

Personal Care policy

Ratified/Reviewed by...	Date	Date to be reviewed
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Key Contact Personnel in School:

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Aylesford School Personal Care Policy 2024-2025

1. Purpose and Scope

The purpose of this document is to set out a clear framework which provides guidance for people who provide personal care at Aylesford School. This policy particularly applies to children and young people who want to participate in universal services and require personal and intimate assistance due to their specific requirements.

This policy aims to:

- Safeguard the rights and well-being of pupils with regards to dignity, privacy, choice and safety
- Assure parents/carers that all staff are knowledgeable about personal care and that individual concerns are taken into account and where possible, acted upon
- Clearly define the difference between intimate and personal care and set out clear guidance of the reasonable adjustments made at Aylesford School to cater for a student's personal care requirements.
- Ensure parents/carers and pupils are involved in any decision about the personal care of their child
- Provide guidance and reassurance to staff
- Ensure that parents/carers and pupils are actively involved in the development of agreed personal care protocols
- Ensure that details of an agreed personal care protocol will be detailed in an individual health care plan and will be shared with other agencies where necessary
- Provide staff with information and appropriate training in personal care

2. Introduction

Aylesford School is a mainstream secondary school with an inclusive ethos where all students are made to feel welcome and valued.

The purpose of this policy is to set out procedures that safeguard pupils and staff by providing a consistent approach and guidance to personal care, including toileting. We recognise that personal care raises complex issues. Whilst it may not be possible to eliminate all risks, the balance should be on the side of dignity, privacy, parental and pupil choice and safety.

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.

Staff who work with children and young people who have special educational needs will realise that whilst the issue of personal care is unusual in a mainstream secondary school, some children do require support with their personal care. Aylesford School recognises that there is a need to treat all children with respect when personal care is given. No child should be attended to in a way that causes distress or pain. At Aylesford School, the child's welfare and dignity is of paramount importance.

In this document, where the term child/children is used, it refers to children and young adults. The term parent/carer is used to refer to parents and legal guardians or carers. Staff includes all adults working in Aylesford School, although those required to undertake personal care will have that task specified in their job description, and are referred to in the rest of the document as "designated" for that task.

3. Legislation, Guidance and Policies

- The Children Act 1989;
- The Childcare Act 2004
- The Childcare Act 2006;
- The Disability Discrimination Act 1995;
- UN Convention on the Rights of the Child (1989);
- Health and Safety At Work etc. Act 1974;
- Equality Act 2010;
- DfE, Supporting pupils at school with medical conditions – Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (2014)
- Local safeguarding policy.

4. 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 sanitary wear or continence pads (faeces/Urine);
- Bathing / showering;
- Washing intimate parts of the body;
- Inserting and monitoring pessaries or suppositories

5. Definition of Personal Care

Personal Care generally carries more positive perceptions than intimate care. Although it may 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;
- Administering oral medication;
- Administering diabetic injections;
- Assisting with dressing and undressing (clothing);
- Washing non-intimate body parts;
- Prompting to go to the toilet, feed or drink

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.

6. Our Policy

Intimate personal care may be provided by specialist schools which have specialist facilities and / or employ appropriately trained health care staff to provide intimate personal care.

As a mainstream secondary school Aylesford School does not have the specialist facilities nor employ health care staff and is therefore unable to make the reasonable adjustments required to provide intimate personal care.

Children and young people at Aylesford School may require help and are supported with personal care such as eating, drinking, washing, dressing and toileting, without the need for intimate care.

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

Staff who provide personal care are trained to do so (including Child Protection and Health and Safety training) and are fully aware of best practice. For staff that have difficulty fulfilling this main duty on the Job Description, support should be available to access appropriate training.

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.

As a basic principle 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.

Individual personal care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans may include a risk assessment to address the personal safety and health of the child and the carer e.g. moving and handling, infection control etc.

Each child's right to privacy will be respected. Wherever possible, the same child will not be cared for by the same adult; there will be a minimal rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.

Parents/carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing, resource, accommodation and equal opportunities legislation.

Each child/young person will have an assigned senior member of staff to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive. At Aylesford School this is the SENCO Miss Chayla Duff.

7. The Protection of Children

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.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager /

designated person for child protection. Safeguarding procedures will then be followed and guidance provided to the member of staff.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution.

