Manor Medical Practice

CHAPERONE POLICY

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.

- Ideally the chaperone should be the same sex as the patient

- Communication is key; the Clinician will explain the nature of the examination, what needs to be done and why in a clear professional and considerate manner, and allow the patient to ask questions. Avoid personal comments, and care should be taken with humour as a way of relaxing a nervous situation as it can easily be misinterpreted.

  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 the patient.

- The Clinician will record details of who the chaperone is and document if chaperone is declined by the patient.

- The Clinician will check consent is given.

- Privacy is important – always ensure the patient has privacy to undress and dress.

- A friend or relative is not an impartial observer and would not be suitable but a reasonable request to have such a person present as well as the chaperone will be considered.

- The chaperone does not have to be clinically qualified, but the patient should be informed if they are not.

- Confidentiality procedures must be respected at all times, and the chaperone must understand this.

- In the unlikely event that a chaperone cannot be offered then an alternative appointment should be offered and this should be documented in the notes by clinician.

- The Chaperone should introduce her/himself to the patient and stand behind the curtain at the head of the examination couch. To prevent embarrassment, the chaperone should not enter into conversation with the patient or GP unless requested to do so by the patient, or make any mention of the consultation afterwards.