

1.13.1 Personal Hygiene

Regulations and standards

England

- [Regulation 6: The quality and purpose of care standard](#)
- [Guide to the quality and purpose of care standard](#)
- [Regulation 7: The children's wishes and feelings standard](#)
- [Guide to the children's wishes and feelings standard](#)
- [Regulation 9: The enjoyment and achievement standard](#)
- [Guide to the enjoyment and achievement standard](#)
- [Regulation 10: The health and well-being standard](#)
- [Guide to the health and well-being standard](#)

Wales

- [Social Services and Well-being \(Wales\) Act 2014](#)
- Regulation 28: Supporting individuals to manage their money.
<https://www.legislation.gov.uk/wsi/2017/1264/regulation/28/made>
- Regulation 15: Personal plan
<https://www.legislation.gov.uk/wsi/2017/1264/regulation/15/made>
- Regulation 56: Hygiene and infection control
<https://www.legislation.gov.uk/wsi/2017/1264/regulation/56/made>

Outcome statement

Children are encouraged and enabled to choose their own clothes and personal requisites and have these needs fully met.

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1. General Principles

Each child's **My Life Plan/ Personal Plan** should show how their personal hygiene needs are being addressed; with a view to encouraging and supporting them to maintain a positive and healthy lifestyle.

In addition to the plan, the following must be adhered to:

- a. Personal Hygiene products and services may only be obtained from reputable, professional and suitably qualified providers;
- b. Where children have special needs or there are healthcare concerns regarding their hair or skin, specialist or professional advice must be sought and recommended treatment provided;
- c. Children must be provided with combs, brushes, oils, shampoos, creams and other hair or skin care products suitable to their needs, age and understanding;
- d. Children's daily routine should include opportunities, with support if necessary, to cleanse themselves and brush and/or comb their hair;
- e. Children's hair must be cut and styled by reputable hairdressers or stylists;
- f. Where a child requests, or it seems appropriate for a child to have a hairstyle or skincare product which may significantly change their appearance, the manager/supervisor and social worker should be consulted before a decision is taken;
- g. If possible, children should be offered counselling and support on the underlying issues and education about the health risks of such products;
- h. Children who need or choose to shave or remove facial or other body hair should be supported to do so and given allowances for the purchase of suitable oils, creams or shaving materials.
- i. Where children will have health conditions or allergies known, these must always be taken into consideration when purchasing or using any personal hygiene products.

2. Body Piercing, Tattoos etc.

It is acknowledged that body piercing and tattoos is a form of self-expression and fashion, and that many children will experiment with it or choose to use it.

It is illegal for tattooists to tattoo anyone under 18 years old, even with parental consent.

Children can have their bodies pierced at any age.

There is no **legal age** of consent for body **piercing**, and so it's **legal** for someone under the **age** of 18 to have a **piercing** as long as they have consented to it. Children under the **age** of 16 can't **legally** consent to a genital (or in the case of girls, nipple) **piercing**.

Children who express an interest in body piercing or tattoos should be treated on a case by case basis depending on their age and level of understanding, but on principle, staff/carers should discourage them, pointing out the possible implications and healthcare risks; for example, from unsafe materials, needles etc.

Under no circumstances may staff encourage or give consent children to have their bodies pierced or tattooed.

Children should be informed that it is illegal for tattooists to tattoo them, even with parental consent; if they appear determined, consideration should be given to making the tattooist aware of the age of the child. If children are likely to use materials to tattoo themselves, consideration should be given to confiscating them.

If children appear determined to have their bodies pierced, they should be asked to discuss the matter with their parent(s) and social worker beforehand.

Whether consent is given or not, children cannot be prevented from being pierced.

If they continue to be determined, staff/carers should ensure that measures used for piercing are as safe and hygienic as possible; preferably undertaken by a reputable person.

Piercing's may not be undertaken or in any way supported by staff/carers.

If necessary, staff must confiscate any materials/equipment which may be used for it.

If a child does allow their body to be pierced or tattooed, the social worker must be informed and asked to decide whether to notify the parents.

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End