



NEWPORT
COMMUNITY
SCHOOL
PRIMARY
ACADEMY

Intimate Care Policy

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Author/owner: School Community Board
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Introduction

Newport Community School Primary Academy 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; children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. No child should be attended to in a way that causes distress, embarrassment or pain.

Definition

Intimate care is any care which involves washing, touching or carrying out an invasive procedure. Most children can carry these procedures out for themselves but some children are unable to do so, due to a physical disability, special educational needs associated with learning needs, medical needs or needs arising from the child's stage of development. Care may involve help with drinking, eating, dressing and toileting.

In most cases, such care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process, as part of a staff member's duty of care. In the case of specific procedures, only staff suitably trained and assessed as competent should undertake the procedure.

Aims

The aims of this document and associated guidelines are;

- To provide guidance to staff.
- To safeguard the rights, dignity and well-being of children.
- To assure parents that staff are knowledgeable about intimate care and that their individual needs and concerns are taken into account.

Objectives

The aims and ethos of this policy are implemented in legislation and other policies used within our school.

The legislation that informs this policy is; Health and Safety at Work Act 1974, The Children Act and UN Convention on the Rights of the Child 1989, The Disability Discrimination Act 1995 and The Childcare Act 2006.

This policy should be read in conjunction with other relevant school policies; Child Protection Policy; Health and Safety Policy;; First Aid Policy & The Administration of Medicines; Risk Assessment Policy; SEND Policy and Disability Plan; Physical Intervention Policy; Promoting Positive Behaviour Policy

Our Approach to Best Practice Procedures

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care will be treated with respect at all times; the child's welfare and dignity is of paramount importance. The SENDco will organise and plan any care plans needed for a child; in consultation with the parents, child, and relevant staff and outside agencies.

Staff who provide intimate care are trained to do so, (School Health Team, Child Protection, Moving and Handling) and are fully aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements, following assessment from the physiotherapist and occupational therapy teams. All staff will be required to confirm they have read the document, Guidance for staff who provide intimate care to children and Young People' DCC 2019 (see Appendix 1).

The child will be supported to achieve the highest level of autonomy that is possible given to their age and abilities. Staff will encourage each child to do as much for themselves as they can. Individual care/toileting plans (see will be drawn up for particular children as appropriate to suit the circumstances of the child. Staff will be supported by the SENDCo and outside agencies, to adapt their practice in relation to the needs of individual children, taking into account developmental changes; such as the onset of puberty.

In developing intimate care plans the whole school and classroom management implications should be considered. Some areas to consider are:

- the importance of working towards independence
- arrangements for sports day, school performance, examinations, school trips and swimming
- strategies in dealing with pressure from peers
- who will substitute in the absence of the appointed person
- the child's seating in the class, a system to allow the child to leave the classroom without disruption to the lesson, avoidance of missing the same lesson due to medical routines, awareness of a child's discomfort which may affect learning, additional time for changing for PE.

When children need intimate care facilities, reasonable adjustments will be made to ensure that an appropriate room is available for staff and children to use. Each child's right to privacy will be respected. It is the responsibility of all staff caring for the child to ensure they are aware of the child's method and level of communication. Communication methods may include words, signs, symbols, body movements and eye pointing.

Careful consideration will be given to each child's situation to determine how many carers might need to be present during intimate care arrangements. It is recommended that two adults are present when invasive procedures are performed, though for toileting plans, once a management

plan has been agreed (signed by parents, the child if appropriate and staff involved), then it is acceptable for only one member of staff to assist, unless there is an implication for safe moving and handling of the child (see Appendix 2). A record of intimate care intervention should be recorded by staff involved using the schools daily accident record.

The Protection of Children

The following are factors that can increase a child's vulnerability;

- Children who need help with intimate care are statistically more vulnerable to exploitation or abuse.
- Children with disabilities may have less control over their lives than others.
- Children do not always receive sex or relationship education and may therefore be less able to recognise abuse.
- Children may experience multiple carers.
- Children may not be able to communicate.

Education Child Protection and Multi-Agency Child Protection procedures will be adhered to. If a member of staff has any concerns about physical changes in a child's presentation, for example, marks, bruises or soreness, then this will be immediately reported to the 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 the 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's needs remain paramount. If a child makes an allegation against a member of staff, all necessary procedures will be followed.

Wherever possible, staff who are involved in the intimate care of children will not usually be involved with the delivery of sex education to the children in their care, as an additional safeguard to both the staff and children involved.

All children will be taught personal safety skills carefully matched to their level of ability, development and understanding. Allow the child, subject to their age and understanding, to express a preference regarding the choice of their carer and sequence of care, within the restraints of staffing resources. Children should be encouraged to recognise and challenge inappropriate assistance and behaviour that erodes their dignity. Staff should be encouraged to listen.

Working with Parents

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan or agreed toileting plan; this information will be recorded on a child's Individual Education Plan if they have special educational needs. Parents will sign any agreed

plans and be given copies of any care or toileting plans; the plan will be filed confidentially with the child's records. The plan will be reviewed on an agreed basis.

- The needs and wishes of pupils and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation. Religious and cultural values will be respected within any care plans agreed. The toileting or intimate 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)
 - Agreed terminology for areas of the body and bodily functions
 - Child's level of ability i.e. what tasks they are able to do by themselves
 - Acknowledge and respect any cultural or religious sensitivities related to aspects of intimate care
 - How and when it is to be monitored i.e. termly or when an aspect of care changes in accordance with the child's development

Policy Implementation

The Head Teacher and SENDco are responsible for the implementation, review and evaluation of this policy.

