## **HURST GREEN PRIMARY SCHOOL**



# **Personal Care Policy**

Policy for the attention of			
Audience	Key Audience	Optional Audience	Additional/Notes
Senior Leadership Team			
Teachers	$\sqrt{}$		
Teaching Assistants	$\sqrt{}$		
Administrative Staff	$\sqrt{}$		
Lunchtime Supervisors	$\sqrt{}$		
Site Manager			
Cleaners			
Governors			
Parents			
Website			
Local Authority		V	

Responsibility of	School Improvement
Review frequency	Annually
Previous versions	22 October 2018; 21 October 2019; 2
	November 2020; 18 October 2021, 17 October
	2022; 9 October 2023
This version agreed	21 October 2024
Next review date	Autumn 2025

The pastoral care of our children is central to the aims, ethos and teaching at Hurst Green Primary School and we are committed to developing positive and caring attitudes in our children. It is our intention to develop independence in each child, however there will be occasions when help is required. The principles and procedures apply to everyone involved in the personal care of children.

'Personal care may be defined as an activity required to meet the personal care needs of each individual child in partnership with the parent, carer and the child.' (9.26, ACPC Regional Policy and Procedures). In school this may occur on a regular basis or during a one-off incident.

Hurst Green Primary School is committed to ensuring that all staff responsible for the personal care of children will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all our children with respect when personal care is given. No child should be attended to in a way that causes distress or pain and adults and staff must be sensitive to each child's individual needs.

Personal care is any care which involves one of the following:

- 1. Assisting a child to change his/her clothes
- 2. Changing or washing a child who has soiled him / herself
- 3. Assisting with toileting issues
- 4. Supervising a child involved in personal self-care
- 5. Providing first aid assistance
- 6. Providing comfort to an upset or distressed child
- 7. Feeding a child
- 8. Providing oral care to a child
- 9. Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided. \*
- \* In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. injection of insulin). Parents have the responsibility to advise the school of any known personal care needs relating to their child.

## **Principles of Personal Care**

The following are the fundamental principles of personal care upon which our policy guidelines are based: (Rights Respecting School)

- Every child has a 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:
- All children have the right to be involved and consulted in their own personal care to the best of their abilities;
- All children have the right to express their views on their own personal care and to have their views taken into account; and
- Every child has the right to have levels of personal care that are appropriate and consistent.

## Assisting a child to change his / her clothes

This is more common in our Reception classes. On occasions an individual child may require some assistance with changing if, for example, he / she has an accident at the toilet, gets wet outside, or has vomit on his / her clothes etc.

Staff will always encourage children to attempt undressing and dressing unaided. However, if assistance is required this will be given.

Staff will always ensure that they have a colleague in attendance when supporting dressing/undressing and will always give the child the opportunity to change in private, unless the child is in such distress that it is not possible to do so. If staff are concerned in any way parents/ carers will be called and asked to come and assist their child. Parents/ carers will also be informed if the child becomes distressed.

## Changing a child who has soiled him/herself

For children, who due to a medical or developmental need either frequently
wets and/or soil or wears pull ups, an individual intimate care plan will be
drawn up in consultation with the parent/ carer to agree the procedures staff
will follow. Staff will record these on our Medical Tracker system and an email
notification will be sent to parents detailing the care provided.

Where a child not on an intimate care plan soils him/herself in school a professional judgement has to be made whether it is appropriate to change the child in school, or request the parent/carer to collect the child for changing. In either circumstance the child's needs are paramount and he/she should be comforted and reassured throughout. The following guidelines outline our procedures but we will also seek to make age-appropriate responses.

- The child will be given the opportunity to change his / her underwear in private and carry out this process themselves if capable.
- School will have a supply of wipes, clean underwear and spare uniform for this purpose. (A supply of clean underwear and spare uniforms are available in the cupboard in the Accessible Toilet and EYFS and Year 1 also have their own supplies).
- If a child is not able to complete this task unaided, school staff will attempt to contact the emergency contact to inform them of the situation.
- If the emergency contact is able to come to school within an appropriate time frame, the child will be accompanied and supported by a staff member until they arrive. This avoids any further distress and preserves dignity.
- If the emergency contact cannot attend, school will seek verbal permission for staff to change the child. If none of the contacts can be reached the Headteacher is to be consulted and the decision taken on the basis of locoparentis and our duty of care to meet the needs of the child.
- The member of Staff who has assisted a pupil with unplanned personal care will record this on Medical Tracker and parents/ carers notified via an email.

 In extreme circumstances staff may need to use the shower facilities. Parent/ carer agreement will be gained before this occurs and two members of staff will be present.

## **Child Protection/Safeguarding Guidelines**

 Ensure that the action you are taking is necessary. Get verbal agreement to proceed – CARE – CONCERN – COMMUNICATE.

#### **Pastoral Care Procedures**

- Ensure the child is happy with who is changing him / her.
- Be responsive to any distress shown.

