

CHAPERONES

GUIDELINES

1. It is recommended that a chaperone be available whenever intimate physical examinations or physical therapies i.e. involving the genitalia, rectum or female breast, are performed by a qualified staff member or the naturopathic physician.
2. A policy that patients may request a chaperone should be established and patients informed of this policy by means of a clear notice in waiting rooms or a printed sheet, or through a conversation initiated by qualified staff or the naturopathic physician. It is the responsibility of the naturopathic physician to ensure that patients are advised of this policy.
3. The request by a patient to have a chaperone must be honoured.
4. If at all possible, a chaperone should be a member of the professional clinical team. Ideally, the chaperone would be the same gender as the patient.
5. If a patient asks to have an appropriate support person in the room, their demand must be respected but that person should not be considered as a chaperone.
6. The chaperone's identity must be recorded in the patient's file.
7. Chaperones must adhere to clear rules about respecting patient privacy and confidentiality.
8. If a chaperone is to be provided, a separate opportunity for private conversation between the patient and the naturopathic physician should be arranged.
9. A chaperone should accompany the naturopathic physician on home visits if an intimate physical examination or therapy is to be performed.

ADVICE

Naturopathic physicians seeking advice on the use of chaperones may call the Patient Relations Committee or make a request to the College Board for clarification or guidance with respect to his or her rights and responsibilities.

It should be noted, however; that no advice or guidance offered by the Committee or the College can guarantee that a naturopathic physician will not be the subject of a complaint lodged by a patient or former patient. Each complaint, by law, must be considered by the College on the merits of the case as to whether the naturopathic physician's conduct was appropriate.

PRACTICAL CONSIDERATIONS

Ethics, professional conduct and prudence, dictate a general protocol of having chaperones available on a consistent basis. It is impractical to have a chaperone at every physical exam and therapy session for every patient. The naturopathic physician must use judgement and discretion in considering the need for a chaperone; however, priority should be given to the requests of the patient and the parent or guardian of a patient. The naturopathic physician should discuss with the patient the various considerations in deciding whether to have a chaperone.

ROLES OF A CHAPERONE

Chaperones play a role in the protection of both parties.

For patients, chaperones should provide physical and emotional comfort and reassurance during sensitive and intimate examinations or treatments. The presence of a chaperone may provide reassurance, for the patient, of the professional character of the exam or therapy.

For the practitioner, the chaperone provides protection from unfounded allegations of professional/sexual misconduct. Such accusations may damage the naturopathic doctor's reputation irreparably. With the prospect of legal proceedings, professional discipline and criminal charges, a chaperone could play an invaluable role in preventing misunderstandings and false accusations. Doctors who continue performing unchaperoned intimate examinations or treatments risk allegations of sexual misconduct.

Clear notices in waiting rooms highlighting the role and availability of chaperones would enhance the understanding of the need for protection of both doctors and patients.

WHEN TO USE A CHAPERONE

The nature of the exam or therapy

Individual patients have different senses of intimacy and invasiveness during a physical examination or therapy session. Showing consideration for a patient's dignity illustrates an understanding of their vulnerability and respect for their concerns and well-being.

A comfortable and considerate atmosphere for the patient includes the provision of privacy to undress, appropriate gowns, sensitive use of draping, and clear explanations on various components of the physical examination or therapy. Younger patients require extra care to provide reassurance.

This is of particular importance during examinations where patients may not understand why a more intimate examination may be required (for example, a testicular examination when presenting with abdominal pain), and in situations where intimate examinations are not performed per se, but where potentially "inappropriate" exposure may be required (for example, of a woman's breasts during auscultation of the heart).

Providing explanations during an intimate examination lets both the patient and chaperone know what is expected and lessens any cause for concern. During any intimate examination or therapy involving the genitalia, rectum or female breast, a chaperone must be present, especially when a patient is having a physical examination or therapy for the first time.

Doctor/Patient Genders

Although chaperones are most commonly offered to patients of the opposite sex, and most frequently to female patients of male physicians, it is important that patients from all demographic categories feel comfortable requesting a chaperone. Intimate examinations can be interpreted as inappropriate by either sex. The degree to which this occurs may also vary depending on the sexual orientation of the doctor or patient.

