

Bitterne CE Primary School



Intimate Care Policy

Headteacher

Last review- July 2022

Next review- July 2024

Chair of Governors- Amanda Humby

Introduction

This policy should be read in conjunction with the school's Safeguarding Policy.

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas. 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, (e.g. the administration of rectal medicine.)

The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues.

Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

Statement of Intent

Bitterne CE 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. We recognise that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

Implementation

- ❖ The management of all children with intimate care needs will be 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 intimate care will be trained to do so (including Child Protection and Health and Safety training in lifting and moving, where applicable) and are fully aware of best practice.
- ❖ Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.
- ❖ Staff will be supported to adapt their practice in relation to the needs of individual children.
- ❖ 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 he/she can. This may mean, for example, giving the child responsibility for washing themselves.
- ❖ Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child and these will be agreed and signed by a parent/ guardian. Where a child requires intimate care in school for the first time, they will be treated in line with this policy and in discussion with parents afterwards an individual intimate care plan may be developed.
- ❖ Each 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 is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present. If this is the case, the reasons should be clearly documented. Where contact of a more intimate nature is required, another adult should be made aware of the task being undertaken and be in earshot.
- ❖ 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.

- ❖ All school staff will work effectively with other agencies to ensure care plans are implemented and reviewed, such as 'Jigsaw' or OT.

The protection of children

Education Child Protection Procedures will be adhered to.

All children will be taught personal safety skills carefully matched to their level of development and understanding.

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 appropriate manager/ designated person for child protection.

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.

If a child makes an allegation against a member of staff, all necessary procedures will be followed as set out in the child protection policy with involvement of the LADO (Local Authority Designated Officer).

Intimate Care Guidelines

Children wearing nappies

If the school is asked to admit a child who is still wearing nappies, parents will be given a copy of the intimate care policy and the practice in the school will be discussed with them. The parents will be asked to sign an individual intimate care plan outlining who will be responsible within the school for changing the child and when and where this will be carried out. A note book will be kept in school to record who changes a child, and the times involved. Parents will be informed of the intimate care that has taken place.

Changing facilities

Children who have long term incontinence or who need to change separately for other medical reasons, will use one of the disabled toilets which have been designed with this function in mind. The dignity and privacy of the child will be of paramount concern. When a child is to be changed and requires adult assistance for this, a changing mat is available to be used on the floor. This is the recommended method of changing a child, as it avoids an adult having to lift a child and cause possible back injury.

Equipment Provision

The parent should provide nappies, disposal bags, wipes, changing mat etc. Parents will be made aware of this responsibility. The school will be responsible for providing gloves, plastic aprons, masks/ visors, a bin and liners to dispose of any waste.

Health and Safety

Staff should always wear a mask / visor apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in the designated 'bodily fluids' bin (complete with a liner) specifically designated for the disposal of waste. There is a separate bin for handtowels etc. The bin will be emptied on a daily basis and it will be collected as part of the usual refuse collection service as this waste is not classed as clinical waste. Staff should be aware of the school's current Health and Safety policy and follow the latest guidance with regard to the safe management of any possible COVID19 virus transmission.

Special needs

Children with special needs have the same rights to safety and privacy when receiving intimate care as those without. Additional vulnerabilities that may arise from a physical disability or learning difficulty will be considered with regard to individual teaching and care plans for each child. As with all arrangements for intimate care needs, agreements between the child, those with parental responsibility and the school will be easily understood and recorded. Regardless of age and ability, the views and/or emotional responses of children with special needs will be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements.

Guidance to safeguard children and education staff with regard to situations which may lend themselves to allegations of abuse

(Physical contact, first aid, showers/ changing clothes, out of school activities, and photography)

Physical Contact

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact. The expectation is that staff will work in 'limited touch' cultures and that when physical contact is made with pupils this will be in response to the pupil's needs at the time, will be of limited duration and will be appropriate given their age, stage of development and background.

Staff should be aware that even well intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny. Physical contact which is repeated with an individual child or young person is likely to raise questions unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

Children with special needs may require more physical contact to assist their everyday learning. The general culture of 'limited touch' will be adapted where appropriate to the individual requirements of each child. The arrangements must be understood and agreed by all concerned, justified in terms of the child's needs, consistently applied and open to scrutiny. Wherever possible, consultation with colleagues should take place where any deviation from the arrangements is anticipated. Any deviation and the justification for it should be documented and reported.

Extra caution may be required where a child has suffered previous abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to staff being vulnerable to allegations of abuse. Additionally, many such children are extremely needy and seek out inappropriate physical contact. In such circumstances staff should deter the child without causing them a negative experience. Ensuring that a witness is present will help to protect staff from such allegations.

Pupils in distress

There may be occasions when a distressed pupil needs comfort and reassurance that may include physical touch, such as a caring parent would give. Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation. Where appropriate, PPE should be worn. Judgement will need to take account of the circumstances of a pupil's distress, their age, the extent and cause of the distress. Unless the child needs an immediate response, staff should consider whether they are the most appropriate person to respond. It may be more suitable to involve the child's relative. Particular care must be taken in instances which involve the same pupil over a period of time. Where a member of staff has a particular concern about the need to provide this type of care and reassurance, they should seek further advice from their line manager or other appropriate person.

