When another person is present during a consultation

Key points

As a doctor, you or a patient may request that another person is present during a consultation. This may be as a support person, interpreter, observer, student, chaperone, or other reason.

Everyone involved in the consultation should be clear about why the other person is attending the consultation, including what that person’s role and level of involvement will be during the consultation.

When another person attends the consultation at your request, it is your responsibility to obtain the patient’s agreement before proceeding with the consultation. Let the patient know that they can change their mind at any time during the consultation.

If you or your patient cannot agree on having another person in the consultation, or who that other person should be, you should discontinue the consultation until a mutually acceptable other person is available. If no suitable replacement can be found, you should refer your patient to another doctor.

How this statement applies

This statement outlines our expectations when another person1 attends a consultation between you and a patient. The other person’s attendance at the consultation can be in person, or virtually through a personal mobile device or video conference.

There are several factors to be aware of when another person is present in a consultation. Having another person present could affect the dynamics of the treating relationship, either positively or negatively. It could also influence what information the patient shares with you.

This statement is intended to provide general guidance to doctors, patients and other people who attend a consultation. We are unable to cover every scenario and therefore you will need to use your judgement when applying this statement to your situation.

This statement may also be helpful for other health professionals, practice managers, teaching facilities, and staff at medical centres and outpatient clinics who book appointments for patients.

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1 Where that person is not directly involved in providing care to the patient, for example as part of the multi-disciplinary team.
Situations where another person attends with the patient

As a support person

1. Patients have the right to have one or more support people present during a consultation, except where that could compromise safety, or another patient’s rights.²

2. A support person can assist the patient by prompting the patient, providing information about the patient, asking questions on the patient’s behalf, or providing support by their presence. A support person might be present for all or part of a consultation.

3. Reasons a patient may request a support person/s include:
   a. they feel more comfortable having someone with them
   b. it is their first consultation with the doctor
   c. cultural reasons
   d. their age (either young or old)
   e. they would like someone to help them recall and make sense of the consultation
   f. they have a disability.

4. A patient should still be given the chance to talk directly with you even when they attend with a support person. You should check that the patient is comfortable providing personal health information in the presence of the support person. If not, it may be appropriate to ask the support person to leave the room. Be clear about your patient’s needs and check that you have understood your patient correctly.

As an interpreter

5. Patients have the right to effective communication in a form, language, and manner that helps them understand the information provided during a consultation.³

6. An interpreter may attend to facilitate communication between you and your patient.

7. Before the consultation, you should confirm that:
   a. your patient agrees to an interpreter being present
   b. the interpreter understands their role in interpreting for both you and your patient.

8. Practical and ethical issues can arise from involving an interpreter in the consultation. We encourage you to familiarise yourself with our guidance on working with interpreters.⁴

Situations where another person attends with the doctor

As an observer

9. There are several reasons you may ask an observer to attend your consultation, for example:
   a. for continuing professional development (CPD) - to provide input on how you can improve your communication or clinical examination skills
   b. organisational policies that require another person to attend certain examinations or consultations (e.g. intimate physical examinations)
   c. when observations are a requirement of your training or professional development programme.

10. Before the consultation starts, you should discuss with the observer their level of involvement in the consultation. This will include their role, the taking of any notes, and the nature of those notes. Although those notes will not form part of the patient’s records, they must comply with the Health Information Privacy Code.

² Right 8 of the Code of Health and Disability Services Consumers’ Rights.
³ Right 5 of the Code of Health and Disability Services Consumers’ Rights.
⁴ Cole’s medical practice in New Zealand includes a chapter on working with interpreters. A key point is that accurate interpreting requires training, and trust between the interpreter and those the interpreter works with.
11. You should discuss the observer’s level of involvement with the patient and obtain their agreement\(^5\) to have an observer present before proceeding with the consultation. The observer could be present for all or part of a consultation. Let the patient know that they can withdraw their agreement at any point during the consultation.

**As a student**

12. As part of their education, students need to gain experience from observing how clinicians practise. This includes attending patient consultations.

13. You should obtain your patient’s agreement to have a student present before proceeding with the consultation. The student could be present for all or part of a consultation. You should ensure the patient understands that they have the right to refuse the involvement of those attending at any time.\(^6\)

14. If a student attends a consultation with you, they should be formally introduced to the patient. You should explain their role and level of involvement (such as whether they will be observing or participating in your patient’s care by taking a clinical history or conducting a physical examination), and document that the patient agrees to this.\(^7\)

**As a chaperone**

15. A chaperone acts as an independent person within the consultation, for your and the patient’s safety.

**When having a chaperone is good practice**

16. Some workplaces have a policy that requires a chaperone to be present for certain types of consultations or examinations (for example, intimate examinations). Even when there is no formal requirement for a chaperone, offering a chaperone is considered good practice for certain consultations.

