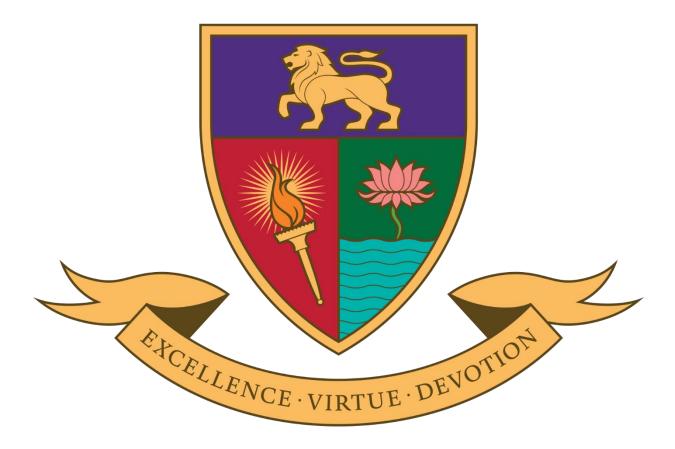
# Personal Care Policy



Agreed & Ratified: June 2022 Review date: January 2023

## **SCHOOL AIMS**

Our school community (children, staff, parents and the SSC) aim to:

- Learn and grow together within a safe, caring and happy environment;
- Continually encourage achievement in all aspects of school life.;
- Motivate all children with a broad and challenging curriculum;
- Treat everyone with honesty and respect;
- Ensure opportunities for all.

# **Personal Care Procedures**

This policy represents the agreed principles for intimate care throughout the school.

# **INTRODUCTION**

The purpose of this policy is:

- To safeguard the rights and promote the best interests of the children;
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one;
- To safeguard adults required to operate in sensitive situations;
- To raise awareness and provide a clear procedure for intimate care;
- To inform parents/carers in how intimate care is administered;
- To ensure parents/carers are consulted, where possible, in the intimate of care of their children.

# **PRINCIPLES**

It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. As far as possible, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. It is important for staff to bear in mind how they would feel in the child's position. Given the right approach, intimate care can provide opportunities to teach children about the value of their own bodies, to develop their safety skills and to enhance their self esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young person's right to privacy and dignity is maintained at all times.

#### **DEFINITION**

Intimate care is one of the following:

- Supporting a pupil with dressing/undressing;
- Providing comfort or support for a distressed pupil;
- Assisting a pupil requiring medical care, who is not able to carry this out unaided;
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell.

# SUPPORTING DRESSING/UNDRESSING

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Nursery and Reception. Staff will always encourage children to attempt undressing and dressing unaided.

## PROVIDING COMFORT OR SUPPORT

Children may seek physical comfort from staff (particularly children in Nursery and Reception). Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body, which could be regarded as intimate. If physical contact is deemed to be appropriate, staff must provide care which is suitable to the age, gender and situation of the child.

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.

## **MEDICAL PROCEDURES**

It is school policy to administer prescribed medication by the General Practioner (GP).

Any member of staff giving medicine to a pupil should check:

- The pupil's name
- Prescribed dose
- Expiry date

Medicines should be kept in a secure place not accessible to pupils but arrangements must be in place to ensure that any medication that a pupil might need in an emergency is readily available.

#### **SOILING**

# (See also appendix 1 Toilet Training)

Parents who have children in the EYFS will be requested to sign a permission form so that staff can support a child to clean and change their clothing in the event of the child soiling themselves. Of course, the staff member would encourage the child to clean themselves first using clear supportive instructions. If the soiling is severe and staff are unable to change a child, the parents/carers will be contacted.

Staff members who are known to the child will take on that responsibility for changing children. The staff member who is involved will always ask the child for permission to assist them. The child will be supported to achieve the highest level of autonomy and independence that is possible given their age and ability. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present. It is the parent's responsibility to provide nappies, disposal bags, wipes, changing mat.

The dignity of children will be preserved at all times. The child will be dressed as quick as possible at all times and never left partially clothed.

When touching a child, staff should always be aware of the possibility of invading a child's privacy and will respect the child's wishes and feelings.

Where soiling is severe children should use the wash room to shower if they are of an age to shower themselves. If the child's soiling is severe the parent will be called and they will be given the option to shower their child in the washroom rather than taking them home so that they do not miss learning time.

Staff should remain outside the toilet cubicle until the child has finished. If children need assistance because they are very young or have poor motor skills 2 members of staff should be present.