DEVON COUNTY COUNCIL Toileting and Intimate Care Policy

All children at Newport Community School Primary Academy 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 School.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Safeguarding policy, Health and Safety policies, Moving and Handling policy and Administering of Medicines policy.

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2017 and the Disability Discrimination Act 2005: Newport Community School Primary Academy will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities.
- No child with a named condition that affects personal development will be discriminated against
- No child who is delayed in achieving continence will be refused admission
- No child will be sent home or have to have to wait for their parents/carer to provide intimate care due to their toileting needs
- Adjustments will be made for any child who has delayed continence

Intimate Care Tasks – cover any tasks that involve the dressing and undressing, washing including intimate areas, helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Partnership with Parents/Carers – Staff/ Child's Key Person at Newport Community School Primary Academy works in partnership with parents/carers to provide care appropriate to the needs of the individual child and together will produce a care plan. The plan should be signed by all who contribute and reviewed on an agreed basis, termly ideally but at least annually or when something changes.

The toileting or intimate 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)
- Agreed terminology for areas of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- Acknowledge and respect any cultural or religious sensitivities related to aspects of intimate care
- How and when it is to be monitored i.e. termly or when an aspect of care changes in accordance with the child's development

Parents/Carers are asked to supply the following (delete as appropriate):-

- Spare nappies
- Wipes, creams, nappy sacks etc
- Spare Clothes/underwear

Best Practice – When intimate care is given, the member of staff explains fully each task that is carried out and the reason for it. Staff to encourage children to do as much for themselves as they can. Lots of praise and encouragement will be given to the child when they achieve.

All staff working in early year's settings must have a DBS check. Particular staff members are identified to change a child with known needs and that they plan and record their work with that child. Best practice is for the child's Key Person to take the child to the toilet/change nappy each time but where this may not be possible keep this to a maximum of two alternative people.

Safeguarding – Staff are trained on the signs and symptoms of child abuse which in line with Devon Safeguarding Children's Board guidelines and are aware of the DFE's booklet '*What to do if you think a child is being abused*' and will follow the guidance given.

If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc they will inform the Designated Safeguarding Lead (DSL) immediately. The Safeguarding policy will then be implemented.

Should a child become unhappy about being cared for by a particular member of staff, the DSL/ Manager/Playleader will look into the situation and record any findings. These will be discussed with the child's parents/carers in order to resolve the problem. If necessary the DSL/Manger/Playleader will seek advice from other agencies. Please remember that you need parental permission to talk to any agency about a specifically named child, except where a child is considered to be at risk of harm and you believe that seeking parental consent may increase this risk.

If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding policy will be followed.

Dealing with body fluids – Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely by *following the schools Policy for dealing with body fluids*. When dealing with body fluids, staff wear protective clothing (disposal plastic gloves and aprons) wash themselves thoroughly afterward. Soiled children's clothing will be bagged to go home or– staff will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with.

All staff to maintain high standards of personal hygiene and will take all practicable steps to prevent and control the spread of infection.

This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy.



Toileting/Intimate Care Plan

Name:	Date of birth:
Date plan completed:	Date for plan to be reviewed:
Issue:	
<p>What is to be done:</p> <p><u>When:</u></p> <ul style="list-style-type: none"> • consider timings if required (30mins; before break, after lunch, etc.), what does regular prompts mean? <p><u>Where:</u></p> <ul style="list-style-type: none"> • (if intimate care/wiping is required then the pupils' accessible toilet/nursery pupils' changing area needs to be recorded) <p><u>How:</u></p> <ul style="list-style-type: none"> • be specific about intimate care, use biological terminology if required (penis, vulva, vagina), record language to be shared at home and school e.g. "You try", record hand over hand method for wiping, always include the following: • Staff will encourage independence and preserve dignity at all times. • _____ will be changed by a named staff member, using the procedures discussed with parents and following the Intimate Care Policy. • _____ is being encouraged to join in with and learn about self care- for example 	
<p>Special notes: eg reward scheme, attitude to be taken, fluid requirements, access to toilet, equipment required:</p> <p>Always include:</p> <p style="padding-left: 40px;">Wipes, spare pants, clothes and socks kept in locker- parent to provide.</p>	
<p>How to record:</p> <p>Always include:</p> <ul style="list-style-type: none"> • Verbally inform parent/carer at pick up of changes and progress. 	

- Named staff changing _____ to keep a record of when intimate care has taken place- records to be kept on the school's Accident Record form.

Additional Information:

Always include:

- Named adults providing intimate care to inform parents if anything in locker needs replacing.

Next steps:

Examples: staff and parent to liaise, when _____ is ready he should move from sitting on the toilet to standing, getting ready for using a urinal.

Agencies involved to support toileting:

Check with SENDCo and parents.

Record of Independence:

I can already:

Examples:

- ✓ Sit on the toilet and try for a wee when asked.
- ✓ Wash my hands on my own.

I will try to:

Examples:

- Tell an adult when I feel I need to go to the toilet or if I've had an accident- use of visual prompt card available for _____ to communicate.
- Get myself undressed/dressed when going to the toilet.

I will advise the Head Teacher of any medical complaint or changes in relation to my child's needs, which may affect issues of intimate care.

As parent / carer of _____ date of birth, _____, I give permission for the following members of staff to help my child with their toileting needs.

Name of staff member:

Signed:

Name of staff member:

Signed:

Name of staff member:

Signed:

Name of staff member:

Signed:

Signed by child, if appropriate: _____

Parent/carer's name: _____

Signed: _____ Date: _____

Name of SENDCo/SLT staff: Harriet Vickery– SENDCo

Signed: _____ Date: _____