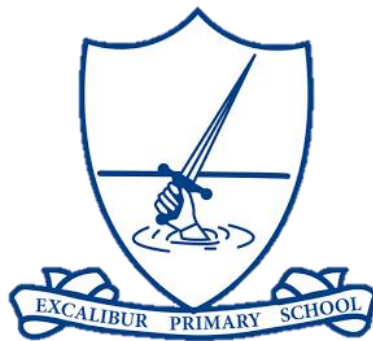


# **Intimate Care Policy**

## **Excalibur Primary School**



**The Intimate Care Policy in respect of Excalibur Primary School has been discussed and adopted by the Governing Body**

*Chair of Governors/Committee:*

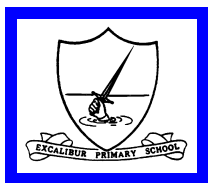
*Gill Burgess*

*Head Teacher:*

*Juliet Jones*

*Ratified at the meeting of Full Governing Body on: 29<sup>th</sup> November 2021*

*To be reviewed: November 2024*



# Excalibur Primary School

## Intimate Care Policy

This policy represents the agreed principles for intimate care throughout the school. It is closely linked to other school policies, including Child Protection, Health and Safety, Inclusion and Medicines.

### **Introduction**

The purpose of this policy is to:

- safeguard the rights and promote the best interests of children;
- ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one;
- safeguard adults required to operate in sensitive situations;
- raise awareness and provide a clear procedure for intimate care;
- provide guidance and reassurance to staff and parents/carers;
- ensure parents/carers are consulted in the intimate care of their children.

### **Principles**

All children who require intimate care are treated respectfully at all times, the child's welfare and dignity is of paramount importance. Staff who work with young children or children who have special needs will realise that the issue of intimate care can be a difficult one. It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. If appropriate, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the child's right to privacy and dignity is maintained at all times.

### **Definition**

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which involve washing, touching or carrying out an invasive procedure (such as cleaning after a child has soiled him/herself). Most children can carry out such care tasks for

themselves, but some are not able to do so, due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development.

Intimate care may include any of the following:

- Supporting a pupil with dressing/undressing
- Assisting a pupil requiring medical care, who is not able to carry this out unaided
- Care associated with menstrual management
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell

### **Our Approach to Best Practice:**

Where a routine procedure is required, an intimate care plan should be agreed in discussion with the child, school staff, parents and relevant health personnel. The plan should be signed by all who contribute and reviewed on an agreed basis.

Positive links with other agencies will enable school-based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child's well being and development remains paramount. The school nurse will be informed of all children requiring intimate care and provide training to enable the school to fully meet individual needs.

### **Supporting dressing/undressing**

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 independently first.

### **Medical procedures (See Medicines Policy)**

If it is necessary for a child to receive medicine during the school day, parents must fill out a permission form from the school office and discuss their child's needs with a member of staff before the school agrees to administer prescribed 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
- the prescribed dose
- expiry date of medicine

Particular attention should be paid to the safe storage, handling and disposal of medicines. The Head Teacher has prime responsibility for the safe management of medicines kept at school. This duty derives from the Control of Substances Hazardous to Health Regulations 2002 (COSHH). School staff are also responsible for making sure that anyone in school is safe. 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.

## **Soiling**

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, following consultation with the class teacher and SENCo.

If a child soils unexpectedly, though illness, a parent/carer or emergency contact will be contacted in order 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/herself. If the parents and emergency contacts cannot be contacted the Head Teacher will be consulted.

If a child needs to be cleaned, staff will make sure that:

- 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 covered or wiped up and disposed of in an appropriate way
- 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

## **Hygiene**

All staff must be familiar with normal precautions for avoiding infection, must follow basic hygiene procedures and have access to protective, disposable gloves.

## **Protection for staff**

Members of staff who provide intimate care to children should have a high awareness of child protection issues. Staff behaviour is very rightly, open to scrutiny and staff at Excalibur work in partnership with parents/carers to provide continuity of care to children wherever possible.

Excalibur 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. Our approach to best practice includes:

- 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 and encourage them to say if they find a carer to be unacceptable;
- allow the child a choice in the sequence of care;
- be aware of and responsive to the child's reactions;
- whenever possible the same child will not be cared for by the same adult; there will be a rota of carers known to the child who will take turns in providing care.
- careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is made aware of each procedure that is carried out and the reasons for it.

## **Safeguards for children**

There is an obligation on local authorities to ensure that staff who have substantial, unsupervised access to children undergo police checks. All staff at Excalibur Primary School are DBS checked on application and cannot undertake tasks within school until all checks are completed satisfactorily. Personal and

professional references are also required and unsuitable candidates are not permitted to work within the school. All those working with children should be closely supervised throughout a probationary period and should only be allowed unsupervised access to children once this has been completed to their supervisor's satisfaction.

It is not appropriate for volunteers to carry out intimate care procedures.

Where appropriate, all children will be taught personal safety skills matched to their level of development and understanding, as part of Personal, Social and Health Education.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness, etc., s/he will immediately report concerns to the school's designated Child Protection Co-ordinator. A record of concern will be completed and, if necessary, referred further. Parents will be asked for their consent or informed that a referral is necessary prior to it being made, unless doing so is likely to place the child at greater risk of harm.

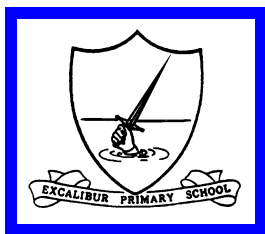
If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until any issues are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

Any allegations against members of staff will be dealt with in accordance with LEA guidelines, as detailed in our Child Protection Policy.

### **Monitoring and Evaluation**

This policy is monitored by the governing body and will be reviewed annually.

November 2018



## **Permission form for the Provision of Intimate Care**

I understand that:

- I give permission to Excalibur Primary School to provide appropriate intimate care support to my child e.g. changing nappies, pull-ups or soiled clothing, washing and toileting;
- I will advise the Head Teacher or SENCo of any medical complaint my child may have which may affect issues of intimate care;
- Excalibur Primary School has an Intimate Care Policy, available on our website.

Name.....

Signature.....

Relationship to child.....

Date.....

Child's Surname.....

Child's Forename.....

Male/Female.....

Date of birth.....