If a child needs to be cleaned, staff will make sure that:

- The child is encouraged to care for him/herself as far as possible;
- Staff will stand by the door way and allow children to change themselves if possible;
- Protective gloves are to be worn by the supervising adults;
- The procedure is discussed in a friendly and reassuring way with the child throughout the process;
- Physical contact is kept to the minimum to carry out the necessary cleaning;
- Privacy is given appropriate to the child's age and the situation;
- All spills of vomit, blood or excrement are wiped up and placed in the medical waste bin bag (these bags are yellow and available from the medical room;
- Any soiling, that can be, is flushed down the toilet e.g: excrement;
- Soiled clothing is put in a plastic bag, unwashed, and sent home with the child. Parents are informed that the child has these items in their school bag so that they can be washed at home as soon as possible.

#### **HYGIENE**

All staff must be familiar with normal precautions for avoiding infection, must follow basic hygiene procedures and have access to protective, disposable gloves, disposable aprons and protective eyewear.

#### PROTECTION FOR STAFF

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk. These should include:

- Gaining a verbal agreement from another member of staff that the action being taken is necessary;
- Taking careful consideration to each child's situation to determine how many carers might need to be present when a child is toileted.
- Being aware of and responsive to the child's reactions/needs and feelings.

## SAFEGUARDS FOR CHILDREN

All staff at Avanti Fields School are DBS (Disclosure Barring Services) checked on application and cannot undertake tasks within school until all checks are completed satisfactorily. The DBS's aim is to help organisations in the public, private and voluntary sectors by identifying candidates who may be unsuitable to work with children or other vulnerable members of society. Personal and professional references are also required and unsuitable candidates are not permitted to work within the school. All staff receive safeguarding training as part of their induction and refresher training takes place throughout the year.

It is not appropriate for volunteers to carry out intimate care procedures.

**Toilet Training Policy** 

#### Statement

The SSC and staff at Avanti Fields School recognise that for developmental and other specific reasons children may not be toilet trained when they start school. For some children this may be extended for some time due to medical reasons.

We would encourage all parents to toilet train their children before starting Nursery. We recognise that becoming toilet trained is an important part of a young child's development. The staff and SSC recognise that this aspect of a child's development is part and parcel of their education at its early stages.

Avanti aims to have a positive approach to intimate care (i.e. when a child needs to be changed/cleaned) which ensures a safe and comfortable experience for the child.

## The Policy

When appropriate, staff within the Early Years Foundation Stage will assist parents and carers to toilet train their children by directing parents to supportive groups, distributing leaflets, offering guidance and by asking the school nurse/Early Years specialists for support etc.

Good liaison with parents and a consistent approach are vital. It is important to work together with other professionals. Parents/carers of children in the Nursery and Reception can be referred to their Health Visitor/School Nurse.

A care plan will be agreed and signed by the parents/carers and the school staff specifying specific arrangements that have been put in place for children with particular medical or developmental needs.

Staff have been instructed on the importance of Health and Safety, with particular regard to disposal of hazardous waste and communicable diseases. (See Appendix 2)

Attending to the needs of children who require toilet training is part of the early education of the child and not a child protection issue. Indeed leaving a child in dirty clothing could be considered to be a child protection issue in itself.

In the best interests of the child and staff involved the following protocol will be followed:

- Staff will encourage children to be independent and to manage their own needs whenever possible;
- Staff will always notify another member of staff (as confidentially as possible) when they are taking a child to the toilet;
- Whilst respecting the privacy of the child staff members will be as 'visible' as possible;
- Children who need assistance with their toileting needs will be taken to the designated area, which could be the main wash room or the Nursery/Reception toilet area. In other parts of the school this may be the closest toilet. If necessary there is a shower room (situated on the ground floor in the primary wing)

As a basic principle, children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can.

Only Avanti Fields staff will provide such intimate care. Training will be provided for staff.

All staff have a responsibility for children's welfare. A log of who is changed, when and by whom, with times and dates will be kept. This will be checked to ensure that no single person always carries out this duty unless employed specifically for that purpose. After a child has been changed information will be given to the parents confidentially and sensitively.

## Hygiene & Toilet Training

# Hygiene and Bodily Fluids

The risks of dealing with spillages of body fluids are small. Nevertheless the maintenance of good hygiene standards is important. Assume body fluids (blood, vomit, urine etc.) may be infectious and always follow hygiene procedures.

# **Universal Precautions**

- Hand washing is the most simple and effective method for preventing the spread of infections.
- Hands must be washed using soap under warm running water, rinsing carefully and thoroughly drying them on disposable paper towels. Hand sanitizer is availbale throughout the school for use.
- Shared towels must not be used.

#### Hands should be washed:

- Before and after each work shift and at regular intervals throughout the day;
- Before putting on, and after removing, protective clothing;
- Before and after physical contact with individual children;
- After handling contaminated items such as soiled clothing & nappies/pull ups;
- After using the toilet;
- After blowing your nose or covering a sneeze;
- Whenever hands become visibly soiled;
- Before and after eating, drinking or handling food.

