



Intimate Care Policy for Children in Years 1-6

School Name: St Mary's Primary School

Version No: 1

Author:

Owner:

Approved by:

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Overview

'St Mary's Primary School is committed to safeguarding and promoting the wellbeing of all our children, and expects our staff and volunteers to share this commitment'.

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 which some children are unable to do because of their young age, physical difficulties or other special needs. 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

Introduction

The Intimate Care Policy and Guidelines regarding children have been developed to ensure that:

- The health, safety, independence and welfare of children is promoted
- The dignity and privacy of children is respected
- To safeguard children and staff
- Arrangements for intimate and personal care are open and transparent

Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs.

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 entitled to respect and privacy at all times 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 taken into account
- Every child has the right to have levels of intimate care that are as consistent as possible

Responsibilities

The Principal and SENDCO 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)
- 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)

School staff will:

- Work in partnership with children and parents
- Make other staff aware of the task being undertaken and have 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 agreed 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
- 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 a fresh disposable apron & gloves while changing a child
- Not assist with intimate or personal care tasks which the pupil is able to undertake independently

If a staff member has concerns about a colleague's intimate care practice, they must report this to the Designated Safeguarding Lead.

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

Guidelines for Good Practice

When assistance is required, this should normally be undertaken by one member of staff, however, they should ensure that another appropriate adult is present who is aware of the task to be undertaken and that they are visible and/or audible. Intimate or personal care procedures should not involve more than one member of staff unless the pupil's care plan specifies the reason for this.

A signed record should be kept of all intimate and personal care tasks undertaken and, where these have been carried out in another room, should include times left and returned. Any vulnerability, including those that may arise from a physical or learning difficulty should be considered when formulating the individual pupil's care plan. Involve the child in their intimate care. Try to encourage a child's independence as far as possible in his/her intimate care. Where the child is fully dependent, talk with them about what is going to be done and give them choice where possible.

Check your practice by asking the child/parent any likes/dislikes while carrying out intimate care and obtain consent. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.

Make sure practice in intimate care is consistent (a child can have multiple carers; a consistent approach to care is important). Effective communication with parents/carers ensures practice is consistent. Be aware of your own limitations – only carry out care activities you understand and feel competent and confident to carry out. If in doubt, ASK. Some procedures must only be carried out by staff who have been formally trained and assessed.

Promote positive self-esteem and body image. Confident, self-assured children who feel their body belongs to them are less vulnerable. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. If you have any concerns, you must report them. If you observe any unusual markings, discolouration or swelling including the genital area, complete a safeguarding report and immediately give it to the Designated Safeguarding Lead to record on CPOMs. If during the intimate care of a child you accidentally hurt them, or the child appears to be sexually aroused by your actions, or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to your Designated Safeguarding lead and record on CPOMs. Report and record any unusual emotional or behavioural response by the child. Parents/carers are to be informed about concerns (see school Safeguarding Policy).

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Children communicate using different methods, e.g. words, signs, symbols, body movements, eye pointing. Make eye contact at the child's level. Use simple language and repeat if necessary. Wait for response. Continue to explain to the child what is happening even if there is no response. Treat the child as an individual with dignity and respect.

Monitoring, Evaluation and Review

The school will review this policy annually and assess its implementation and effectiveness.

Appendix I – Agreement Between Child and Personal Assistant

Child's Name _____

Class/Year Group _____

Name of Support Staff Involved _____

Date _____

Review Date _____

Support Staff

As the personal assistant helping you in the toilet, you can expect me to do the following:

- When I am the identified person, I will stop what I am doing and come and help you in the toilet. I will avoid all unnecessary delays
- When you use our agreed emergency signal, I will stop what I am doing and come and help
- I will treat you with respect and ensure privacy and dignity at all times
- I will ask permission before touching you or your clothing
- I will check that you are as comfortable as possible, both physically and emotionally
- If I am working with a colleague to help you, I will ensure that we talk in a way that does not embarrass you
- I will look and listen carefully if there is something you would like to change about your Toilet Management Plan

Child

As the child who requires help in the toilet, you can expect me to do the following:

- I will try, whenever possible, to let you know a few minutes in advance, that I am going to need the toilet so that you can make yourself available and be prepared to help me
- I will try to use the toilet at break time or at the agreed times
- I will only use the agreed emergency signal for real emergencies
- I will tell you if I want you to stay in the room or stay with me in the toilet
- I will tell you straight away if you are doing anything that makes me feel uncomfortable or embarrassed
- I may talk to other trusted people about how you help me. They too will let you know what I would like to change

Signed _____ **Member(s) of Staff**

Signed _____ **Child (if appropriate)**

Appendix 2 – Permission for School to Provide Intimate Care

Child's Full Name _____

Male/Female _____

Date of Birth _____

Parent/Carer's Full Name _____

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 below:

Any additional details, e.g. frequency of changing required/minimum number of changes

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 _____

Full Name _____

Relationship to Child _____

Date _____

Appendix 3 – Toilet Management Plan

Child's Name _____

Class/Year Group _____

Name of Support Staff Involved _____

Date of Plan _____

Review Date _____

Area of Need:

Equipment Required:

Location of Suitable Toilet Facilities:

Support Required:

Frequency of Support:

Working Towards Independence:

Target:

Child Will Try To:

Staff Support Will Do:

Signed: Parent/Carer _____ **Date** _____

Child (if appropriate) _____ **Date** _____

Member(s) of Staff _____ **Date** _____

_____ **Date** _____

