Much Birch C of E Primary School

Intimate Care Policy



'We will flourish and reach our God given potential'

I am the vine; you are the branches. If you remain in me and I in you, you will bear much fruit. **John 15:5**

All members of our whole school community are able to realise their God-given potential, enabling them to become equal, caring and active citizens whilst upholding true Christian values. We treat others, as we would like to be treated, with dignity and respect. Everyone is encouraged to flourish with hope and high aspirations

Updated:	**2 yearly**
Review date:	**September 2028**
Head teacher:	**Mrs. B. Davies**
Chair of Governors:	**Reverend Mark Johnson**

Introduction

Intimate care is any care which is associated with invasive procedures relating to bodily functions, bodily products and personal hygiene which demands direct or indirect contact with or exposure of intimate parts of the body, such as cleaning up after a child who has soiled themselves. In addition, some children may need help with dressing/undressing or using the toilet. Most children can carry out these functions themselves, but it is recognised that some are unable to due to physical disability, learning difficulties, medical needs or needs arising from the child's stage of development.

This Intimate Care Policy has been developed to safeguard children, support staff and ensure good practice is followed. At Much Birch Primary School all staff are checked with the Disclosure and Barring Service (DBS) and we are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times.

We believe that the intimate care of children cannot be separated from other aspects of their learning and development and we believe that every child has the right to feel safe and secure. We do not discriminate against children who have not reached a stage where they can manage their own personal hygiene and as such welcome all children to participate in our school and provide appropriate support for each child on an individual basis.

We recognise the need to treat all children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

We aim to:

- Safeguard the rights and promote the welfare of all children and young people including those who may be more vulnerable to abuse;
- Provide guidance and reassurance to staff whose duties may include intimate care;
- Assure parents and carers that staff are knowledgeable about personal care and that their individual needs and concerns are taken into consideration;
- Remove barriers to learning and participation, protect from discrimination and ensure inclusion for all children and young people within our setting.

Our approach to Best Practice

- Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child
- Any child who requires intimate care is treated with respect at all times; we recognise that the child's welfare and dignity is of paramount importance.
- We will work with parents and children to establish a preferred procedure for supporting the child in our care with their personal and intimate needs.

- Where these procedures may require specialist training, we will seek out training for the staff who will be involved in a child's care, ensuring that the child's key-person and at least one other member of staff accesses the training.

- Where possible the child's key-person is responsible for undertaking their care. When this is not possible, a staff member who is known to the child will take on that responsibility. The staff member who is involved will always ask the child for permission to assist them. The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities and staff will encourage **them to do as much for him/herself as he/she can**.

Children will be cared for with dignity and respect for their privacy. 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.
- 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.
- 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.

A parent or carer will be called if:

- a child refuses staff assistance or
- 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.

Working with Parents

We believe that our partnership with parents is an essential principle in our setting and is particularly necessary in relation to children needing intimate care. We recognise that the information required to carry out intimate care is available from parents and prior permission must be obtained from parents

- before intimate care procedures are undertaken (see Appendix 1)
- We acknowledge that cultural and diversity influences may affect what is deemed 'intimate' and ensure we pay regard to social, ethnic and cultural perspectives through open dialogue with parents.
- Parents should be encouraged and empowered to work with staff to ensure that their child's needs are identified, understood and met. This may include Health Care plans and any other plans which identify the support of intimate care where appropriate. Exchanging information with parents is essential through personal contact, telephone or correspondence.

- When any intimate care is carried out on children with individual care plans, it will be recorded on their own personal record (see Appendix 2).
- All information concerning intimate care procedures is recorded and stored securely.

We appreciate that sometimes children have toileting 'accidents' which are out of character for them. In the event of this, and in the absence of a personal intimate care plan, the child would be fully encouraged and supported to achieve the highest level of autonomy that is possible given their age and ability.

Staff will encourage the child to do as much for his/herself as possible and parents will be informed the same day. The parents/carers will be contacted confidentially either in person, by telephone or in a sealed letter, not through the home/school diaries. On the rare occasion that a child is soiled to a point where they are unable to clean themselves to a comfortable state, parents would be contacted immediately so that the child could be taken home for bathing.

The Protection of Children

Child Protection procedures will be adhered to.

All children will be taught personal safety skills carefully matched to their level of development and understanding to build their confidence and assertiveness about their own body and its worth. Confident and assertive children who feel their body belongs to them are less vulnerable to abuse.

If a member of staff has a concern about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate 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 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.

If a child makes an allegation against a member of staff, all necessary procedures will be followed. (See Child Protection Policy and Procedures)

Allegations of Abuse

Personnel working in intimate situations with children can feel particularly vulnerable. This school policy can help to reassure both staff involved and the parents of vulnerable children. Action will be taken immediately should there be a discrepancy of reports between a child and the personal assistant.

Where there is an allegation of abuse, the guidelines in the Child Protection procedures will be followed. If staff are concerned about a child's demeanour during or following intimate care, or has responded to or said something that has caused concern during the intimate care, they will report such incidents immediately to one of the Designated Safeguarding Leads who will follow the correct safeguarding procedures.

Health and Safety – Covid 19

Staff must always wear disposable nitrile gloves and pvc apron when dealing with a child who is bleeding or soiled or when changing a soiled nappy. (School will provide gloves/ aprons, a bin and liners to dispose of any waste). **Certain viruses e.g. COVID19, will require the use of face-masks also to be worn by staff members during intimate care procedures. If there are concerns that there may be spitting or splashes, then close-fitting eye goggles should be worn by the staff member.**

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 daily basis and it can be collected as part of the usual refuse collection service as this is not classed as clinical waste.

Staff members will wash their hands for at least 20 seconds with soap and hot water before and after intimate care procedures.

Policies

These guidelines should be read in conjunction with policies:

- Health and Safety Policy
- Child Protection Policy
- Safeguarding Policy
- First Aid Policy
- First Aid procedures & managing children who are sick / infectious
- Complaints Policy

The governing body reviews this policy every two years. The governors may, however, review the policy earlier than this, if the Government introduces new regulations, or if the governing body receives recommendations on how the policy might be improved.

Appendix 1

Letter to parent(s) outlining policy/procedures and their consent to carry out 'intimate care')

Dear Parents,

I am writing to you regarding occasions when your child may need support with intimate care routines. We have drawn up the attached guidelines to ensure that your child's needs are met in a professional and dignified manner at all times.

I would be grateful if you could sign and return the slip below once you have read the guidelines and agree to the school carrying out 'intimate care' procedures when necessary.

Yours sincerely,

Headteacher

I have read a copy of the School's 'Personal and Intimate Care Policy.'

I agree to the school carrying out 'intimate care' on my son/daughter when necessary.

Signed:_____

Name:_____

Name of child:_____

Date:_____

Appendix 2.

TOILET TRAINING/CHANGING RECORD

(to be completed after each 'intimate care' activity)

Child's Name _____

D.O.B. _____

Name of Adult _____

Date	Time	Comment e.g. what action was taken