



# INTIMATE CARE POLICY



## Document Status -

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<b>Committee/Approver of Policy</b>	Health, Safety & Safeguarding Committee

## **1. 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. 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. Staff training will be provided where it is deemed necessary.
- Staff are required to be respectful of the child's needs and dignity. A high level of privacy should be preserved, and all staff should have a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to the child wherever possible.
- Hollinswood Primary School & Nursery 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. All children should be treated with respect when intimate care is given and no child should be attended to in a way that causes distress.
- Staff will adapt their practice in relation to the needs of individual children and will take into account developmental changes. The child will be supported to achieve the highest level of autonomy that is possible given the child's age and abilities, e.g. this may mean for example allowing a child to wash him/herself. Each child's right to privacy will be respected and careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted.
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's 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.

## **2. Child Protection**

- Child protection procedures and inter-agency child protection procedures will be adhered to.
- If a member of staff has any concerns regarding physical changes in a child's presentation, e.g. marks, bruises, soreness, etc. they must immediately report concerns to the Head Teacher (Designated Safeguarding Lead) or to the deputy designated person for child protection. **The designated members of staff for Safeguarding and Child Protection are Mrs Kath Osborne (Headteacher), Mrs Emma Morris (Deputy Headteacher), Mrs Sam Jones (LKS2 Team Leader/SENCo), Abigail Scott (Inclusion Leader) and Susan Newbrook (Inclusion Leader).**
- 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 arrangements may be altered until the issues are resolved so that a child's needs remain paramount. Further advice will be taken from outside agencies if necessary. If an allegation is made against a member of staff, all necessary procedures will be followed.
- Details regarding child protection can be found in the Policies folder in the School Office.

### **3. Health and Safety**

- Health and safety advice, including details of infection control can be found in the Schools Policies and Health & Safety folders on the schools network.
- If a child or member of staff becomes unwell with symptoms of coronavirus while in the setting and needs first aid or changing before they return home, and a distance of 2 metres cannot be maintained, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the first aider. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn.
- All recommended PPE is available for staff members in the isolation rooms/school offices.

### **4. Inclusion and Welfare of Pupils**

- The following advice/strategies are some suggestions as possible ways to actively promote inclusion and the welfare of pupils:
  - a) Children Wearing Nappies
    - ☑ All children are admitted to school regardless of whether they are still wearing nappies.
    - ☑ Where a child is using nappies there will be a signed agreement with the parent/carer outlining who will usually be responsible for changing the child and when and where this will be carried out. This agreement allows school and parents to be aware of all the issues surrounding this task from the outset. A record will be kept of when changing took place and who carried it out. If the child refuses to have the nappy changed, the parent must be informed.
    - ☑ Nappies and wipes from healthy children can be double-bagged or put into nappy sacks and placed into the designated bins in school.
  - b) Changing Facilities
    - ☑ At all times, the dignity and privacy of the child will be of paramount importance.
    - ☑ Consideration should be taken into account for health and safety issues
    - ☑ The area must not be situated in a thoroughfare
    - ☑ An area made private by use of a screen is acceptable

- ☑ Paper matting will be used on the floor for a child to stand on whilst being changed. Alternatively facilities are available for a child needing to be changed whilst lying down.
- ☑ Sensitivity to where a child is changed/cleaned and the safety of the member of staff must be considered. Children should be changed in the Disabled Toilet facility.
- c) Equipment Provision
  - ☑ Parents are expected to provide nappies and should be made aware of this responsibility.
  - ☑ Schools are responsible for providing medical gloves, plastic aprons, disposal bags, wipes, changing surface and bin and liners to dispose of any waste.
- d) Health and Safety
  - ☑ Staff should always wear an apron and medical gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy.
  - ☑ Any soiled waste should be placed in a polythene waste disposal bag which can be sealed.
  - ☑ The bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste.
  - ☑ The bin can be emptied into the usual refuse collection bin as this waste is not classified as clinical waste.
  - ☑ Staff should be aware of the school's Health and Safety Policy.
- e) 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 care plans for each child.
  - ☑ As with all arrangements for intimate care, agreements between the child, those with parental responsibility and the school should be easily understood and recorded.
  - ☑ Regardless of age and ability, the views and/or emotional responses of children with special needs should be actively sought in regular reviews of these arrangements.

**5. Guidance to Safeguard Children and Education Staff with Regards to Situations which may lend themselves to Allegations of Abuse including Physical Contact, First Aid, Changing Clothes and Out of School Activities etc.**

## ➤ Physical Contact

- ☒ All staff engaged in the care and education of children need to exercise caution in the use of physical contact. Physical contact should be made in response to the pupil's needs at the time, will be of limited duration and be

appropriate given the child's age, stage of development and background. The limited touch should be very visible and obvious by body position and location – **Hands must always be visible.**

- ☑ Staff should be aware that even well-intentioned 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 may 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 them and the general culture of "limited touching" will be adapted to the individual requirements of each child. All 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 when 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 a witness is present will help to protect staff from such allegations.

