

St. John's Primary School

Intimate Care Policy

"You should be protected from things that could harm you."

Article 36 United Nations Rights of the Child

Thinking learning Caring

Introduction

St John's School is committed to ensuring that all staff responsible for the intimate care of children will always undertake their duties in a professional manner. We recognise that there is a need to treat all children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain. Children's dignity will be preserved, and a high level of privacy, choice and control will be provided to them. Staff that provide intimate care to children have a high awareness of safeguarding issues. Staff will work in partnership with parents/carers to provide continuity of care.

Intimate care is any care which involves washing/ cleaning intimate personal areas or care which involves specific procedures as recommended by a Health Professional where a care plan is in place. Intimate care involves procedures to do with personal hygiene or health conditions and the cleaning of associated equipment as part of the staff member's duty of care. In the case of specific procedures recommended by a health professional, only staff suitably trained and assessed as competent should undertake the procedure.

Our Approach to Best Practice

The management of all children with intimate care needs will be carefully planned. The child who requires care will be always treated with respect; the child's welfare and dignity is of paramount importance. Staff who provide intimate care are fully aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements following assessment from the appropriate agencies. It is essential that the adult who is going to change the child informs the teacher and/or another member of staff that they are going to do this. There is no written legal requirement that two adults must be present. However, to completely secure against any risk of allegation, a second member of staff may be present where resources allow.

Managing Intimate Care

The child 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 him/herself as they are able. For children who wet or soil themselves on a regular basis and are unable to manage their own personal hygiene, intimate care plans will be drawn up for individuals as appropriate to suit the circumstances of the child. For Nursery children who have regular accidents, a parent agreement form that gives permission for the EYFS team to provide intimate care will be put in place. (Appendix 1)

Procedure

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers will need to be present when the child is toileted. Wherever possible the child should be cared for by an adult of the same sex. However, in EYFS/ KS1 this principle will need to be waived where the failure to provide appropriate care would result in negligence for example, female staff supporting boys in our school, as no male staff are consistently available. Intimate care arrangements for children who have been identified as requiring a Care Plan will be discussed with parents/carers on a regular basis and recorded on the child's personal care plan. The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing and equal opportunities legislation. The Protection of Children Safeguarding Procedures and Multi-Agency Protection procedures will be adhered to.

Record Keeping

A record should be kept following all incidents of Intimate Care undertaken by staff members. This must detail who changes the child, how often this task is carried out and the time they left/returned to the classroom following this task. (Appendix 2) The policy accompanied by the record keeping sheets is maintained as a printed hard copy for incidents to be recorded upon. This includes incidents where intimate care only involved instructions. One copy is held within nursery and another, for the rest of school, is kept in the School Office.

Procedure in the event of a child who is still wearing nappies/ pull up pants.



In the case of a care plan in place for wearing nappies or pull up pants, the school will request support from Family Nursing. An agreement form will be made available for parents to sign. This document will outline who will be responsible within the school for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task from the outset.

The dignity and privacy of the child is of paramount concern. A private area is used for changing; however, consideration should be given to the sighting of this area from a health and safety aspect. The area should not be situated in a thoroughfare, as a changing mat may have to be used when a child is to be changed.

Equipment Provision

We ask the parent to provide nappies, disposal bags, wipes, changing mat etc. and parents are made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

First Aid and Intimate Care

Staff who administer first aid should ensure wherever possible that another adult or other children are present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Safeguarding Considerations

In the circumstance where parents do not co-operate with intimate care agreements, concerns should be raised with the parent/carer in the first instance. A meeting may be called that could possibly include the health visitor and headteacher to identify the areas of concern and how all present can address them. Should concerns continue, there should be discussions with the school's safeguarding DSL about the appropriate action to take to safeguard the welfare of the child. If any member of staff has concerns about physical changes to a child's presentation, e.g., marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate designated person for safeguarding.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated, and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of the process to reach a resolution; staffing schedules will be altered until the issue(s) are resolved.

All staff will be required to confirm that they have read the 'Intimate Care Policy and Guidance' document.

Change History

| Version | Date Issued | Issued by | Reason for Change | Presented To | Approved by: | Date |
|---------|------------------|----------------------|-------------------|--------------|--------------|------------------|
| 0.1 | November 2018 | Trudie De La Haye | | | | |
| 0.2 | December 2022 | Hilary Jones | Procedural Change | Jamie Hazley | Jamie Hazley | December 2022 |



APPENDIX 1



Parental permission for Intimate Care

| Should it be necessary, I give permission for | to receive intimate |
|--|---------------------|
| care (e.g. help with changing or following toileting). | |

□ I understand that staff will endeavour to encourage my child to be independent.

 \Box I understand that I will be informed discretely should the occasion arise.

Signed:_____

Date: _____

Adult with parental responsibility for: _____





Record of Intimate Care

| Name of Child | Date and time | Comments | Staff Involved | Signature |
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