

# ST. OSWALD'S RC PRIMARY SCHOOL

Intimate Care Policy

The Governing Body will act in accordance with Section 175 of the Education Act 2002 and 'Safeguarding Children and Safer Recruitment in Education' (DfES 2006) to safeguard and promote the welfare of pupils at this school.

The Governing Body and Head Teacher will act in accordance with the supplementary DfES guidance: 'Safer Recruitment and Selection in Education Settings' (2005) and 'Dealing with Allegations of Abuse against Teachers and other Staff' (2005)

This 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.

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 policies,

- St Oswald's Safeguarding Policy
- Health and Safety policy
- Managing medicines in schools Policy
- Positive Handling policy
- Special Education Needs and Inclusion policy
- Staff code of conduct

St Oswald's RC Primary 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. It is acknowledged that these adults are in a position of great trust.

St Oswald's RC Primary 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 distress or pain.

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

#### **Best Practice**

Staff who provide intimate care at St Oswald's are trained to do so including in child protection and health and safety training in moving and handling and are fully aware of best

practice regarding infection control, including the need to wear disposable gloves and aprons where appropriate.

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.

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.

All 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 his/herself as possible.

## The Purpose of the Policy

- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- To safeguard adults required to operate in sensitive situations
- To raise awareness and provide a clear procedure for intimate care
- To inform parents/carers in how intimate care is administered
- To ensure parents/carers are consulted in the intimate care of their children.

#### **Definition of Intimate Care**

The care may be defined as any activity required to meet the personal care needs of each individual child. Parents have the responsibility to advise staff of any intimate care needs of their child, and staff have a responsibility to work in partnership with children and parents. Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing Supporting a pupil with dressing/undressing
- Toileting Assisting a pupil who has soiled him/herself, has vomited or feels unwell
- Menstrual care Providing advice to enable a pupil to attend to their own needs
- Supervision of a child involved in intimate self-care
- Providing comfort or support for a distressed pupil and assisting a pupil requiring medical care, who is not able to carry this out unaided are also considered as intimate care

## **Principles of Intimate Care**

The following are the fundamental principles upon which the policy is 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;
- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities;
- Every child has the right to have levels of intimate care that are as consistent as possible.

Children who require regular assistance with intimate care should have written Individual Education Plans or Care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists.

These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer. Any historical concerns should be noted and taken into account.

Where a care plan or IEP is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (eg: has had an 'accident' and soiled him/herself).

## Responsibilities of Staff involved with Intimate Care

All staff must have an awareness of the specific types of intimate care that they carry out and fully understand the Intimate Care Policy and Guidelines within the context of their work

Intimate Care Arrangements Supporting dressing/undressing sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Nursery and Foundation Stage.

Staff will always encourage children to attempt undressing and dressing unaided.

If a child has a medical condition which is likely to lead to soiling and subsequent staff intervention, specific medical advice may be sought from outside agencies and the parents will be asked to sign a permission form so that staff can clean and change their child if necessary. (Appendix 1)

If a parent does not give consent, the school will contact the parents or other emergency contact giving specific details about the necessity for cleaning the child.

If tending to a child who has soiled themselves during the school day, staff will respond sensitively and professionally.

If 'accidents' occur, the child will change themselves into dry clothing, and wet items will be sent home for washing.

If there is an occurrence of heavier soiling or vomiting, this may require staff to provide care at a more personal level.

The child's independence will be encouraged as far as possible in his/her intimate care and reassurance given.

A record of the incident will be kept in school and the parent will be informed (by a note home, verbally at home collection time or phone call) and requested to return the borrowed items of clothing when laundered.

#### **Child Protection**

The Governors and staff at St Oswald's recognise that children with special needs and disabilities are particularly vulnerable to all types of abuse.

The school's child protection policy and inter-agency child protection procedures will be accessible to staff and adhered to.

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 in this school best practice will be promoted and all adults will be encouraged to be vigilant at all times. 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 Head Teacher.

#### **Medical Procedures**

Any members of staff who administer first aid should be appropriately trained. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity.

#### 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 are involved in delivering aspects of programmes devised by therapists.

## **Record Keeping**

It is good practice for a written record to be kept in an agreed format every time a child requires assistance with intimate care, including date, times and any comments such as changes in the child's behaviour. It should be clear who was present.

These records will be kept in the child's file and available to parents/carers on request.

Reviewed September 2011 Reviewed April 2015 Reviewed March 2016 Reviewed April 2017 Reviewed October 2018

Reviewed October 2019 Accepted by Governors: 9<sup>th</sup> December, 2019



# Intimate Care Plan Parental Consent Form

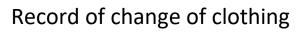
Name of Child:				
Date of Birth:				
Class / Teacher Name:				
Care required				
Member(s) of staff who will carry out the tasks				
Where will the tasks be carried out and what equipment/resources will be required to safely carry out the procedures:				
Actions that will be taken if any concerns arise:				
Additional Information:				
We have read the Intimate Care Policy provided by St Oswald's Primary School.  I/We give permission for the named member(s) of staff to attend to the care needs of my/our child and are in agreement with the procedures proposed.				
Name				
Signature				
Date				
Head Teacher Signature				
Date				

# Appendix A Intimate care Record Sheet



Date	Time	Type of Care Carried out (toileting, nappy change, other intimate/personal care task	Carried out by	Signature

# Appendix B





Dear Parents,		
Your child		required a change
of clothes on:	<b>~</b> +	
because		
Items Changed:		
Supervised/Assisted by:		

