



Guidelines on the Podiatric Treatment of Whanau/ Family Members

Although the decision to treat an **immediate or extended** family member can be left to the discretion of the practitioner, the following factors should be considered:

- The treatment of whanau/family members has the potential for independent clinical judgment to be compromised due to whanau ties or pressure. Of secondary importance is the risk that such treatment exposes the practitioner to potential allegations of favoritism towards whanau at the expense of non-whanau patients.
- Each practitioner needs to make the judgement whether the above risks are likely to be outweighed by the treatment benefits to the whanau member.
- While the decision to treat a family member should be approached with caution, exceptions might be where the treatment is needed in an emergency, or takes place in a small community where there is limited access to appropriate treatment. In such situations, a thorough care plan should be documented with handover when and where appropriate.
- It is the practitioner's responsibility to understand the potential risks noted above. Moreover, the appropriate level of treatment is an important factor, and evaluation of the possible risks in each specific circumstance is needed on a case by case basis.
- This consideration does not supersede any policy/procedural requirements placed upon the practitioner by their employer/funding agency, where the patient is not paying for the service directly.

- The practitioner needs to be aware that there is the potential for professional objectivity to be compromised, which may unduly influence the level of care being delivered, for example:
 - patients may feel uncomfortable disclosing sensitive medical information, which could potentially compromise treatment; or
 - In the treatment of a minor over which a practitioner has guardianship rights, the consent of any other guardian to the proposed treatment should be sought and obtained;¹
 - It should be noted that in some situations minors can refuse care from their parents.
- It is the practitioner that will need to defend any allegations arising from the treatment of whanau/family members, so they need to be confident that they can demonstrate that they have acted reasonably and in the best interests of the patient.
- A second opinion should be sought where a practitioner is unsure as to whether to proceed with treatment.

This policy document is intended as a helpful guideline for practitioners considering the treatment of whanau/family members.

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¹ Sections 16 and 36(3) of the Care of Children Act 2004.