

# The British School

Working together for our children's future



## Intimate Personal Care And Clinical Tasks

<b>Based on Gloucestershire County Council's Policy of the same name</b>	
<b>Review Date</b> <b>Next review</b>	<b>April 2024</b> <b>April 2026</b>

## 1. Policy Statement

1.1 The School is committed to providing personal care that has been recognised as an assessed need and indicated in the care plan, in ways that:

- Maintain the dignity of the individual
- Are sensitive to their individual needs and preferences
- Maximise safety and comfort
- Protect against intrusion and abuse
- Respect the person's right to give or withdraw their consent
- Encourage the individual to care for themselves as much as they are able

1.2 These principles of care also apply to the activities known as 'Clinical Tasks' which require additional training by either the health professional who is delegating the task, or school-arranged training. Staff can refuse to perform a task if they do not feel competent to undertake it.

## 2. Definitions

2.1 Intimate personal care is hands-on physical care in personal hygiene, and/or physical presence or observation during such activities. It includes.

- Body bathing other than to arms, face and legs below the knee
- Toileting, wiping and care in the genital and anal areas
- Continence care
- Placement, removal and changing of incontinence pads

- Menstrual hygiene
- Dressing and undressing

2.2 Clinical Tasks: This care falls into three main categories:

1. Acceptable care tasks such as tasks which require additional training eg. Catheter and stoma care, gastro tube feeding, diabetes care.
2. Complex care eg application of splints or care of gastrostomy (but not replacing mickey button). Treatments eg assisting with the administration of oxygen.
3. Emergency care procedure eg anaphylactic pens.
4. Emergency care procedure eg insulin

### 3. **Scope**

This policy applies to all class staff. The aim of all staff should be to promote as much independence as is reasonably possible and to respect the pupil's dignity at all times.

### 4. **Mandatory Procedures**

- 4.1 All staff will already have an enhanced DBS clearance.
- 4.2 Staff undertaking personal care and the more complex clinical tasks would always act in accordance with the policy.
- 4.3 Staff must have received training before undertaking any of the tasks detailed in the care plan.
- 4.4 Parents/guardians must give written consent before any of the detailed tasks in the care plan are undertaken since they may include very intimate, personal tasks. Staff must at all times explain what they are doing to ensure consent is 'informed' and wherever possible verbal or non-verbal consent should be obtained each time the procedure is carried out.
- 4.5 This policy must be read in conjunction with the School's rules for administering medication, safe storage of medication and all other relevant policies and procedures.

## **5. Practice Guidance – General Personal Care**

- 5.1 Pupils should be encouraged and supported to be as independent as possible in all their care tasks. Staff should never undertake tasks which pupils are able to perform themselves with sufficient time and support.
- 5.2 Where both men and women are working in class, boys and girls may be cared for by female staff. Male staff will generally assist boys only, but if necessary at any time they may assist a female staff member with a girl's personal needs.
- 5.3 Pupils should be offered as much consistency of care as possible so that they can develop a rapport with the care staff.
- 5.4 Staff must be culturally sensitive and aware of different concepts of privacy, nudity and in/appropriate touch.

## **6. Washing, Dressing, Toileting**

- 6.1 Pupils must be encouraged and supported to conduct their own self-care as much as possible. It must not be undertaken by staff because they feel it is quicker or more convenient.
- 6.2 Staff must respect the personal religious beliefs and customs of the people they are supporting with regards to cleansing as long as it is within Health and Safety guidelines and falls within the competency level to which they are trained.
- 6.3 Pupils must be offered maximum privacy within the constraints of needing to be assisted and accompanied.
- 6.4 If staff should notice any changes in an individual's appearance that may require attention eg. Rashes, blisters, sores etc these should be reported to the parents/guardians.

## **7. Nail Care**

- 7.1 Staff will not cut pupil's fingernails, unless this is required in special circumstances and arranged with the parents/guardians.

