



# Farnham Road Medical Group

## Clinical Policy

### Chaperone Policy and Procedure

Person responsible for review of this policy: Adult Safeguarding Lead

#### Introduction

The purpose of the policy is to set out the approach at the Farnham Road Medical Group to offering Chaperones to patients.

This policy is relevant to anyone who provides clinical care at or for Farnham Road Practice. Individuals on training placements on the premises must also adhere to this.

This policy will be monitored and reviewed annually by the Adult Safeguarding Lead.

This policy should be read in conjunction with the "Guidelines for Chaperones", at the appendix.

#### Policy

All Chaperones must be trained to Level 3 Adult Safeguarding and be up to date with their Enhanced Disclosure and Barring Service check. This therefore means that it will usually be necessary to ask a Clinician to chaperone.

Whenever possible the chaperone should be of the same sex as the patient (although this might be difficult to achieve for male patients).

The patient being the same sex as the clinician should not preclude the patient being offered a Chaperone.

Should the patient request a clinician of the same sex for examination purposes and should this not be possible at the time, then the patient will have the opportunity to postpone the examination to a later date when it is convenient for their examination to be carried out.

Chaperones should be offered to patients in the following circumstances:

- For intimate examinations or procedures;
- If the patient requests a chaperone at any time;
- When the clinician feels that the patient might be more comfortable to have a chaperone;
- When the clinician feels that it is in their (the clinician's) best interest to have a chaperone;
- (Be aware that in some cultures even for a non-intimate examination by 'western' standards the patient might prefer to be offered a Chaperone).

### Role of the Chaperone:

- Providing the patient reassurance
- Helping the patient to undress or prepare, or helping with clothing or covers
- Assist with procedures (if a nurse or healthcare assistant)
- Helping with instruments
- Witnessing a procedure
- 'Protecting' a clinician
- Being able to identify unusual or unacceptable behaviour relating to a procedure or the consultation
- Being able to identify whether the implied or implicit consent given at the start of the procedure remains valid throughout, and determine whether the attitude of the patient or the clinician has changed

### The Clinician will:

- Ask if the patient would like a trained chaperone during their examination/procedure;
- Inform the chaperone about the examination;
- Document in the medical records the name and attendance of a chaperone, or that a chaperone was declined.

### The Chaperone will:

- Introduce themselves;
- Ask if the patient has given consent to the Chaperone's presence;
- Ask if the patient requires any further information about the nature of the examination;
- Ask if the patient has given consent to the examination/procedure.

The Chaperone will stand within the privacy curtain and do all they can to make the patient feel comfortable. They should make eye contact with the patient without making them feel uncomfortable. They will reassure the patient if they sense signs of distress or discomfort and ask if you require the clinician to pause or stop.

### At the end of the examination / procedure the Chaperone will:

- Ask the patient if they require assistance in getting dressed
- Provide privacy and dignity whilst they get dressed
- Ask when the patient is happy for them to leave the room
- Be available should the patient wish to speak with them after the examination/ procedure and before they have left the practice.

Notices asking patients if they would like a chaperone should be on display in every clinical room (Appendix A) in English and other appropriate languages.

Last Review Date	September 2022	GA & CDM
Next Review Date	September 2024	