SHORELINE
PHYSIOTHERAPY

Under-16 Chaperone Policy

Effective date: 21.08.26

1. Purpose

This policy sets out the arrangements for providing physiotherapy assessment and treatment to patients under the age of 16.

Our priority is to ensure that every child receives care in a safe, respectful and child-centred environment, while protecting their privacy, dignity and wellbeing.

2. Chaperone requirement

A chaperone must be present for all physiotherapy assessments and treatments involving a patient under 16.

The chaperone should normally be a parent or legal guardian.

The chaperone should remain present for the duration of the assessment or treatment and must be able to observe the interaction between the physiotherapist and the child.

3. Parent or guardian attendance

A parent or legal guardian should attend the appointment with a patient under 16.

The parent or guardian may remain in the treatment room throughout the assessment and treatment, subject to the child's wishes and the requirements of the clinical assessment.

If the parent or guardian cannot attend, the practice should agree appropriate arrangements in advance. A suitable responsible adult should normally accompany the child.

The physiotherapist should not routinely see a child under 16 alone without an appropriate adult present.

4. Consent

The physiotherapist will explain the assessment and proposed treatment to both the child and their parent or guardian in language appropriate to the child's age and understanding.

Appropriate consent must be obtained before treatment begins.

The child should be encouraged to participate in decisions about their care and to communicate if they feel uncomfortable or do not wish to continue with an assessment or treatment.

If a child indicates that they are uncomfortable or wishes to stop, the physiotherapist will pause or stop the assessment or treatment and discuss the situation with the child and parent/guardian as appropriate.

5. Privacy and dignity

The child's privacy and dignity must be maintained at all times.

Where the child needs to change clothing or remove clothing for assessment:

- The reason will be explained beforehand.
- The child will be given appropriate privacy to change.
- Only the clothing necessary for the assessment will be removed.
- Appropriate draping will be used where necessary.
- The child's dignity will be maintained throughout.
- The physiotherapist will explain any physical contact before it occurs.

Children should never be unnecessarily exposed during an assessment or treatment.

6. Physical contact

Physiotherapy may require physical contact for assessment or treatment.

The physiotherapist will explain what they are going to do and why before making physical contact.

Physical contact must always be clinically appropriate, professional and proportionate to the treatment being provided.

The child's response and comfort should be monitored throughout the assessment.

7. Professional boundaries

All staff must maintain appropriate professional boundaries when treating children.

Staff must not engage in behaviour that could be considered inappropriate, intimidating or unsafe.

This includes inappropriate physical contact, inappropriate comments, personal social media contact or unnecessary communication outside approved practice channels.

8. Safeguarding

The safety and welfare of every child is the responsibility of all members of the practice team.

Any concern that a child may be at risk of harm, abuse or neglect must be reported in accordance with the practice's safeguarding procedures.

Confidentiality does not prevent information being shared when this is necessary to protect a child from harm.

9. If a chaperone or appropriate adult is unavailable

If an appropriate chaperone or responsible adult is unavailable, the appointment should normally be postponed and rearranged.

The physiotherapist should not proceed with an examination or treatment where doing so would compromise the child's safety or the practice's safeguarding requirements.

Any exceptional circumstances must be considered carefully and documented.

10. Documentation

The patient's clinical record should record:

- The name and role of the chaperone.
- The name and relationship of the parent/guardian or accompanying responsible adult.
- Relevant consent discussions.
- Any concerns raised by the child, parent/guardian or physiotherapist.
- Any safeguarding concerns or incidents.

11. Confidentiality

All staff and chaperones must maintain patient confidentiality.

Information relating to the child's treatment should only be shared with appropriate people and in accordance with applicable confidentiality, safeguarding and data protection requirements.

12. Complaints and concerns

Children and their parents or guardians are encouraged to raise any concerns about their care or the presence of a chaperone.

All concerns will be taken seriously and managed in accordance with the practice's complaints procedure.