

Wardley CE Primary School
Intimate Care Policy



Name of Reviewer	Mark Foster
Date of Approval of Governing Body	February 2019
Signature of Chair	<i>John Storey</i>
Signature of Head	<i>Mark Foster</i>
Date Due for Review	February 2022

EQUALITY STATEMENT

As a school we welcome our duties under the Equality Act 2010. The general duties are to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

We review all policies and procedures we operate to ensure there are no negative equality impacts based on age, disability, gender, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation as outlined in the Equality Act 2010. If you feel, on reading this policy that there may be a negative equality impact, please tell us about this. Please also let us know if you need to access this policy in a different format. You can do this by contacting the school office.

1. Rationale

It is our intention to develop independence in each child; however there will be occasions when additional help is required. Our intimate care policy has been developed to safeguard children and staff. It is one of a range of specific policies that contribute to our provision of pastoral care. The principles and procedures apply to everyone involved in the intimate care of children.

2. Definition

Intimate care is any personal care activity a child would normally be able to do for themselves 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, (e.g. the administration of rectal diazepam).

The issue of intimate care is a sensitive one and will require staff to be respectful of the 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. 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.

Wardley CE Primary 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. Wardley CE Primary School recognises that there is a need to treat all children with respect when intimate care is given.

3. Principles of Intimate Care

The following are fundamental principles of intimate care upon which our policy guidelines are 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.
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities.
- All children have 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 appropriate and consistent.

4 School Responsibilities

All staff working with children are subject to the appropriate Disclosure and Barring Checks. This includes student teachers and volunteers.

Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are involved in the intimate care of children.

Prior permission must be obtained from parents before intimate care procedures are undertaken (see Appendix 1). Consent forms are signed by the parent and stored in school. If there is an emergency which requires intimate care to be given (e.g. needing to clean a pupil after a toilet accident) but there is no prior parental authorisation and where the delay will not cause distress, phone permission can be sought.

Where necessary, intimate care arrangements are formulated in the form of an intimate care plan which is agreed between the school, parents and if appropriate by the child.

Intimate care in the school can only be provided by those members of staff who have been appropriately trained and have specifically indicated a willingness to do so, either as part of their agreed job description or by volunteering to undertake the role.

5 Guidelines for Good 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. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved in the intimate care of children.

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their needs.

Staff also need to be aware that some adults may use intimate care as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard children and staff:

- Involve the child in intimate care.
- Try to encourage a child's independence as far as possible in their intimate care. Emphasis should be on staff providing the minimum level of assistance and intervention, compatible with the particular circumstances and the child's needs. This may mean, for example, giving the child responsibility for washing themselves.
- Where a situation renders a child fully dependent, talk about what is going to be done and give choices where possible.
- Check your practice by asking the child or parents about any preferences whilst carrying out the intimate care.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation. 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.
- Make sure practice in intimate care is consistent. A child may have multiple carers and a consistent approach is essential. Effective communication between all parties ensures that practice is consistent.
- Ensure that any incidents where a child has received intimate care are reported to parents and recorded in school using the record of intimate care intervention kept in the phase Intimate Care Box (see Appendix 2).
- If intimate care is a regular, planned event then there should be an Intimate Care plan (See Appendix 4) that sets out the method of communication. If there are specific medical needs then the school nurse will be involved and may support staff and parents by advising what sort of information should be recorded and monitoring the provision in school.
- Be aware of your own limitations. Only carry out activities you understand and feel competent with. If in doubt ask a member of the leadership team or one of the designated persons.
- Promote positive self-esteem and body image. Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. 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. Keeping in mind the child's age, routine care can be both efficient and relaxed.

6. Working with Children of the Opposite Sex

Wherever possible staff 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

Wherever possible staff should only care intimately for older/more aware pupils of the same sex. Male staff will not be asked to carry out intimate care procedures on female pupils. However, in the case of younger pupils and older boys with more significant learning difficulties female staff will assist in their needs as the majority of staff are female and this is the only practical option.

7 The Protection of Children

The school's Safeguarding Policy and Working Together Statutory Guidance will be accessible to all staff and will be adhered to.

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

If a member of staff has any concerns about physical changes in a child's presentation (e.g. marks, bruises or swellings) they should immediately report their concerns to one of the designated persons. These are; Mark Foster, Kari Walker or David Foster (See Safeguarding Policy).

If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to one of the designated persons.

Report or record any unusual emotional or behavioural response by the child on CPOMS and inform one of the designated persons.

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 issues(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 The Managing Allegations Policy will be followed.

8 Vulnerability to Abuse

Children should be encouraged to recognise inappropriate assistance and behaviour that erodes their dignity and self-worth, Staff should be encouraged to listen to the child at all times.

