

Drove Primary School

Intimate Care Policy

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| Key Document details: |
| Author: | **Bryony Bardwell and Sarah Cuming**  | Approver: | **LBG** |
| Owner: | **Bryony Bardwell**  | Version No.: |  |
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**Introduction**

Drove Primary School is committed to safeguarding and promoting the welfare of children and young people. We are committed to ensuring that all staff responsible for the intimate care of children and young people will undertake their duties in a professional manner at all times.

**Aims and Objectives**

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. Intimate care can include:

* Washing & changing – dressing/undressing (underwear)
* Toileting
* Treatments such as enemas, suppositories, enteral feeds
* Catheter and stoma care
* Supervision of a child involved in intimate self-care

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of the genitals. Examples include support with dressing and undressing (underwear), changing incontinence pads and nappies, helping someone use the toilet or washing intimate parts of the body. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

**Principles of Intimate Care**

The following are the fundamental principles upon which the Policy Guidelines are based:

* Pupils should be encouraged to act as independently as possible and to undertake as much of their own personal care as is possible and practicable
* Pupils are always entitled to respect and privacy and especially when in a state of undress, including, for example, when changing, toileting and showering
* Every child has the right to be safe
* Every child has the right to be valued as an individual
* Every child has the right to be treated with dignity and respect
* Every child has the right to be involved and consulted on their own intimate care to the best of their abilities
* Every child has the right to express their views on their own intimate care and to have such views considered
* Every child has the right to have levels of intimate care that are as consistent as possible

**The Role of Governors**

The Governing Body recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

**The Role of the Principal and SENCo**

It is the responsibility of the school principal and SENCo to implement the school’s Intimate Care Policy and to ensure that all staff (both teaching and non-teaching) are aware of the school policy; routines and procedures.

The school principal ensures that all staff receive sufficient support and development to be equipped to deal with incidents when intimate care is needed.

**The Principal and SENCo will:**

* Arrange a multi-agency meeting to discuss the personal care needs of any pupil for which it is foreseeable that they will have Intimate Care Needs prior to them attending the school
* Create, in liaison with the child and parents/carers, an Individual Healthcare Plan to ensure that reasonable adjustments are made for any child with a health condition or disability (this may not be necessary for every child who has intimate care needs)
* Ensure pupils are actively consulted about their own care plan
* Ensure all staff undertaking the intimate care of children are familiar with, and understand the Intimate Care Policy
* All staff access any required training for specific types of intimate care that they carry out
* Ensure intimate care arrangements are agreed by the school, parents/carers, and child (if appropriate)
* Ensure intimate care arrangements are recorded in the child’s personal file and consent forms/Intimate Care Plans signed by the parents/carers and child (if appropriate), these will be kept in a locked cupboard
* Ensure intimate care arrangements are reviewed at least six monthly. (The views of all relevant parties, including the child (if appropriate), should be sought, and considered to inform future arrangements)
* Ensure provision is in place for occasions when key members of staff are absent (other staff are trained as a contingency)
* Ensure termly checks of the records of the Routine Intimate Care intervention sheets are taken, ensuring that they are being completed correctly and that they correspond with the agreed care plan

**The Role of the Staff**

We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain.

Staff will work in close partnership with parents and carers to share information and provide continuity of care.

It is generally expected that most children will be toilet trained and out of nappies before they begin at school or nursery. However, it is inevitable that from time to time some children will have accidents and need to be attended to. In addition to this an increasing number of children and young people with disabilities and medical conditions are being included in mainstream settings. A significant number of these pupils require adult assistance for their personal and intimate care needs.

In order to help the children to become aware of their bodily needs and respond to them in time, those who wish to go to the toilet are always allowed to go, although they are encouraged as they progress through the school to use the toilet during break times. The school undertakes to attempt and support any training programme requested by a child’s GP and/or the school doctor or parent.

**School staff will:**

* Work in partnership with children and parents
* Make other staff aware of the task being undertaken and if required another member of staff present
* Always explain to the pupil what is happening before a care procedure begins
* Change the child, or assist them in changing themselves if they become wet, or soil themselves
* Never knowingly leave a child in wet or soiled clothing
* React to accidents in a calm and sympathetic manner
* Keep accurate records of times, staff, and any other details of incidents of intimate care
* Agree how often the child should be routinely changed if the child is in school for a full day, and designate a member of staff to change them (agree to a minimum number of changes)
* Encourage the child’s participation in toileting procedures wherever possible
* Discuss and take the appropriate action to respect the cultural practices of the family
* Contact parents/carers if the child refuses to be changed, or becomes distressed during the process
* Maintain excellent standards of hygiene when carrying out intimate care
* Consult with colleagues where any variation from agree procedure/care plan is necessary
* Record the justification for any variations to the agreed procedure/care plan and share this information with the pupil and their parents/carers
* Ensure Incidences of a one-off intimate care are recorded using the miscellaneous intimate care sheets. These forms are kept in the safeguarding files in each classroom
* Where the child is in a changing room/toilet announce their intention of entering
* Always consider the supervision needs of the pupils and only remain in the room where their needs require this
* Wear gloves while changing a child and a fresh disposable apron if required
* Not assist with intimate or personal care tasks which the pupil is able to undertake independently.

