

Inspire Partnership Academy Trust

Intimate Care Policy



Introduction

At West Thornton Primary School we recognise that all children have different rates of development and differing needs during their time at school. Most children achieve continence before starting full-time school. With the development of more early years' education and drive towards inclusion, however there are many children in mainstream education who are not fully independent. Some children remain dependent on long term support for personal care, while others progress slowly towards independence.

It is our intention to develop independence in each child; however there will be occasions when additional help is required. Our Intimate Care Policy has been developed to safeguard children and staff. It is one of a range of specific policies that contribute to our provision of pastoral care. The principles and procedures apply to everyone involved in the intimate care of children. Children are generally more vulnerable than adults, and staff involved with any aspect of pastoral care need to be sensitive to their individual needs. Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities include:

- Feeding
- Oral care
- Washing
- Changing clothes
- Toileting
- First aid and medical assistance
- The supervision of a child involved in intimate self-care

Parents have a responsibility to advise the school of any known intimate care needs relating to their child.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

Every child has the right to be safe

- Every child has the right to personal privacy
- Every child has the right to be valued as an individual
- Every child has the right to be treated with dignity and respect
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities
- All children have the right to express their views on their own intimate care and to have such views taken into account.
- Every child has the right to have levels of intimate care that are appropriate and consistent.

School Responsibilities

1 Introduction

- 1.1 Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas. In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam).
- 1.2 The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of safeguarding issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.
- 1.3 West Thornton Primary School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. West Thornton Primary School recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

2 Best Practice

- 2.1 The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.
- 2.2 Staff who provide intimate care are trained to do so (including Safeguarding and Health and Safety training in lifting and moving) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.
- 2.3 Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.
- 2.4 The child 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 him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.
- 2.5 Each child's right to privacy will be respected. 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. If this is the case, the reasons should be clearly documented.
- 2.6 Wherever possible staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence for example, female staff supporting boys in a primary school, as no male staff are available.

- 2.7 If the intimate care is a regular, planned event there should be regular communication between home and school. This may be in the form of a homeschool books, or a more formal record kept in the case of pupils with specific medical needs. In this case the School Nurse will be involved and may support staff and parents by advising what sort of information should be recorded, and monitoring the provision in school.
- 2.8 Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.
- 2.9 Children who need an intimate care plan will also be scheduled to have a meeting the school SENCo team who will involve the school nurse to give parents any support and aid the child's independence.

3 Children wearing Nappies / soiling

- 3.1 Schools may have concerns regarding Safeguarding issues when they are asked by parents to admit a child who is still wearing nappies. Safeguarding need not present an issue. It is good practice to provide information for parents of the policy and practice in the school. Such information should include a simple agreement form for parents to signoutlining who will be responsible, within the school, for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task right from the outset.
- 3.2 Staff will call a parent or carer on the emergency contact list to change a child after a soiling incident when they feel this is appropriate. Staff will make the child feel as comfortable as possible and reassure the child while waiting for the parent to arrive.
- 3.3 Particularly with younger children, staff may need to carry out some cleaning to maintain a child's dignity and comfort. If a child needs to be cleaned or changed, staff will do so on a voluntary basis and ensure they follow safety measures.

3.4 The school will use CPOMs to record who changes a child, how often this task is carried out. Examples of such good practice provide reassurance for parents that systems are in place and that schools have implemented procedures for staff to follow.

4 Equipment Provision

4.1 Schools often ask for clarification regarding who is responsible for providing equipment when children require changing. Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

5 **Health and Safety**

- 5.1 Some schools are concerned about health and safety issues when staff are changing children or dealing with a child who has had an accident and is bleeding.
- 5.2 Staff should always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. The bin should be emptied on a weekly basis and it can be collected as part of the usual refuse collection service as this waste is not classed as clinical waste. Staff should be aware of the school's Health and Safety policy.

6 First Aid and intimate care

- 6.1 Staff who administer first aid should ensure wherever possible that another adult or other children are present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.
- **6.2** Regular requirements of an intimate nature should be planned for. Agreements between the school/organisation, those with parental

responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

7 Child Protection

- 7.1 All staff working with children are subject to the appropriate Disclosure and Barring Checks. This includes student teachers on work placement and volunteers.
- 7.2 The normal process of changing continence or wet/soiled clothes should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the changing process to ensure that abuse does not take place. Few schools will have the staffing resources to provide two members of staff for changing and DBS checks are carried out to ensure the safety of children with staff employed in our school. If there is known risk of false allegation by a child then a single practitioner will not undertake changing.
- 7.3 A student on placement will not change a child unsupervised. Where ever possible, the same member of staff will be allowed to change named children. This reduces the risk to the child and promotes their dignity. The care plan will outline back up or contingency measures in the event that the named member of staff is not available.
- 7.4 If you have any concerns you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to designated Safeguarding lead.

8 Monitoring and Review

- **8.1** The SENCO / Inclusion Leader will take responsibility for monitoring that agreed procedures are being followed and are meeting the needs of children and families.
- **8.2** It is the SENCO / Inclusion Leader's responsibility to ensure that all practitioners follow the school policy.

- **8.3** Any concerns that staff have about child protection issues will be reported to the Designated Safeguarding Lead and subsequently the Head Teacher for further referral if appropriate.
- **8.4** This policy runs alongside other school policies, particularly Safeguarding Children, SEND, and Health and Safety.

Ensure any incidents where a child has received intimate care are reported to parents.

INTIMATE CARE POLICY PARENTAL AGREEMENT FORM

- 1. Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas.
- 2. The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of safeguarding issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.
- 3. West Thornton Primary School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. West Thornton Primary School recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.
- **4.** The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.
- 5. The child 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 him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.
- **6.** Each child's right to privacy will be respected. 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.
- **7.** Wherever possible staff should only care intimately for an individual of the same sex.
- **8.** West Thornton Primary School has introduced Intimate Care Record which notes who changes a child, how often this task is carried out and the time they left/returned to the classroom following this task.
- **9.** Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.
- 10. Staff should always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste.
- 11. Staff who administer first aid should ensure wherever possible that another adult is present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Intimate Care Permission Form

P	Pupil's Personal Details Child's Full Name:			
C				
С	Oate of Birth:	/	/	Parent/Carer Name:
tak Yed if p	en to have then ars staff are expe referred, the sch	n chang rienced lool cal ay. Wes	ged (and d and tra n contac st Thornto	while they are in school, it is important that measures are d if necessary cleaned) as quickly as possible. Our Early ained at carrying out this task if you wish them to do so or, ct you or your emergency contact who will be asked to on Primary School has an Intimate Care Policy which is
Ple	ase fill out the pe	ermissio	n slip bel	low stating your preference.
Υοι	urs sincerely,			
Mrs	D Callaghan			
De	signated Safegue	arding I	Lead/Ass	sociate Headteacher
Na	me of Child			Class
	ase tick as appr			
			•	hild to be changed and cleaned by Early Years' staff if my selves while in the care of West Thornton Primary School.
	*I <u>do not</u> gi		nsent for	my child to be changed and cleaned if they wet/soil
	be cle canno	eaned of be c	and cha	or my emergency contact and I will organise for my child to anged. I understand that if I (or the emergency contact) d the staff will act appropriately and may need to come ysical contact in order to aid the child.
Sig	nature of Parent	/Carer		Date