

Nyland School Intimate Care Policy

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Nyland Campus Intimate Care Policy

Purpose:

The Intimate Care Policy at Nyland School recognises that all adults may be involved in duties which require intimate care of children. As the need arises, staff are expected to carry out such a procedure whilst children are in their care. Staff responsible for the intimate care of children will undertake their duties in a professional manner at all times.

The school takes seriously its responsibility to safeguard and promote the welfare of the children in its care. The Governing Body recognises its duties and responsibilities in relation to the Equality Act 2010 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.

Staff recognise the need for children 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.

Procedures have been adopted with consideration to Department for Education Guidance including Keeping Children Safe In Education (2020) and Working Together To Safeguard Children (2020).

What is intimate care and who will undertake it?

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.

Intimate care is a sensitive issue and will require staff to be respectful of a 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 child protection issues.

There should be a high level of awareness of safeguarding issues; only members of staff will carry out intimate care with children at our school. It is not appropriate to

have students or parent helpers carrying out this role. 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.

Nyland 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.

Nyland 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.

A parent or carer will be called if:

- A child refuses staff assistance
- A child is unduly distressed by the experience.

The parent/carer may be asked to take the child home if the child is distressed or unwell.

Our Approach to Best Practice

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.

Staff who provide intimate care are trained to do so in relation to Child Protection and Health and Safety implications and best practice guidance

For children with specific needs training will be implemented for staff so that they are fully aware of best practice.

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 members, 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.

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 his/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.

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. Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care.

Whenever possible, another staff member should stay close by while the procedure is carried out, but does not need to stand as a 'witness' to the procedure.

This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different carers.

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.

Where will the intimate care take place?

Intimate care will usually take place in the toilets which are private enough to respect the child's dignity but also allow the adult to be seen at all times.

No adult will be left alone with a child behind a fully closed door when carrying out intimate care procedures. This is to safeguard both the child and the adult

What safeguarding procedures will be followed?

The Protection of Children Education Child Protection Procedures and Inter-Agency Child Protection procedures will be adhered to.

Staff members will follow the school's policies for Safeguarding and for Child Protection. If a member of staff notices marks, injuries, bruising or undue soreness, the staff member will record and share their concern with the school's Designated Safeguarding Lead immediately after completing the intimate care procedure.

All children will be taught personal safety skills carefully matched to their level of development and understanding.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into 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 (Child Protection Policy and Procedures for details).

Procedures:

Changing a child

- Ascertain the child has had an accident
- Offer to help the child to change their clothes and make themselves clean
- Seek out a second adult to provide support
- Ensure all changing equipment and resources are to hand
- Staff take the child to the designated changing area (usually the toilets) and establish that the child is happy and comfortable with being changed by talking to the child throughout and telling them what they are about to do before each step
- Reassure the child and make changing an enjoyable time from beginning to end by chatting and/or singing
- Disposable gloves are recommended to be worn. Please note, the use of disposable gloves is not a substitute for good hand hygiene and hands must still be washed at the start and end of the procedure.
- Staff to encourage the child to undress independently where possible. If adult help is needed, the adult is to remove only the clothes required to reach soiled underpants unless further soiling has occurred and the child needs to be changed fully. Adult to remove the soiled pants, double-bag in a sanitary bag and place into the sanitary bin.
- Child's skin is to be cleaned with disposable wipes (by the child whenever possible) and also disposed of in a sanitary bag in the sanitary bin.
- Child to be dressed, or encouraged to dress in clean clothes if soiled. Dirty
 clothes to be put into a plastic bag and given to parents/carers when the child
 is picked up at the end of the day. Staff members will not attempt to wash or
 rinse the clothes.
- Staff to oversee the child wash their hands.
- Staff to determine if changing area should be wiped with anti-bacterial spray and dried after use.
- In the Early Years Foundation Stage class, all intimate care procedures carried out are recorded on the Intimate Care log and signed by the person carrying out the procedure, detailing the procedure carried out and any additional notes, for example, if child was upset or a rash was present. The second adult supporting the procedure will also sign the log. The parent/carer

- responsible for collecting the child from school that day will be informed of the need to carry out intimate care at the end of the school day.
- In Key Stage 1 and Key Stage 2 the need to carry out an intimate care
 procedure is rarer and so the staff member will notify the parents/carers by
 telephone directly and in person and inform them that intimate care of their
 child has been necessary. The staff member must inform the child's class
 teacher and/or a member of the office staff before making the telephone call.
- Class teachers should consider creating an individual healthcare plan for children who require regular changing. (See Supporting Pupils with Medical Conditions Policy for an example). This should be written and agreed by parents/carers and staff and signed by both. Additional Guidance-

Children Wearing Nappies

In some circumstance pupils may join Nyland School who still require nappies. Schools may have concerns regarding Child Protection issues when they are asked by parents to admit a child who is still wearing nappies. Child Protection need not present an issue. Consent to change nappies must be gained as part of the entry procedures.

Changing Facilities

Children who have long-term incontinence will require specially adapted facilities. The dignity and privacy of the child should be of paramount concern. Consideration is given to the sighting of this area from a health and safety aspect. The area should not be situated in a thoroughfare, as a changing mat will have to be used on the floor when a child is being changed. This method of changing a child is recommended, as it avoids having to lift a child and cause possible back injury.

Equipment Provision

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 parent should be made aware of this responsibility. The school is responsible for providing gloves, plastic aprons, a bin, non-allergic wet wipes, and liners to dispose of any waste. Health and Safety Staff should wear a plastic 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 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 made aware of the school's Health and Safety Policy.