

## Physical and neurological impairment (PNI)

### Good practice guidance for intimate care

**Intimate care** encompasses areas of personal care, which most people usually carry out for themselves. Some people may be unable to do so because of an impairment or disability.

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

The Equality Act, 2010 provides protection for anyone who has a physical, sensory or mental impairment that has an adverse effect on his/her ability to carry out normal day to day activities. It is not acceptable to refuse admission to children who are delayed in achieving continence. Education providers have an obligation to meet the needs of children with delayed personal development.

### Planning for Intimate Care

You should draw up a Daily Health Care plan detailing the child's care requirements and how these will be met. When devising your plan:

- Consider the child's welfare, autonomy, dignity, privacy and respect at all times.
- Ensure an appropriate level of staffing.
- Ensure appropriate equipment is available in an accessible environment – do reasonable adjustments need to be made? Consider access to storage for resources such as gloves and wipes.
- Liaise with healthcare professionals and parents for training and when devising your plan. You can find Daily Care Plan templates [here](#).
- Consider health and safety issues (such as disposal of soiled waste).
- Embed child protection procedures in your plan (see below under Legal requirements).
- Encouraging child or young person to participate as fully as they are able to develop their independence.
- Incorporate the wishes and views of the child where possible
- Consideration of contingency plans for staff absence/school trips etc.

### Common difficulties and concerns

#### Access to the toilet, bathroom and changing facilities

*"We already have an accessible bathroom so it should be fine"*

Not every accessible bathroom has the space and/or equipment required to meet a particular pupil's needs. You may need to discuss this with the Specialist Teacher (PNI) and Occupational Therapist.

*"The current accessible bathroom is not large enough for a changing bench and hoist, what do I do?"*

Speak to the Specialist Teacher (PNI) and Occupational Therapist, who will jointly assess the pupil's needs and help you to access the appropriate equipment. Where possible, bathroom adaptations can be considered by the local authority if deemed necessary.



Image: Wikipedia.co.uk

## Balancing educational, toileting and social needs

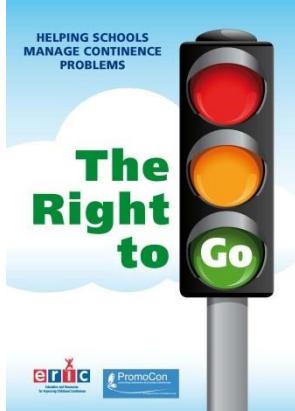
*"The pupil is missing the lesson introduction every day because it just takes a long time in the toilet. We don't want him to miss out on break time, what can be done?"*

It can feel like a juggling act to ensure that a pupil has the opportunity to meet with peers at break time and access the toilet. Where pupils take in excess of 10 minutes to use the toilet (due to use of equipment and/or the ability to pass urine/have a bowel movement) there will always be an element of a compromise on their lesson time. It is vital to maintain a balance between loss of social and lesson time. Where possible, look to be flexible with the timing of using the bathroom and encourage the rehearsal, practise, and revisiting of class activities to maximise time away from the classroom. Many learning support assistants report that practising spellings and/or times tables in the bathroom is an excellent use of time! Talk with the PNI Specialist Teacher if you have a specific concern.

## Waste disposal

*"The pupil is doubly incontinent and wears pads (nappies). How do we dispose of these?"*

Pads and nappies need to be double wrapped, but you do not need a special bin for disposal. See: [The Right To Go](#)



## Product supply and storage



Image:

A1disposables.co.uk

*"I have been told that my staff need gloves, aprons, and anti-bacterial spray, who supplies these?"*

It is the expectation that schools will provide cleaning and barrier products to ensure that their staff are able to work within a clean and safe environment, thus reducing the risk of infection both to themselves, others and pupils.

*"At school we keep running out of nappies, what shall we do?"*

Most Primary Care Trusts (National Health Service) will provide nappies and pads to school-aged pupils. Parents/carers will have these delivered to home, so ask for extra to be kept in school. Some parents like to give schools a daily allowance, but we would recommend that there is an agreement to have a few extra to keep in school. This should be in the pupil's care plan and therefore agreed with parents.

## Legal requirements

*"I have heard that there should be two members of staff available to help a pupil in the toilet with intimate care needs, is this right?"* No.

There is no written legal requirement for two members of staff to be present when a child is being changed. Staff who are going to help a child with intimate care should make sure another member of staff is aware of their intentions and is in the vicinity and visible or audible. See page 14 of the ['Guidance for safer working practice for those working with children and young people in education settings', 2015](#)

***“Some of my staff are hesitant to take on an intimate care role with a pupil in school, what can I do?”***

You can talk with your school nurse and parents, to try and demystify the tasks that need to be undertaken. There is no legal obligation for current staff to take on intimate care needs, unless it is written into their job description. When advertising for new learning support staff it is necessary to be clear that the role will or may involve intimate care support.

***“Do my staff need to have a vaccination for Hepatitis B or Tetanus?”***

It is essential to follow good hygiene procedures, which should minimise the risk of infection to staff. However, it is the personal choice of staff members whether or not they have vaccinations.

Guidance on Hepatitis B can be found [here](#). Guidance on Hygiene procedures can be found [here](#).

### **Developing pupil independence**

***“The pupil I work with is very passive with his intimate care routine, how can I help him become more involved?”***

Ask the pupil what element of the routine they would be comfortable to undertake (such as; pass the wipes to the learning support assistant, open the catheter packaging, or attempt to wipe themselves, etc). This can be supported by a visual cue chart and/or linked to a reward chart and shared with parents at home.

### **Want to know more?**

Specialist Teachers (PNI) are able to offer specialist support and advice according to the needs of individual children. If the child has support from healthcare professionals such as an Occupational Therapist, Incontinence Nurse or School Nurse, advice can also be sought from them.

### **Useful Resources**

- The Right to Go: a guide to helping early years settings and schools manage continence – [ERIC](#)
- Statutory Guidance for Supporting Pupils with Medical Conditions, DFE, [Supporting pupils at school with medical conditions - Publications - GOV.UK](#)
- Bladder and Bowel UK <http://www.bladderandboweluk.co.uk/>