

# Personal Care and Dignity

Toileting Policy-Marshbrook First School and Marshmallows Feb 2014

Policy and Good Practice Guidelines for  
Early Years Settings [Education and Care]  
Primary Schools  
Parents / Carers  
Relevant Agencies in supporting children with toileting needs

## Acknowledgements

Children and Lifelong Learning have developed policy and guidance regarding toileting needs.

The Working Group consisted of:

Julia Anderson	Specialist Senior Educational Psychologist
Ruth Denison	Early Years District SENCo
Sharon Kelly	Primary Heads Forum
Janet Markwell	Parent Partnership
Gill Turton	Autism Outreach Early Years
Gill Wilson	Early Years District SENCo

## Foreword

The enclosed policy and guidance have been developed to ensure best practice is promoted within all settings in Staffordshire. Personal care and dignity are of the utmost importance. Guidance on safeguarding children and staff is also incorporated.

This guidance and policy support the fundamental principles of Every Child Matters, the Disability Discrimination Act and SENDA.

## Introduction

This document provides information about meeting children's toileting needs for staff in early years setting and primary schools in Staffordshire. It is relevant for adults who are working with:

- Young children who are acquiring toileting skills age appropriately
- Children who may have a developmental delay and who will achieve independence in toileting later than their peer group
- Children who have a disability or who require special arrangements for toileting due to medical, emotional or social needs

The guidance is based on good practice and is designed to support procedures already in place. It aims to:

- Ensure that all children are included in their local community school regardless of their toileting needs
- Provide advice and practical examples to staff
- Assure parents and carers that staff are knowledgeable about personal care, and that their individual concerns are taken into account
- Safeguard the rights and well-being of the children
- Reassure and protect the interests of staff working in a personal care capacity

## Background

Following the implementation of the Disability Discrimination Act 1995 (DDA) and the SEN and Disability Act 2001 (SENDA), an increasing number of children and young people with disabilities, developmental delay and medical needs are being included in local early years settings and mainstream schools. A number of these children require assistance with toileting.

Regardless of age, these children fall within the terms of DDA/SENDA and the setting must make 'reasonable adjustments' to support them.

**These children have an educational / care entitlement irrespective of their difficulties with toileting.**

## Principles

Children and Lifelong Learning believe that children with toileting needs should be admitted normally into pre school, nursery and infant classes with their cohort. These children have an educational entitlement irrespective of their difficulties with toileting. It is not acceptable to deny, delay or reduce attendance at an early years setting, nursery or reception class simply because a child has special toilet requirements.

Parents have a key role to play in effective toilet training and management of toileting needs. It is particularly important to ask for parental guidance on cultural or religious issues and the child's preferences for comfortable and appropriate care. Parents can expect to work in partnership with schools and settings and to have clear written information on policies and personal care plans.

It is important to recognise that people may feel judged or blamed if their child has not become toilet trained by the time of school admission. It is not appropriate to expect parents or carers to be on emergency stand by to change children during the school day / extended day.

Managers and head teachers in settings and schools have a special responsibility to set the tone for the way in which the issue of toileting is addressed. Managers, head teachers and governors should be aware of their duties to comply with the DDA and SENDA, and should pass this awareness on to all staff. Practice in settings/schools should be consistent with Staffordshire's policy on the development of inclusive practice, so enabling a greater number of children to be educated in their local community schools. Children or young people who need assistance with toilet training or special toileting arrangements must be treated with respect, dignity and sensitivity.

Children must never be left wet or soiled.

Parents should not be expected to dispose of soiled nappies.

## **Good Practice Guidance for Admission of Non-Toilet trained children: Policy and Procedures**

A number of children entering school or early years settings may not be fully toilet trained. It should not be assumed that failure to achieve independence with toileting is in itself an indication of special educational needs. With good partnership working between home and school, most children are able to achieve full toilet training by the end of the first terms in reception class.

Schools should ensure that additional resources and finances are allocated to the foundation stage group to ensure that children's individual needs can be met. In private, voluntary and independent early years settings, where staffing levels are higher, allocating staff to change the children should not be such an issue.

Children with long-term toileting requirements as part of complex medical or physical needs may require additional assistance to manage their personal care needs in settings and schools. Settings and schools are required to contact the appropriate external agencies working with the child for advice. Please refer to list of Useful Contacts and Resources.