➤ **Recommended Actions:**

- ☑ Hands always visible;
- ☑ Talk the child through what you are doing, e.g. I am going to put my hands under your legs so I can lift you (particularly in swimming lessons);
- ☑ Always check that what you are going to do is acceptable to the child and they know why you are doing it;
- ☑ Keep children to your side at all times so that your body does not obscure action;
- ☑ Deter children from sitting on your lap. Where essential, keep the child's legs to the side;
- ☑ Tell someone where you are going and why;
- ☑ Wherever possible, keep doors open and talk to people outside;
- ☑ Make sure some knows you are in a room alone with a child and why or call another adult to be with you.

➤ **Restraint**

- ☑ There may be very rare occasions where it is necessary for staff to restrain children physically to prevent them from inflicting damage on either themselves, others or property. Restraint should be used only as a last

resort to ensure the safety of the child. All other options should be explored first.

- ☑ Only the minimum force necessary should be used for the minimum length of time required for the child to regain self-control.
- ☑ Under no circumstances is it ever permissible to use physical force as a form of punishment, to modify behaviour or to make a pupil comply with an instruction. Physical force of this nature can, and is likely to, constitute a criminal offence.

➤ **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 intrusive, threatening or open to misinterpretation. Judgements will need to take account of the circumstances of a pupil's distress, their age and 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.
- ☑ 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 the class or head teacher.

➤ **First Aid and Intimate Care**

- ☑ Staff who administer first aid should ensure whenever possible that another adult or child is present. The pupil's dignity must always be considered and where contact of a more intimate nature is required, e.g. toileting or removing soiled/wet clothes, another member of staff should be informed and be in the vicinity.
- ☑ 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 and reviewed regularly. The child's views should be sought and, in particular, any discomfort with the arrangement addressed.
- ☑ Where a child wets or soils themselves and there is no written agreement, the school will inform the parents of the actions taken. The child's comfort must be paramount and the school will provide clean underwear/clothes and send home the soiled clothing. The above guidelines for changing a child must be followed.

➤ **Physical Education/Swimming and Other Skills Coaching**

- ☑ Staff are likely to come into physical contact from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment. They should be aware of the limits within which such contact can properly take place and of the possibility of

misinterpretation. Where it is anticipated that a pupil might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable pupil in the demonstration.

- ☑ Currently all children in KS1 change together in the classroom and at the swimming pool. Adults supervise and keep an overall check on the children as they change. KS2 children change separately but are still supervised by adults.
- ☑ Should staff see any marks, bruising or scars during changing, the guidelines in the child protection policy should be followed.

➤ **Changing Clothes**

- ☑ Young people are entitled to respect and privacy when changing clothes. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying or teasing does not occur.
- ☑ Adults should announce their intention of entering changing/toilet areas and should avoid remaining in toilet areas unless there is an emergency or care plan in place.
- ☑ Any physical contact or visually intrusive behaviour should be avoided when children are in a state of undress. It is strongly recommended that another member of staff is present when supervising children in a state of undress. This may not always be possible and therefore staff need to be vigilant about their own conduct, for example staff must not change in the same place as children.

➤ **Out of School Trips, Clubs, etc.**

- ☑ Staff should take particular care when supervising children in the less formal atmosphere of a school trip or after school activity. The standard of behaviour of staff should be no different to that expected in school. Staff involved in such activities should also be familiar with their school's policy and all LA guidance regarding out of school activities.
- ☑ To ensure pupil's safety, increased vigilance may be required when monitoring behaviour on a school trip. It is important to exercise caution so that a pupil is not compromised and the member of staff does not attract allegations of overly intrusive or abusive behaviour.
- ☑ If staff come into contact with pupils whilst off duty, they must behave as though in their professional role and not give conflicting messages regarding their own conduct.
- ☑ Staff should not place themselves in a position where they are in a vehicle, house or other venue alone with a child.

## Hollinswood Primary School & Nursery

### Continence/Intimate Care Plan

<b>Care Plan Date</b>	
<b>Pupil Name</b>	
<b>Pupil Date of Birth</b>	
<b>Emergency Contact No.</b>	
<b>Identified Need of Pupil</b>	
<b>Resources/Equipment Provided by Parents</b>	
<b>Resources/Equipment Provided by School</b>	
<b>Agreed Action to be Taken by School</b>	
<b>School Staff Involved (Name &amp; Job Title)</b>	



<b>Any Additional Information</b>	
<b>Signature of Parent/Carer</b>	Signature .....  Print .....
<b>Signature of Pupil (If appropriate)</b>	Signature .....  Print .....
<b>Signature of Named School Staff Above</b> <b>(At least 1 signature must be a designated member of staff for Safeguarding/Child Protection)</b>	Signature .....  Print .....  Signature .....  Print .....  Signature .....  Print .....
<b>Signature of School Nurse/Health Care Professional (If appropriate)</b>	Signature .....  Print .....
<b>Care Plan Review Date</b>	

### Details of Continence/Intimate Care Instances

(Please ensure that a Continence/Intimate Care Plan is completed and signed by all parties before any care is given)

<b>Pupil Name</b>				<b>Pupil Date of Birth</b>	
<b>Date</b>	<b>Time</b>	<b>Action Taken</b>	<b>Resources/Equipment Used</b>	<b>Staff Member Involved</b>	<b>Staff Member Signature</b>



