INTIMATE CARE POLICY

1.0 Introduction

Mary Elton Primary School is committed to ensuring that all staff responsible for the intimate care of children undertake their duties is a professional manner at all times. We recognise the need to treat all children with respect when intimate care is given. The child's welfare and dignity is of paramount importance. Every child's right to privacy is respected.

2.0 Rationale

The purpose of this policy and procedure is to set out guidelines that safeguard children and staff by providing a consistent approach. Staff providing personal care must be aware of the need to adhere to good safeguarding practice in order to minimise the risk for both children and staff.

This policy should be read in conjunction with the:

- Safeguarding policy
- Staff Code of Conduct
- Guidance on safer working practice
- Whistleblowing
- Health and Safety Policy
- SEND policy
- Physical Intervention
- Supporting pupils with medical conditions

3.0 Aims

The aims of the policy and procedures are:

- To safeguard the dignity, rights and well-being of children.
- To ensure that children are treated consistently with sensitivity and respect when they experience personal care.
- To provide guidance and reassurance to staff.
- To ensure that parents/carers are involved in planning the intimate care of their child and are confident that their concerns and the individual needs of their child are taken into account.
- To reassure parents/carers that staff are knowledgeable about intimate care.

4.0 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 wet/soiled him/herself, has vomited or feels unwell.

5.0 Responsibilities

5.1 School Leadership Team responsibilities:

5.1.1 To ensure permission has been sought from parents/carers for staff to support their child's personal care routines through registration forms or care plans.

5.1.2 To ensure all staff are DBS checked before engaging in any personal care routines.

5.1.3 To provide facilities appropriate to the children's age and individual needs.

5.1.4 To provide appropriate guidance, training, supervision and reassurance to staff to ensure safe practice.

5.1.5 To ensure that staff will receive ongoing training in good working practices which comply with health and safety regulations, hygiene procedures, first aid and child protection procedures. To keep a record

of training undertaken by staff and to ensure that refresher training is provided where required.

5.1.6 To ensure that all staff are familiar with the school's Intimate Care Policy and procedures.

5.1.7 To provide an induction programme for all new staff and to ensure that they are made fully aware of the Intimate Care procedures for the children they are supporting.

5.1.8 To ensure no mobile phones are carried on the person, or available in the classroom, and no unauthorised recording equipment is in use, as per our Staff Code of Conduct.

5.2 School Staff responsibilities:

5.2.1 Staff must be familiar with the Intimate Care Policy and procedures, and adhere to the guidance set out.

5.2.2 Staff must report any concerns to the Designated Safeguarding Lead (DSL).

5.2.3 Teachers will liaise with parents/carers to establish specific care routines where appropriate.

5.2.4 Staff must take part in safeguarding training.

5.2.5 Staff will make considerations to pupils intimate care needs when organising school visits.

6.0 Guidelines

6.1 Procedure

6.1.1 Pupils who require regular assistance with intimate care have written SEND Arrangements, EHCP or intimate care plans by staff, parents/carers and other professionals actively involved.

6.1.2 Pupils who require regular assistance with intimate care will be provide with a backpack of spare clothing by parents/carers.

6.1.3 Where a care plan is not in place, parents/carers will be informed the same day of their child has needed help with meeting intimate care needs. This should be treated as confidentially in person or by telephone.

6.1.4 This will be recorded on CPOMS.

6.1.5 When organising school trips, staff will need to consider the intimate care plans and how these are supported through the visit.

6.1.6 Clarification will be sought by the group leader on the facilities available to allow for the intimate care of the pupils.

6.2 Supporting Dressing/Undressing

6.2.1 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 unaided.

6.3 Providing comfort or support

6.3.1 Children may seek physical comfort from staff.

6.3.2 Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated.

6.3.3 When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate.

6.3.4 If physical contact is deemed to be appropriate staff must provide care which is suitable to the age, gender and situation of the child. If a child touches a member of staff in a way that makes him/her feel

uncomfortable this can be gently but firmly discouraged in a way that makes it clear that it is the touch, not the child that is unacceptable.

6.4 Medical Procedures (See also Supporting Pupils with Medical Needs Policy)

6.4.1 If it is necessary for a child to receive medicine during the school day parents/carers must fill out a form from the School Administration Office and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care. The medicine must be in its original packaging with the dosage on the packet.

6.4.2 Any member of staff giving medicine to a pupil should check:

6.4.2.1 The pupil's name

6.4.2.2 Written instructions provided by parents or doctor

6.4.2.3 Prescribed dose and expiry date

6.4.2.4 Sign and record the time and dosage given using the Administration of Medication form.

6.4.2.5 Medicines are kept in a secure place, not accessible to pupils but arrangements are in place to ensure that any medication that a pupil might need in an emergency is readily available

6.5 Soiling

6.5.1 Intimate care for soiling should only be given to a child after the parents/carers have given permission for staff to clean and change the child.

6.5.2 Parents/carers will be asked to sign a admission form when their child joins the school so that staff can clean and change their child in the event of the child soiling themselves.

6.5.3 If a parent/carer does not give consent, the school will contact the parents/carers or other emergency contact giving specific details about the necessity for cleaning the child.

6.5.4 If the parents/carers or emergency contact is able to come within a few minutes, the child is comforted and kept away from the other children to preserve dignity until the parent/carer arrives.

6.5.5 Children are not left on their own whilst waiting for a parent/carer to arrive, an adult will stay with them, giving comfort and reassurance.

6.5.6 The child will be dressed at all times and never left partially clothed.

6.5.7 If a parent/carer or emergency contact cannot attend, the school seeks to gain verbal consent from parents/carers for staff to assist the child to clean and change.

6.5.8 If the parents/carers and emergency contacts cannot be contacted, the Headteacher will be consulted.

6.5.9 If put in an impossible situation where the child is at risk, staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

6.5.10 When touching a child, staff should always be aware of the possibility of invading a child's privacy and will respect the child's wishes and feelings.

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

6.5.11.1 Protective gloves and an apron are worn.

6.5.11.2 The procedure is discussed in a friendly and reassuring way with the child throughout the process.

6.5.11.3 The child is encouraged to care for him/herself as far as possible. This may include being asked to use the shower to wash themselves down.

6.5.11.4 Physical contact is kept to the minimum possible to carry out the necessary cleaning.

6.5.11.5 The child is clean before they redress themselves.

6.5.11.6 Privacy is given appropriate to the child's age and the situation.

6.5.11.7 All spills of vomit, blood or excrement are wiped up and disposed appropriately.

6.5.11.8 Soiled clothing is put in a bag (where possible a red washable bag), unwashed, and sent home with the child.

6.6 Hygiene

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

6.6.2 Staff will make reference to the Guidance on infection control in schools and other childcare settings document.

6.7 Protection for Staff Members of staff

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

6.7.1.1 Gaining a verbal agreement from another member of staff that the action being taken is necessary.

6.7.1.2 Another member of staff will be available to support.

6.7.1.3 Being aware of and responsive to the child's reactions.

7.0 Review

This policy will be reviewed every three years. The Local Governing Board may, however, review the policy earlier than this, if the government introduces new regulations, or if the governing Body receives recommendations on how the policy might be improved.