It is recommended that all schools/settings should have a policy on managing toileting issues, whether or not they currently support children with these needs. The policy should show a commitment to including all children and young people with continence needs and should be placed in the context of the Disability Discrimination Act.

The policy should make explicit the roles and responsibilities of staff in a school or early years setting and should clarify for parents and children what they can expect from the school or early years setting and what should be expected from them.

It is likely that most personal care tasks will be undertaken by teaching assistants and nursery nurses within schools and settings. Since the DDA became applicable to schools and settings in 2002, all new and reviewed contracts for teaching assistants working with young children should include personal care in their remit. This would include support in promoting independent toileting and other self-care skills.

However, ALL staff are expected to promote personal dignity and care. Teachers may take responsibility for assisting children with toileting. This is undertaken voluntarily as part of duties regarding reasonable adjustment..

In addition, managers and headteachers should ensure implementation of the following requirements:

I) Resources and Facilities

Whenever possible, the existing toilet areas should be used. If these are inappropriate then the Medical Room will be used to protect the dignity of the child without compromising staff (a member of the office staff should be present). Do not change pupils in educational, play or public areas, or in any location used for the preparation of food and drink.

The minimum facilities would comprise access to:

- Sink with taps [ideally lever] and hot and cold running water
- Dedicated bin
- Paper roll and / or wet wipes for cleansing the body, cleaning the surface of the changing area and mopping up spillages. Settings should liaise with parents about the use of wipes and agree who will provide these, bearing in mind the possibility of allergies. Wipes provided for individuals should be labelled with the child's name
- Antibacterial spray/Milton/liquid soap and water are all suitable for cleaning surfaces and the changing area.
- Non-latex gloves and disposable aprons – fresh ones should be used each time for each child

The resources listed above will be stored in the Early Years Foundation Stage Classroom. In addition, arrangements should be confirmed for spare clothing to be available within the setting and the transfer of wet or soiled clothing back home.

If children are able to stand independently, it is acceptable to change children when they are standing up. It is not appropriate to use this method if the child is soiled.

It is acceptable to change children on the floor if no other surface is available. In this circumstance, an easy to clean mat should be placed under a changing mat and other children should be prevented from accessing the area whilst changing is underway. A risk assessment should be completed for the adult responsible for changing and they should be provided with a kneeling pad.

If making adaptations, schools and settings should try to create a facility that will be suitable for children who may be included in the school or setting in the future. The DDA and SENDA require schools and settings to anticipate the needs of potential pupils. Disability, Equality and Accessibility plans should include upgrading toilets to meet the needs of a range of users.

In early years settings, when upgrading consideration should be given to providing changing facilities that minimise lifting and avoid staff having to kneel down on the floor to change children. Ideal facilities would include:

- Extractor fan
- Rise and fall changing table
- Toilet
- Disposal system for clinical waste (for example via an existing sanitary bin disposal contract)

## II) Health and Safety Issues

Headteachers and Managers have a duty to safeguard the health and safety of both children and staff. It is imperative that the following health and safety concerns are addressed before the child begins attending.

- Personal hygiene (5 step handwashing technique)
- Disposal (soiled items should not be placed with general refuse)
- Protective clothing (disposable gloves and aprons)

- Cleaning of changing area/equipment (responsibility of a named person)

### III) Staff training

- Staff should have access to appropriate training to meet the needs of individual children.

This could include:

- i) medical conditions (School Health Advisor, Continence Service)
  - ii) physical needs (PDSS)
  - iii) lifting and handling (County Moving and Handling training team)
  - iv) child protection / safeguarding issues (Chris Bowering)
  - v) personal hygiene (School Health Advisor)
- Risk assessments should be completed to anticipate or address concerns raised by children, parents or staff. Personal care plans should include a risk assessment. Staff training on risk assessment should aim to encourage staff to 'think safety' when considering situations and identifying potential risks. A form and guidelines for Personal Care Risk Assessments are attached in Appendix I.

### IV) Child Protection

*The normal process of changing a nappy should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the nappy-changing process to ensure that abuse does not take place. Few settings/schools will have the staffing resources to provide two members of staff for nappy changing and CRB checks are carried out to ensure the safety of children with staff employed in childcare and education settings*

*Jeannie Carlin, Council for Disabled Children 2005*

*Including Me: Managing complex health needs in schools and early years settings, p75.*

Some unions recommended that in schools two members of staff are present when personal care is undertaken. This however does need to be balanced with issues around maintaining staff/child ratios and ensuring privacy. If there is a known risk of false allegation by a child or parent then two members of staff should be present.

