

CHAPERONES – WHAT TO EXPECT

I am committed to providing a safe comfortable environment where patients and staff can be confident that best practice is being followed at all times and the safety of everyone is of paramount importance.

What is a Formal Chaperone:

In clinical medicine, a formal chaperone is a person who serves as a witness for both a patient and a medical practitioner as a safeguard for both parties during a medical examination or procedure and is a witness to continuing consent of the procedure. Family members or friend may be present but they cannot act as a formal chaperone.

Why do we need Chaperones:

There are two considerations involved in having a chaperone to assist during intimate examinations; namely for the comfort of the patient and the protection of the doctor/nurse from allegations of impropriety.

What is an intimate examination?

Obvious examples of an intimate examination include examinations of the breasts, genitalia and the rectum but it also extends to any examination where it is necessary to touch or be close to the patient for example conducting eye examinations in dimmed lighting, taking the blood pressure or palpating the apex beat.

The rights of the Patient:

All patients are entitled to have a chaperone present for any consultation, examination or procedure where they feel one is required. Patients have the right to decline the offer of a chaperone. However the clinician may feel that it would be wise to have a chaperone present for their mutual protection for example, an intimate examination on a young adult of the opposite gender.

If the patient still declines the doctor will need to decide whether or not they are happy to proceed in the absence of a chaperone. This will be a decision based on both clinical need and the requirement for protection against any potential allegations of improper conduct.

Appropriately Trained Chaperones:

An appropriately trained Chaperone is defined as a member or Practice staff who has completed the Practice Training Programme and has been assessed as competent by a member of the Practice clinical team.

Consultations involving intimate examinations:

If an intimate examination is required, the clinician will:

Establish there is a need for an intimate examination and discuss this with the patient.

Give the patient the opportunity to ask questions.

Obtain and record the patient's consent.

Offer a chaperone to all patients for intimate examinations (or examinations which may be construed as such). If the patient does not want a chaperone it will be recorded in the notes.

The Patient can expect the chaperone to be:

Available if requested.

Pleasant/approachable/professional in manner, able to put them at ease.

Competent and safe.

Clean and presentable.

Confidential.

Where will the chaperone stand?

The positioning of the chaperone will depend on several factors for example the nature of the examination and whether or not the chaperone has to help the clinician with the procedure. The clinician will explain to you what the chaperone will be doing and where they shall be in the room.

If you are not happy with the chaperone you have the right to decline or request someone else to undertake the role.

Patients should raise any concerns/make any complaint via the practice's usual comments/complaints procedure.

When a chaperone is not available:

There may be occasions when a chaperone is unavailable (for example on a home visit or when no trained chaperone of the appropriate sex is in the building). In such circumstances the doctor will assess the circumstances and decide if it is appropriate to go ahead without one.

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