

Intimate Care Policy

This policy applies all pupils in the school, including in the EYFS

Signed:	
Chair of Local Advisory Board:	Ian Phillips
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Review Period	2 years
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Intimate Care Policy

The intimate care policy applies to all staff involved in the intimate care of children.

Policy aims:

- To safeguard and make paramount the dignity, rights and well-being of children
- To ensure that the school makes reasonable adjustments to meet pupils' intimate care needs and that there is equality of opportunity for all pupils
- To provide guidance and reassurance to staff
- To assure parents/carers that staff are knowledgeable about intimate care and that their individual needs and concerns are taken into account
- To enable parents/carers to give informed consent for the school to provide intimate care to their child

Definition of 'Intimate Care'

Intimate care may be defined as any activity required to meet the personal care needs of an individual child.

Intimate care can include:

- nappy changing
- washing,
- cleaning (e.g. after a child has wet or soiled themselves)
- changing,
- dressing or undressing
- supervision of children involved in intimate self-care

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.

In some cases, administration of medication and first aid may involve intimate care. Procedures for administration of medications are detailed in the First Aid and Administering Medications Policy, however the intimate care policy should also be adhered to for issues relating to intimate care.

Our Approach to Best Practice

The management of children with intimate care needs is 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.

Staff who provide specific intimate care are trained to do so (including Child Protection and Moving and Handling if necessary) and are aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements following assessment from outside professionals, e.g. physiotherapist, health visitor. Staff will be supported to adapt their best practice in relation to the needs of individual children.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many members of staff will need to be present when intimate care is administered. Where possible, one child will be catered for by one adult however another adult will always be present in the vicinity. Specific intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's 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.

Sharing information with Parents and Carers

For all children joining the school, parents will be asked whether they give consent to intimate care being administered by staff. For children with intimate care needs, parents/carers will be provided with a copy of this policy.

This policy is also available on the school website. Where pupils have individual needs, a Personal Care Plan will be co-constructed and signed by parents/carers (*Appendix 1*).

If a parent does not want the school to provide intimate care, we will telephone the parent to come into school to change their child. However we would expect that the parent responds rapidly to such a request in order to reduce any stress or discomfort for the child.

Nappies, Pull Ups and Toilet Training

We encourage all parents/carers to toilet train their child before starting school. However, we understand that there may be reasons why a child is not fully trained when they start school. In this instance we ask that parents provide their child with “pull ups” rather than a nappy as soon as they are ready to allow the child greater independence. When children are ready for toilet training, we will work with families to jointly implement the routines and support needed.

A personal care plan will be agreed with parents/carers (*Appendix 1*)

Procedures

- Staff member to check whether the parent/carer has given consent for intimate care. This information is on arbor in the consents section of the student profile.
- For children who have soiled themselves and do not have a personal care plan, or children who are refusing intimate care from school staff, staff may wish to call the parent to check whether they would prefer to come to clean/change their child. However, if the parent has given written consent (recorded on arbor) and does not answer the phone or does not come to the school, school staff should administer intimate care in line with procedures below.
- Staff members are calm and reassuring to the child, telling them that we will look after them and that they are ok. Staff should not show disgust, pull faces or make negative comments.
- Children’s privacy is respected. Children are changed in areas where they cannot be seen by other children, parents, visitors or staff not involved in their intimate care or staff supervision. Staff do not discuss what has happened in corridor areas.
- Staff inform colleagues when they are carrying out intimate care duties and will tell the child what will happen. Staff will carry out intimate care duties with the knowledge of at least one other member of staff and where they can be seen by at least one other member of staff.
- Children can access the toilet whenever they have the need to and are encouraged to be independent.
- Parents/carers will be notified if their child soiled/wet themselves and needed to be changed.

