Airedale Infant School
'Ambition - Bravery - Respect'

Intimate Care Policy
September 2019

Introduction

Airedale Infant 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 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.

Definition

Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. In most cases, such care will involve procedures to do with personal hygiene and the cleaning of associated equipment as part of the staff member's duty of care.

Intimate care is any care, which involves one of the following:

1. Assisting a child to change his/her clothes
2. Changing or washing a child who has soiled him / herself
3. Assisting with toileting issues
4. Supervising a child involved in intimate self-care
5. Providing first aid assistance
6. Providing comfort to an upset or distressed child
7. Feeding a child
8. Providing oral care to a child
9. Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided. *

* 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 diazepam). Parents have the responsibility to advise the school of any known intimate care needs relating to their child.

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 treated with respect at all times; 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, in order to completely secure against any risk of allegation, a second member of staff may be present, where resources allow.

Staff will be supported to adapt their practice in relation to the needs of individual children, taking into account developmental changes, such as the onset of puberty or menstruation. Wherever possible, staff involved in intimate care will not be involved in the delivery of sex education to the children in their care, as an extra safeguard to both staff and children involved.

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.

Individual intimate care plans will be drawn up for children as appropriate to suit the circumstances of the child. 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 certain circumstances this principle may need to be waived where the failure to provide appropriate care would result in negligence for example, female staff supporting boys in school, as no male staff are available.

Intimate care arrangements 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 taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Changing a child who has soiled him/herself

If a child soils him/herself in school, a professional judgement has to be made whether it is appropriate to change the child in school, or request the parent/carer to collect the child for changing. In either circumstance, the child's needs are paramount and he/she should be comforted and reassured throughout. The following guidelines outline our procedures but we will also seek to make age-appropriate responses.

- The child will be given the opportunity to change his / her underwear in private and carry out this process themselves.

- School will have a supply of wipes, clean underwear and spare uniform for this purpose. (If this is an ongoing condition, parents will be required to ensure that a child brings adequate spare clothes, wipes and bags for soiled clothing to school daily).

- If a child is not able to complete this task unaided, school staff will attempt to contact the emergency contact to inform them of the situation.

- If the emergency contact is able to come to school within an appropriate time frame, the child will be accompanied and supported by a staff member until they arrive. This avoids any further distress and preserves dignity.

- If the emergency contact cannot attend, school will seek verbal permission for staff to change the child. If none of the contacts can be reached the Head teacher is to be consulted and the decision taken on the basis of loco-parentis and our duty of care to meet the needs of the child.

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Child Protection/Safeguarding Guidelines

- Ensure that the action you are taking is necessary. Get verbal agreement to proceed from all relevant parties e.g. the child, parent/carer, headteacher.

CARE – CONCERN – COMMUNICATE.

Pastoral Care Procedures

- Ensure the child is happy with who is changing him / her.
- Be responsive to any distress shown.

Basic hygiene routines

- Always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to parents.

The Protection of Children

Safeguarding Procedures will be adhered to. Where parents do not co-operate with intimate care agreements, concerns should be raised with the parents in the first instance. A meeting may be called that could possibly include the health visitor and head teacher to identify the areas of concern and how all present can address them. If these concerns continue there should be discussions with the school's safeguarding co-ordinator 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 looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of the process in order to reach a resolution; staffing schedules will be altered until the issue(s) are resolved.

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc.

To ensure effective communication:

- Make eye contact at the child's level;
- Use simple language and repeat if necessary;
- Wait for response;
- Continue to explain to the child what is happening even if there is no response; and
- Treat the child as an individual with dignity and respect.

This Intimate Care Policy was considered by staff and governors and was approved in July 2019.
Next review date: July 2020.