Chaperone Policy

Langham Place Surgery 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 patient information leaflets, website and can be read at the Practice upon request. A Poster is also displayed in each of the consulting rooms and in the waiting areas (see appendix A).

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

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

All trained chaperones understand their role and responsibilities and are competent to perform that role. All trained chaperones have a DBS check as per the DBS check policy

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.

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

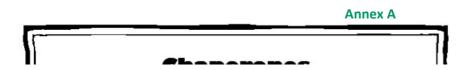
- Emotional comfort and reassurance to patients
- · Assist in examination (e.g. during IUCD insertion)
- · Assist in undressing
- Act as interpreter
- Protection to the healthcare professional against allegations / attack)

Checklist for consultations

- 1. This applies to all members of the clinical team, performing any intimate examinations or procedure on patients of both sexes.
- 2. The clinician will take account of any cultural/learning difficulties/child protection issues that may affect informed consent to proceed.
- 3. The clinician will explain the Clinical indication for the examination to the patient and document it in the patient's medical record.
- 4. The clinician will obtain the patient's informed consent to proceed and explain what the procedure will involve.
- 5. The clinician will offer ALL patients the service of a trained chaperone of the same sex as the patient and explain the chaperone's role. Should a male patient attend the nursing team and require an intimate examination, he may be referred to a male GP
- 6. The clinician will provide privacy for the patient to dress/undress and provide a modesty cover for the patient to use whilst undressed
- 7. The clinician will avoid personal comments.
- 8. The clinician will invite the trained chaperone into the consulting room and explain the procedure that is to be performed.
- 9. The chaperone will wear a practice badge "trained chaperone" if they are a receptionist rather than a nurse
- 10. The clinician will confirm with the patient (in front of the chaperone) that he/she has their informed consent to proceed.
- 11. The chaperone will stand WITHIN the curtains at the head end of the examination couch when rectal/genital examinations are taking place or at an appropriate place for breast examinations.
- 12. The chaperone will not lift or handle the patient or assist in dressing/undressing, unless the patient requires assistance and the chaperone is a nurse.
- 13. The chaperone will not assist in the procedure in any way
- 14. The chaperone will not be left alone with the patient.
- 15. If a chaperone has been present, the clinician will record that fact and the identity of the chaperone in the patient's notes on the template within SystmOne.
- 16. Chaperones should only attend the part of the consultation that is necessary other verbal communication should be carried out when the chaperone has left.
- 17. The chaperone will wash/gel hands BEFORE leaving the consulting room.

Training and Raising Concerns

- The chaperone will raise initial concerns with the clinician involved or speak to the Practice manager.
- The chaperone will maintain "trained chaperone" competency by regular or annual review.



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If you feel you would like a Chaperone present at your Consultation, please inform your Doctor / Nurse, who will be more than happy to arrange this for you.



