Advancing Pediatric Care: Total and Training Draggers for Madiate Ch



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1. Background

The use of chaperones is meant to protect both our patients and healthcare providers.

In an increasingly litigious profession, chaperones can protect clinicians from false allegations of abuse or maltreatment and serve as a witness should a patient or parent find the provider's behavior inappropriate.

The role of chaperones in Pediatrics remains unclear, particularly within a children's hospital that is part of a larger adult healthcare system. Standard nursing protocols may not always align with the unique needs of pediatric patients, leading to uncertainty in their application. As lead nurses, we recognized the need to adapt the system-wide protocol to better serve our pediatric population, ensuring clarity and appropriateness in practice.

2. Aim

A survey of our nurses revealed misconceptions about the need for chaperones across different developmental stages.

We aimed to identify these obstacles and educate our staff on the following findings::

- Confusion compounded by absence of clearly defined age limits for offering a formal chaperone.
- Challenge is especially relevant in our setting, where we care for newborns through young adults up to 25 years of age.
- Given the broad age range we serve, nurses sometimes forget to ask if a chaperone is requested.
- Where and how to document when a chaperone is offered and utilized

3. Methods

- Lead nurses surveyed frontline staff, including nurses and care partners, and identified inconsistencies in the use and need for chaperones across different developmental stages.
- Stakeholders were consulted to determine which patient populations were perceived as most vulnerable and in greater need of chaperones.
- Following the initial survey, lead nurses educated staff through unit committee meetings and pre-shift huddles. Key messages were also reinforced during staff meetings.
- Management conducted real-time chart audits while the vulnerable population was inpatient to assess adherence and impact
- The same survey was sent again six months later to evaluate the effectiveness of the education provided.

4. Analysis/Results

Over 90% of surveyed staff understood that chaperones are utilized to:

- Protect the patient
- Provide assurance to the patient and family
- Offer clinician protection

However, findings indicated that chaperones were not being utilized as expected.

Pre-Education: Staff demonstrated inconsistencies in identifying which procedures were considered vulnerable across different age groups within the pediatric population.

Post-Education: Staff demonstrated improved understanding and consistency in identifying vulnerable procedures across different pediatric age groups, leading to better utilization of chaperones as intended.

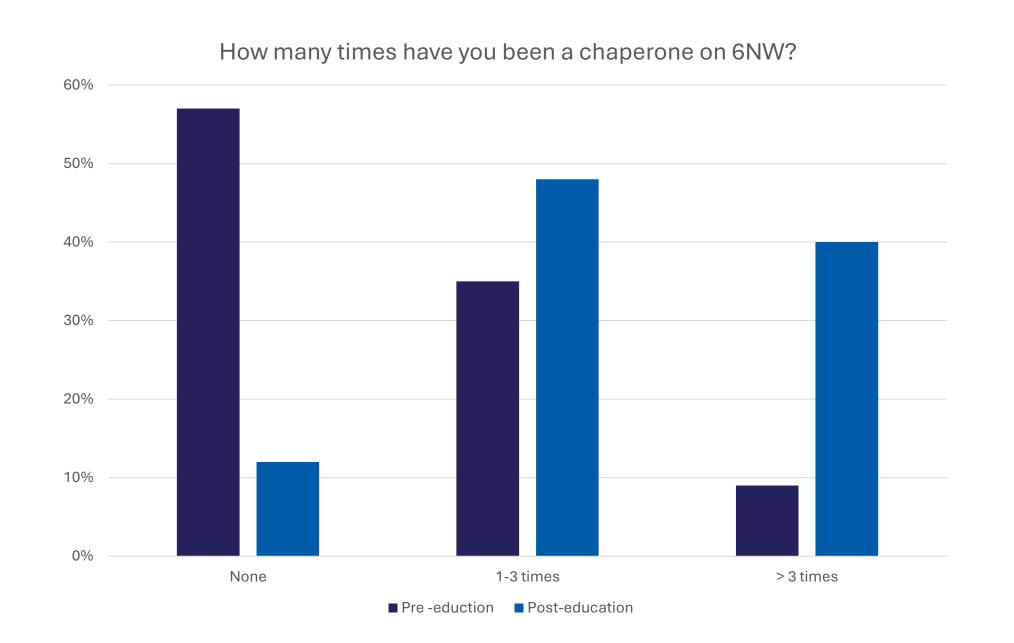
Pre education where to document

48%

20%

yes no = -

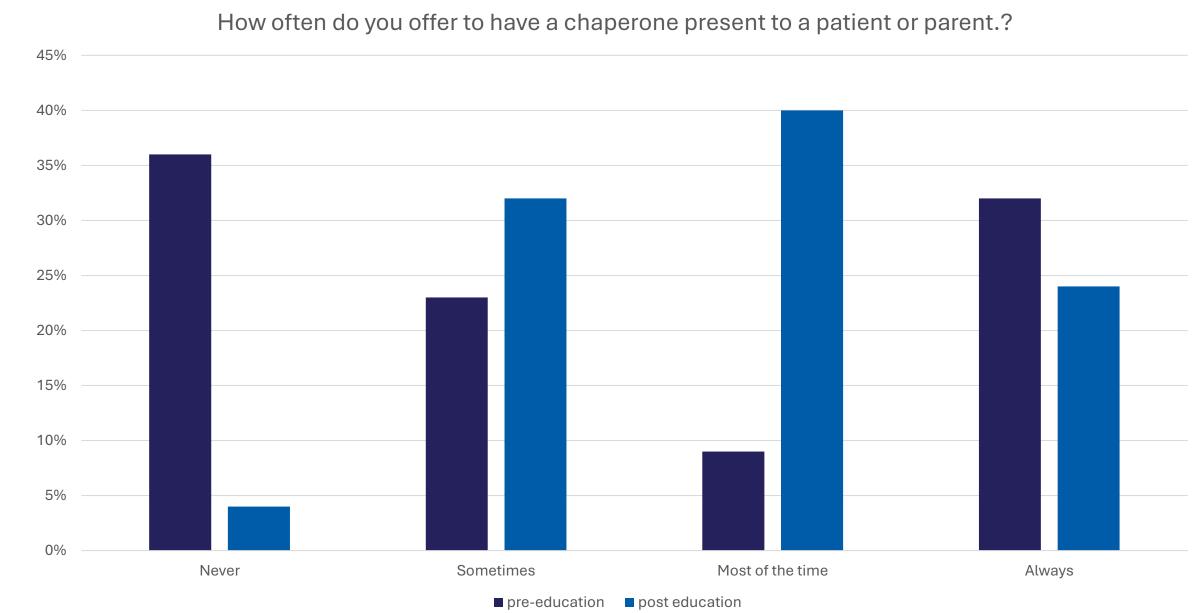
Post education where to document



MAGNET

RECOGNIZED

AMERICAN NURSES



Pre - Education



Post - Education



5. Conclusion

Following the implementation of the new unit standard for chaperones, there has been a noticeable increase in the use of chaperones during procedures. While the requirement for chaperones in genital or breast exams for teenagers and older patients has been clear, practices for patients under 14 have varied. Along with our existing protocol of having two nurses present for certain procedures for safety and task completion, we aim to clarify the role of a chaperone and communicate this clearly to both patients and parents.

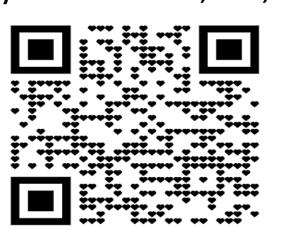
Our continued goal is to eliminate any misunderstandings and create a consistent, standard approach that applies across different age groups and developmental stages.

References

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