

## **CHAPERONE POLICY**

### **Introduction:**

This policy is designed to protect both patients and staff from abuse or allegations of abuse and to assist patients to make an informed choice about their examinations and consultations. Where it is felt that the patient does not have “Capacity” to consent to an intimate examination a family member/carer will always be involved in the discussion prior to the examination taking place.

### **Guidelines:**

Clinicians (male and female) should consider whether an intimate or personal examination of the patient (either male or female) is justified, or whether the nature of the consultation poses a risk of misunderstanding.

- The clinician should give the patient a clear explanation of what the examination will involve.
- Always adopt a professional and considerate manner - be careful with humour as a way of relaxing a nervous situation as it can easily be misinterpreted.
- Always ensure that the patient is provided with adequate privacy to undress and dress.
- Ensure that a suitable sign is clearly on display in each consulting or treatment room offering the chaperone service if required.

This should remove the potential for misunderstanding. However, there will still be times when either the clinician, or the patient, feels uncomfortable, and it would be appropriate to consider using a chaperone. Patients who request a chaperone should never be examined without a chaperone being present. If necessary, where a chaperone is not available, the consultation / examination should be rearranged for a mutually convenient time when a chaperone can be present.

Complaints and claims have not been limited to male doctors with female patients - there are many examples of alleged homosexual assault by female and male doctors. Consideration should also be given to the possibility of a malicious accusation by a patient

There may be rare occasions when a chaperone is needed for a home visit; on these occasions a joint visit will be organised or alternatively a family member/carer will be requested to be present if it is agreed that this would be an acceptable alternative.

## **WHO CAN ACT AS A CHAPERONE?**

A variety of people can act as a chaperone, within Kingswood Medical Group any non-clinical staff member acting as a Chaperone will have attended a training session; with regular updates. The training session includes: the procedural aspects of personal examinations, how to be comfortable in acting in the role of chaperone, and be confident in the scope and extent of their role. They will have received instruction on where to stand and what to watch and instructions to that effect will be laid down in writing by the practice.

A Chaperone will ideally:

- Be sensitive and respectful of the patient's dignity and confidentiality.
- Be prepared to reassure the patient if they show signs of distress or discomfort.
- Be familiar with the procedures involved in a routine intimate examination.
- Be prepared to raise concerns about a Clinician if misconduct occurs.

In some circumstances a member of practice staff or a relative or friend of the patient may be an acceptable Chaperone.

## **CONFIDENTIALITY**

- The chaperone should only be present for the examination itself, and most discussion with the patient should take place while the chaperone is not present.
- Patients should be reassured that all practice staff understand their responsibility not to divulge confidential information.

GMC guidelines are available relating to intimate examinations: <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/intimate-examinations-and-chaperones/intimate-examinations-and-chaperones>

## **PROCEDURE**

- The clinician will contact Reception to request a chaperone.
- The clinician will record in the notes that the chaperone is present, and identify the chaperone.
- Where no chaperone is available the examination will not take place – the patient should not normally be permitted to dispense with the chaperone once a desire to have one present has been expressed.

- The chaperone will enter the room discreetly and remain in room until the clinician has finished the examination.
- The chaperone will normally attend inside the curtain at the head of the examination couch and watch the procedure.
- To prevent embarrassment, the chaperone should not enter into conversation with the patient or GP unless requested to do so, or make any mention of the consultation afterwards.
- The chaperone will make a record in the patient's notes after examination. The record will state that there were no problems, or give details of any concerns or incidents that occurred.
- The patient can refuse a chaperone, and if so this **must** be recorded in the patient's medical record.

Version	Date	Name
1.1	20-October-21	Sandy Jack
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# **Kingswood Medical Group**

## **Chaperone Policy**

**Please note you may request to have a Chaperone present during your consultation today if an examination is required.**

**We will do our best to meet this request, however there may be occasions when due to lack of staff we are unable to do so. On these occasions you may have to book another appointment when a Chaperone will be available.**

**Anyone acting as a Chaperone will have to undergo training to allow them to perform the required duties.**

**Sandy Jack  
Practice Manager**