## **8. Contact Lenses and Spectacles**

- 8.1 Staff may assist pupils to clean and put on glasses.
- 8.2 Due to the risk of harm, staff must not insert contact lenses.
- 9. **Dental Care**
  - 9.1 Staff may assist pupils to cleanse their natural teeth and perform mouth care tasks as indicated in the care plan.
- 10. **Hearing Aids**
  - 10.1 Once taught the proper technique by an appropriate person, staff may assist pupils to insert and adjust hearing aids.
  - 10.2 Following training staff may clean hearing aids.
- 11. **Sanitary/Incontinence Protection**
  - 11.1 Staff may help change both sanitary towels and incontinence pads in agreement with parents/guardians.
- 12. **Category 1 - Acceptable Tasks and Category 2 - Tasks That May Be Delegated by a Health Professional**
  - 12.1 **Acceptable Care Task List**
    - Application of topical creams and ointments
    - Administration of ear drops and eye drops
    - Mouth care
    - Fitting supports, artificial limbs, or braces
    - Awareness of pressure care in relation to prevention and good practice.
    - Assisting with the cleaning of a supra-pubic catheter site
    - Emptying, changing/replacing urostomy bags
    - Emptying, changing/replacing colostomy bays
    - Emptying, changing/replacing ileostomy bags

## 12.2 Negotiable Care Task List

Any appropriate complex care is given only following advice from an appropriate health professional or parent/guardian as to how (and how frequently) this task should be performed.

Changing a two piece system or stoma.

Gastrostomy tube feeding, by inserting water through the tube before and after the feed and attaching the pump giving set to the gastrostomy.

Cleansing of gastrostomy tube sites.

### Treatments

Assist a pupil to self-administer routine, pre-measured doses of prescribed medicines via an inhaler or nebulizer as regular procedure for chronic conditions only. The health professional must regularly monitor and review this process.

Administering medication via a gastrostomy tube but only where staff have received medication training.

Fitting transcutaneous Nerve Stimulation (TENS) machines, only where their use has been approved by the GP or other appropriate health care professional.

Taking temperatures only when there are clear guidelines in any written procedure from a health professional on what action to take to alert health staff if the temperature should exceed certain pre-defined limits. Care staff should never be expected to interpret any temperature readings.

Administer oxygen to a pupil via a pre-set facility.

### Emergency Care Procedures

Administering rectal Diazepam (Stesolid) or buccal Midazolam, only as an emergency procedure and subject to current medical protocols.

Oral aspiration or excess saliva from the front of the mouth with suction equipment.

Administering anaphylactic pens, as an emergency procedure only.

This list is not exhaustive and there may be occasions when the Headteacher would be willing to negotiate to establish an individual procedure, based on the experience and willingness of staff to be trained and the nature of the task.

### 13. **Category 3 Tasks - Not Performed by Staff in any Circumstances**

13.1 Generally, any task which is invasive or requires a member of staff to make a judgement without the guidance of a health professional is unacceptable.

#### 13.2 **Unacceptable Task List**

The administration of medicines through a nebuliser for acute or emergency conditions (apart from administration of emergency medication as indicated in 12. Above).

Flushing to unblock any tube or line.

Assisting with the cleaning and replacement of tracheostomy tubes.

Assisting with syringe driver pain relief systems.

Aspiration of naso-gastric tube.

Naso-gastric tube feeding.

Oral suction, other than oral aspiration of excess saliva from the front of the mouth with suction equipment.

Suction through tracheostomy tube.

The administration of medicine via a naso-gastric tube.

### 14. **Emergency Procedures**

14.1 An emergency is defined as a life threatening situation so there will be occasions when a person's personal safety may be at risk and

where urgent intervention is required. However, whatever the circumstances, staff should not put themselves at risk.

- 14.2 If a staff member is seriously concerned about a pupil's physical condition and they have had the appropriate first hand training from a health care professional or qualified trainer in emergency procedures and feel confident of intervening in an emergency situation, they can do so only as a first aid measure, and whilst ensuring that an ambulance is called first through the 999 emergency service.

15. **Cardiac and Respiratory Resuscitation/DNR Notices**

- 15.1 In the event of a pupil appearing to suffer a cardiac or respiratory arrest, an ambulance must be called using the 999 emergency service. In addition, emergency life saving procedures should be carried out by a trained first aider, if one is available.
- 15.2 If a pupil has a DNR decision in place this is recorded in their individual pupil profile.
- 15.3 When there is no guidance and the pupil concerned is receiving palliative care, staff should still contact the GP for advice.