



## 3. Practising inclusive education

### 3.3b Personal care support

## Introduction

Students returning to school after a spinal cord injury will need support in all elements of education – learning, social, extracurricular, career planning and more. For a child or young person to be appropriately and fully included, as is their right, schools should recognise and offer this multi-faceted need for support.

This section covers considerations for schools relating to managing pupils' personal care.

## Personal care support

Many children or young people with a spinal cord injury will need to deal with others supporting them with personal care issues, including getting changed, using the loo, completing standing regimes, or eating and drinking. How a child or young person has care needs met is variable across the country. In some cases, care staff from a care agency will support needs. In other cases – and particularly for younger children – parents fill this function.

“**When my son started nursery it was quite traumatic for me because it was entrusting all his medical and physical care to somebody. He was catheterised, so it was a lot of intimate care. It was important that I met with his learning support assistant, that I spoke with her and that she could contact me at any time. The big thing was that I didn't know who it was going to be until he started, and it was nerve-racking. But communication is the key, for them to feel that they could talk to you. I went into the school to look after him, to catheterise him because although he was statemented there wasn't someone in place who could do that, they hadn't employed someone who could do his catheter every two to three hours. So I had to go there for the first term. I had to get them to have them trained so that they could catheterise.**

Janet, mum of son age 17

At schools, it will often be the TA who performs any required intimate care though sometimes it may be a personal assistant (PA). Schools hiring TA's should ensure this is included in their job description as school staff are not required to support personal care if it is not explicit in their job description (though they can volunteer to support). The following considerations relate to managing personal care in schools:

- 1** The child or young person and their families should always be involved or consulted about how personal care is undertaken, what type of care plan is developed or if any change in care is planned. They should help decide who performs intimate care, how it happens and if it needs to be adjusted. Consent should be gained for any changes or alterations in personal care.
- 2** Staff should be fully trained in how to undertake any required personal or intimate care (e.g. hoist training, manual handling, involving children or young people), alongside the young person.
- 3** Any intimate care should be done as discreetly and with as much dignity as possible.
- 4** Intimate care should be done in a sensitive way that also supports the child or young person to be as independent as possible and allows them to provide self-care where appropriate.

“ It can be variable how [using LSA's and carers] works in schools but I have known it to work really well. Quite often an LSA is in the classroom and can work one-to-one with the student for their learning needs; then the carer is there to meet their spinal injury needs. The carer might come in and help assist with catheter or bowel issues or a standing regime but it works well if they then back off and allow the child to mix, for example at lunch and social time. Schools that are open minded to the issues are going to do really well. There's no magic answer. They just need to negotiate what works best in each situation for each child.

Zoe Chevalier, Clinical Psychologist, National Spinal Injuries Centre, Stoke Mandeville Hospital

“ Privacy is so important – for anyone – but especially for children and young people with a spinal cord injury. They want ordinary relationships. They want personal private time and adult carers need to be sensitive and not hover or be overly involved. Some [carers] get it spot on and realise it just needs to be negotiated. This relationship needs regular review and regular conversations with the child, parents, carers, and schools. Schools can help facilitate this – ideally on a termly basis.

Zoe Chevalier, Clinical Psychologist, National Spinal Injuries Centre, Stoke Mandeville Hospital