Where there is parental consent for intimate care:

- Key persons are aware of the young children in their care who wear nappies or pull-ups and those children who have occasional accidents. They are aware of children’s personal care plans.
- Children should wear ‘pull-ups’ or other types of training pants as soon as they are ready and their parents agree.
- A changing station is available for use in the Medical room when children need to lie down to be changed.
- Children wearing pull ups or pants will be changed in the Reception toilet area or Shower room.
- To promote independence, children are encouraged to do as much for themselves as they are able to
- The changing area is prepared and gloves put on before changing starts. New gloves are used each time a new child is changed.
- Children are never left unattended or unsupervised whilst they are on a changing table.
- Nappy changing is relaxed and comfortable. Staff are gentle and do not show disgust, pull faces or make negative comments about ‘nappy contents’
- Children are encouraged to take an interest in using the toilet.
- Children are encouraged to wash their hands, and have soap and towels to hand. They are allowed some time for play as they explore the water and the soap.
- Nappies and pull ups are disposed of hygienically. Any soil (faeces) in nappies or pull ups is flushed down the toilet and the nappy or pull up is bagged and put in the bin. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled are bagged for parents to take home.

- A written record should be kept in the agreed format every time a child requires assistance with intimate care or has physiotherapy/OT. These records will be available to parents/carers on request.
- Parents/carers will be notified if their child soiled/wet themselves and needed to be changed.

Where there is no parental consent for intimate care:

- If a parent/carer has not given consent, a member of staff must call the parent/carer or ask the welfare office or member of staff to call them. The person calling should establish how long the parent/carer will take to arrive and ensure this information is passed to the staff members with the child. The person calling should inform the parent that they will not be able to change the child as there is no written consent, and let the parent know what steps will be taken.
- If the parent/carer will be more than 20 minutes to arrive, a member of SLT should be informed.
- The child should be encouraged to begin to change and clean themselves if possible. They should be provided with wipes and clean clothes, and a member of staff should stay nearby to offer verbal assistance.
- Soiled clothes should be put in a bag to be sent home, and the child encouraged to wash their hands.
- Information should be provided to the parent at collection about what support has been offered to the child, who supported them and how, e.g. that the child changed themselves, while an adult stood outside the cubicle door.

Child Protection and Safeguarding

The Child Protection and Safeguarding Policy will be adhered to.

If a member of staff has any concerns about a child's physical presentation, e.g. marks, bruises, injuries, soreness etc. he/she will immediately report concerns to the designated safeguarding lead (DSL) or DSL Deputy.

When providing intimate care, staff should carefully and sensitively observe the child's emotional response and report any concerns to the designated teacher. Parents/carers will be contacted as part of this process to reach a resolution.

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. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount.

Physiotherapy / Occupational Therapy

Children who require physiotherapy/occupational therapy whilst at school should have this carried out by trained physiotherapists. If this is agreed in the individual education plan or health care plan that a member of the school staff should undertake part of the physiotherapy/OT programmes (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly.

In no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes.

Any concerns about the programmes or any failure in equipment should be reported to the Special Educational Needs and Disability Co-ordinator (SENDCo) immediately.

Record Keeping

A written record should be kept in the agreed format every time a child requires assistance with intimate care or has physiotherapy/OT. These records will be available to parents/carers on request.

Parents/carers will be notified if their child soiled/wet themselves and needed to be changed.

Additional Related Policies

- Child Protection and Safeguarding Policy

- Health & Safety Policy
- SEND Policy and SEND Information Report
- Keeping Children Safe in Education
- Working Together to Safeguard Children
- Supporting Pupils with Medical Conditions and Administration of Medicines Policy
- NSPCC Factsheet for schools: getting changed for PE (March 2018)

Personal Care Plan

For children wearing nappies or pull-ups, or children who have regular intimate care needs

This plan should be co-constructed and agreed with parents/carers

Child's Name: _____ DOB: ____/____/____

Completed By: _____

Date of Plan: ____/____/____

Review Date: ____/____/____

Procedure:

Reason for Personal Care Plan/Intimate Care Needs:
Who will change the child:
How will the child be changed? e.g. standing up, in a cubicle
Who will provide the resources? e.g. wipes, pull-ups, disposable gloves
How will wet/soiled clothes be dealt with?
How will the child be encouraged to participate in the procedure?
Any other comments/important information: e.g. medical information

This plan has been agreed with me and I agree to bring my child to school in a clean nappy/pull ups, provide the resources indicated above and encourage my child's participation in toileting procedures at home as appropriate as discussed and where possible.

I give consent for school staff to provide intimate care to my child, including changing their nappy, pull ups, underwear or other clothes if they have wet or soiled themselves or require changing.

Parent/Carer's full name: _____ Signature: _____ Date: _____

