FAKENHAM MEDICAL PRACTICE

Chaperone Policy

Document Control

A. Confidentiality Notice

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2. Introduction

FAKENHAM MEDICAL PRACTICE is 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.

This Chaperone Policy adheres to local and national guidance and policy – i.e.:- 'NCGST Guidance on the role and effective use of chaperones in Primary and Community Care settings'.

The Chaperone Policy is clearly advertised through our patient information leaflets and website and can be read at the Practice upon request to Reception and/or the Practice Manager. A Poster is also displayed in each waiting area (See Appendix A).

3. Chaperone policy

All patients are entitled to have a chaperone present for any consultation, examination or procedure where they consider one is appropriate or required. The chaperone may be a family member or a friend, but on occasions a formal chaperone, a member of staff specially trained in this role, may be preferred.

Patients are advised to ask for a chaperone if required, at the time of booking an appointment, so that arrangements can be made and the appointment is not delayed. However, if the request is not made until the time of the appointment, the Practice will always do its utmost to provide a formal chaperone if the patient has not brought a friend or relative with them.

On occasions, a doctor or nurse may also request a chaperone to be present. This should be discussed with the patient in advance of the appointment, if at all possible.

All staff are aware of and have received appropriate information in relation to this Chaperone Policy.

All the nurses and health care assistants are trained chaperones; they all understand their role and responsibilities and are competent to perform that 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 being carried out.

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Their role can be considered in any of the following areas:

- Emotional comfort and reassurance to patients
- Assist in examination (e.g. during IUCD insertion)
- Assist in undressing
- Act as interpreter
- Protection to the healthcare professional against allegations / attack)

4. Consultations involving intimate examinations

Chaperones are most often required or requested where a male examiner is carrying out an intimate examination or procedure on a female patient, but the designation of the chaperone will depend on the role expected of them, whether participating in the procedure or providing a supportive role.

Healthcare professionals should note that they are at an increased risk of their actions being misconstrued or misrepresented, if they conduct intimate examinations where no other person is present.

5. Chaperone Procedure

- a) Establish there is a genuine need for an intimate examination and discuss this with the patient and whether a formal chaperone (such as a nurse) is needed.
- b) Explain to the patient why an examination is necessary and give the patient an opportunity to ask questions. The chaperone would normally be the same sex as the patient and the patient will have the opportunity to decline a particular person as a chaperone, if that person is considered not acceptable for any reason.
- c) Offer a chaperone or invite the patient to have a family member / friend present, read code / record that the offer was made in the patient's notes:
 - XaEiq chaperone offered
- d) If the patient does not want a chaperone, read code / record that the offer was made as above and read code / record that the offer was declined in the patient's notes:
 - XaEis chaperone refused
- e) Obtain the patient's consent before the examination and be prepared to discontinue the examination at any stage at the patient's request. Any request that the examination be discontinued should be respected.
- f) Read code / record that permission has been obtained in the patient's notes.
 - XaLQR Informed consent given
- g) Once the chaperone has entered the room, they should be introduced by name and the patient allowed privacy to undress / dress. Use drapes / curtains where possible to maintain dignity. There should be no undue delay prior to examination once the patient has removed any clothing.

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- h) Explain what is being done at each stage of the examination, the outcome when it is complete and what is proposed to be done next. Keep discussion relevant and avoid personal comment.
- i) If a chaperone has been present, read code / record that fact and the identity of the chaperone in the patient's notes.
 - XaEir chaperone present
- j) During the examination, the chaperone may be needed to offer reassurance, remain alert to any indication of distress but should be courteous at all times.
- k) Chaperones should only attend the part of the consultation that is necessary other verbal communication should be carried out when the chaperone has left.
- l) Record any other relevant issues or concerns in the patient's notes, immediately following the consultation.

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Fakenham Medical Practice

Chaperones

A patient, or their doctor or nurse may ask for a **chaperone** (someone to accompany them) for any procedure or examination for which they consider it appropriate.

Patients may, of course, choose to be accompanied by a relative or friend, but nurses and health care assistants are specially trained in this role and can always be made available if required.

If you require a chaperone, please let us know as soon as possible, ideally at reception when first booking your appointment. We are more than happy to arrange this for you and, if organised in advance, your appointment will not be delayed.

A copy of our chaperone policy can be found on our website www.fmp.nhs.uk

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