

# **Intimate Care Policy**

At St Mary and St Andrew's Catholic Primary School, we are guided by God who is at the centre of everything we do.

We support each other to be the best we can be to secure bright futures for everyone. With our parishes, families and the community, we work together to create a school that is safe, happy, respectful and inspirational.

School takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.

Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves, but some children are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing, toileting, dressing or nose wiping. Help with eating, drinking and face wiping after meals may also be needed. Intimate care includes the supervision of children in their own intimate care.

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 day-to-day activities must not be discriminated against.

This intimate care policy should be read in conjunction with the following: The school's Safeguarding and Child Protection policy.

Health and Safety policy and procedures.

Policy for the administration of medicines.

Special Educational Needs and Disability policy.

Procedures and policy on use of force and restraint.

Staff code of conduct or guidance on safe working practice.

St Mary & St Andrew's Catholic Primary School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a kind and professional manner at all times. It is acknowledged that these adults are in a position of great trust.

School recognises that there is a need to treat all children, whatever their age, gender, disability, religion or ethnicity, with respect when intimate care is given. The child's welfare and dignity is of paramount importance. No child should be attended to in a way that causes them distress or pain.

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## **Best Practice and Practical Arrangements**

Adults who assist children one-to-one should be employees of the school and be DBS checked at the appropriate level.

It is not always practical for two members of staff to assist with an intimate procedure and also this does not take account of the child's privacy. However, before attending to a child, the staff member will inform another adult. If the adult is alone in the classroom, a message will be sent for assistance or cover to the school office.

Wherever possible, staff should care for a child of the same gender. However, as no male members of staff currently work full time in school, female staff will support boys. Male members of staff should not provide routine intimate care for girls.

In KS1 and EYFS, the bathrooms are situated off the classrooms. Staff must demonstrate how to help a child sensitively so that the other children follow this good practice and understand how to treat each other sensitively and with dignity.

In KS2, staff will offer assistance as needed to a child showing discretion and sensitivity.

## **Infection Prevention**

Staff who provide intimate care are fully aware of best practice regarding infection control, including the need to wear disposable gloves and aprons where appropriate. Soiled underwear will be double bagged, sealed and promptly disposed of in an outside bin. Outer clothes will be bagged and sealed and returned to the family at the end of day. Staff will have time to wash thoroughly and change clothes as needed. Our aim is to reduce the risk of infection. There are no facilities to wash soiled garments in school. Underwear can be provided if needed from school and we ask for a new replacement item or a financial donation in return. If a child regularly has toilet accidents, parents are advised to send in extra underwear/clothing to be kept in the child's PE bag. Families can be referred to the School Nurse or their GP as needed.

Areas of the floor / cubicle that have been soiled will be closed off until hygienic cleansing can be undertaken. All soiled protective equipment is disposed of as above. In addition, school follows any updated advice, for example, regarding Covid 19. If the child is unwell, s/he will be sat apart from other children whilst arrangements are made for the child to be collected. Children with diarrhoea or sickness must feel well and have been eating and toileting normally for 48 hours before returning to school.

All children will be supported to achieve the highest level of independent self-care possible, given their age and abilities. Staff will work in close partnership with parent/carers to share information and provide continuity of care. Parents/carers will be informed that day if their child has needed help with intimate care. This information is treated as confidential and communicated with discretion.

Children who require regular assistance with intimate care usually have a Health Care Plan written by school. This is shared with the staff who work with the child, their parent/carers

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and medical practitioners as appropriate, for example, Occupational Therapy. The school nurse service will be consulted for advice and help with individual cases if necessary.

Where a care plan is not in place, 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.

The religious views and cultural values of families should be considered, particularly as they might affect certain practices.

As an additional safeguard, staff involved in meeting intimate care needs will not be involved with the delivery of sex education to children, wherever possible.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss their needs and preferences. Where the child is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.

## **Child Protection**

The school's Safeguarding and Child Protection policy and inter-agency child protection procedures are followed by all staff. From a child protection perspective, it is acknowledged that intimate care involves risks for children and adults as it may involve staff touching private parts of a child's body. It may be unrealistic to expect to eliminate these risks completely, but best practice will be promoted, and all adults will be encouraged to be vigilant.

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. unexplained marks, bruises, soreness etc s/he will immediately report concerns to the DSL. A clear written record of the concern will be completed.

If a child becomes distressed or very unhappy about being cared for by a particular member of staff, this should be reported to the class teacher and Head Teacher. The matter will be investigated at an appropriate level (usually the Head Teacher) 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 may 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 an adult working at the school, this will be investigated by the Head Teacher (or by the Chair of Governors if the concern is about the Head Teacher) in accordance with the agreed procedures.

Any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the Head Teacher or to the Chair of Governors if the concern is about the Head Teacher.

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## **Physiotherapy**

Children who require physiotherapy whilst at school will have this carried out by a trained physiotherapist. If it is agreed in the care plan that a member of the school staff should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly. School staff will not devise exercises or physiotherapy programmes. Adults (other than the physiotherapist) carrying out physiotherapy exercises with pupils should be employees of the school. Any concerns about the regime or any failure in equipment should be reported to the physiotherapist.

## **Medical Procedures**

Children who require assistance with invasive or non-invasive medical procedures will have an agreed care plan detailing their needs and the responsibilities of school staff and the training needed to support a child safely.

Members of staff who administer first aid are appropriately trained. If an examination of a child is required in an emergency aid situation, another adult is present to maintain the child's confidence with privacy and dignity.

The administration of routine or ad hoc medication will be governed by our 'administration of medication 'policy – parents will need to complete a consent form before any medication is administered.

## Massage

Massage is now commonly used with children who have complex needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation. Staff may be involved in delivering aspects of programmes devised by therapists and is confined to the back, hands, feet and face in order to safeguard the interest of both adults and children.

## **School Trips**

Additional arrangements for providing intimate care during school trips will be made beforehand so that all children are enabled to take part in trips happily and safely.

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