If a child makes an allegation against a member of staff, all necessary procedures will be followed.

8. Guidelines for Good Practice

This guidance is not prescriptive but is based on the good practice and practical experience of those dealing with such children and young people. All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the personal care of children.

8.1 Treating children and young people with dignity and respect

Young children and children with special educational needs can be especially vulnerable. Staff involved with their personal care need to be particularly sensitive to their individual needs. Staff also need to be aware that in exceptional circumstances some adults may use personal care as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard children and staff.

1. Involve the child in the personal care

Try to encourage a child's independence as far as possible in his or her personal care. Where a situation renders a child fully dependent, talk about what is going to be done and give choices where possible. Check your practice by asking the child or parent about any preferences while carrying out the personal care.

2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.

Staff can administer Personal Care alone however settings need to be aware of the potential safeguarding issues for the child and member of staff. Care should be taken to ensure adequate supervision primarily to safeguard the child but also to protect the staff member from potential risk.

3. Be aware of your own limitations

Only carry out activities you understand and feel competent with. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

4. Promote positive self-esteem and body image.

Confident, self-assured children who feel their body belongs to them are less vulnerable to **Sexual Abuse**. The approach you take to personal care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

5. If you have any concerns you must report them.

If you observe any unusual markings, discolouration or swelling, report it immediately to the designated practitioner for child protection.

If a child is accidentally hurt during the personal care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the designated Practitioner. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

6. Helping through communication

There is careful communication with each child who needs help with personal care 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.

7. Support to achieve the highest level of autonomy and independence

As a basic principle 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. Individual personal care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health.

8.2 Infection prevention control

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 personal care. We will manage infection risks related to the setting, equipment, staff working practices and clinical practices arising from the personal care of children.

8.3 Forward Planning with parents/carers and children

Establishing effective working relationships with parents/carers is a key task for all settings and is particularly necessary for children/young people with special care needs or disabilities.

Parents/carers should be encouraged and empowered to work with professionals to ensure their child/young person's needs are properly identified, understood and met. Although they should be

made welcome, and given every opportunity to explain their child/young person's particular needs, they should not be made to feel responsible for their child/young person's care in each setting, or for making teaching staff disability aware. They should be closely involved in the EHC plans. Staff have a duty to make reasonable adjustments to remove barriers to learning and participation for pupils and students of all abilities and needs. Plans for the provision of personal care must be clearly recorded to ensure clarity of expectations, roles and responsibilities. It is also important that the procedure for dealing with concerns arising from personal care processes is clearly stated and understood by parents/carers and all those involved.

8.4 Working with other agencies

Children and young people with special care needs or disabilities will be known to a range of other agencies. Aylesford School endeavour to establish and maintain positive links with all those involved in the care or welfare of individual children/young people. This will enable plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child/young person's well-being and development remains the focus of concern. The SENCO, Miss C Duff will be responsible for co-ordinating links with other agencies.

8.5 Resources and training

Each child's right to privacy must 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 care. Where possible a child will be cared for by one adult unless there is a sound reason for having two adults present.

Where possible the child's key-person is responsible for undertaking the care of an individual child. When this is not possible a staff member who is known to the child will take on that responsibility. The staff member who is involved will always ask the child for permission to assist them.

Space for privacy

At Aylesford School it is not possible to provide a purpose built changing area with a shower. The disabled toilet in the main building is the designated place to provide personal care.

Appropriate resources such as pads, wipes, changes of clothing and a hygienic disposal unit will be provided within this room.

Suitable hygiene resources

- Staff should not touch a child's soiled nappy, pad or soiled clothing;
- The child should place soiled nappies or pads should be placed in the hygienic disposal unit;
- Agreed regular emptying of bins;
- Hot water and liquid soap to wash hands as soon as the task is completed;
- Hot hand dryer or paper towels available for drying hands.

Guidance and training

Written guidelines should specify:

- Who will change the nappy/pad/clothes;
- Where nappy/pad/clothing changes will take place;
- What resources will be used (Cleansing agents used or cream to be applied);
- How the nappy/pad will be disposed of;
- What infection control measures are in place;
- What the staff member will do if the child is unduly distressed by the experience or if the staff member notices marks or injuries.