoked.

Legislative history

Notes

- For further information relating to the Act and subordinate legislation made under the Act see the Index of South Australian Statutes or www.legislation.sa.gov.au.

Principal regulations

Year	No	Reference	Commencement
2014	78	<i>Gazette 12.6.2014 p2498</i>	1.7.2014: r 2