Burnt Tree Primary School



Intimate Care Policy

Signed by Chair of Governors	apsort
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Burnt Tree Primary School INTIMATE CARE POLICY

Introduction

The Intimate Care Policy represents the agreed principles for intimate care throughout the school and have been developed to safeguard both children and staff. They apply to everyone involved in the intimate care of children.

What is Intimate Care?

Intimate care can be defined as care tasks that support the personal care needs of each individual child. Parents and staff have the responsibility to work in partnership to plan for the intimate care needs of a child. Children's dignity will be preserved, and a high level of privacy, choice and control will be provided appropriate to their level of developmental need. Burnt Tree 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.

All children at Burnt Tree Primary have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of the schools provision. This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. If should be considered in line with the Safeguarding, Health and Safety, Supporting Pupils with Medical Conditions and Administering of Medicines policies. This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2012 and the Equality Act 2010. Manor Primary School will act in accordance with Section 175 of the Education Act 2002 and the Government guidance 'Keeping Children Safe in Education Sept 2019 to safeguard and promote the welfare of pupils at the school.

Definition

Intimate care is one of the following:

- Supporting a pupil with dressing/undressing.
- Providing comfort or support for a distressed pupil.
- Assisting a pupil requiring medical care, who is not able to carry this out unaided.
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell.

Principles

It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. As far as possible, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. It is important for staff to bear in mind how they would feel in the child's position. Given the right approach, intimate care can provide opportunities to teach children about the value of their own bodies, to develop their safety skills and to enhance their self-esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young persons' right to privacy and dignity is maintained at all times.

Our Approach to Best Practice

The management of all children/young people with intimate care needs will be carefully planned and should be a positive experience for all involved. The child/young person who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide this care are trained to do so (including Safeguarding and Child Protection and Moving and Handling Training) and are fully aware of best practice. Suitable equipment and facilities will be provided to assist with children/young people who need special arrangements following assessment from a physiotherapist/occupational therapist.

Staff will be supported to adapt their practice in relation to the needs of individual children/young people taking into account developmental changes such as puberty e.g. menstruation. Whenever possible, staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex and relationships education to the children/young people in their care as an additional safeguard to both staff and children involved. If staff are involved, care should be taken to ensure that resource materials cannot be misinterpreted and clearly relate to the learning outcomes identified by the lesson plan. This plan should highlight particular areas of risk and sensitivity.

Children/young people will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will ensure each child/young person does as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up as appropriate and shared and agreed by the child/young person and their parents/carers.

Each child/young person's right to privacy will be respected. Careful consideration will be given to each situation to determine how many staff need to be present when the child/young person is being cared for. Where possible, one child will be catered for by one adult unless there is a sound reason for having more adults present. In this case, the reasons should be clearly documented and reassessed regularly.

Wherever possible staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence, for example female staff supporting boys when there is no male staff.

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/young people and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Partnership with Parents and Carers

Where regular intimate care is required, this will be agreed in advance. Staff will work in partnership with parents/carers to establish an Intimate Care plan to provide care appropriate to the needs of the individual child.

The care plan will set out:

What care is required

- Number of staff needed to carry out the task (if more than one person is required, reason will be documented)
- · Additional equipment required
- Child's preferred means of communication (e.g. visual, verbal).
- Agree terminology for parts of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- Acknowledgment and respect for any cultural or religious sensitivities related to aspects of intimate care
- How and when the plan will be reviewed in accordance with the child's development.

Parents/Carers are asked to supply the following where regular intimate care is required:

- Spare clothes
- Spare underwear
- Any other identified consumables (e.g. changing mat, antibacterial wipes, nappy sacks, nappies, baby wipes)

Safeguarding Children

Sandwell LSCB Safeguarding Interagency Procedures and Safeguarding and Child Protection Procedures for Education will be adhered to alongside the school/setting's policy and procedures.

All children/young people will be taught personal safety skills relative to their age, ability and understanding. These skills will be shared with parents/carers to enable them to be consolidated within the home/community.

If a member of staff has any concerns about physical or behavioral changes in a child/young person's presentation, e.g. marks, bruises, soreness or reluctance to go to certain places/people etc. s/he will immediately pass their concerns to the designated person for child protection in their school/setting.

If a child/young person is displaying inappropriate sexual behaviour, advice should be sought from the appropriate source (e.g. In schools this might be: Designated Person for Child Protection, School Nurse, Social Care, Education Child Protection Service

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 issue/s are resolved so that the child/young person's needs remain paramount. Further advice, following the Interagency Procedures will be taken from outside agencies as necessary.

If a child makes an allegation against a member of staff the procedures for Allegations Against Staff, in the Safeguarding and Inter-Agency Procedures will be followed. All staff will be required to confirm that they have read the school Policy and Guidance for Intimate Care and be aware of the need to refer to other policies the school/setting may have in place for clarification of practices and procedures.

Protection of Staff

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk. These should include:

- Gaining a verbal agreement from another member of staff that the action being taken is necessary.
- Allow the child, wherever possible, to express a preference to choose his/her carer.
- Allow the child a choice in the sequence of care.
- Be aware of and responsive to the child's reactions.
- Have another adult present

EYFS

Due to the increasing number of children entering the Early Years who are not toilet trained the procedures we will follow when nappy changing and in the case of a child accidently wetting or soiling him/herself are detailed below.

We are an inclusive school and do admit children who are not fully toilet trained but we feel that it benefits the child if he/she is out of nappies or at least working towards this by the time they start school. If children are still in nappies at home parents are encouraged to use pull ups for school so that staff can support with toilet training with the child attending school in pants as soon as possible.

Parents are made aware that the Early Years Team are on hand to offer advice on how to toilet train and are put into contact with relevant support if wanted. Parents are also asked to inform us of any medical conditions which requires their child to need a nappy.

Frequently Asked Questions

• Where will changing will take place?

In the Nursery toilet area or in the changing room located in the Key Stage One on the changing bed.

What resources will be used?

A changing mat, gloves, antibacterial wipes, nappy sacks, nappies, baby wipes (provided by parents)

How will the nappies will be disposed of?

In a nappy sack and in the hygienic disposal nappy bin.

What infection control measures are in place?

Staff will wear disposable gloves while dealing with the incident.

Changing area will be cleaned after use.

Hot water and soap is available to wash hands as soon as the task is completed. Hot air dryer or paper towels are available for drying hands.

What will the staff member do if the child is unduly distressed by the experience?

Staff will comfort and reassure the child, talk through what they are doing and ensure the change is completed swiftly to ensure the stress is not prolonged.

• What will the staff member do if he/she notices marks or injuries on the child?

Follow the school safeguarding policy and report it to the Designated Safeguarding Lead.

Review

This policy will be reviewed annually by staff. However, staff in consultation with other relevant bodies may review the policy earlier than this if new regulations are introduced or if recommendations are received about how the policy may be improved.