**When having a chaperone is a requirement\(^8\)**

17. We may require you to have a chaperone present for particular consultations. This can be after a disciplinary process, while you undergo an investigation, or as part of an agreement (‘voluntary undertaking’). In these instances, you must comply with specific requirements imposed or agreed, some of which are outlined below.

18. You should inform your workplace of your requirement to have a chaperone. You may be required to put up a notice in the waiting and examination areas to inform patients. When the patient books the appointment, the patient should be advised that a chaperone will attend the consultation.

19. The chaperone must be approved by us. Chaperones are usually registered health professionals who have received training on attending a consultation with a doctor and specific areas to observe during the consultation.

20. If the patient is not comfortable with a chaperone attending, the patient will need to see another doctor.

21. In an emergency, you may attend to the patient without a chaperone, even if you have a chaperone requirement.\(^9\) If that happens, you should inform us as soon as possible that you saw a patient without the required chaperone and the circumstances of the emergency.

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\(^5\) Or the agreement of someone who has the legal right to make decisions on the patient’s behalf when the patient lacks capacity to make their own decisions.

\(^6\) Under Right 9 of the Code of Health and Disability Services Consumers’ Rights, all rights under the Code apply equally in situations where the patient is asked to be part of training or research.

\(^7\) See the section ‘When care is provided in a teaching environment’ in our statement on *Informed consent: Helping patients make informed decisions about their care*.

\(^8\) Our Chaperone policy outlines our framework for the use of chaperones in situations when that is our requirement.

\(^9\) Refer to our statement *A doctor’s duty to help in a medical emergency* for how a ‘medical emergency’ is defined, and the doctor’s obligations in that event.
How to facilitate having another person present in a consultation

Make arrangements for the person’s attendance ahead of the consultation

22. If another person attends a consultation, wherever possible and practical, arrangements should be made ahead of the consultation. We recommend informing the patient when they book their appointment so that the patient is prepared ahead of time. For teaching facilities, explain that medical, nursing and allied health students may attend the appointment, but patients can decline the students’ attendance.

23. Practice policies about another person attending a consultation should be displayed in waiting and examination rooms, and should also be available online if virtual consultations are offered.

Ensure that all parties are clear about the other person’s role

24. Everyone involved in the consultation must understand the other person’s role. This includes introducing the other person to the patient and being clear about the extent of the other person’s involvement and what is expected of them.

Ensure that the patient agrees to the other person attending the consultation

25. In situations where the person attending is not directly involved in the patient’s care, the patient must agree to the other person’s attendance before the consultation starts. The patient may withdraw their agreement at any point.

26. Where possible, speak privately with your patient about the other person’s attendance. That way, your patient is less likely to feel pressured about agreeing to the other person attending, and it gives your patient the opportunity to ask any questions they may have about that person’s involvement.

Ensure the other person understands what is expected of them when they attend a consultation

27. You must ensure that any other person attending a consultation recognises its confidential nature and is respectful of your patient’s personal information and physical privacy. It is important that the other person is clear about your and your workplace’s expectations in areas such as:
   a. the use of personal mobile devices during a consultation
   b. not talking about the consultation with others in the person’s network
   c. not sharing the other person’s views, experience, opinions, and observations during the consultation on social media.

Document the other person’s attendance at the consultation

28. While not every aspect of another person’s attendance at a consultation can be documented, you should record enough information to provide an accurate summary. This is particularly important if another person attends the consultation with you. As far as is reasonably practicable, include the following information in your documentation:
   a. name and role of the person(s) who attended
   b. purpose of their attendance
   c. confirmation that your patient agreed to their attendance.

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10 In a hospital setting, ward rounds often comprise doctors at varying levels of training and experience, nursing staff and allied health professionals. It would be courtesy to inform the patient that there are a range of health professionals involved in their care.

11 See also Right 1 (right to be treated with respect) and Right 3 (right to dignity and independence) in the Code of Health and Disability Services Consumers’ Rights.
What if the patient or doctor cannot agree on the presence of another person during a consultation?

29. A patient has the right to decline having another person present in a consultation. There may be a variety of reasons for their refusal including when sensitive information is being shared, or when there is an intimate examination.

30. If you or your patient cannot agree on having another person attend the consultation, or who that person should be, either of you can defer the consultation until a mutually acceptable person is available. Alternatively, you can refer your patient to another doctor. The patient should be reassured that this will not have any adverse effect on their care.

31. You should ensure that you document the patient’s refusal to have the other person present and the alternative course of action taken.

June 2022

This statement was updated in June 2022. It replaces the March 2004 statement on When another person is present during a consultation. It is scheduled for review in 2027. Any changes to the law before that review date may make parts of this statement obsolete.