Section 18 in the government guidance, *Safe Practice in Education*, states that “Staff should ensure that another appropriate adult is in the vicinity and is aware of the task to be undertaken.”

At all times the privacy and dignity of the child should be respected, especially if more than one member of staff is present.

The process of nappy changing may, in rare circumstances, lead to a level of concern for staff regarding child protection. The usual procedures for sharing concerns with the nominated child protection members of staff or First Response should be followed.

### **Good Practice Guidance for Admission of Non-Toilet trained children: Individual Needs**

It is good practice to establish a child’s toileting needs at entry to a school or setting. Transition arrangements offer an opportunity to support parents in establishing toilet training if this is appropriate to the child’s developmental level. Parents and carers have a key role to play in effective toilet training or toilet management.

When families visit the setting/school prior to entry, it is appropriate to discuss toileting issues with the parents/carers. If the child is still in nappies, staff could support parents in trying to establish toileting routines. If necessary, these routines would be maintained by the setting/school after admission. A leaflet which may be helpful for parents is provided in Appendix II. This includes guidance on establishing the child’s toileting pattern before entry.

It is very important that personal care plans are prepared for children entering the setting or school with toileting needs which differ from the majority of their peers. An example of Personal Care Plan for toileting is attached in Appendix III.

Preparation should include discussion with parents, confirmation of arrangements and plans for monitoring and review. The personal care plan should make reference to:

- Signed consent from parents/carers to allow support

- Clear arrangements for staffing and access to facilities
- Specialist advice, training or resources required
- Record keeping such as toilet diary or reward system
- Child protection or social care issues
- Liaison and review with parents and outside agencies

When setting up a care plan, the child and his/her parents should feel comfortable with the staff members who are providing the personal care. Gender issues, religious and cultural values should always be taken into account. It is important to adopt consistent approaches at home and school

The SENCo for the setting/school should be aware of the personal care plan and link this intervention with other monitoring completed under Code of Practice procedures.

There are a number of other issues which it is helpful for staff to consider and agree with parents prior to the child starting at the setting. These include:

**Clothing:** Parents should be asked to provide clothing that is easy to manage when toileting. Clothing with elasticated waists and no zips or buttons is most helpful. Whenever possible it is better to train the child with appropriate clothing rather than relying on nappies or training pants. Parents should also be asked to provide plenty of changes of pants/trousers in case of accidents. Setting/school should provide spare clothes in an emergency, but it is always better for a child to wear his/her own clothes. Finally, the setting should agree with parents/carers what will happen to wet or soiled clothing.

**Routines:** Parents should be asked to ensure that the child is changed or taken to the toilet at the last possible time before leaving home. One member of staff should take responsibility for prompting the child to go to the toilet or taking the child to the toilet at fixed appropriate intervals throughout the day. Ensure arrangements are confirmed for cover if the member of staff concerned is unavailable. Whenever possible arrange toilet visits during 'break' time in the child's day-to-day routine. Careful observations may identify when the child 'needs to go'. Ensure that the routine established in setting/school is strictly maintained from the start and try hard to avoid accidents. If necessary, shorten the time between visits to the toilet so that the

child gets into the habit of being dry. Reminders to use the toilet should be discreet and staff should make use of signs, pictures or code words.

**Accidents:** Children may be anxious and pre-occupied by toilet difficulties but usually respond to praise, encouragement and confidence building. It is important to promote self-esteem in other areas of learning. Make little fuss over accidents that do occur and ensure that they are dealt with swiftly, appropriately, sympathetically and in a calm, low-key way

**General management:** Make drinking water easily accessible for all children and encourage them to have 'little and often' rather than huge amounts at a time. Remember that some children enjoy the personal attention they receive when being changed, so try not to make this a chatty, personal occasion. Give extra attention when they have made the effort to go to the toilet independently

When managed in these ways most children will achieve independence during their first terms in reception. When this does not occur, it is appropriate to discuss arising concerns with parents and if appropriate with other professionals.