## Protective Clothing

## **Aprons**

- Disposable plastic aprons should be used for all activities that may result in clothing being soiled with bodily fluids such as excreta;
- The apron should be thrown away and hands washed before dealing with a different child or any other activity;
- If heavy-duty protective clothing is worn, these should be washed and dried regularly, following the manufacturers instructions to avoid contamination.

# **Gloves**

- Disposable gloves are only required where hands are in contact with body fluids, or for other health and safety reasons. For example when using a caustic cleaning agent.
- Gloves should be single use, well fitting and made of vinyl (latex and polythene disposable gloves with seams are unsuitable).
- Hands must be washed after removing gloves, as germ counts increase while gloves are worn.

#### Skin

Cuts or abrasions in any area of exposed skin should be covered with a waterproof plaster dressing.

# **Spills of Body Fluids**

• Splashes into eyes or mouth should be rinsed freely with clean cold water.

- Body fluid spillages should be cleaned using whatever absorbent materials are available e.g toilet paper, paper towels. Disposable gloves and aprons should be worn when cleaning such spills.
- Skin that has been in contact with another person's bodily fluid should be washed with soap as soon as possible.
- Disinfect spillage area with a cleaning agent from the Site Keeper.

## **Spills on Hard Surfaces**

Large spills should be covered with disposable paper towels to soak up excess. The towels should be treated as clinical waste and discarded in yellow bags. The remaining spillage should be treated as follows:

- Urine spillage: Wash the area using hot water and a general- purpose detergent, for example liquid soap.
- Other spillage: Disinfect with a 1% solution of a disinfectant.

# **Spills On Carpets or Upholstery**

• Mop up excess fluid with a J-cloth or kitchen roll. Sponge it with cold water, and then clean with hot water and liquid soap. Dispose of the material used to soak up the fluid and treat as medical waste.

# **Spills On Clothing**

• Sponge off with warm soapy water and wash as soon as possible in the hottest wash the clothing will stand. Clothing may also be dry cleaned, if suitable.

## Cleaning agents

All spillages of blood, faeces, saliva and vomit should be cleaned up immediately, wearing personal protective equipment. Clean spillages using a product which combines detergent and disinfectant, and ensure it is effective against both bacteria and viruses. The school uses Sanitaire which absorbs bodily fluids, this enables the bodily fluid to be more easily cleaned up.

### **COSHH Assessments**

COSHH Assessment's must be carried out for all cleaning agents (information will be included with the School's Health and Safety Policy or contact the School's Health and Safety Lead). All staff who are required to use and store cleaning agents are to be informed of the findings of the COSHH assessment.

Disinfecting products are irritating to the skin/eyes and can be harmful if swallowed. Contact with acid can liberate chlorine gas as can dilution in hot water. Provided instructions from the COSHH assessments and the control measures below are adhered to, the risk will be adequately controlled.

- Store in original containers, upright in a cool place not accessible to children.
- Ensure they cannot come into contact with acids.
- Wear gloves.
- Wear eye protection if risk of undiluted liquid splashing eye.
- Wash hands after use.

# **Changing pullups**

- Hygienic practices involving pull-ups are vital to reduce the risk of infection.
- Pull ups should be placed in a yellow medical waste bag
- Thorough hand washing, using soap and warm water/sanitizer, must follow any contact with soiled pull-ups.

# **Disposal**

- All waste contaminated body fluids (disposable gloves and aprons, together with contaminated absorbent material and dressings) should be treated as clinical waste and placed into yellow bags. The bag must be emptied at the end of the day; if an alternative to a yellow bag is used then this must be put into a yellow bag at the end of the day.
- Yellow bags are only to be two thirds full. These should be clearly marked 'clinical
  waste bio-hazard for incineration' and the bag should be sealed, the point of
  origin marked, and stored in a lockable, vermin-proof enclosure for collection, by
  the Public Protection Service.
- Clinical waste is incinerated and therefore more expensive to dispose of than non-clinical/household waste. The Public Protection Service will be able to advise on the cost of the collection service.

# **Accidental Spillage Of Clinical Waste**

- Service areas should have a local procedure for dealing with an accidental spillage; contact the Public Protection Service for advice. This procedure must include staff training.
- There must be proper cleansing of the affected area, tools or protective clothing used.

 $Personal\ care\ policy\ log-\ \underline{https://forms.gle/er8WnRrNZAXmwxnX6}$ 

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| were extremely wet. They did this independently/ support by an adult(s).  |  |  |
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