**If a child soils him/herself during school time, one member of the EYFS staff (with support from another) will help the child to:**

• To remove their soiled clothes

* Clean skin (this usually includes bottom, genitalia, legs, feet)

• Dress in the child’s own clothes or those provided by the school

• Double wrap soiled clothes in plastic bags and give to parents to take home.

At all times the member of staff pays attention to the level of distress and comfort of the child. If the child is ill the member of staff telephones the parent/carer. In the event a child is reluctant and finally refuses, the parent/carer will be contacted immediately.

Our intention is that the child will never be left in soiled clothing, but as soon as the member of staff responsible for him/her is aware of the situation, she/he will clean the child. The member of staff responsible will check the child regularly to ensure that he/she is clean before leaving to go home. The latter is because the school washing facilities are not accessible to parents.

It is intended that the child will not experience any negative disciplining, but only positive encouragement and praise for his/her endeavours to master this necessary skill. It is always our intention to avoid drawing attention to such events and positively to encourage the child in his/her efforts to gain these skills.

**Parents will:**

* Advise staff of the intimate care needs of their child
* Change their child, or assist them in going to the toilet at the latest possible time before coming to school
* Provide spare nappies/incontinence pads, wet wipes, and a change of clothes in case of accidents
* Read and sign this policy to ensure they understand the policies and procedures around intimate care
* Inform the school should their child have any marks/rashes
* Discuss with the school how often their child will need to be changed, and who will do the changing
* Work with the school to develop their child’s independence where appropriate

**Our approach to best practice for intimate care needs over and above accidents.**

• The management of all children with intimate care needs will be carefully planned.

• There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.

• Staff will be supported to adapt their practice in relation to the needs of individual children considering developmental changes such as the onset of puberty and menstruation.

• Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities

•Individual care plans will be drawn up for any pupil requiring regular intimate care. This will be discussed with the parent and completed by the school SENCO.

• Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one pupil will be cared for by two adults unless there is a sound reason for having more adults present. In such a case, the reasons will be documented

• Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan

• The needs and wishes of the child and parents will be considered wherever possible, within the constraints of staffing and equal opportunities legislation

• Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet ‘accident’) then parents/carers will be informed the same day.

• This information should be treated as confidential and communicated in person, via telephone or by sealed letter

**Child Protection**

The Governors and staff of Drove Primary School recognise that disabled children are particularly vulnerable to all forms of abuse.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.

If a member of staff has any concerns about physical changes in a child’s presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Person for Child Protection.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff this will be investigated in accordance with agreed procedures.

It will be reviewed by February 2024

*Adults consenting to Changing:*

*Bryony Bardwell*

*Hollie Phillips*

*Sarah Cuming*

*Maria Pereria*

*Julie Ann Gadd*

*Andrea Morava*

*Ellie Cresswell*

*Marketa Khan*

*Ian Young*

*Jadz Szuster*

*Nicoleta Sheen*

*Megan Webb*

**Appendix one:**

**Permission for School to Provide Intimate Care**

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| **Child** |  |
| **Date of Birth** |  |
| **Address** |  |
| **Parent/Guardian** |  |
| I give permission to the school to provide appropriate intimate care support to my child, e.g., changing soiled clothing, washing and toileting as detailed throughout. I will advise the Head Teacher of any medical complaint my child may have which affects issues of intimate care. I confirm that I have read a copy of the school Intimate Care Policy. I will provide the school with nappies, wipes and any other resources required for my child.**Signed:****Date:**  |

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| **Intimate Care Plan** |
| **Child:**  | **DoB:** |
| **Area of Need:** |
| **Assistance and equipment required:** |
| **Instructions:** |
| **Support Required:** |
| **Location of Suitable Toilet Facilities:** |
| **Alternative arrangements:** |  |  |
| **Location/Equipment** |  |  |

 **Working Towards Independence:**

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| **Target:** |
| **Child Will Try To:** |
| **Staff Support Will Do:** |

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| **Designation** | **Signed** | **Date** |
| **Parent** |  |  |
| **Pupil (if appropriate)** | **Too young to sign.**  |  |
| **Person/s assisting** |  |  |
| **Principal** |  |  |

**Appendix two:**

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| **Intimate Care Record****Name of child:**  |
| Date | Time | Reason for change | Signature 1 | Signature 2 |
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