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Signed:



Clenchwarton, Walpole Cross Keys & West Lynn Primary Schools

Intimate Care Policy October 2018

Introduction:

Clenchwarton, Walpole Cross Keys and West Lynn Primary Schools are committed to ensuring that all staff responsible for intimate care of children and young people will undertake their duties in a professional manner at all times.

The schools take seriously their responsibility to safeguard and promote the welfare of the children and young people in their care.

The Governing Body recognises its duties and responsibilities in relation to the Equality Act 2010 which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain.

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

Definition:

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

Our approach to best practice:

- The management of all children with intimate care needs will be carefully planned.
- All incidents involving intimate contact are recorded using the schools' agreed procedures.
- Staff who provide intimate care are trained to do so (*including Child Protection, and Moving and Handling where appropriate*) and fully aware of best practice.
- Sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Early Years. Staff will always encourage children to attempt undressing and dressing unaided.
- Children may seek physical comfort from staff - particularly the children in Reception. Where children require physical support, staff must be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate. If physical contact is deemed to be appropriate staff must provide care suitable to the age, gender and situation of the child.
- Intimate care for soiling should only be given to a child after the parents have given permission for staff to clean and change the child. Parents may sign a permission form so that the staff can clean and change their child in the event of the child soiling themselves (*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 the parents/carers or emergency contact is able to come within a few minutes, the child is comforted and kept away from the other children to preserve dignity until the parent arrives. Children are not left on their own whilst waiting for a parent to arrive, an adult will stay with them, giving comfort and reassurance. The child will be dressed at all times and never left partially clothed.

If a parent/carers or emergency contact cannot attend, the school will seek to gain verbal consent from parents/carers for staff to clean and change the child. This permission will be sought on each occasion that the child soils him or herself.

If the parents and emergency contacts cannot be contacted the Head Teacher will be consulted. If the child is at risk, staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

When touching a child, staff should always be aware of the possibility of invading a child's privacy and will respect the child's wishes and feelings. If a child needs to be cleaned, staff will make sure that:

- They inform another member of staff that they are changing a child – two members of staff should be in attendance
 - Protective gloves are worn.
 - The procedure is discussed in a friendly and reassuring way with the child throughout the process.
 - The child is encouraged to care for him/herself as far as possible.
 - Physical contact is kept to the minimum possible to carry out the necessary cleaning.
 - Privacy is given appropriate to the child's age and the situation.
 - All spills of vomit, blood or excrement are wiped up and flushed down the toilet
 - Any soiling that can be, is flushed down the toilet.
 - Soiled clothing is put in a plastic bag, unwashed, and sent home with the child.
- If it is necessary for a child to receive medicine during the school day parents must fill out a permission form from the school (these are kept in each class) and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical

care. It must be made clear to parents that staff administration of medicines is voluntary. Any member of staff giving medicine to a pupil should check:

- The pupil's name
- Written instructions provided by parents or doctor
- Prescribed dose
- Expiry date

Medicines should generally be kept in a secure place, not accessible to pupils but arrangements must be in place to ensure that any medication that a pupil might need in an emergency is readily available.

- Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.
- There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- 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.
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities
- Individual care plans will be drawn up for any pupil requiring regular intimate care
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan
- The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation
- Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day. This information should be treated as confidential and communicated in person, via telephone or by sealed letter.

Child Protection:

The Governors and staff recognise that disabled children are particularly vulnerable to all forms of abuse.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Safeguarding Lead for Child Protection.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff, this will be investigated in accordance with agreed procedures.

Intimate Care Permission Form for Soiling

Pupil's Personal Details	
Full Name:	
Date of Birth:	Parent/Carer name:
Address:	

I/We give permission for school to provide intimate care to my/our child. This may involve staff helping to clean / change my child in the event of them soiling themselves.

I/We will advise the school of anything that may affect issues of personal care (if medication is changed or my child has an infection for example).

I//We understand the procedures that will be carried out and will contact the school immediately if there are any concerns.

Signature: _____

Name: _____

Relationship to child: _____

Date: _____