#### STANDARD ON PROVIDING CARE TO RELATED PERSONS

#### **DEFINITION**

The definition of a related person for the purpose of this standard is a family member, colleague or friend.

## **BACKGROUND**

It is common for health regulatory bodies to recommend against providing care to related persons due to the challenges practitioners may face in making objective decisions regarding the care they provide, the increased power imbalance that may exist in light of how much personal information the midwife may have about the related person, and the reluctance the related person (client) may have about complaining in respect of the conduct of the practitioner even when a complaint may be warranted. Midwives have traditionally provided intimate care during what is often considered to be a profound family event, and the midwife/client relationship develops in a safe comfortable environment that engenders trust and mutual respect. Midwives may be asked to be involved in the care of related persons during this important time. In these instances, the unique midwife/client relationship requires thoughtful consideration of the role as primary care provider as well as a friend, family member or colleague.

### **S**TANDARD

Midwives must consider the responsibility and the potential conflicts and/or risks that can arise when providing care to related persons. The midwife and related person must be aware of the potential difficulties maintaining the necessary professional boundaries while in a midwife/client relationship. Boundary violations can result when there is confusion between the needs of the midwife and those of the client. The midwife and client should discuss and document the effect the personal relationship might have on the quality of care that can be provided, including:

- The midwife's ability to maintain clinical objectivity and provide care, especially in difficult situations and emergencies.
- The midwife's ability to act in the client's best interests.
- The midwife's ability to engage in informed choice discussions and support client's decisions.
- The midwife's ability to maintain client confidentiality.
- The client's comfort level in disclosing personal information necessary to provide appropriate care.
- The client's willingness to disagree with any of the midwife's recommendations.
- The client's willingness to complain in the case of any problems occurring.

# College of Midwives of Manitoba

Where possible, the midwife should offer the opportunity to meet another midwife in their community. The midwife must have mechanisms in place to ensure they have the necessary support to transfer primary care to another care provider should any involved parties believe that the personal relationship compromises the midwife's judgment or ability to provide quality care. Where possible the midwife should consider having an alternate care provider available at the birth in case of emergency.