

Laycock Primary School Intimate Care Policy – May 2021 v3

Intimate Care Policy

This policy represents the agreed principles for intimate care throughout the school.

This policy needs to be agreed by all staff and governors within the school.

Introduction

The purpose of this policy is:

- · To safeguard the rights and promote the best interests of the children
- · To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- · To safeguard adults who are required to operate in sensitive situations
- · To raise awareness and provide a clear procedure for intimate care
- · To inform parents/carers in how intimate care is administered
- · To ensure parents/carers are consulted in the intimate care of their children

Principles

It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. As far as possible, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. It is important for staff to bear in mind how they would feel in the child's position. Given the right approach, intimate care can provide opportunities to teach children about the value of their own bodies, to develop their safety skills and to enhance their self esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young persons' right to privacy and dignity is maintained at all times.

Definition

Intimate care is one of the following:

- Supporting a pupil with dressing/undressing
- Providing comfort or support for a distressed pupil
- Assisting a pupil requiring medical care, who is not able to carry this out unaided
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell
- Assisting a child with self-care after using the toilet defined in either an Educational Health Care Plan (EHCP) OR Individual provision map (IPM)

Supporting dressing/undressing

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed, particularly in Early Years or for a child with SEN. Staff will always encourage children to attempt undressing and dressing unaided. For children with SEN, the level of support and, where possible, gender of the adult will be included in their Healthcare Plan or on their Individual Provision Map (IPM) / My Support Plan (MSP).

Providing comfort or support

Children may seek physical comfort from staff (particularly children in Reception). Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body, which could be regarded as

intimate. If physical contact is deemed appropriate, staff will provide care which is suitable to the age, gender and situation of the child. This must also be in a room where there are other members of staff present or other children.

If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable.

Medical procedures (See Policy on Medicines)

If it is necessary for a child to receive medicine during the school day, parents must fill out a permission form from the school office and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care. It must be made clear to parents that staff administration of medicines is voluntary. As a general rule, only individually prescribed medicines to be taken four times a day will be administered in school.

Any member of staff giving medicine to a pupil should check:

- The pupil's name
- Prescribed dose
- Expiry date
- Written instructions provided by parents or doctor

Particular attention should be paid to the safe storage, handling and disposal of medicines.

The Head Teacher has prime responsibility for the safe management of medicines kept at school. This duty derives from the Control of Substances Hazardous to Health Regulations 2002 (COSHH). School staff are also responsible for making sure that anyone in school is safe. Medicines should generally be kept in a secure place, not accessible to pupils but arrangements must be in place to ensure that any medication that a pupil might need in an emergency is readily available. Medication that must be kept refrigerated must be kept in the locked medicine box in the fridge in the staff room & details of the enclosed medication recorded on the form attached to the lid of the box.

Soiling

Intimate care for soiling should only be given to a child after the parents have given permission for staff to clean and change the child. Parents who have children in Reception may sign a permission form so that the staff can clean and change their child in the event of the child soiling themselves but children will always be encouraged to do this independently (Appendix 1). For children with SEN if they require changing, this will be included on their Individual Healthcare Plan or for some children this will be included on their IPM or MSP.

If a parent does not give consent, or if the child is in Key Stage one or two, the child will be encouraged to clean themselves. If the child is unable to do this, then the school will contact the parents or other emergency contact giving specific details about the necessity for cleaning the child. The parents/carers can then decide whether they can come within a few minutes and in the meantime the child will be comforted and kept away from the other children to preserve dignity until the parent arrives. Children are not left on their own whilst waiting for a parent to arrive; an adult will stay with them, giving comfort and reassurance. The child will be dressed at all times and never left partially clothed.

If a parent/carer or emergency contact cannot attend, or the child is so distressed or too uncomfortable to wait for parents/carers to arrive, the school will seek to gain verbal consent from parents/carers for staff to clean and change the child. This permission will be sought on each occasion that the child soils him or herself. If the parents and emergency contacts cannot be contacted the Head Teacher will be consulted. If put in an impossible situation where the child is at risk, staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

When touching a child, staff should always be aware of the possibility of invading a child's privacy and will respect the child's wishes and feelings.

If a child needs to be cleaned, staff will make sure that:

- · Protective gloves are worn;
- · The procedure is discussed in a friendly and reassuring way with the child throughout the process;
- · The child is encouraged to care for him/herself as far as possible;
- · Physical contact is kept to the minimum possible to carry out the necessary cleaning;
- · Privacy is given, appropriate to the child's age and the situation;
- · All spills of vomit, blood or excrement are wiped up and flushed down the toilet;
- · Any soiling that can be, is flushed down the toilet;
- · Soiled clothing is put in a plastic bag, unwashed, and sent home with the child.

Hygiene

All staff must be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures and have access to protective, disposable gloves and Bioman (stored in the caretaker's cupboard, PE store off the dining hall and first aid room).

Protection for staff

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk. These should include:

- · Gaining a verbal agreement from another member of staff that the action being taken is necessary and consulting the child's Healthcare Plan if the child has one in place (SEN);
- · Allow the child, wherever possible, to express a preference to choose his/her carer and encourage them to say if they find a carer to be unacceptable;
- · Allow the child a choice in the sequence of care, where applicable;
- · Be aware of and responsive to the child's reactions.

Safeguards for children

There is an obligation on local authorities to ensure that staff who have substantial, unsupervised access to children undergo police checks. All staff at Laycock Primary School are DBS checked on application and cannot undertake tasks within school until all checks are completed satisfactorily. The DBS aim is to help organisations in the public, private and voluntary sectors by identifying candidates who may be unsuitable to work with children or other vulnerable members of society. Personal and professional references are also required and unsuitable candidates are not permitted to work within the school. All those working with children should be closely supervised throughout a probationary period and should only be allowed unsupervised access to children once this has been completed to their supervisor's satisfaction.

It is not appropriate for volunteers or students to carry out intimate care procedures. This Policy will be reviewed every 2 years or earlier if necessary.

*If deemed necessary, I give consent for my child to be changed and cleaned by school staff if they wet/soil themselves while in the care of Laycock Primary School.

*I do not give consent for my child to be changed and cleaned if they wet/soil themselves. The school will contact me or my emergency contact and I will organise for my child to be cleaned and changed. I understand that in the event that I (or the emergency contact) cannot be contacted the staff will act appropriately and may need to come into some level of physical contact in order to aid my child.

| Signature of Parent | /Carer | Date |
|----------------------|---------|------|
| Signature or rareire | / Ca. C | Date |

Laycock Primary School