## **Basic hygiene routines**

- Always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to parents/ carers.

## Providing comfort or support to a child

There are situations and circumstances where children seek physical comfort from staff (particularly children in Reception and Key Stage 1). Where this happens, staff need to be aware that any physical contact must be kept to a minimum. When comforting a child or giving reassurance, staff must ensure that at no time can the act be considered personal. If physical contact is deemed to be appropriate, staff must provide care which is professionally appropriate to the age and context.

If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable. If a child touches a member of staff, as noted above, this should be discussed, in confidence with the Designated Safeguarding Lead and /or a Deputy Designated Safeguarding Lead in their absence.

Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided.

Our Administration of Medications Policy outlines arrangements for the management of the majority of medications in school.

Parental permission must be given before any medication is dispensed in school - this form is available from the school office.

A small number of children will have significant medical needs and in addition to the arrangements included in our Administration of Medications Policy will have an Individual 'Care Plan'. This Care Plan will be formulated by the parents, with support from the school nurse or other relevant medical teams. If required, school staff will receive appropriate training.

## **Swimming**

It is planned that some Key Stage Two children will go swimming at the new aquatics centre in the Spring Term. Before this begins, risk assessment procedures will be carried out including consideration of age and developmentally appropriate changing arrangements. Where a child has a need for a private changing option this will be arranged. Showering arrangements for children who need to shower after being in the pool for medical reasons will also be sorted. Until staff have visited the new centre further details cannot yet be provided.

## **Residential Trips**

Residential educational visits are an important part of our Year 6 school experience. Particular care is required when supervising pupils in this less formal setting.

As with Extra-Curricular Activities, although more informal relationships in such circumstances tend to be usual, staff are still guided by our Child Protection procedures and Behaviour Policy. We note that more specific Personal Care issues may arise in a Residential context.

## **Showering**

Children are entitled to respect and privacy when changing their clothes or taking a shower. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations, and to ensure that bullying, teasing or other unacceptable behaviour does not occur.

This means that staff have a set procedure they follow unless there is an emergency or pupil needs require it and the children are covered e.g. with a towel. Given the vulnerability of the situation, it is essential that when supervising children who are showering that another member of staff is present. On residential trips, we will ensure that two male members of staff supervise the boys and two female members of staff supervise the girls.

When supporting children in their cabins and/or tents (such as when settling the children to sleep or attending to night time calls) all staff are aware they must knock before entering and ask if everyone is dressed. Where possible, best practice is that two staff are present (and at least one member of staff is the same gender) however the frequency of night calls does dictate that sometimes staff need to be spread across the cabins.

## **School Responsibilities**

All members of staff at Hurst Green Primary School have been DBS checked through the local authority. Vetting includes criminal record checks and two references.

Only those members of staff who are familiar with the personal care policy are involved in the personal care of children.

The views of all relevant parties should be sought and considered to inform future arrangements. Where anticipated, intimate personal care arrangements are agreed between the school and parents and, when appropriate and possible, by the child. The intimate care policy is signed by the parent and stored electronically on Medical Tracker and paper copies in the class medical file and a copy for the parent/ carer to keep.

Some incidents, such as wetting, can't be anticipated and staff would deal with these types of incidents as detailed in previous sections of this policy. In these situations, parents would be informed after the event.

If a staff member has concerns about a colleague's personal care practice he or she must report this to the Designated Safeguarding Lead, the SENDCO, the Headteacher or the Deputy Headteacher.

#### **Guidelines for Good Practice**

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.

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.

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 both 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, where possible, give choices. 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. Hands on care should not be carried out by a member of staff working alone with a child.

- **3. Make sure practice in personal care is consistent**. As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
- **4. 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.
- **5. Promote positive self-esteem and body image.** Confident, self-assured children who feel their bodies belong 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 personal care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.
- **6.** If you have any concerns you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to the Designated Safeguarding Lead or a Deputy Designated Safeguarding Lead in their absence.
- **7. Have another adult present if the personal care is hands on** Where the personal care requires a staff member to touch the child then another member of staff must be present. Where the staff member can verbally coach the child through completing the personal care themselves one member of staff will be sufficient.

If a child is accidentally hurt during personal care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the Designated Safeguarding Lead or a Deputy Designated Safeguarding Lead in their absence. Report and record any unusual emotional or behavioural response by the child. Parents/carers will be informed via a telephone call and a written record will be made.

## **Working with Children of the Opposite Sex**

There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for personal care but the current ratio of female to male staff means that assistance will more often be given by a woman. The personal care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- When personal care is being carried out, all children have the right to dignity and privacy, i.e. they should be appropriately covered, in a designated personal care space;
- If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance;
- Report any concerns to the Designated Safeguarding Lead, or a Deputy Designated Safeguarding Lead in their absence, and make a written record;
- Parents must be informed about any concerns.