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Document Name	Medical Legal Reports (MNML) (P) Chaperone Policy (Division Business) Internal Document
Version	V. 3
Approved by	Mani Neelamegan
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Introduction

This policy sets out guidance for the use of chaperones where it is deemed necessary.

The aim of the policy is to promote good practice, providing children/young people and any vulnerable person with appropriate safety/protection whilst allowing staff to make informed and confident responses to specific protection issues.

Policy Statement

MEDICAL LEGAL REPORTS (MNML) is committed to the following:

- the welfare of the patient is paramount;
- all children/vulnerable person, whatever their age, culture, ability, gender, language, racial origin, religious belief and/or sexual identity should be able to receive treatment in a safe environment;
- taking all reasonable steps to protect children/vulnerable persons from harm, discrimination and degrading treatment and to respect their rights, wishes and feelings;
- all suspicions and allegations of poor practice or abuse will be taken seriously and responded to swiftly and appropriately;

Working in partnership with parents/carers is essential for the protection of the patient.

Providing Medical Report

Whilst carrying on the assessment, patients are advised that such evaluation cannot be carried out without the attendance of either;-

- a parent,
- someone who holds "parental responsibility",
- a "legal guardian",

Medical Legal Reports (MNML)

(P) Chaperone Policy (Division Business) Internal Document





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- an "appropriate adult" or,
- anyone who has legal responsibility toward the welfare and care of the child/young person,

And where:-

- The patient is under 18;
- The patient is classed as being vulnerable;
- Is a vulnerable adult e.g. an older person or a patient with a learning disability or any cognitive impairment. For these patients, a familiar individual such as a family member or carer may be the best chaperone;
- The patient does not speak English properly and will need to give consent for the provision of treatment. We recommend the use of a translator;
- Is confused/disorientated;
- Have hearing, visual or speech difficulties.

Promoting Good Practice

To provide children/vulnerable persons with the best possible experience. Everyone within the organisation must operate within an accepted ethical framework as described by the code of conduct from the Health and Care Professional Council.

It is not always easy to distinguish poor practice from abuse. It is therefore not the responsibility of employees to make judgements about whether or not abuse is taking place. It is however their responsibility to identify poor practice and possible abuse and act if they have concerns about the welfare of the child/vulnerable adult.

Good Practice

All personnel should adhere to the following principles and action:

- always work in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets);
- act in an appropriate and professional manner;
- treat all young/vulnerable people equally and with respect and dignity;
- always put the welfare of the young person first;
- Avoid unnecessary physical contact with young/vulnerable people.
- secure written parental consent where needed;
- keep a written record of any injury that occurs, along with details of any treatment given.





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Defining Abuse

Abuse is any form of physical, emotional or sexual mistreatment or lack of care that leads to injury or harm, it commonly occurs within a relationship of trust or responsibility and is an abuse of power or a breach of trust.

There are four main types of abuse: physical abuse, sexual abuse, emotional abuse and neglect. Any individual may abuse or neglect a young person directly, or may be responsible for abuse because they fail to prevent another person harming the young person.

Responding To Suspicions and Allegations

It is not the responsibility of anyone working in Medical Legal Reports (MNML) to decide whether or not abuse has taken place. However there is a responsibility to act on any concerns through contact with the appropriate authorities so that they can then make inquiries and take necessary action to protect the young/vulnerable person.

Recording Information

To ensure that information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern. In recording you should confine yourself to the facts and distinguish what is your personal knowledge and what others have told you. Do not include your own opinions.

Information should include the following:

- name, age and date of birth;
- home address and telephone number;
- whether or not the person making the report is expressing their concern or someone else's;
- the nature of the allegation, including dates, times and any other relevant information;
- a description of any visible bruising or injury, location, size etc. Also any indirect signs, such as behavioural changes;
- details of witnesses to the incidents;
- an account of what has happened and how any bruising/injuries occurred;
- have the parents/carer been contacted? If so what has been said?;
- has anyone else been consulted? If so record details;
- has anyone been alleged to be the abuser? Record detail.





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Reporting the Concern

All suspicions and allegations MUST be reported appropriately. It is recognised that strong emotions can be aroused particularly in cases where sexual abuse is suspected or where there is misplaced loyalty to a colleague. It is important to understand these feelings but not allow them to interfere with your judgment about any action to take.

References

Equality and Human Rights Commission: Employers

www.equalityhumanrights.com

ACAS: Equality. www.acas.org.uk

The Equality Act 2010 www.legislation.gov.uk

Business link: Set up employment policies www.businesslink.gov.uk

Directgov: Discrimination at work. www.direct.gov.uk

Art 19. Freedom of Expression





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~ Policy Implementation Notice ~

This is the policy statement of:

MEDICAL LEGAL REPORTS (MNML)

The overall and final responsibility for this policy is that of:

DIRECTOR

. Uzzi

Signed:

Dated 22/02/2021

Day-to-day responsibility for ensuring this policy is put into practice is delegated to:

MANI NEELAMEGAN

Policy Review Date: 22/02/2021

Next Review Date: 22/02/2022