

Chaucer Infant and Nursery School Intimate Care Policy



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At Chaucer Infant and Nursery School our goal is to develop independence, however we recognise that there will be times when help is required. Our intimate Care Policy has been developed to safeguard children and staff during these occasions. It applies to all staff who undertake intimate and personal care tasks with children and young people.

Intimate care is defined as care involving washing, touching or carrying out a procedure to intimate personal areas which some children may need support in doing because of their young age, physical difficulties or other special needs. Where a child has intimate care needs, a designated member of staff takes responsibility to provide their care. We address all issues on an individual basis.

Aims

- To safeguard the rights of children and young people and staff who are involved in providing personal and intimate care.
- To ensure inclusion for all children and young people.
- To ensure continuity of care between parents/carers and involved professionals.
- To ensure all staff involved in personal and intimate care have access to appropriate training.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has the right to be safe;
- Every child has the right to personal privacy;
- Every child has the right to be valued as an individual;
- Every child has the right to be treated with dignity and respect;
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities;
- Every child has the right to have levels of intimate care that are appropriate and consistent

Implementation

All staff are knowledgeable about intimate care. They are aware of their responsibilities, relevant policies and procedures in place (including adhering to Child Protection, Health and Safety, Confidentiality). All staff have current DBS certificates. They follow the child's care plan, where appropriate, and they undertake their duties.

Intimate Care Procedures

Children frequently start Chaucer Infant and Nursery School in nappies. We support children sensitively and with dignity in this matter. Also, from time to time some children will have accidents and need to be attended to. Parents of children, not yet toilet trained, are asked to supply a bag of clean clothes, pull ups and wipes for their child in a drawstring bag to

be hung on their child's peg. These are taken into the toilet facilities prior to changing. However, a supply of spare clothing is available if necessary and parents are asked to return these as soon as possible. If a child has needed help with meeting intimate care needs (had an accident). This is treated as confidential and shared with the parents in person at the end of the day.

For children who are wet or soiled;

The toilet area is used to attend to a child's needs and every effort is made to ensure privacy and modesty. The child is encouraged to undertake as much of the procedure for themselves as possible, including washing intimate areas, dressing/undressing and hygiene. Children are assisted in changing from their soiled clothes and washing, as appropriate. Soiled clothes are bagged for the parent to take home. If a child is unhappy or anxious about the care being provided, the issue will be addressed to ensure that we continually meet a child's needs. Parents will be confidentially informed by the child's class teacher at the end of the school day. In extreme incidents, parents may be contacted to collect their child if we feel using school facilities and resources would not clean the child effectively.

Medical Procedures

- Pupils who are disabled might require assistance with invasive or non-invasive medical procedures such as the
 administration of rectal medication, managing catheters or colostomy bags. These procedures will be
 discussed with parents/carers, documented in the health care plan or IEP and will only be carried out by staff
 who have been trained to do so.
- It is particularly important that these staff should follow appropriate infection control guidelines and ensure that any medical items are disposed of correctly.
- Any members of staff who administer first aid should be appropriately trained in accordance with LA guidance. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity.

Best Practice

- Pupils who require regular assistance with intimate care have written Individual Education Plans (IEP), health care plans or intimate care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. Ideally the plan should be agreed at a meeting at which all key staff and the pupil should also be present wherever possible/appropriate. Any historical concerns (such as past abuse) should be taken into account. The plan should be reviewed as necessary, but at least annually, and at any time of change of circumstances, e.g. for residential trips or staff changes (where the staff member concerned is providing intimate care). They should also take into account procedures for educational visits/day trips.
- Where relevant, it is good practice to agree with the pupil and parents/carers appropriate terminology for private parts of the body and functions and this should be noted in the plan.
- Where a care plan or IEP is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (eg has had an 'accident' and wet or soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated in person by telephone or by sealed letter. Parents will sign to confirm they have been informed.
- In relation to record keeping, a written record should be kept in a format agreed by parents and staff every time a child has an invasive medical procedure, e.g. support with catheter usage.

- Accurate records should also be kept when a child requires assistance with intimate care; these can be brief
 but should, as a minimum, include full date, times and any comments such as changes in the child's behaviour.
 It should be clear who was present in every case.
- These records will be kept in the child's file and available to parents/carers on request.
- All pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual pupil to do as much for his/herself as possible.
- Staff who provide intimate care are trained in personal care (eg health and safety training in moving and handling) according to the needs of the pupil. Staff should be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate.
- Staff will be supported to adapt their practice in relation to the needs of individual pupils taking into account developmental changes such as the onset of puberty and menstruation.
- There must be careful communication with each pupil who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc) to discuss their needs and preferences. Where the pupil is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.
- Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their ages.
- Every child's right to privacy and modesty will be respected. Careful consideration will be given to each pupil's
 situation to determine who and how many carers might need to be present when s/he needs help with intimate
 care. SEN advice suggests that reducing the numbers of staff involved goes some way to preserving the child's
 privacy and dignity.
- Wherever possible, the pupil's wishes and feelings should be sought and taken into account.
- An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.
- The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- Whilst safer working practice is important, such as in relation to staff caring for a pupil of the same gender, there is research which suggests there may be missed opportunities for children and young people due to over anxiety about risk factors; ideally, every pupil should have a choice regarding the member of staff. There might also be occasions when the member of staff has good reason not to work alone with a pupil. It is important that the process is transparent so that all issues stated above can be respected; this can best be achieved through a meeting with all parties, as described above, to agree what actions will be taken, where and by whom.
- Adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced CRB checks.
- All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.

•	No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.