

# **St John's Catholic Primary School**



## **Intimate Care Policy**

**Autumn 2015**

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St John's Catholic Primary follows all advice and guidance available on the West Sussex grid for Learning, health and safety section, in addressing issues of continence. This policy confirms these arrangements and clarifies procedures in our school, and has been formulated with the support from the School Nursing Service.

### **Developing a care plan**

A planning meeting with the head teacher, Inclusion Leader, School Nurse and parents is arranged for each child with continence difficulties, in order to develop a care plan. This meeting also identifies equipment, accommodation and support requirements (see Intimate Care Plan in appendix). A subsequent meeting is arranged with the teaching team in order to communicate the intimate care plan to all concerned.

### **The hazards**

The main health and safety hazards when caring for children with continence difficulties are:

- Spread of infection
- Skin irritation
- Manual handling

Good hygiene must be used when changing or cleaning a soiled child to reduce the risk of infection.

### **Do:**

1. Ensure you have all the equipment you need and access to water before you begin to clean and change the child.
2. Wash hands thoroughly before and after each change (including after disposal of soiled garments).
3. Wear latex-free disposable gloves. Use disposable towels and consider using a hand sanitizer.
4. Clean any surface that is soiled or touched during changing with a detergent solution followed by a hypochlorite disinfectant (eg one part household bleach to one hundred parts water) and then dry the surface. (If you wish to avoid using bleach, there are less harmful products containing hypochlorite such as Milton.) Detergents and disinfectants must be labelled clearly and stored securely, in accordance with COSHH regulations. 'Use by' dates must be adhered to as the product effectiveness diminishes over time. Disposable cleaning cloths should be used.
5. Dispose of nappies/pads safely by placing them in an individual plastic bag. Put this into a bin with a second plastic liner. See link to Clinical Waste below.
6. Ensure the changing area is well away from food preparation areas.
7. Store clean garments and nappy bags etc away from changing area to prevent cross-contamination.

### **Do not:**

1. Share creams and lotions between children.
2. Use fingers to remove cream from containers. (Use a clean disposable spatula each time.)
3. Return soiled waste to parents – this raises a dignity issue for the child and may lead to careless disposal of waste in the school grounds/local area.

## **Appropriate Skincare**

Parents should supply a change of clothes, nappy bags, wipes, creams where requested and either Flash or Milton bleach cleaner. It is important to keep the child's skin clean and dry. Be aware that scented wipes can cause irritation. In some instances it may sometimes be appropriate to call parents in order to take the child home to shower thoroughly and return the child to school.

## **Manual Handling and Pupil Safety**

Adequate space and equipment is required for changing and cleaning children to avoid manual handling injury. The designated area must have sufficient space so that staff do not have to adopt hazardous postures when attending to a child.

## **Safety**

Pupils with disabilities can be extremely vulnerable. All staff involved with their intimate care need to be sensitive to the pupil's needs and also aware that some care tasks or treatments could be open to possible misinterpretation. False allegations of sexual abuse are extremely rare, but certain basic guidelines will safeguard both pupils and staff. Everyone is safer if expectations are clear and approaches are consistent as far as possible. If you cannot work within these guidelines for any reason, please talk to a member of the senior management team.

## **Dignity, Respect and Privacy**

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

Privacy is an important issue. At times intimate care is carried out by one staff member alone with one pupil. This practice is accepted unless the task requires two people. Having people working alone does increase the risk of abuse, however, this is balanced by the loss of privacy and lack of trust implied if two people have to be present, as well as the practical difficulties of releasing two members of staff and the issue of restricted space.

Male and female pupils must not use changing areas simultaneously. There may be an element of discretion in the early years class. Pupils must never share a toilet cubicle.

Cubicle doors must be at least part closed as should the door to the toileting area, unless there is a specific agreement between the parent and the school.

Staff must be aware that they are being monitored when carrying out intimate care of pupils. The physical conditions within the toilet area will make monitoring more discreet, for example, cubicle doors may be shoulder height so that adults can, if necessary, peer over the top whilst maintaining privacy for pupils. Staff should feel less vulnerable knowing that adults could enter the toilet area to observe at any time. Staff should inform a colleague before and after undertaking intimate care; the colleague should support the member of staff responsible for undertaking the intimate care by checking on the process throughout.

Each pupil that requires intimate care will have an intimate care plan which includes a monitoring element. The Lead will be responsible for monitoring the intimate care of the

pupil concerned. The Medical Support Manager, Mrs Rhoda Hatton, will co-ordinate the intimate care of pupils.

### **Involve the pupil as far as possible in their own intimate care**

Try to avoid doing things for the pupil that he/she can do alone and if a pupil is able to help, ensure that they are able to do so. If a pupil is fully dependent on you, talk with them about what you are doing and give them choices where possible.

### **Be responsive to a pupil's reactions**

Where possible check your practice by asking the pupil questions, particularly if you have not previously cared for them, for example, "Is it OK to do it this way?", "Can you wash there?". If a pupil expresses dislike of a certain person carrying out their intimate care, try and find out why and as far as possible respect their personal preferences.

### **Make sure practice in intimate care is as consistent as possible**

Teachers have responsibility for ensuring that staff have a consistent approach and this is achieved through regular monitoring and evaluation of the intimate care plan. It is important that approaches are not markedly different between different staff. Where possible there will be one named member of staff who is the lead for each child's intimate care.

### **Never do something unless you know how to do it**

If you are not certain how to do something, ask. If you need to be shown more than once, ask again. Intimate care such as administering rectal diazepam must only be carried out by staff who have been formally trained and must be witnessed. If handling or lifting is required, staff should receive the appropriate training and a risk assessment will be carried out.

### **If you are concerned, report it**

During the intimate care of a pupil, it may be that you accidentally hurt him/her, or the pupil seems unusually sore or tender in the genital area, or appears to be sexually aroused by your actions, or misunderstands or misinterprets something, or has a very emotional reaction without apparent cause. Report any such incident immediately to the Inclusion Leader, S Trikilis, or one of the two other members of staff responsible for Safeguarding, the Deputy Head or Headteacher. Staff need also to request that parents should report any injuries or soreness to the teaching team responsible for their child.

### **Encourage the pupil to have a positive image of their own body**

Confident, assertive pupils who feel their body belongs to them are less vulnerable to sexual abuse. As well as basics like privacy, the approach you take to a child's intimate care can convey lots of messages to them about what their body is worth. Your attitude to the pupil's

intimate care is important. Their experience of intimate care should be relaxed and stress free and they should maintain their sense of dignity at all times.

**Policy to be reviewed in Autumn 2017**