

# Part of the



# INTIMATE CARE POLICY

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#### Definition

Intimate care refers to any care, which involves toileting, washing, changing, touching or carrying out an intimate procedure to children's intimate personal areas. It also includes supervision of pupils involved in intimate self-care.

#### Introduction

At St John's CE Academy, we recognise that there is a need to treat all pupils, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given. The academy 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. We recognise 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

#### **Aims**

The purpose of this policy is to:

- Raise awareness and provide a clear procedure for intimate care.
- Ensure that the child's welfare and dignity is of paramount importance and his/her
  experience of intimate and personal care should be a positive one. It is essential that
  every pupil is treated as an individual and that care is given gently and sensitively: no
  pupil should be attended to in a way that causes distress or pain and staff will always ask
  for the child's consent before administering any intimate care.
- Work in partnership with parents/carers to inform them how intimate care is administered, ensure they are consulted in the intimate of care of their children and provide assurance that staff are trained in this and that the needs of their children are taken into account.
- Ensure the religious views, beliefs and cultural values of children and their families are taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- Safeguard children in sensitive intimate care situations.
- Safeguard adults required to operate in sensitive situations.
- Ensure that staff carrying out intimate care work do so within guidelines (see Health and Safety, Manual Handling, Safeguarding policies).
- Ensure that accurate records and logs are kept of intimate care procedures.
- This policy applies to all staff undertaking personal care tasks within our academy but particularly to those in our Early Years Foundation Stage where the normal range of development indicates that children may not be fully toilet trained or due to parenting issues, it may be that some may not have even commenced toilet training at this age.

In addition to this, there are other vulnerable groups of children who may require support with personal care on either a short, longer term or permanent basis due to SEND and disability, medical needs or a temporary impairment. This could include:

- Children and young people with limbs in plaster.
- Children and young people needing wheelchair support.
- Children and young people with pervasive medical conditions.

#### Links with other Policies

- Safeguarding and Child Protection Policy
- Staff code of conduct and guidance on safer working practice
- Whistle Blowing Policy
- Health and safety policy and procedures
- Special Educational Needs policy
- Supporting Pupils with Medical Conditions Policy

## **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.

#### **Toilet Training**

- Our academy recognises that starting nursery or school is an important and potentially challenging time for children. It is also a time of growth and very rapid developmental change for all children. As with all developmental milestones within the Early Years Foundation Stage, there is a wide variation in the time at which children master the skills involved in being fully toilet trained. Children in our EYFS may:
- Not be toilet trained or be developmentally not ready to commence this.
- Not be toilet trained but be likely to respond quickly to a well-structured toilet training programme.
- Be at the point of being toilet trained but require reminders and encouragement.
- Be fully toilet trained at home but prone to accidents in new settings.

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- Be fully toilet trained but regress a little due to the stress and excitement of beginning nursery or school.
- Have delayed onset of toilet training in line with other developmental delays but will will master these skills during their time in the Foundation Stage.
- Have SEND and may require help (during the Foundation Stage and beyond) with all or some aspects of personal care such as washing, dressing or toileting.
- Be fully toilet trained across all settings.

Parents will be expected and encouraged to toilet train their child at home as part of their daily routine and school staff will work in close partnership with parents to support and reinforce this. Children beyond the EYFS may also experience difficulties with toileting independence and require support. These issues are likely to relate to complex health needs or a specific disability.

#### Health and Safety

Staff should follow school procedures (see Health and Safety Policy) to deal appropriately with issues of intimate care. These precautions include:

- Staff should wear fresh disposable aprons and gloves when changing a child.
- Soiled nappies/ pull ups should be securely wrapped and disposed of appropriately
- The changing area/toilet will be left clean.
- Staff will wash and dry hands thoroughly once changing is done.

#### **Facilities and Resources**

The Headteacher will ensure that there are suitable hygienic changing facilities for changing children who are in nappies and staff should ensure that an adequate supply of clean towels, spare clothes and other necessary items is always available. Wherever possible mobile children will be changed standing up. Children in our Early Years Foundation Stage will be changed on a mat on a changing table or a changing mat on the floor. Children in Year 1 and above should only be changed either in a toilet cubicle standing up or on a changing bed for SEND and immobile children.

#### The Protection of Children

- Safeguarding and Child Protection procedures will be accessible to staff and adhered to.
- Staff will always seek a child's consent before administering any intimate care procedure.
- Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.
- If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. He/She will immediately report concerns to the DSL or DDSL. A clear record of the concern will be completed and referred to Darlington Children's Services

if necessary. Parents will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm. (The child protection policy will be followed).

