

Prof. M Sim Chaperone Policy

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INTRODUCTION

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.

All clinical consultations, examinations and investigations are potentially distressing. Patients may find some examinations, collectively referred to as intimate examinations, particularly intrusive. These can be examinations, investigations or photography involving the breasts, genitalia, or anus (including internal vaginal & rectal examinations). Consultations involving dimmed lights, the need for patients to undress or for intensive periods of being touched may make a patient feel vulnerable.

Consideration should also be given to the possibility of a malicious accusation by a patient. The General Medical Council ("GMC") guidelines for such examinations can be found at: <https://www.gmcuk.org/ethical-guidance/ethical-guidance-for-doctors/intimate-examinations-and-chaperones>

None of these apply to a properly conducted aviation medical, the guidelines for which can be found at

<https://www.caa.co.uk/aeromedical-examiners/medical-standards/> and
https://www.faa.gov/ame_guide/standards

The physical exam requires the patient to be dressed only in underwear (as defined below) and involves appropriate touching for the purposes of clinical examination only.

Definition

The purpose of this document is to ensure that Prof. M Sim meets statutory and GMC requirements and minimises risks to patients, professional staff and the company by ensuring that a systematic and planned approach for the provision of chaperones is in place.

“Chaperone” , means a trained third party present at an examination of a patient undressed to their underwear. The chaperone acts to safeguard both parties and is a witness to continuing consent throughout the examination. The chaperone is also a witness to the interaction between the clinician the patient and can and will be called upon if necessary to confirm or deny allegations of inappropriate conduct in speech or action.

“Underwear” means, for men, underpants or boxer shorts; and, for women, knickers and sports bra. Tights or leggings worn in direct contact with the genital area do not meet this definition as examination of the skin of the legs is required.

GUIDELINES

The relationship between a patient and their clinician is based on trust. This trust, and the key principles of communication and medical record keeping, should safeguard the clinician/patient relationship and protect against formal complaints or, in extreme cases, legal action.

A clinician may have no doubts about a patient they have known for a long time and consider it unnecessary to offer a formal chaperone. Similarly, studies have shown that many patients are not concerned whether a chaperone is present or not. These observations do not alter the fact that it is good practice to offer all patients a chaperone.

Clinicians (male and female) should consider whether a personal examination of the patient (male or female) is justified, or whether the nature of the examination poses a risk of misunderstanding. In aviation this is less of a problem as the extent of necessary examination is clearly defined by the aviation authorities.

The clinician should give the patient a clear explanation of what the examination will involve. In our case, this can be found on the CAA website link.

All patients booked for aviation medicals will be asked in the email trail leading to the medical to read these, and confirm that they have understood the guidelines, and invited to ask questions about anything they are unsure of.

Consent forms to medical examination can be downloaded from Prof. Sim’ s website. On the day of the medical all patients will be asked to read the consent form, ask any questions they wish, and sign it.

Prof. M Sim will ensure that the patient is provided with adequate privacy to undress and dress.

Prof. M Sim will ensure that a suitable sign is clearly on display in each consulting room stating the chaperone policy and offering to rebook the medical if a chaperone is requested on the day instead of in advance. Patients have a right to change their mind and request a chaperone on the day, but not to expect that one will necessarily be available on the day. No justification needs to be given. Prof. M Sim recognises that there may be times when the clinician feels uncomfortable and would therefore consider it appropriate to have a chaperone present and reserves the right to rebook medicals when a chaperone is available. No justification needs to be given.

Patients who have requested a chaperone will never be examined without a chaperone present. When a chaperone is unexpectedly unavailable, the examination will be rearranged for a mutually convenient time.

As. Prof. M Sim is male, it is his policy that female patients will always have a chaperone present. However, he recognises that complaints and claims have not been limited to male doctors with female patients - there have been examples of alleged same sex assault by both female and male doctors. For this reason, we always offer chaperones to male patients, and we always reserve the right for Prof. M Sim to insist on a chaperone or, if the level of discomfort is

sufficient, not to proceed with an undressed medical at all. Minors – patients under 16 – will always have a chaperone present.

General Issues

All staff acting as chaperones must have a DBS (Disclosure and Barring Service) check and be certificated in chaperone skills. Chaperones must maintain a clear line of sight to patient and clinician during their interaction. It is not sufficient to be on the other side of a screen or curtain, and it is not acceptable to be distracted by a mobile phone.

Role of the Chaperone

The chaperone's role varies considerably depending on the needs of the patient, the healthcare professional, and the examination or procedure being carried out. For the purposes of aviation medicals, their role can be stated as follows:

- To provide reassurance to patients.

- To assist in the examination by, for example, asking the patient to undress and checking that they are comfortable and are adequately prepared for examination.
- To confirm that the examination has passed without incident and that behaviour was appropriate on both sides.
- In the alternative, to identify, record and bear witness to abnormal, unusual or unacceptable behaviour on the part of health care professional or patient.

Chaperone can decline the role if they feel uncomfortable. They can call a halt to the examination and must be clear on what actions to take if they feel they have witnessed something untoward.

Patient's friends and relatives do not meet the criteria for chaperones, although in the case of a minor a relative can be present as well.

The patient has the right to decline a particular person as a chaperone if that person is not acceptable to them, though their reasons should be stated. They should be made aware that to locate a replacement chaperone the examination may have to be delayed and rescheduled. If the reason stated has a racial or otherwise morally unacceptable basis, the AME/ client relationship will be terminated.