## Children's Views

It is essential that children's views and preferences are taken into consideration in management of toileting needs. This includes consideration of non-verbal communication and visual cues. Staff involved in meeting children's toileting needs should endeavour to:

- Get to know the child beforehand in other contexts to gain an appreciation of his/her moods and systems of communication
- Respect a child's preference for a particular sequence of care
- Have a knowledge of and respect for any cultural or religious sensitivities related to aspects of personal care
- Speak to the child by name (using age-appropriate language) and ensure that they are aware of the focus of the activity
- Give explanations of what is happening in a straightforward and reassuring way
- Agree terminology for parts of the body and bodily functions that will be used by staff and encourage children to use these terms appropriately

- Give strong clues that enable the child to anticipate and prepare for events e.g. show the clean nappy to indicate the intention to change

## Conclusions

Staffordshire County Council is committed to inclusive practice in its early years settings and schools. There is an expectation that settings, schools and parents will work together to support children with toileting needs without impact on their access to education. Good practice recommendations have been highlighted within this guidance to protect the well being of children, parents and staff and promote consistent best practice.

## Useful Contacts/Resources

School Nurse

Early Years District SENCo

Early Years Advisory Team

PDSS

Moving and Handling Teams

Access Officer

Signs and symbols resources [www.widgit.com](http://www.widgit.com)

## AGE APPROPRIATE TOILETING GUIDANCE

### Introduction

This document provides information about meeting personal care needs in Primary, Middle and High Schools in Staffordshire. It is relevant for adults who are working with:

- Children and Young People who have a developmental delay and who may achieve independence in personal care later than their peer group
- Children and Young People who have a disability or who require special arrangements for personal care due to medical, emotional or social needs

The guidance is based on good practice and is designed to support procedures already in place. It aims to:

- Ensure that all Children and Young People are included in their local community school regardless of their personal care needs
- Provide advice and practical examples to staff
- Assure parents and carers that staff are knowledgeable about personal care, and that their individual concerns are taken into account
- Safeguard the rights and well-being of the Children and Young People.
- Reassure and protect the interests of staff working in a personal care capacity

### Background

Following the implementation of the Disability Discrimination Act 1995 (DDA) and the SEN and Disability Act 2001 (SENDA), an increasing number of Children and Young People and young people with disabilities, developmental delay and medical needs are being included in mainstream schools. A number of these Children and Young People require assistance with personal care.

Regardless of age, these Children and Young People fall within the terms of DDA/SENDA and the setting must make 'reasonable adjustments' to support them.

**All Children and Young People have an educational entitlement irrespective of their difficulties with personal care. Additionally they have the right to be safe, treated with courtesy dignity and respect.**

## Principles

Staffordshire County Council believes that Children and Young People with personal care needs should be admitted into school, with their cohort. These Children and Young People have an educational entitlement irrespective of their difficulties with personal care. It is not acceptable to deny, delay or reduce attendance at any school simply because a child has individual personal care requirements.

Parents have a key role to play in the management of personal care needs. It is particularly important to ask for parental guidance on cultural or religious issues and the child's or young person's preferences for comfortable and appropriate care. Parents can expect to work in partnership with schools and settings and to have clear written information on policies and personal care plans.

**It is important to recognise that people may feel judged or blamed if their child is not independent in personal care. It is not appropriate to expect parents or carers to be on emergency stand by to change Children and Young People during the school day or during educational (including residential) visits.**

Managers and head teachers in settings and schools have a special responsibility to set the tone for the way in which the issue of personal care is addressed. Managers, head teachers and governors should be aware of their duties to comply with the DDA and SENDA, and should pass this awareness on to all staff. Practice in settings/schools should be consistent with Staffordshire's policy on development of inclusive practice, so enabling a greater number of Children and Young People to be educated in their local community schools. Children or Young People who need assistance with personal care or individual arrangements must be treated with respect, dignity and sensitivity.

**Children and Young People must not be left wet or soiled.**

**Parents must not be expected to dispose of soiled items**

## Definition of Personal care

Personal care can incorporate all those tasks of an intimate nature associated with bodily functions, bodily products and personal hygiene. These may include

- Dressing and undressing
- Helping someone to use the toilet
- Changing continence pads
- Bathing/showering
- Washing intimate parts of the body
- Changing sanitary wear

## Respecting Personal Dignity

Where staff are involved on a daily basis in providing personal and intimate care to young people with special educational needs arising from learning difficulties, sensory impairments and physical disabilities they are placed in a position of great trust and responsibility. They are required to attend to the safety and comfort of the children and to ensure that they are treated with dignity and respect.

