BEEBE MEDICAL CENTER CHAPERONE POLICY & PROCEDURES





BACKGROUND

All medical consultations, examinations, investigations, and treatment are potentially distressing. Many patients find Intimate Examinations particularly intrusive. These Intimate Examinations can predispose patients to feelings of vulnerability and emotional discomfort. Patients will respond differently to these situations depending on individual beliefs, views, religion, culture, and experience. The presence of a chaperone during a physical examination offers important benefits to both patients and providers. For example, a chaperone's presence assures the patient of the professional nature of the exam. In addition, the availability of this service demonstrates the care provider's attention to the patient's well-being, respect for their concerns, and understanding of their vulnerabilities.

DEFINITIONS

CHAPERONE means: a parent, guardian, other caretaker, or an adult staff member. When using an adult staff member to observe, the staff member shall be of the same gender as the patient when practicable. Adult staff member is defined as a person 18 years of age or older who is:

- (a) acting under the direction of the physician,
- (b) acting under the direction of the facility, or
- (c) a licensed healthcare professional.

INFIRM ADULT, for the purposes of this policy, means any person 18 years of age or over who, because of mental disability, is substantially impaired in the ability to provide adequately for his or her own care and custody. Examples include, but are not limited to, patients who are unconscious, confused, disoriented, or with mental disabilities that affect the patient so that he or she is unable to understand or comprehend the chaperone guidelines and what they mean.

INTIMATE EXAMINATIONS are treatments

while the patient is disrobed or partially disrobed or during a physical examination involving the breasts, genitalia, or rectum, regardless of the sex of the licensed person and the patient, except when rendering care during an emergency.

GUIDELINES FOR WHEN TO USE A CHAPERONE

REQUIRED

A Chaperone is required for Pediatric Patients and Infirm Adults of any age.

Specifically for the **Pediatric Population**:

- For Intimate Examinations of children ages 15 and under, a chaperone <u>must be present</u>. The parent, guardian, or other caretaker may act as the chaperone during the examination; however, in cases of suspected physical abuse, neglect, or sexual abuse, parents, guardians, or other caretakers may not be appropriate to use as a chaperone or be present during the exam.
- For Intimate Examinations of children ages 16 up to 18 (and younger patients who are advanced physically and developmentally), a chaperone <u>must be present</u>. A parent, guardian, or other caretaker may act as the chaperone with the child's consent.
- Pediatric patients may request a private interview with the provider separate from the examination process. During any such interview the patient's privacy and dignity should be maintained. Parents, guardians, or other caretakers shall not act as a chaperone during private interviews involving sexual intimacy, suspected physical abuse, neglect, or sexual abuse.

- A pediatric patient may decline the presence of an adult staff member as a chaperone only with the consent of a parent, guardian, or other caretaker.
- In cases involving police or Delaware Division of Family Services, parents, guardians, or other caretakers may be separated from the pediatric patient.
- An adult staff member chaperone must always be present when a minor presents for an examination.

Specifically for the **Infirm Adult** of any age:

 For Intimate Examinations of in infirm adult of any age, a chaperone must be present. A legally designated adult may be the chaperone during the examination; however, in cases of suspected physical abuse, neglect, or sexual abuse, legally designated adults may not be appropriate to use as a chaperone or be present during the exam.

UPON REQUEST

A Chaperone will be available to any patient upon the request of the patient.

ROLES AND RESPONSIBILITIES OF A CHAPERONE

Ideally, a chaperone should be a clinical health professional and should:

- Be sensitive and respectful of the patient's dignity and confidentiality
- Be familiar with the procedure or examination
- Speak the same language as the patient

- Be responsive and aware of the patient's reactions, as well as verbal and nonverbal indications of distress
- Offer reassurance to the patient
- Be courteous and respectful of the patient
- Keep the discussion relevant and avoid unnecessary personal comments to the patient
- Be the same gender as the patient, when practicable

PATIENT RIGHTS AND RESPONSIBILITIES

The patient has the right to:

- Request a chaperone
- Decline a specific staff member who was chosen as a chaperone
- Have a family member or friend present for an examination when clinically appropriate (see subsection below: "Practitioner Rights and Responsibilities")
- An opportunity, if a chaperone is provided, to have a separate, private conversation with the provider to discuss issues of a sensitive nature

PRACTITIONER RIGHTS AND RESPONSIBILITIES

Any practitioner has the right to:

- Request a chaperone for staff safety
- Determine who will be the most appropriate person to be the chaperone in consideration of the clinical circumstances

Reporting Unprofessional Behavior

Anyone suspecting unprofessional, unsafe behavior by a Delaware licensed healthcare provider may submit a complaint of such behavior to the Delaware Division of Professional Regulation's Investigative Unit.

Make complaints to the attention of:

Investigative Supervisor
Division of Professional Regulation
861 Silver Lake Blvd., Suite 203
Dover, DE 19904-2467
Phone 302-744-4500



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