Intimate Care Policy

Belonging, Believing, Building a Future

It is our mission for everyone to experience the joy of God's love in their lives as part of St Peter's family through trust and friendships. We aim for everyone to be nurtured and to grow in peace, hope and understanding of God, themselves and one another in order to achieve and live fulfilled lives.

"May the God of hope fill you with all joy and peace in believing, so that you overflow with hope by the power of the Holy Spirit" (Romans 15:13)

At St Peter's School our primary concern is to address the needs of all children to help them to achieve their full potential. We work in partnership with parents/carers and encourage and support the involvement and inclusion of individual children and it is for this reason that we have an intimate care policy. We also recognise that particularly when children first enter the school in Reception, they may still be in nappies, or may occasionally wet/soil themselves.

Aims

The aims of this document are to:

- safeguard the dignity, rights and well-being of children and staff
- provide guidance and reassurance to staff
- assure parents that staff are knowledgeable about Intimate Care
- assure parents that their child's individual needs and any concerns they may have will be taken into account.

The Headteacher and Governors will ensure that the personal care needs of children are attended to by:

- respecting the wishes of staff in relation to the intimate and personal care of children.
- ensuring that a sufficient number of staff (at least two) are trained to toilet or change children throughout the school.
- ensuring that staff working with children with identified intimate care needs have received appropriate training.
- providing appropriate support to staff to create an Intimate Care Plan alongside parents.
- recognising the need for privacy and confidentiality in relation to intimate care.

In most cases, Intimate Care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process and should only be carried out by suitably trained, competent staff.

All children who need intimate care are recognised as being especially vulnerable and staff involved in intimate care should therefore be particularly sensitive to their individual needs.

From time to time any child may need a level of intimate care, for example if they become unwell. In these circumstances, supported by a member of staff, children should be encouraged as much as possible to undertake their own intimate care. Where it has been necessary to provide any intimate care parents/carers must be informed and a record of the intimate care that was given and by whom kept.

Any child wearing nappies will have an individual intimate care plan. The plan will be reviewed termly to ensure that the level of intimate care required is accurate and updated.

Definition

Intimate care is any care that involves washing, touching or carrying out an invasive procedure that some children are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development. Intimate care may involve help with drinking, eating, dressing, toileting and nappy changing.

Child Protection

- Where intimate care raises any concerns these should be raised with the headteacher immediately. Safeguarding concerns must dealt with in accordance with the school's policy.
- 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 headteacher /
 Designated Safeguarding Lead, who will them follow the procedures outlined in the
 Safeguarding and Child Protection policy.
- If any parent or member of staff has concerns or questions about intimate care procedures or individual routines they should contact the headteacher / Designated Safeguarding Lead.
- 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.
- St Peter's operates a whistle-blowing policy as a means for staff to raise concerns relating to their peers.
- If an allegation is made against a member of staff, the school will follow the procedure outlined in the Safeguarding Policy and Managing Allegations against staff policy

Working with parents

Partnership with parents underpins the school's administration of intimate care. Much of the information required to make the process of Intimate Care as comfortable as possible is available from parents, including knowledge and understanding of any religious/cultural sensitivities. To ensure consistency of care and that intimate care provided is in line with parent's wishes and the child's needs, an intimate care plan must be agreed and signed by parents where it is likely that intimate care will be needed or where a child has ongoing intimate Care needs.

Parents are encouraged to work with staff to ensure their child's needs are identified, understood and met. This will include involvement in the development of Intimate Care Plan. (See appendix)

Exchanging information with parents is essential through personal contact, telephone or correspondence. Particular care must be taken when gathering and sharing information regarding intimate care as it is likely to contain confidential information that should not be accessed by people other than the parent and staff members involved with the delivery of intimate care.

Open communication between staff responsible for intimate care and parents must be maintained. Staff and parents should arrange to review the Intimate Care Plan at least annually and more often as necessary, particularly where a child's needs may have changed.

Occasional 'accidents'

Where a care plan is **not** in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g. has had an 'accident' and wet or soiled him/herself). The following should also be taken into consideration.

• When a child has required assistance with intimate care following an accident, accurate records should be kept, these can be brief, but should as a minimum, include full date, times, who was present and the nature of the intimate care provided.

- An individual member of staff should inform another appropriate adult when they are going to assist a pupil with intimate care. Where possible, intimate care should be undertaken with a minimum of two adults in attendance so as to safeguard both the adults and the child. Where this is not possible, the member of staff conducting the intimate care should inform another adult of the assistance they are providing and where they are providing it. Where only one adult is providing intimate care the door to the space where the care is being provided must be left open.
- Adults who assist pupils with intimate care following an 'accident' should be employees of the school, not students or volunteers, and they will have the usual range of safer recruitment checks, including enhanced DBS checks.
- All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know

Pupil voice

Every attempt should be made to determine the child's wishes. To ensure effective communication with the child, staff should:

- ascertain the agreed method of communication (words, signs, signals) and identify this in the agreed Intimate Care Plan,
- allow the child, subject to their age and understanding, to express any preferences regarding their care,
- encourage as much independence in relation to their intimate care as the child is capable
 of,
- agree appropriate terminology to be used by staff for private parts and bodily functions and record them in the Care Plan.

Where there is any doubt that a child is able to make an informed choice on these issues, the child's parents are usually in the best position to act as advocates.

Guidelines for Staff

Staff members must:

- ensure that sensitive information about a pupil is only shared with those who need to know, such as members of staff specifically involved with the child.
- ensure they know who to ask for advice if they are unsure or uncomfortable about a particular situation or procedure.
- identify and use a communication system that the child is most comfortable with.
- provide the child with choices regarding their intimate care wherever possible
- communicate with and involve the child in the intimate care process
- develop, where possible, greater independence in the pupil in relation to their intimate care
- maintain confidentiality with children who discuss elements of their intimate care (safeguarding procedures must be followed where appropriate)
- work closely with other healthcare professionals as necessary to ensure best practice.

When involved in intimate care stuff must:

- wear single-use disposable gloves and aprons, where appropriate
- cleaning changing mats with antibacterial spray after every use
- follow robust hand-washing procedures
- inform a colleague when leaving the room to support a child with intimate care
- dispose of waste safely in a designated covered bin with a disposable liner. The bin will be emptied at least once a day and the liner replaced.

APPENDIX - INTIMATE CARE PLAN

Name of child:				
Date of birth:	Date plan was v	vritten:		
Description of the type of intimate care that requires assistance				
		for staff members? YES/ NO ing and how often staff will need to have		
List of staff membe	rs trained to provide this ca	re		
Name	Position	Date of training (if required)		
Communication/ch	oice			
Location of care pro	ovided			
Equipment / Resour	ces needed			

Strategies for learning and promoting independence				
Terminology to be used				
Any further comments				
Agreed with parent				
Date	_ Signature			
Agrand with school				
Agreed with school				
Date	_ Signature			
Staff role within school e.g. SENCO				
Date of next review:				
Date of flext review.				

Record of intimate care intervention

Child's name:

DOB:

<u>Date</u>	<u>Time</u>	<u>Procedure</u>	Staff signature