Where non-clinical staff act as chaperones, the patient must be comfortable with and agree to the presence of a non-clinician at the examination.

The staff member should be trained in the procedural aspects of personal examinations, comfortable in acting in the role of chaperone, and be confident in the scope and extent of their role. They will have received instruction on where to position themselves and will sign the clinical note to confirm their presence and that they have witnessed the examination proceeding in the expected manner without incident, allegation or complaint.

Offering a Chaperone

Prof. M Sim explains the chaperone role on its website and offers a chaperone at the time of booking by email. A patient notification poster is also placed in the waiting room, and in the examination room (see Appendix) making it clear that the patient may at the time of their examination request a chaperone.

When the clinician feels a chaperone is necessary and the patient does not: There may also be circumstances in which the clinician thinks that a chaperone should be present. Prof. M Sim's policy is to have a chaperone present at all female examinations. If a chaperone is refused by the patient a healthcare professional cannot insist that one is present but does

have the right not to proceed with the examination. If this situation arises Prof. M Sim will refund the patient and make every effort to assist the patient in finding another clinician.

Where a chaperone is needed but not available:

If the patient has requested a chaperone and none is available, the patient will be given the opportunity to reschedule their appointment when one becomes available.

Consent

It is assumed that in attending a pilot medical the applicant is seeking an examination. However, before proceeding with an examination, we will provide sufficient information to enable the individual to give informed consent. This is provided on the website, and in the booking email.

The consent forms are appended and include a checklist for an aviation medical.

Issues Specific to Religion/Ethnicity or Culture

The ethnic, religious and cultural background of some women can make unclothed examination impossible. It is Prof. M Sim's policy not to compromise on safety by performing incomplete examinations on clothed patients. Where women have a strong cultural aversion to being touched by the opposite sex in a professional encounter Prof. M Sim does not currently consider that it can provide a proper medical assessment and will recommend that the patient find a culturally appropriate female AME.

Communication and Record Keeping

Details of the examination including the presence/absence of a chaperone will be documented in the patient's medical records. The full name of the chaperone will be documented.

Chaperone Offered Y/N

Chaperone Present Y/N

Chaperone Name.....

Chaperone signs to confirm that examination passed without incident Y/N

CONFIDENTIALITY

- The chaperone will generally only be required for the examination itself. If the patient or doctor wishes, however, this may be extended to include the discussion phase of the medical.
- Patients should be reassured that all chaperones understand their responsibility not to divulge confidential information and therefore should have signed a confidentiality agreement.

Chaperone Policy Notice

This organisation is committed to providing a safe, comfortable environment where patients and staff can be confident that General Medical Council best practice is being followed at all times and that the safety of everyone is of paramount importance.

There is no intimate or intrusive examination in the aviation medical. Nevertheless, patients will be required to undress to their underwear as part of the general body and skin examination. The period of undress will be kept to the minimum necessary to complete the examination.

All female patients and patients under 16 will be provided with a chaperone. Male patients are offered a chaperone at the time of booking and may rebook their medical examination if they decide on the day that they wish one.

**WE ARE HAPPY TO PROVIDE A
CHAPERONE. IF YOU WOULD PREFER TO HAVE
A CHAPERONE PRESENT AT YOUR MEDICAL
EXAMINATION, PLEASE INFORM THE DOCTOR.
THANK-YOU!**

Prof. M Sim

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Consent to aviation professional physical and mental state examination.

It is a legal requirement for CAA pilots ATCOs and cabin crew and FAA authorised pilots and ATCOs to hold a valid medical certificate attesting to their medical fitness to perform their duties given the particular risks associated with working in a safety-critical environment. The medical examination and assessment are conducted in accordance with statutory medical standards set by the UK CAA and US FAA. Further details, if required, may be found at:

<https://www.caa.co.uk/aeromedical-examiners/medical-standards/> and https://www.faa.gov/ame_guide/standards

Nature of the examination

The AME Physician will review your medical history then examine you. The standard examination will include:

Observation of posture, movement, balance, core stability and gait

- Pulse, blood pressure
- Height, weight, Body Mass Index,
- Urine test and Blood tests for Hb and Lipids.
- Examination of whole-body skin cover
- Examination of veins
- Examination of foot pulses, capillary return and sensation.
- Clinical tests of ears and hearing and Eustachian function
- Clinical test of eyes and eyesight
- Examination of nose, teeth, gums, mouth and throat
- Examination of heart, lungs and abdomen
- Examination of the neurological system
- Examination of the abdomen including checking for groin hernias if clinically indicated
- ECG, audiogram, spirometry
- Any other tests that might be clinically indicated.
- Confirmation that you carry out regular testicular or breast self-examination.
- Assessment of your mental health with regard to psychiatric questionnaires and observation of your appearance, demeanour, behaviour and communications before, during and after the medical.

Intimate examination (breasts, genitals and/or anus and rectum) is not part of the aviation medical.

However it will still be necessary for you to be undressed to your underwear (underpants for men, pants and sports bra for women).

Your dignity will always be paramount, and you may request a chaperone when you book the medical. If you change your mind and decide on the day that you wish a chaperone, one will be provided if available or we will rebook the medical when one is available.

Further information may be required from your GP, or you may need to commission a specialist report or reports prior to a fitness decision being made.

Declaration:

I have read and understood all information above regarding my aircrew medical examination. I have been given the opportunity to ask questions. I agree to proceed with the examination.

Signed: _____ Name (PRINT): _____ Date: _____

Prof. Malcolm Sim 27th March 2024