First Aid and intimate care where a child does not have a plan

Staff who administer first aid/ intimate care, where the child does not already have an intimate care plan, 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. Regular requirements

of an intimate nature will result in an intimate care plan being created and agreed by parents. Agreements between the school, those with parental responsibility and the child concerned will be documented and easily understood. The necessity for such requirements will be reviewed regularly. The child's views will also be actively sought and, in particular, any discomfort with the arrangements addressed as outlined in the Intimate Care Policy and guidance.

Physical Education and other skills coaching

Some staff are likely to come into physical contact with pupils from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment. Staff should be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation. Where it is anticipated that a pupil might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable pupil in the demonstration.

Showers/changing clothes

The schools do not have specially designated shower/changing rooms. When visiting other schools, sporting faculties or when on residential visits the following guidance will apply. Young people are entitled to respect and privacy when changing clothes or taking a shower. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying or teasing does not occur. This means that adults should announce their intention of entering changing rooms, avoid remaining in changing rooms unless pupil needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour. Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct e.g. adults must not change in the same place as children or shower with children.

When changing for P.E. and games, children in EYFS, KS1 and lower KS2, change in their classrooms. Due to their age, it is appropriate for this to be mixed gender. If for religious or cultural reasons a parent does wish for this to happen, alternative arrangements are made within the school. In the upper KS2, girls and boys change in separate classrooms. In both cases, the children are supervised by the teachers, who will take into account the relevant aspects of these guidelines.

Out of school trips, clubs etc.

Employees should take particular care when supervising pupils in the less formal atmosphere of a residential setting or after-school activity. Although more informal relationships in such circumstances tend to be usual, the standard of behaviour expected of staff will be no different from the behaviour expected within school. Staff involved in such activities will be familiar with the school's policy and all LA guidance regarding out of school activities.

To ensure pupils' safety, increased vigilance may be required when monitoring their behaviour on field trips, holidays etc. It is important to exercise caution so that a pupil is not compromised and the member of staff does not attract allegations of overly intrusive or abusive behaviour. On occasions (field trips/days out, etc.) some pupils might be short of funds and would be embarrassed or singled out if this were known. It would be acceptable for a member of staff to subsidise a child, provided that this was disclosed to colleagues.

Meetings with pupils away from the school premises where a chaperone will not be present, are not permitted unless specific approval is obtained from the head teacher or other senior colleague with delegated authority. Staff should not place themselves in a position where they are in a

vehicle, house or other venue alone with a child. If staff come into contact with pupils whilst off duty, they must behave as though in their professional role and not give conflicting messages regarding their own conduct.

Photography, videos and similar creative arts

Staff should be aware of the potential for such mediums of teaching to be used for the wrong purposes. Additionally, children who have been previously abused in this way may feel threatened by the legitimate use of photography, filming etc. The potential for founded and unfounded allegations of abuse requires that careful consideration be given to the organisation of these activities. The school has policies and protocols for the taking and use of images and of photographic equipment and staff must follow these. Consent to participating in these activities should be sought from the child and those with parental responsibility at the beginning of courses, but staff should remain sensitive to those children who appear particularly uncomfortable with the activity.

All material produced should be viewed for acceptability by another member of staff. Its circulation should be in accordance with the school's 'Use of Images' guidelines within the E safety Policy, and relevant arrangements with parents.

Appendix 1 Intimate Care Plan

To be completed by the SENCO or representative and parent/carer & shared with all staff who are involved in supporting the child.

| | | | |
|--|---|-----|----|
| Name of Pupil | Class Teacher | | |
| School Staff Involved [including support staff, school nurse, specialist staff] 1. 2. 3. 4. 5. In the event of any of the above staff being unavailable, any member of staff may change my child in line with this policy. | | | |
| Nature of Intimate Care provide [including changing, toileting, feeding, showering, medical intervention, first aid, physical education] | | | |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| Parental Permission agreed | [please tick] | Yes | No |
| Special arrangements for Changing | | | |
| Special arrangements for Toileting | | | |
| Other Special arrangements above] | [please included any other intimate care not shown above] | | |
| Parents/ Carers will provide: | | | |

Signature of SENCO:

Signature of Parent/Carer:

Appendix 2 Permission for School to provide intimate Care

| | |
|--------------------|--|
| Child's last name | |
| Child's first name | |
| Male/Female | |
| Date of Birth | |
| Parent/Carers name | |
| Address | |

I give permission to the school to provide appropriate intimate care to my child
E.g. changing, toileting, feeding, showering, medical support or other.

I would like to advise you that I would like the following to be the school's approach to this:

| |
|--|
| Special arrangements for my child should be as follows |
|--|

I will advise the head teacher of any medical issues which impact on the intimate care of my child.

| |
|------------------------|
| The medical issues are |
|------------------------|

Name

Signature

Relationship to child.....

Date