As children with special needs and disability can lack confidence and assertiveness those activities related to intimate care should offer opportunities for personal development and choice.

**Staff should respect the personal dignity of the children at all times. It is vital that schools seek to engage with parents, and children, prior to enrolment, to discuss the normal routines of the school and staff most likely to be involved in delivering aspects of intimate care.**

Where appropriate the following can assist in promoting positive attitudes to intimate care:

- Get to know the child beforehand in other contexts to gain an appreciation of his/her verbal and non-verbal communication;

- Have a knowledge and understanding of any religious and/or cultural sensitivities related to aspects of intimate care related to this individual child and take full account of these;
- Give explanations of what is happening in a straightforward and reassuring way;
- When washing, always use a sponge or flannel and where possible encourage the child to attempt to wash private parts of the body him/herself;
- Provide facilities which afford privacy and modesty
- Respect a child's preference for a particular carer and sequence of care
- Keep records which note responses to intimate care and any changes in behaviour;
- Agree appropriate terminology for private parts of the body and functions to be used by staff and encourage children to use these terms as appropriate; and
- Respond to and speak to older children in an age-appropriate manner

## Policy and Procedures

A number of Children and Young People may need assistance with their personal care. It should not be assumed that failure to achieve independence with personal care is in itself an indication of special educational needs.

Schools should ensure that additional resources and finances are allocated to ensure that Children and Young People's individual needs can be met.

Children and Young People with long-term personal care requirements as part of complex medical or physical needs may require additional assistance to manage these needs in settings and schools. Settings and schools are required to contact the appropriate external agencies working with the child for advice. Please refer to the list of Useful Contacts and Resources (p).

It is recommended that all schools/settings should have a policy on managing personal care issues, whether or not they currently support Children and Young People with these needs. The policy should show a commitment to including all Children and Young People with personal care needs and should be placed in the context of the Disability Discrimination Act.

The policy should make explicit the roles and responsibilities of staff in a school and should clarify for parents and Children and Young People what they can expect from the school and what should be expected from them.

It is likely that most personal care tasks will be undertaken by teaching/support assistants within schools and settings. Since the DDA became applicable to schools and settings in 2002, **all new and reviewed contracts for teaching assistants working with young Children and Young People should include personal care in their remit. This would include support in promoting independent personal care and other self-care skills.**

All staff however are expected to promote personal dignity and care and Teachers may take responsibility for assisting Children and Young People with personal care needs. This is undertaken voluntarily as part of duties regarding reasonable adjustment.

In addition, managers and headteachers should ensure implementation of the following requirements:

## II) Resources and Facilities

Whenever possible, the existing toilet areas should be used. If these are inappropriate then choose a private, safe location that protects the dignity of the Child or Young Person without compromising staff. Do not change pupils in educational, play or public areas, or in any location used for the preparation of food and drink.

The minimum facilities would comprise:

- Sink with lever taps and hot and cold running water
- Dedicated bin
- Paper roll or wet wipes for cleansing the body, cleaning the surface of the changing area and mopping up spillages. Settings should liaise with parents about the use of wipes and agree who will provide these, bearing in mind the possibility of allergies. Wipes provided for individuals should be labelled with the child or young person's name
- Antibacterial spray/Milton/liquid soap and water are all suitable for cleaning surfaces and the changing area.

- Non-latex gloves and disposable aprons – fresh ones should be used each time for each child

Consideration should be given to storage arrangements for the resources listed. In addition, arrangements should be confirmed for spare clothing to be available within the setting and the transfer of wet or rinsed, soiled clothing back home.

If Children and Young People are able to stand independently, it is acceptable to change them whilst they are standing up. It is not appropriate to do so if they are soiled.

In the short term it may be necessary to change Children and Young People on the floor if no other surface is available. In this circumstance, an easy-to-clean mat should be placed under a changing mat and other pupils should be prevented from accessing the area whilst changing is underway. A risk assessment should be completed for the adult responsible for changing and they should be provided with a kneeling pad.