The following are factors that can increase a child's vulnerability:

- Children who need help with intimate care are statistically more vulnerable to exploitation and abuse.
- Children with disabilities may have less control over their lives than others.
- Children may experience multiple carers.
- Children may not be able to distinguish between intimate care and abuse.
- Children may not be able to communicate.

9 Dealing with Toilet Accidents

Accidents and unexpected soiling will sometimes occur. On these occasions there may not be a personalised care plan in place or prior parental authorisation. In some situations (needing to clean a pupil after a toilet accident) and where the delay will not cause distress, phone permission can be sought.

Children must be taught strategies to make their need for the toilet clear either verbally or using a sign or symbol.

Staff who have children on toilet training programmes must ensure that relevant staff beyond the immediate class team are aware and competent in maintain programme consistency.

Staff will ensure that any soiling incidents are dealt with quietly and respectfully to avoid any embarrassment for the child.

Parents must keep children who are unwell away from school to reduce the chance of stomach bugs from spreading. Children should stay off school until the symptoms have stopped for 48 hours.

Refer to the Toilet training Chart (See Appendix 3).

9 Equipment Provision

Each phase has an intimate care changing box. These are used for the equipment needed to provide intimate care to the children in that phase. These boxes are stored in each phase. If items in the box are running low then staff should inform the office so new equipment can be ordered.

Suitable equipment and facilities will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.

Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags & wipes. Parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

10 Working with Parents

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents, including knowledge and understanding of any religious/cultural sensitivities.

Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met including plans that identify the support of intimate care.

Exchanging information with parents is essential through personal contact, telephone or correspondence. However, information concerning intimate care procedures should not be recorded in home/school books as it may contain personal information that may be accessed by people other than the parent/carer and staff member.

11. Writing an Intimate Care Plan.

Where an intimate care plan is required this should be agreed in discussion with the child, school staff, parents and (where appropriate) the relevant health personnel.

The plan should be signed by all who contribute and reviewed at least six monthly. The views of all relevant parties should be sought and considered to inform future arrangements.

In developing the plan the following should be considered:

- a) Whole school implications
 - The importance of working towards independence
 - Arrangements for school trips and special events.

- Who the named person is and who will substitute in the absence of the appointed person.
 - Strategies for dealing with pressure from peers e.g. teasing/bullying.
- b) Classroom Management
- The child's seating arrangements in class.
 - A system for the child to leave class without disruption to the lesson.
 - Avoidance of missing the same lesson due to medical routines.
 - Awareness of a child's discomfort which may affect learning.
 - Implications for PE e.g. additional time for changing.

All plans must be clearly recorded using the school's template (see Appendix 4) to ensure clarity of expectation, roles and responsibilities. They should reflect all methods of communication. A procedure should also be included to explain how concerns arising from the intimate care process will be dealt with.

12 Health and Safety

Barrier materials will always be used when administering intimate care e.g. disposable gloves. Appropriate Lifting & Handling Procedure will be followed when necessary. Staff should be aware of the school's Health and Safety policy



INTIMATE CARE POLICY PARENTAL AGREEMENT FORM

There may be occasions when your child may need support with intimate care routines. We have drawn up an intimate care Policy which is on the school website to ensure that your child's needs are met in a professional and dignified manner at all times. Please sign and return the slip below once you have read the guidelines in the school policy on the school website and agree to the school carrying out intimate care procedures when necessary.

I have read a copy of the school's Intimate Care Policy.

I agree to Wardley CE Primary School carrying out 'intimate care' on my child when necessary.

Signature of Parent / Carer:

Print Name:

Name of Child:

Date:

APPENDIX TWO

WARDLEY CE PRIMARY INTIMATE CARE RECORD FORM				
CHILD'S NAME:			CLASS	
First Named Staff Member				
Date	Time	Procedure	First Staff Signature	Second Staff Signature

APPENDIX THREE

TOILET TRAINING CHART			
PUPIL NAME:			
WEEK BEGINNING:			
DAY	TIME	STAFF	CODE
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
CODES: W= wet. S=soiled. U=urinated. B=bowels open. D=dry. SPECIFY CURRENT ROUTINE AND ANY CHANGES NECESSARY AS A RESULT OF RECORD EVALUATION:			

APPENDIX FOUR

WARDLEY CE PRIMARY SCHOOL INTIMATE CARE PLAN	
Child's Name	
Class	
First Named Staff Member	
Second Named Staff Member	
Medical Notes:	
Details of the Personal Care:	
Whole School Implications:	
Classroom Implications:	
Signatures:	
Review Date:	

