

140 Fitzwilliam Street Huddersfield HD1 5PU

CHAPERONE POLICY

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Role

There is no common definition of a chaperone and their role varies considerably depending on the needs of the patient, the healthcare professional and the examination or procedure being carried out. In this practice, a chaperone is present as a safeguard for all parties (patient and practitioners) and is a witness to continuing consent of the procedure, however, a chaperone cannot be a guarantee of protection for either the examiner or examinee.

Broadly speaking their role can be considered in any of the following areas:

- Providing emotional comfort and reassurance to patients
- > To assist in the examination, for example handing instruments during IUCD insertion
- > To assist with undressing patients
- > To act as an interpreter
- > To provide protection to healthcare professionals against unfounded allegations of improper behavior
- ➤ In very rare circumstances to protect the clinician against an attack
- An experienced chaperone will identify unusual or unacceptable behavior on the part of the health care professional or patient

Generally patients inform reception if they are told to book a joint appointment for the Dr & Nurse but on occasion a patient may attend the GP with an acute issue and no other clinician is available. If that is the case, a trained receptionist may be used. Generally this will be a female member of staff although on occasions a male member of staff may be available if required.

Recording

Details of the examination including presence/absence of chaperone and information given must be documented in the patient's electronic medical records by the clinician and chaperone. The appropriate clinical codes should be used and a clinical system template is provided for staff to record chaperone use on SystmOne.

If the patient expresses any doubts or reservations about the procedure and the healthcare professional feels the need to reassure them before continuing then it would be good practice to record this in the patient's notes. The records should make clear from the history that an examination was necessary.

In any situation where concerns are raised or an incident has occurred and a report is required this should be completed immediately after the consultation.

Summary

The relationship between a patient and their practitioner is based on trust. A practitioner may have no doubts about a patient they have known for a long time and feel it is not necessary to offer a formal chaperone. Similarly studies have shown that many patients are not concerned whether a chaperone is present or not. However this should not detract from the fact that any patient is entitled to a chaperone if they feel one is required.

This policy is for the protection of both patients and staff and should always be followed. The key principles of communication and record keeping will ensure that the practitioner/patient relationship is maintained and act as a safeguard against formal complaints, or in extreme cases, legal action.