If making adaptations, schools and settings should try to create a facility that will be suitable for Children and Young People who may be included in the school or setting in the future. The DDA and SENDA require schools and settings to anticipate the needs of potential pupils. Disability, Equality and Accessibility plans should include upgrading toilets to meet the needs of a range of users.

When upgrading, consideration should be given to providing changing facilities that minimise lifting and avoid staff having to kneel down on the floor to change Children and Young People. Ideal facilities would include:

- Emergency call system
- Extractor fan
- Rise and fall changing table
- Toilet
- Disposal system for clinical waste (for example via an existing sanitary bin disposal contract)
- Sufficient room to store and operate a mobile hoist and to accommodate a powered wheelchair.

#### V) Health and Safety Issues

Headteachers and Managers have a duty to safeguard the health and safety of both Children and Young People and staff. It is imperative that the following health and safety concerns are addressed before the pupil begins attending.

- Personal hygiene (5 step hand washing technique)
- Disposal (soiled items should not be placed with general refuse)
- Protective clothing (disposable gloves and aprons)
- Cleaning of changing area/equipment (responsibility of named persons)
- Risk assessment

Disposal of pads and other soiled waste should be negotiated with the company that collects usual refuse from the settings. Some companies will collect waste connected to bathroom needs commensurate with that that would normally be created by a small family. Others will necessitate specific arrangements for 'clinical waste'.

Risk assessments should be completed to anticipate or address concerns raised by Children and Young People, parents or staff. Personal care plans should include a risk assessment. Staff training on risk assessment should aim to encourage staff to 'think safety' when considering situations and identifying potential risks. Support for the creation of Personal Care Risk Assessments can be obtained from the County Physical Disability Support Service (see list of Useful Contacts and Resources p)

Certain conditions and disabilities may bring with it early onset of puberty. Menstruation can be alarming for girls if they are not prepared. Support can be obtained from the school Nurse and the Physical Disability Support Service (see list of Useful Contacts and Resources p) Schools should make adequate and sensitive preparation to help girls cope with menstruation and with requests for sanitary protection. Provision of sanitary wear should be done in a sensitive and discreet way.

#### VI) Staff training

- Staff should have access to appropriate training to meet the needs of individual Children and Young People. This could include:
  - i) health and safety regulations
  - ii) medical conditions (School Health Advisor, Contenance Service)
  - iii) physical needs (PDSS)
  - iv) lifting and handling (County Moving and Handling training team)
  - v) child protection issues (Chris Bowering)
  - vi) personal hygiene (School Health Advisor/School Nurse)

## VII) Vulnerability to abuse and Child Protection

Children and Young people with disabilities may have an increased vulnerability to abuse and discrimination. It is essential that all staff are familiar with the setting's Safeguarding/child Protection policy and procedures, with agreed procedures within this policy and with the child/young person's Care plan.

*The normal process of supporting personal care needs should not raise child protection concerns, and **there are no regulations that indicate that a second member of staff must be available to supervise this process in order to ensure that abuse does not take place.***

*'Few settings/schools will have the staffing resources to provide two members of staff for personal care and CRB checks are carried out to ensure the safety of Children and Young People with staff employed in childcare and education settings.'*

Jeannie Carlin, Council for Disabled Children and Young People 2005

Including Me: Managing complex health needs in schools and early years settings, p75.

Some unions recommended that in schools two members of staff are present when personal care is undertaken. This however does need to be balanced with issues around maintaining staff/pupil ratios and ensuring privacy. If there is a known risk of false allegation by a pupil or parent a risk assessment should be undertaken and appropriate action taken.

Section 18 in the government guidance, Safe Practice in Education, states that

"Staff should ensure that another appropriate adult is in the vicinity and is aware of the task to be undertaken."

At all times the privacy and dignity of the Child or Young Person should be respected, especially if more than one member of staff is present.

The process of providing personal care may, in rare circumstances, lead to a level of concern for staff regarding child protection. The usual procedures for sharing concerns with the nominated child protection members of staff or First Response should be followed.

### **Good Practice Guidance for Admission/Inclusion of Children and Young People requiring personal care:**

#### **Individual Needs**

It is good practice to establish a child's or young person's personal care needs at entry to a school or setting. Transition arrangements offer an opportunity to support parents in establishing personal care needs in the new setting. Close liaison with parents/carers is vital.

