Chaperones



Advice correct as of September 2013

Putting members first

It is always the doctor's responsibility to manage and maintain professional boundaries – and utilising chaperones effectively is a way of managing relations with patients.

Why use chaperones?

The Medical Council of Hong Kong recommends that any intimate examination of a patient should be conducted in the presence of a chaperone, with the full knowledge of the patient. If the patient declines the use of a chaperone, you should record this decision in the medical records.

Effective communication and respect for patients' privacy and dignity are important ingredients of a good and trusting patient–doctor relationship. Therefore when a doctor is carrying out a physical examination on a patient, he should explain fully what he intends to do and why he has to do them, and offer the patient the option of having a chaperone present. This is for the protection of both the patient and the doctor, and is particularly important when:

- Performing intimate examinations
- Examining patients in a darkened room, for example, ophthalmic examinations
- When examining vulnerable adults or children.

A doctor should avoid making personal comments or attempts at humour during an examination. The patient should also be given privacy to undress and dress.

A chaperone:

- Adds a layer of protection for a doctor; it is very rare for a doctor to receive an allegation of assault if they have a chaperone present
- Acknowledges a patient's vulnerability
- Provides emotional comfort and reassurance
- Can assist in the examination

- Can assist with undressing patients
- Can act as an interpreter.

How to use a chaperone

- Establish that there is a need for an intimate examination and discuss this with the patient.
- Explain why an examination is necessary and give the opportunity to ask questions; obtain and record the patient's consent.
- Offer a chaperone to all patients for intimate examinations (or examinations that may be construed as such). If the patient does not want a chaperone, record this in the notes.
- If the patient declines a chaperone and as a doctor you would prefer to have one, explain to the patient that you would prefer to have a chaperone present and, if they decline, you can decline to treat them – provided the patient's health interest is not jeopardised.
- Explain what you are doing at each stage of the examination, the outcome when it is complete and what you propose to do next. Keep the discussion relevant and avoid personal comments.
- Record the identity of the chaperone in the patient's notes.
- Record any other relevant issues or concerns immediately after the consultation.
- In addition, keep the presence of the chaperone to the minimum necessary period. There is no need for them to be present for any subsequent discussion of the patient's condition or treatment.

What not to do

- Allow a relative or friend of the patient to be a chaperone, as they may not fully appreciate the nature of the physical examination performed, and may even testify against you in the event of allegations of misconduct or physical abuse.
- Allow one of your relatives, who is not an impartial observer, to be a chaperone.

Further information

 Medical Council of Hong Kong, Code of Professional Conduct – www.mchk.org.hk

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This factsheet provides only a general overview of the topic and should not be relied upon as definitive guidance. If you are an MPS member, and you are facing an ethical or legal dilemma, call and ask to speak to a medicolegal adviser, who will give you specific advice.

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