

Chaperones

MPS



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Using chaperones is both an added layer of protection and an acknowledgement of a patient's vulnerability. It can also safeguard against unfounded accusations. The Code of Health and Disability Services Consumers' Rights provides that: "Every consumer has the right to have one or more support persons of his or her choice present, except where safety may be compromised or another consumer's rights unreasonably infringed."¹

The third person

For particular consultations, doctors may want another person present. The role they will play will depend on the individual circumstances of the consultation. The function of the third person should be clearly understood by all parties, so it is necessary to obtain informed consent beforehand.

A third person may be present to participate in one of the following five roles as defined in this statement:

- **A support person for the patient** – Patients have the right to request one or more support people for consultations that might cause discomfort or confusion. Their presence focuses on the needs of the patient.
- **An interpreter for the patient** – This is the patient's right under Right 5(1) of the Code of Health and Disability Services Consumers' Rights. An interpreter may assist with translating a different language or with the understanding of someone with a disability or alternative form of communication (ie, sign language).
- **An observer for the doctor** – This person is present at the doctor's request for a number of reasons, eg, part of CPD to assess the doctor.
- **A student or trainee** – Participation in teaching is covered by the Code of Health and Disability Services Consumers' Rights. If a student or trainee is present during a consultation, an explanation should be provided before the consultation and consent obtained.
- **The doctor's chaperone** – A chaperone is a person who, at the invitation of the doctor and with the patient's informed consent, is present during a specific examination or treatment procedure. This could be part of an internal practice policy.²

If a patient or doctor refuses the attendance of a third person, they have the right to withdraw from the

consultation until a mutually acceptable third person is available. Alternatively, the patient may be referred to another doctor.

The doctor's chaperone

"The use or offer of a chaperone should be routinely annotated in the clinical record, even if this is declined by the patient (eg, COD – Chaperone offered: declined, or CP – Chaperone Present)."³

The use of chaperones should not be restricted to male doctors and female patients, or when a physical or internal examination is carried out. Be aware of grey areas of vulnerability where an inadvertent breach may occur. Examples include listening to the chest, taking blood pressure and palpating the apex beat – all could involve touching the breast area.

When choosing a chaperone, consider that:

- Chaperones should have the knowledge to assess the appropriateness of an examination and/or procedure as well as the way in which an examination and/or procedure is carried out.⁴
- The most appropriate person would be a member of the clinical team, but the patient must be introduced to them and told what their position is beforehand.
- Potential inadvertent breaches of confidentiality make friends and relatives poor choices of chaperones.

Doctors with conditions on registration

Some doctors have conditions on their registration that require a chaperone to be present at certain types of consultation. Doctors who have this condition on their practice should inform their employer of the condition, as it is usually the result of past disciplinary action.

For such doctors, the presence of a chaperone is not optional and if a patient does not feel comfortable, they should be referred to another doctor.

According to the Medical Council of New Zealand, doctors who have chaperone conditions should disclose the reason behind the requirement if they are questioned by a patient. The only exception to the chaperone condition is in an emergency situation. A doctor with a chaperone condition may attend an emergency, even when a chaperone cannot be located.

References

1. Right 8, Right to Support, *The Code of Health and Disability Services Consumers' Rights*
2. Medical Council of New Zealand, *Sexual Boundaries in the Doctor–Patient Relationship* (2009)
3. The Health and Disability Commissioner, Report on Opinion – case96dc2761, September 1997
4. New Zealand Society of Physiotherapists, *Guidelines on Support Persons and Chaperones* (2004)

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