

Personal Care Policy

Acorns Personal Care Policy links to Safeguarding and Child Protection Policy and the Health & Safety Policy.

Rationale

A significant number of children and young people with disabilities and medical needs, require assistance with intimate care tasks, especially toileting at Acorns Primary School. Many of the pupils may experience difficulties with toileting for a variety of reasons.

We believe that all our pupils have the right to be safe, to be treated with courtesy, dignity, and respect. This is paramount.

Definition of Intimate Care

There is a clear difference between personal and intimate assistance. 'Intimate Care' can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body. Help may also be required with changing colostomy or ileostomy bags, managing catheters, stomas or other appliances. The Intimate care tasks specifically identified as relevant include:

- Dressing and undressing (underwear);
- Helping someone use the toilet;
- Changing continence pads (faeces/Urine);
- Bathing / showering;
- Changing sanitary wear;
- Inserting suppositories;

In some cases, it may be necessary to administer rectal medication on an emergency basis for example where a child's life is in danger. Effective forward planning and communication with the child and their parents or carers will go some way to mitigating the risks in this eventuality. Please refer to the Administering Medicines Policy for further information.

Definition of Personal Care

Care generally carries more positive perceptions than intimate care. Although it may often involve touching another person, the nature of this touching is more socially acceptable, as it is less intimate and usually has the function of helping with personal presentation and hence is regarded as social functioning. These

tasks do not invade conventional personal, private or social space to the same extent as intimate care and are certainly more valued as they can lead to positive social outcomes for people.

Those personal care tasks specifically identified as relevant here include:

- Skin care/applying external medication;
- Feeding;
- Administering oral medication;
- Hair care;
- Dressing and undressing (clothing);
- Washing non-intimate body parts;
- Prompting to go to the toilet.

Personal Care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Children and young people may require help with eating, drinking, washing, dressing and toileting.

Principles of Intimate Care and Personal Care

The following are the fundamental principles of intimate and personal care upon which our policy guidelines are based:

- Every child has the right to be safe;
- Every child has the right to personal privacy;
- Every child has the right to be valued as an individual;
- Every child has the right to be treated with dignity and respect.

Safeguarding Procedures will be accessible to staff and adhered to. All staff involved in the provision of intimate and/or personal care will have all relevant checks completed before allowing them to be left alone with children (e.g. DBS) and will be subject to robust internal procedures such as reference checking and monitoring and regular updating of enhanced DBS checks. Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.

All children who require intimate and/or personal care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection; Health and Safety and moving and handling training) and are fully aware of best practice.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.

There is careful communication with each child who needs support in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

As a basic principal children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with personal/intimate care.

Best practice indicates that ideally carers will always work with another person when carrying out personal care routines with identified pupils.

Safe handling practices are documented in Moving & Handling Plans. Physiotherapists, OT and a trained member of school staff will review advice on changes to moving and handling techniques.

We provide our staff with the correct equipment and regular training to ensure their safety and that of the pupils.

Pupils who cannot weight bear will be risk assessed. Hoists are used when lowering or raising the pupil from the floor or transferring from a wheelchair to a changing bed.

There are a number of bathrooms and toilets located throughout school to ensure

accessibility for all pupils. We operate a 'bathroom for all' approach. This means that there are some single sex toilets and some bathrooms/toilets that can be used by both sexes, in line with equality. Bathrooms have a mix of adaptations including different sized toilets; handrails; potty chairs and foot stools. Ensuring appropriate modifications and promoting independence and life skills. Bathrooms have specialist equipment including ceiling hoists/portable hoists and adjustable changing beds. The beds should be lowered to a suitable height to allow the pupil to climb / transfer to the bed (at wheelchair height or to allow a level transfer using a suitable transfer board); then raise the bed to at least waist height of the carer to allow a suitable posture to be maintained when changing the pupil. All changing areas are either cubicles or have a private curtained area.

Infection prevention and control is concerned with the prevention of avoidable risks of infection and the control and management of all unavoidable risks of infection to those administering and receiving intimate and personal care. We will manage infection risks related to the setting, equipment, staff working practices and clinical practices arising from the intimate and personal care of children.

- Staff should wear disposable gloves and aprons while changing a nappy, pad or soiled clothing.
- Soiled clothing is placed in specialist red bags to be returned home for families to wash on a 40C cycle which will disintegrate in the cycle
- Soiled nappies or pads should be bagged and disposed of in a hygienic disposal unit (yellow bin)
- · Acorns has an agreed regular emptying of bins contract with LES
- Changing area to be cleaned after each use with disinfectant surface cleaner
- Hand washing basins for pupils and staff are available in all bathrooms, with hot water and liquid soap to wash hands as soon as the task is completed. Paper towels are available for drying hands.
- Storage of toileting supplies are kept in a locked cupboard and are replenished on a regular basis by the school cleaners/site supervisor.

Parental involvement

Parents are given any new information at review meetings concerning new routines.

Pupil involvement

Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding. Pupil voice will always be taken into consideration and adjustments will be made to meet the needs of an individual.

Achieving continence is one of hundreds of developmental milestones for all children usually reached within the context of learning in the home before the child/young person transfers to learning in a setting. In some cases this one developmental area can assume significance beyond all others. Parents and carers are sometimes made to feel guilty that this aspect of learning has not been achieved, whereas other delayed learning is not so stigmatising. As a setting, we will support and teach toilet training and other personal care skills, where appropriate, as an essential part of PSED/PHSE and life skills.

Monitoring and Assessing the Policy

The Personal Care policy is monitored by the Senior Leadership Team and will be reviewed on a planned yearly cycle.

Next Review Date: October 2025