Chaperones should be offered equally to patients of both sexes in order to avoid stigma and misunderstanding.

Children, Patients unable to consent

In certain circumstances, for example during examination of a young child, it is wise to have a parent or legal guardian present during the examination as a companion for the patient. The parent or guardian is not appropriate as the chaperone.

When to Decline/Postpone the Examination or Therapy

Both patient and doctor have the right to insist that a chaperone be present during intimate examinations and treatments and to insist that the examination or therapy be postponed if a chaperone is unavailable.

The doctor should also consider postponing the examination or therapy session in cases where a patient is reluctant to be examined or treated or the doctor feels uncomfortable.

If a patient declines having a chaperone, it is probably unreasonable to insist. However, if the doctor wishes not to proceed with the examination or therapy, he or she must consider if this is appropriate patient care.

If an examination or treatment is declined or postponed, all related discussions and decisions should be recorded in the patient's file.

Why Patients Decline

Not all patients want to have a chaperone present. Patients' reasons for objecting include not feeling the need for a chaperone, the embarrassment of having an onlooker and lack of confidentiality. Some patients consider a naturopathic doctor's insistence on having a chaperone to be implying that they are not trustworthy.

In a well-established patient-physician relationship grounded in trust, the use of chaperones may be seen by both parties as unnecessary.

APPROPRIATE CHAPERONES

The Type of Chaperone

Whenever possible, a trained member of the professional clinical team should serve as chaperone. Health professionals are held to standards for safeguarding patient privacy and confidentiality. Their status affirms the formal nature of the examination or therapy. If properly trained, the chaperone may also provide assistance to the doctor during the examination or treatment improving time efficiency and diverting the attention away from their role as a chaperone.

Not Suitable

Non-clinical staff such as receptionists are not considered favourable chaperones. It is also not suitable to have someone who just stands at the door or behind a curtain as they are not providing adequate protection for a patient or doctor. While patients should be allowed to have a relative or friend present if they prefer, these people are not suitable chaperones, as there remains the potential for embarrassment, breach of confidentiality and lack of protection for the doctor.

Inappropriate Alternatives

Alternatives to having chaperones such as leaving the room door ajar or keeping the intercom between the room and reception open are inappropriate. These actions are unprofessional as they are intrusive to the patient's privacy.

LIMITATIONS AND CONCERNS

Naturopathic doctors and chaperones have different skills. Depending upon their training, it is reasonable to assume that a chaperone may not know if the procedure a doctor is performing is genuinely necessary. Apart from providing an extra pair of eyes and ears, the question becomes, is the chaperone really providing protection to the patients? It is also possible that a chaperone may merely stifle justified complaints. There is always room for misinterpretation of a doctor's actions on the part of the chaperone.

These limitations and concerns enhance the need for well-trained chaperones to provide protection to both parties.

Concerns with the Presence of a Chaperone

Patient privacy and confidentiality may be compromised by having a chaperone present in the room. The presence of a chaperone can hamper communication between the doctor and patient in several ways. It may heighten feelings of susceptibility and embarrassment on the part of the patient and a shy patient may feel even more inhibited about revealing personal and medically important information. The rapport between a patient and naturopathic physician may also be harmed if the patient perceives the chaperone's presence as an act of suspicion and mistrust by the doctor.

The attitude of the doctor is a most important factor in intimate examinations and the naturopathic physician should keep inquiries and history-taking to a minimum during the course of the chaperoned examination or therapy. Instead, the time should be spent on explaining the features of the exam or therapy and educating the patient, communication shown to be of significant value to patients. There may, however, be findings revealed during physical examination that are not protected by these precautions.

Providing a separate occasion for a private conversation between the patient and naturopathic physician gives the opportunity to discuss these matters.

The physician must, in any case, establish clear rules for chaperones about respect for privacy and confidentiality.

CONCLUSION

Ultimately, the doctor-patient relationship is unique and must always be treated as such. Physical examinations and therapies, particularly intimate ones, demand psychological and practical comfort for the patient as well as protection for the doctor from allegations of impropriety. A realistic balance is required between offering protection and maintaining the autonomy of both parties. Measures, such as the use of chaperones, can help to ensure that misunderstandings between doctor and patient are avoided.