

## **Clothing**

The child's clothing should allow for the child to have full movement. Ideally, shorts and a T-shirt should be worn so that movement can be seen clearly. However, there may be times when school uniform may suffice. There may also be times when T-shirts may be removed for short periods such as to assess the trunk and spine.

## **Hugging**

Some young children need to hug as it gives them the tactile input they crave. There has been research into the importance of hugs not just as a sensory feedback and to promote a positive emotional state but also to reduce stress and pain. However, it may appear inappropriate in a school setting where guidelines are very strict relating to a pupil touching a teacher or the teacher touching a child. A physiotherapist must not instigate a hug and if a child does hug the therapist then they should be discouraged from doing so. It may be appropriate to suggest that "hugs are for home". If necessary a discussion with the parents and school on how to wean the child away from hugging may be appropriate as well as having a chaperone during this time.

## **References and additional information**

European Core Standards Of Physiotherapy Practice - WCPT (2008)  
Seeking Consent: Working With Children – Department of Health (2001)  
Guidance to CSP Members on Chaperoning and Related Issues - CSP (2003)

Primary Teacher Resource Centre forum - Weaning children off hugging adults

Personal Growth -Have you hugged anyone lately? -Parveen Chopra



The Chartered Society of Physiotherapy is the professional, educational and trade union body for the UK's 50,000 chartered physiotherapists, physiotherapy students and associates

Association of Paediatric Chartered Physiotherapists

[apcp.csp.org.uk](http://apcp.csp.org.uk)

Published: January 2014

Review: January 2017



Association of Paediatric Chartered  
Physiotherapists

# Physiotherapy in Schools

A guide for schools and parents



## **The Role of the Physiotherapist**

Physiotherapy is an allied health care profession which promotes the health and wellbeing of all. It aims to help maximise movement and function when someone is affected by injury, illness, developmental delay or other disability. Physiotherapists are autonomous practitioners, responsible for the assessment and interpretation of investigations to provide expert, holistic physical rehabilitation. Physiotherapists provide intervention programmes, which may be carried out by non-professionals if taught how to do so.

## **What is paediatric physiotherapy?**

Paediatric physiotherapists work with children from birth to 19 years. They are qualified physiotherapists and registered with the Health Professionals Council (HCPC) and have enhanced Criminal Records Bureau (CRB) clearance. A paediatric physiotherapist possesses a sound knowledge of childhood development, how patterns of movement develop from birth, and a wide range of clinical conditions.

Paediatric physiotherapists work closely with other professionals, parents/carers, teaching and welfare staff at school and nursery to ensure that the child's physical abilities are maximised. Therapy advice should always be incorporated within the daily routine of their life.

Paediatric physiotherapists will use a combination of approaches to develop both gross and fine motor skills e.g walking and object manipulation. The physiotherapist will be flexible enough to incorporate ongoing treatment into school and home life, to maintain a sense of normality appropriate to the age of the child. Physiotherapy can be advice or a hands-on approach that ensures the child is optimally positioned to carry out activities and exercises. This gives the child an opportunity to become aware of new movement patterns which they may not spontaneously use.

## **Physiotherapy in school**

Treatment in school minimises absence from school for therapy and provides opportunity for the therapist to discuss and give appropriate advice for handling and supporting the growing and changing child in the school environment. It ensures a multidisciplinary, holistic approach and ensures children are able to access the National Curriculum.

Many paediatric physiotherapists are based in, or solely work within schools

The physiotherapist will be able to show appropriate I.D. and when visiting a school will carry out the school's policy (e.g. sign in and wear a visitor's badge.)

The physiotherapist will wear appropriate clothing for the session (this typically will be trousers and a top or uniform) and may be asked to wear appropriate footwear for P.E. or game sessions.

The physiotherapist must abide and adhere to the rules and standards of physiotherapy practice as set by the Chartered Society of Physiotherapy and by the Association of Paediatric Chartered Physiotherapists.

The physiotherapist will ensure that the following criteria take place for each treatment:

### **Consent for treatment**

For children under 16, the competency of the child to consent for the proposed intervention means the child's ability to understand their problem and process the information provided about treatment in order to make an informed decision. This will be unique to the individual, the time and the specific treatment intervention. This could include reference to those present at the time of treatment and any techniques intended. If a child is not able to process this information, parental written consent is indicated.

### **Treatment environment**

A child must be treated in an environment that is safe for child, physiotherapist and carer. Adequate space should be available to ensure treatment can be carried out effectively, allow for any equipment to be used and enable appropriate manual handling techniques. The treatment area should allow the therapist to call for assistance if needed and allow school staff to approach the therapist easily. Privacy of the patient to ensure that patient dignity is maintained at all times is vital.

### **Chaperoning / being accompanied in treatment**

The child may be accompanied by a parent or carer who knows the child well, in order that the physiotherapy home/school programme may be explained and taught, to be continued in the school or home environment. A member of school staff may be asked to accompany a child if the treatment or assessment requires a level of undress unusual to the environment. The child must be informed and give verbal consent where possible (see above under consent of treatment).

### **Therapeutic handling**

This may include touching and holding over joints or parts of the body to ensure stabilisation of a joint or body part, to facilitate or inhibit movement as well as to isolate muscles that need to be strengthened. Some children may require hoisting or use of other manual handling/transfer techniques.