- If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- If a child makes an allegation against a member of staff, all necessary procedures will be followed.

## Confidentiality

The academy recognises the importance of confidentiality in relation to intimate care and in accordance with our Safeguarding Policy. Sensitive information about a child should be shared only with those who need to know, such as parents or other members of staff who are specifically involved with the child. Escorts should only be told what is necessary for them to know to keep the child safe.

Parents and children need to know that where staff have concerns about a child's well-being or safety arising from something said by the child or an observation made by the staff then the Designated Safeguarding Lead or Deputy Safeguarding Lead will be informed. This may lead to the procedures set down in the school's Safeguarding Policy being implemented. Information concerning intimate care procedures should not be recorded in a home school diary, as the diary is not a confidential document and could be accessed by people other than the parent/carer and member of staff. It is recommended that communication relating to intimate care should be made through one of the following:

- Personal contact (and recorded in a log)
- A telephone call between the relevant member of staff and the parent/carer (and recorded in a log)
- Sealed letter
- Sharing information between home and schools is important to secure the best care for pupils. However, the consent of parents and their children who are able to give such consent is needed for the Headteacher to pass on information about their child's health to school staff or other agencies.
- 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.

#### Role of Staff

- Any roles in school which may involve carrying out intimate care will have this set out in their job description.
- All staff at school who carry out intimate care will have been subject to an enhanced DBS check with a barred list check before appointment, as well as checks on their employment history.

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- Staff will receive training in the specific types of care they undertake and receive regular safeguarding training and manual handling training if necessary.
- Staff will follow health and safety and hygiene procedures.
- Staff will always seek a child's consent before administering intimate care procedures.
- Staff will ensure there is careful communication with each child who needs help with intimate care to discuss the child's needs and preferences.
- Staff will always seek a child's consent before administering intimate care procedures and ensure that the child is aware of each procedure that is carried out and the reasons for it.
- 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. This may mean, for example, giving the child responsibility for
  wiping or washing themselves or removing wet clothes. Individual Intimate Care plans will
  be drawn up for particular children, as appropriate, to suit the circumstances of the child.
- Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.
- 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 needs help with intimate care.
- Staff will record the procedure and care administered on an intimate care log (see appendix 2)
- Wherever possible two members of staff will be present when performing any intimate care procedures. If this is not possible, an individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.
- Staff members will report any concerns about changes in a child's appearance (e.g. marks, bruises, soreness) in line with school safeguarding procedures.

#### The Role of Parents/Carers

All parents/carers will be asked to sign a consent form (<u>See Appendix 1</u>) which allows staff to provide intimate care when necessary. For children whose needs are more complex or who need particular support outside of what is covered in the permission form, an intimate care plan will be created in discussion with parents (see Appendix 2).

#### **Intimate Care Plans**

Where an intimate care plan is required, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals. The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately. Subject to their age and understanding, the preferences of the child will also be considered. If there's doubt whether the child is able to make an informed choice, their parents will be consulted. The plan will be reviewed twice a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

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See <u>Appendix 2</u> for Intimate Care	Plan Template.	

# Appendix 1

# St John's CE Academy intimate Care Consent Form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE		
Name of child		
Date of birth		
Name of parent/carer		
Address		
I give permission for the school to permissio		
I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or if my child has an infection)		
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns		
I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident).  Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed).  I understand that if the school cannot reach me or my emergency contact if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.		
Parent/carer signature		
Name of parent/carer		
Relationship to child		
Date		

# Appendix 2

# St John's Church of England Academy Intimate/Personal Care Plan

Child's name:	Date :
Nominated Staff:	
Main areas of need:	
Detailed Plan:	
Resources and Equipment Needed:	
How Procedures will differ if on a school trip:	
Childs Views ( if appropriate) on what the	would like to happen:
Childs Views ( if appropriate) on what the	would like to happen :
Childs Views ( if appropriate) on what the	y would like to happen :
This plan was written by:	
This plan was written by:	n :
This plan was written by:  This plan was agreed with parents/carers of	n :
This plan was written by:  This plan was agreed with parents/carers of the child's views were sought for this plan	n :
This plan was written by:  This plan was agreed with parents/carers of the child's views were sought for this plan (if not, please state why not):	n : on :
This plan was written by:  This plan was agreed with parents/carers of the child's views were sought for this plan (if not, please state why not):  Signed	n :  On :  Date  Date  Date