

# Wootton Community Primary School Intimate Care Policy

Approved on:	10 <sup>th</sup> January 2022		
FGB/Committee:	FGB		
Responsibility:	Headteacher		
Review Date:	January 2024		
Signed by Headteacher:	anne.		
Signed by Chair of Governors:	R kusa		

#### Introduction

Wootton Community Primary School is committed to providing personal care that has been recognised as an assessed need and indicated in the care plan for an individual child, in ways that:

- Maintain the dignity of the individual child
- Are sensitive to their needs and preferences
- Maximise safety and comfort
- Protect again intrusion and abuse
- Respect the child's right to give or withdraw consent
- Encourage the child to care for themselves as much as they're able and protect the rights of everyone involved

The diversity of individuals and communities is values and respected. No child or family is discriminated against.

This policy applies to all staff undertaking personal care tasks with children but particularly to those who are in the EYFS, One and Two. The normal range of development for this group of children indicates that they may not be fully toilet trained.

In addition to this there are other vulnerable groups of children and young people that may require support with personal care on either a short, longer term or permanent basis due to SEN and disability, medical need or a temporary impairment. This could include:

- Children and young people with limbs in plaster
- Children and young people needed wheelchair support
- Children and young people with pervasive medical conditions

#### 1. Principles

- 1.0The Governors will act in accordance with Section 175 of the Education Act 2002 and Keeping Children Safe in Education (updated Sept 2021) to safeguard and promote the welfare of pupils at this school.
- 1.1 The Governing Body and head teacher will act in accordance with any supplementary DfES guidance.
- 1.2 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 intimidate care needs is one aspect of safeguarding.
- 1.3 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.

- 1.4 This Intimate Care Policy should be read in conjunction with the following policies:
- Child Protection Policy
- Health and Safety policy and procedures
- Policy for the administration of medicines
- Allegations of abuse against staff policy
- 1.5 Wootton 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. It is acknowledged that these adults are in position of great trust.
- 1.6 Wootton Primary School 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.
- 1.7 Staff will work in close partnership with parent/carers to share information and provide continuity of care.

#### Definition

- 2.0 intimate care can be defined as any care which involved washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some children are unable to do because of their young age, physical difficulties or other special needs. Intimate personal care tasks can include:
- Body bathing other than to arms, face and legs below the knee
- Toileting, wiping and care in the genital and anal areas
- Dressing and undressing
- Application of medical treatment, other than to arms, face and legs below the knee
- Supporting with the change of sanitary protection
  - 2.1 It also includes supervision of children involved in intimate self-care

#### 2. Best Practice

- 3.0 Staff who provide intimate care at Wootton Primary School are fully aware of best practice regarding infection control, including the need to wear disposable gloves and aprons where appropriate.
- 3.1 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.
- 3.2 There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic etch) 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.

- 3.3 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/himself as possible.
- 3.4 All pupils needing intimate care will have manual handling/risk assessments/individual risk assessments/medical care plans, as appropriate, agreed by staff, parents/carers and any other professionals actively involved.
- 3.5 Where a child does not have a relevant plan 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). It is recommended practice that information on intimate care should be treated as confidential and communicated in person, by telephone or by sealed letter, not through the home/school diary.
- 3.7 Every child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Adults who assist children on a one-to-one basis must be employees of the school and be DBS checked at the appropriate level.
- 3.8 It is recommended that two members of staff are present to assist with intimate procedures, however, it is not always practical for two members of staff to be present and also this does not take account of the child's privacy. It is necessary, however, for a member of staff to inform another adult when they are going to assist a child alone with intimate care and that they do not lock the cubicle of door.
- 3.9 Male members of staff will NEVER provide routine intimate care (such as toileting or changing) for girls. This is safe working practice to protect children and to protect staff from allegations of abuse.
- 3.11 The religious views and cultural values of families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- 3.12 No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.
- 3.13 Soiled nappies and clinical waste will be disposed of appropriately in accordance with IOW council guidelines.

#### Nappy Changing Procedure

- Staff to use Hygiene Room and children to be changed using the changing bed.
- Staff to wear disposable gloves and aprons while dealing with the incident including disposal of the nappy

- Soiled nappies are to be disposed of correctly and in the correct bin in the Hygiene Room
- Changing area to be cleaned after use with antibacterial spray
- Hot water and liquid soap available to wash hands as soon as the task is completed
- Paper towels available for drying hands

#### 3. Child protection

- 4.0 The Governors and staff of Wootton Primary School recognise that children with special needs and disabilities are particularly vulnerable to all types of abuse.
- 4.1 The schools' chid protection policy and inter-agency child protection procedures will be accessible to staff and adhered to.
- 4.2 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.
- 4.3 Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.
- 4.4 If a member of staff has any concerns about physical changes in a child's presentation when carrying out a care procedure, eg. Unexplained marks, bruises, soreness etc. s/he will immediately report concerns to the Headteacher (DSL), or in her absence, DDSL members of staff, who will then follow safeguarding procedures and protocols.
- 4.5 If a child becomes distressed or very unhappy about being cared for by a particular member of staff, this should be reported to the class teacher or Head teacher. The matter will be investigated at an appropriate level (usually the head teacher) and outcomes recorded. Parent/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 issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- 4.6 If a child makes an allegation against an adult working at the school, this will be reported immediately to the LADO in accordance with the agreed safeguarding procedure.
- 4.7 Any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the head teacher or to the Chair of the Governing Board if the concern is about the head teacher.

#### 4. Partnership Working

- 5.0 Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to young people. Much of the information required by the school to make the process of intimate care as comfortable as possible is available from the parents. Regular consultation and information sharing remains an essential feature of this partnership.
- 5.1 Issues around toileting should be discussed at a meeting with parents/carers prior to admission into the school.
- 5.2 Prior permission must be obtained from parents before intimate care procedures are carried out (see Appendix 1)
- 5.3 Parents responsibilities include:
  - Agreeing to change the child at the latest possible time before coming to school
  - Providing spare nappies, wet wipes and a change of clothes
  - Understanding and agreeing the procedures to be followed during changing at school
  - Agreeing to inform the school should the child have any marks/rash
  - Agreeing to review arrangements, in discussion with the school, should this be necessary
  - Agreeing to encourage the child's participation in toileting procedures wherever possible

#### 5. Medical Procedures

- 7.0 Sometimes, children might require assistant with invasive or non-invasive medical procedures such as the administration of emergency or daily medication/insulin injections and enteral feeding. These procedures are overseen by the school nurse/community nurses, who provides written guidelines and training to appropriate members of staff. Such procedures will only be carried out by those staff trained to do so.
- 7.1 Any members of staff who administer first aid will be appropriately trained. If an examination of a child is required in an emergency aid situation another adult will be present with due regard to the child's privacy and dignity. Record Keeping Records are kept of any medical/enteral feeding procedures and first aid interventions.

## **APPENDIX 1**

## Permission for Schools to provide intimate care

Child's First Name					
Child's Last Name					
Male/Female					
Date of Birth					
Parent/Carers Name					
Address					
Name					
Signature					
Relationship to child					
Data					

## **APPENDIX 2**

## **Record of Intimate Care Intervention**

Child's Name				
Date of Birth				
Name of Staff Inv	volved			
Date	Time	Procedure	Staff Signature	Second Signature