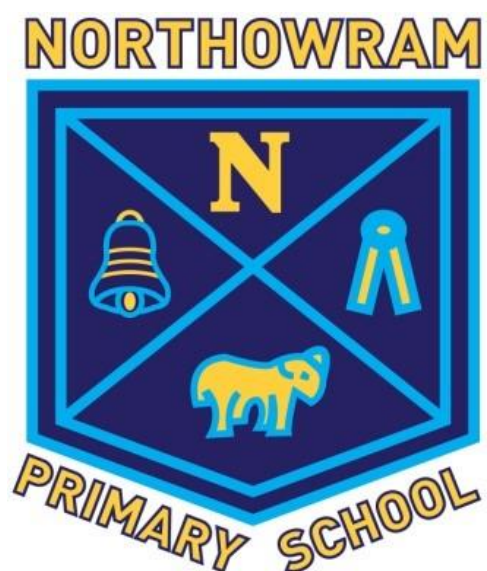


# Northowram Primary School

## Intimate Care Policy



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<b>Name of Policy Writer</b>	<b>Northowram Primary School</b>
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## **Introduction**

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. It also covers procedures for children attending Nursery who require their nappy changing. 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 medication in intimate areas of the body).

Providing intimate care is part of our duty of care for children who come to our school. 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 respectful partnership with parents/carers to provide continuity of care to children/young people wherever possible.

Northowram 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. Northowram School recognises 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.

## **Our Approach to Best Practice**

The management of all children with intimate care needs will be carefully planned. Any 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 are trained to do so (including Safeguarding and Health and Safety training as needed for specific pupils with statements/disabilities) and are fully aware of best practice. Staff who are responsible for nappy changing have received training for the procedures 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 taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved. Exceptions may be made for pupils with learning disabilities with parental consent/agreement.

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.

Each child's right to privacy will be respected. Two members of staff need to be in the toilet area/outside of the toilet area if a member of staff is assisting a child to be changed.

Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that overfamiliar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different carers where possible.

Intimate care arrangements will be discussed with parents/carers on admission to Foundation Stage and in the event of more extreme cases further up in school. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

### **The Protection of Children**

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. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Child Protection Procedures for details).

### **Health and Safety**

Health and safety advice for schools can be found in the Health and Safety Handbook, available to schools. Further Guidance can be found in the Working Together to Safeguard Children (2018) guidance on the government website.

## **The Process at Northowram**

### **Children wearing nappies or pull-ups**

Children admitted to school, may still be wearing nappies or pull-ups and need them changing on a daily basis.

It is good practice to provide information for parents of the policy and practice in the school. Parents are required to sign a simple agreement form (Appendix 1) outlining who will be responsible, within the school, for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task right from the outset.

Changing of nappies or pull-ups and children who have wet/soiled themselves will be recorded on a recording sheet. Information recorded will include date of accident, whether the child changed independently or with support, if any clothing was provided by school. Examples of such good practice provide reassurance for parents that systems are in place and that schools have implemented procedures for staff to follow.

### **Changing Facilities**

Children who have long term incontinence will require specially adapted facilities. The dignity and privacy of the child should be of paramount concern. Consideration is given to the siting of this area from a health and safety aspect. The area should not be situated in a thoroughfare. The Nursery classroom has separate nappy changing facilities including a nappy changing table. This method of changing should be used for any child wearing a nappy. Any child who is using pull ups or underwear should be changed standing up in a toilet cubicle. The door should be left open and a member of staff must be in the vicinity. A kneeling mat should be used when changing a child whilst standing up.

### **Equipment Provision**

Parents have a role to play when their child is still wearing nappies or pull-ups. The parent should provide nappies or pull-ups at a suitable size for this child. They also may wish to provide school with wipes suitable for their child's skin (e.g. sensitive skin wipes) and a spare set of clothes. A parent should be made aware of this responsibility. The school is responsible for providing gloves, plastic aprons, a bin, nonallergic wet wipes, and liners to dispose of any waste. Waste for nappies and pull-ups needs depositing in the nappy bins provided and must be emptied daily.

### **Health and Safety – Staff**

Staff should wear a plastic apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be double wrapped in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a medical waste bin (complete with liner) which is specifically designated for the disposal of such waste. Soiled underclothes should be disposed of and any other clothing should be double bagged and returned to the parent/carer. Staff should then wash their hand using hot water and liquid soap. They should then dry their hands using paper towels. Staff should be made aware of the school's Health and Safety Policy.

## **Special Needs**

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and IEPs for each child. As with all arrangements for intimate care needs, agreements between the child, those with parental responsibility and the school should be easily understood and recorded. Parents of pupils with regular soiling/wetting will be encouraged to leave a change of clothes in school for the use of their child.

Regardless of age and ability, the views and/or emotional responses of children with special needs should be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements.

## **Physical Contact**

All staff engaged in the care and education of children 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 intentional 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 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, wherever possible.

## **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.

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 or another adult in school.

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**

Staff who administer first aid 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 should be planned for. Agreements between the school, those with parental responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed. A letter of agreement will be required between school and those with parental responsibility. (Appendix 1)

### **Procedure for changing/cleaning children**

#### **Who will be involved?**

- Staff who work with the child
- At lunchtime the Midday Supervisor can take responsibility for providing the care if appropriate e.g. enough cover to continue supervise the children
- Seek additional help from the Pastoral Manager - Jane Jennings

#### **Where it will take place?**

- Foundation Stage/Key Stage 1 toilets when quiet if necessary
- Toilets when quiet
- Nursery – standing up to change, leaving door open
- Nurse – changing bed for nappies lying down (not to use if suffer with a bad back)
- Reception disabled toilet with the toilet door open

#### **What is required?**

- Record of incident (any change and/or intimate care given – records must be kept)
- In all Foundation Stage and Key Stage 1 classes (toilet cubicle and record incident)
- Record Sheets
- Plastic aprons
- Gloves
- No allergic wet wipes
- Nappy sacks for soiled wipes (place in yellow lined bin)

- Nappy sacks for soiled underwear/clothes
- Soil bin (yellow bin)
- Wash hands with liquid soap and hot water
- Dry with paper towel or hand drier
- Alcohol gel
- Changing mat and kneeling pad
- Adult to change and clean child
- Procedure
- Parent/carer must be informed





## Appendix 1

### Consent Agreement Form

*To be completed by the parent/carer*

Child name: \_\_\_\_\_ Class: \_\_\_\_\_

I have read the Intimate Care Policy and agree to my child being supported in the changing/cleaning of themselves. For further information see our policy on the website.

Signed: \_\_\_\_\_ Print name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Date: \_\_\_\_\_