

HS-RA-14
Intimate Care of Pupils Within Schools Risk Assessment
 Version 1

For further info on risk assessment see: BHCC Risk Assessment Guidance

To calculate Risk Rating (R): assess the likelihood (L) of an accident occurring against the **most** likely impact (I) the accident might have, taking into account the control measures already in place. **$L \times I = R$**

Task / Activity Covered by the assessment	Intimate care of pupils within schools: Managing children with continence difficulties; nappy changing; dealing with bodily fluids <i>(Consider and add tasks/ activities that relate to intimate care offsite e.g. on trips/excursions, PE, swimming, after school clubs, transport to and from school etc.)</i>			Likelihood (L)	X	Impact (I)	
Workplace				Almost Impossible	1	Insignificant (minor injury, no time off)	
Date of Assessment		Date Assessment to be reviewed		Unlikely	2	Minor (non-permanent injury, up to 7 days off)	
Person Completing		Manager/ Head teacher		Possible	3	Moderate ((injury causing more than 7 days off)	
Staff involved in assessment				Likely	4	Major ((death or serious injury)	
				Almost Certain	5	Catastrophic (multiple deaths)	
				Low =1-3	Moderate = 4-7	Significant = 8-14	High = 15-25

What are the significant, foreseeable, hazards? <i>(the dangers that can cause harm)</i>	Who is at Risk?	Current control measures <i>(What is already in place/done)</i>	Risk Rating			What additional controls can be put in place to reduce the risk further?	Revised Risk Rating			Sign as done
			L	I	R		L	I	R	
1. Trips / slips / fall hazards created from bodily fluids	Staff Pupil(s) People in vicinity	<ul style="list-style-type: none"> -Spill kit available for dealing with bodily fluids -Spillages are dealt with promptly and appropriately. -Staff are aware of who is responsible for clearing/ cleaning spillages -Staff follow safe cleaning procedure to minimise infection risk. <ul style="list-style-type: none"> - Wet floor signs in use - Floors kept in good condition and regularly inspected 								

2.	Health risks and infection control including health risks from bites	Staff Pupil	<ul style="list-style-type: none"> • Disposable apron and gloves provided and used by staff. • Good hygiene practice observed (washing exposed skin, etc). • Staff aware of health/ infection risks associated with children concerned as identified in intimate care plan. <ul style="list-style-type: none"> ○ Arrangements in place to ensure there is a supply of clean clothing. • Waste is disposed of appropriately [disposal of waste for one child can be in the usual bins using appropriate nappy sacks (considered 'municipal waste',) where the school create more waste than this special arrangements will need to be in place]. • Wet nappies/pad can be bagged in a single bag, soiled nappies/ pads require double bagging. • Area where pad/ nappy changes take place are cleaned routinely. <p>Bites</p> <ul style="list-style-type: none"> • Individual intimate care plan in place • Staff wear long sleeves/ gauntlet style gloves under disposable gloves • Staff considered at significant risk from bites have been offered Hep B Vaccines • Pupil has sensory chew toy 								
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3.	Manual Handling – consider weight, size, shape of pupil; staff capability to undertake handling task,	Staff Pupil	<ul style="list-style-type: none"> • Intimate care plan includes any risks associated with physical handling of the child • Staff trained in safe lifting techniques • Hoists in place for transferring child/ young person. Hoists are maintained and tested [add details here] and staff are trained in their safe use. • Changing area is ergonomically designed to reduce the need for staff to stretch, reach, stoop etc 								
4	Inadequate changing facility – too hot or cold; inappropriate location; inadequate lighting etc	Staff Pupil	<ul style="list-style-type: none"> • Dedicated space/ area for changing pupils • Area is cleaned and disinfected regularly and immediately before and after use • Suitable changing materials and equipment provided and maintained in good condition • Sufficient lighting to carry out the task, located with consideration of the pupil to prevent glare • Department of Health recommends that one extended cubicle with a washbasin should be provided in each school for children with disabilities. • Department for Health guidance is that whenever possible it is recommended that: <ul style="list-style-type: none"> ○ Mobile children are changed standing up - if this is not possible the next best alternative is to change a child on a purpose built 								

			<p>changing bed (these are available as portable or fixed and can be lowered and raised safely)</p> <ul style="list-style-type: none"> ○ children in FS1 & FS2 may be changed on a mat on a suitable surface if it is not possible to change standing up/ on a changing bed. ○ If facilities described above are not available, then children in FS1 and FS2 may be changed on a changing mat on the floor. ○ Children in year 1 and above should only be changed either on a changing bed or in a toilet cubicle standing up. 							
5.	Child Protection – risk to pupil; allegations of abuse against staff	Staff Pupil	<ul style="list-style-type: none"> • Staff trained and aware of good practice. • Staff checked via Vetting & Barring Scheme • Liason with parents to ensure they understand procedure using intimate care plan. • School has Safeguarding/ Child Protection Policy which staff will follow. • There is an accepted procedure for intimate care which staff follow: <ul style="list-style-type: none"> • child spoken to personally by name so that s/he is aware of being the focus of the activity • An explanations of what is happening is given in a straightforward and reassuring way • The child is prepared for and able to anticipate events while 							

			<p>demonstrating respect for his/her body e.g. by giving them a strong sensory clue such as using a sponge or pad to signal an intention to wash or change</p> <ul style="list-style-type: none"> • A sponge or flannel is always used when cleaning and where possible the child is encouraged to attempt to wash private parts of the body him/herself • Respect a child's preference for a particular carer and sequence of care • Records are kept which note responses to intimate care and changes in behaviour • Facilities which afford privacy and modesty are provided e.g. separate toileting and changing for boys and girls or at least adequate screening; bathing/ changing one child at a time 							
6.	Equipment failure or inadequate materials	Staff Pupil	<ul style="list-style-type: none"> • Equipment checked and maintained by a competent person. • Regular checks by staff including immediately before use • Faults reported. • Equipment for assisting with toileting/ pad changes will include (but is not limited to): hot running water and soap (antibacterial where possible) toilet rolls, antiseptic cleanser Milton/sterilising fluid, bowl/ 							

			<p>bucket, paper towels/cloths disposable aprons and gloves</p> <p>nappy bags/sacks, cleaning equipment, bin, a supply of spare nappies and wipes (provided by the child's parent/ carer), spare clothes (where possible each child to have their own spare clothes to change into for physical and emotional comfort)</p> <p>changing table (raised)/ changing mat/ electric changing table/ bed</p>						
7.	<p>Individual pupil risks:</p> <p>-Does communication or comprehension present a risk?</p> <p>Are there any medical considerations including pain or discomfort; fragility, head control, epilepsy etc?</p> <p>-Are there any allergies to consider?</p> <p>-Does the pupil have challenging or risky behaviour?</p>	<p>Staff</p> <p>Pupil</p>	<ul style="list-style-type: none"> Intimate care plan outlines specific needs of child. Staff follow care requirements as set out in the plan. 						
8.	<p>Falls from changing tables/ beds</p>	<p>Pupil</p>	<ul style="list-style-type: none"> Only purpose built changing tables/ beds to be used Pupil/ young person is never left unsupervised on the table/bed The safe weight limits of the changing table will be followed Restraint straps will be used where provided Wherever possible the child will climb onto the changing bed themselves using appropriate/ built in steps. 						