When families visit the setting/school prior to entry, it is appropriate to discuss personal care issues with the parents/carers.

**It is very important that personal care plans are prepared for Children and Young People entering the setting or school with personal care needs which differ from the majority of their peers. Support with the creation of a Personal Care Plan can be obtained from the County Physical Disability Support Service (list of Useful Contacts and Resources p)**

The Care Plan should cover

- Procedures
- Facilities
- Resources and equipment
- Staffing
- Training
- Curriculum specific needs
- Educational visits
- Arrangements for the review and monitoring of the Care Plan

Staffing levels need to be considered carefully. There needs to be a balance between maintaining privacy and dignity of the child/young person and protection both for them and staff involved.

Preparation should include discussion with parents, confirmation of arrangements and plans for monitoring and review. The personal care plan should make reference to:

- Signed consent from parents/carers to allow support
- Clear arrangements for staffing and access to facilities
- Specialist advice, training or resources required
- Record keeping such as personal care diary and/or reward system if appropriate.
- Child protection or social care issues
- Liaison and review with parents and outside agencies

When setting up a care plan, the child or young person and his/her parents/carers should feel comfortable with the staff members who are providing the personal care. Gender issues, religious and cultural values should always be taken into account. It is important to adopt consistent approaches at home and school

The SENCo for the setting/school should be aware of the personal care plan and link this intervention with other monitoring completed under Code of Practice procedures.

There are a number of other issues which it is helpful for staff to consider and agree with parents/carers prior to the child starting at the setting. These include:

**Clothing:** Parents should be asked to provide clothing that is easy to manage. Clothing with elasticated waists and no zips or buttons is most helpful. Whenever possible it is better to support the child with appropriate clothing rather than relying on nappies or training pants. Parents should also be asked to provide plenty of changes of clothing. Setting/school should provide spare clothes in an emergency, but it is always better for a child or young person to wear his/her own clothes. Finally, the setting should agree with parents/carers what will happen to wet or soiled clothing.

**Routines:** Parents should be asked to ensure that the child is changed or taken to the toilet at the latest possible time before leaving home. In school, prompting may be necessary as a

reminder. If a member of staff is required to support personal care, ensure arrangements are confirmed for cover if the member of staff concerned is unavailable. Consider the possibility of shared responsibility for supporting personal care needs e.g. job share to enable flexible cover in the event of absence. Careful observations may identify when the pupil requires personal support. Ensure that the routine established in setting/school is strictly maintained from the start and try hard to avoid accidents. Reminders to use the toilet should be discreet and appropriate and staff should make use of signs, pictures or code words to facilitate understanding.

**Accidents:** Children and Young People may be anxious but usually respond to praise, encouragement and confidence building. It is important to promote self-esteem in other areas of learning. Ensure that personal care needs are provided swiftly, appropriately, sympathetically and in a calm, low-key way.

### **Children and Young People's Views**

It is essential that Children and Young People's views and preferences are taken into consideration in management of personal care needs. This includes consideration of non-verbal communication and visual cues. Staff involved in meeting Children and Young People's personal care needs should endeavour to:

- Get to know the child or young person beforehand as appropriate e.g. systems of communication
- Have a knowledge of and respect for any cultural or religious sensitivities related to aspects of personal care
- Speak to the child or young person by name (using age-appropriate language) and ensure that they are aware of the procedures involved

### **Conclusions**

Staffordshire County Council is committed to inclusive practice in all its settings and schools. There is an expectation that settings, schools and parents will work together to support Children and Young People with personal care needs without impact on their access to education. Good

practice recommendations have been highlighted within this guidance to protect the well being of Children and Young People, parents and staff and promote consistent best practice.

## Useful Contacts

Physical Disability Support Service ([charlie.rivers@staffordshire.gov.uk](mailto:charlie.rivers@staffordshire.gov.uk))

Moving and Handling Teams ([charlie.rivers@staffordshire.gov.uk](mailto:charlie.rivers@staffordshire.gov.uk))

Child Protection ([chris.bowering@staffordshire.gov.uk](mailto:chris.bowering@staffordshire.gov.uk))

Adapted by the Staffordshire Physical Disability Support Service from the Personal Care and Dignity - Toileting Policy prepared by the Staffordshire CLL Personal Care Working Group (November 2008)

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