

Captains Close Primary School

Intimate Care Policy

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This policy is reviewed and updated in line with changes to legislation, statutory guidance and recognised best practice as new guidance is published.

Statement of Intent

Captains Close Primary School takes the health and wellbeing of our pupils very seriously. We aim to support pupils with physical disabilities and illnesses, to enable them to have a full and rich academic life whilst at school.

The Advisory Board recognises its duties and responsibilities in relation to the Equality Act (2010) which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

Captains Close Primary School is committed to ensuring that all staff responsible for the intimate care of children will always undertake their duties in a professional manner. We recognise 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 or left feeling embarrassed.

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.

The issue of intimate care is a sensitive one and requires 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 will always be 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 children/young people wherever possible.

This policy sets out Captains Close Primary School's approach to providing safe, respectful and child-centred intimate care.

Our Approach to Best Practice

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Any child with intimate care needs will be supported to achieve the highest level of autonomy possible, taking account of their age, abilities and individual needs. Staff will encourage each child to do as much as they can for themselves. This may include, for example, giving the child responsibility for washing themselves.

Each child's right to privacy, dignity and safety will be respected. The number of staff present will be determined through an individual risk assessment and recorded in the intimate care plan. One trained member of staff may provide care where this is safe and appropriate. A second member of staff may be required where identified by the risk assessment, the child's moving and handling needs, the agreed care procedure or safeguarding considerations. Wherever possible, the child's preferences, communication needs and established relationships with trusted staff will inform the arrangements.

Individual intimate care plans will be drawn up by the class teacher and SENDCo for particular children as appropriate to suit the circumstances of the child.

Intimate care arrangements will be discussed with parents on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing.

The Protection of Children

The school's safeguarding procedures and current statutory guidance will be followed at all times. Children will be supported to develop personal safety skills appropriate to their age, communication needs and level of understanding. If a member of staff notices an unexplained physical change, mark, bruise, injury, change in behaviour or other concern, they must record and report it immediately to a Designated Safeguarding Lead. Any concern about the conduct of an adult, including a low-level concern or an allegation, must be reported in accordance with the school's safeguarding policy and managing-allegations procedures.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the care will stop as soon as it is safe to do so. The concern will be recorded and reported to a Designated Safeguarding Lead, parents or carers will be consulted where appropriate, and alternative staffing arrangements will be put in place while the matter is considered. Any concern or allegation about a member of staff will be managed immediately in accordance with the school's safeguarding, low-level concerns and managing-allegations procedures.

Facilities

Staff members who provide intimate care are competent to do so and are fully aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements following assessment from a physiotherapist/occupational therapist. This may include:

- Changing mat.
- Non-slip step.
- Cupboard.
- Adapted toilet seat or commode seat.
- Disposable gloves/aprons.
- Liquid soap, paper towels, approved cleaning and disinfecting products, and any individually agreed personal-care products.
- Antiseptic cleanser for the changing bed/mat.
- Appropriate waste bags or containers, in accordance with the school's waste-management arrangements.
- Spillage kit.

Captain's Close Primary School has:

- A disabled toilet in the preschool building
- A disabled toilet in the specialist enhanced resource base
- A disabled toilet off the corridor of the main building

Children will be changed in the position and location identified in their intimate care plan and risk assessment, taking account of their mobility, age, dignity, safety, moving and handling needs, and the equipment available.

Children who are not mobile or if age appropriate will be changed on a changing mat.

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 or menstruation.

Children Wearing Nappies

Any child wearing nappies will have an intimate care plan which must be signed by the parent/carer. This plan will outline who is responsible in school for changing the child, and where and when this will be carried out. This agreement allows school and parents to be aware of all issues surrounding the task from the outset.

Children with toileting needs

Any child who struggles with toileting independently and needs assistance in cleaning themselves should have an intimate care plan which must be signed by the parent/carer. Like nappy changing, this plan will outline who is responsible in school for changing the child, and where and when this will be carried out. This agreement allows school and parents to be aware of all issues surrounding the task from the outset.

Health & Safety Guidance

Staff must follow the school's infection-prevention and control procedures when providing intimate care. They must wear appropriate single-use personal protective equipment, including disposable gloves and an apron, where there is a risk of contact with blood, bodily fluids, urine or faeces. Hands must be washed thoroughly with liquid soap and warm water before and after care. Changing surfaces, toilets and contaminated equipment must be cleaned and disinfected promptly using the school's approved products and procedures.

Used nappies, incontinence pads, disposable gloves, aprons and other hygiene waste must be bagged securely and disposed of in accordance with the school's current waste-management arrangements and the waste contractor's requirements. Non-infectious nappies and incontinence pads are classed as offensive hygiene waste rather than clinical waste. Waste that is known or suspected to be infectious must be managed separately in accordance with current infection-prevention and waste guidance.

The changing area or toilet will be left clean and, where necessary, the premises officer/cleaning staff will be informed. Hot water and soap are available to wash hands and paper towels are available to dry hands.

Special Educational Needs and Disabilities (SEND)

Children with special educational needs and disabilities have the same rights to privacy, dignity, safety and participation when receiving intimate care. A child's individual vulnerabilities, including physical disability, medical need, sensory need, communication difficulty or learning disability, must be considered when their care plan and risk assessment are prepared or reviewed. The child's views, preferences and responses must be actively sought and recorded in a way that is appropriate to their age, understanding and communication needs.

- Storing spare clothes for children – parents should provide spare changes of clothing.
- Wet wipes in school – parents should provide suitable materials to clean the child.
- Soiled children should be changed in a suitable room with adequate privacy (e.g. disabled toilet).
- Two adults will be aware when a child requires support in changing/cleaning.

Physical Contact

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact. Staff must be aware that even well-intentioned contact

might be misconstrued by the child or an observer. Staff must always be prepared to justify actions and accept that all physical contact is open to scrutiny

The expectation is that when staff makes physical contact with pupils it will be:

- For the least amount of time necessary (limited touch)
- Appropriate, given their age, stage of development and background
- In response to the pupil's needs at the time

Arrangements must be understood and agreed by all concerned, justified in terms of the child's needs and consistently applied and open to review. Where possible, consultation with colleagues should take place where any deviation from arrangements is anticipated. Any deviation from the agreed plan must be documented and reported. Extra caution may be needed where a child has previously suffered abuse or neglect. This may lead to staff being vulnerable to allegations of abuse. Many such children seek out inappropriate physical contact. In such circumstances staff should deter the child, seek witnesses and document and report the incident following school systems and notify a designated safeguarding lead.

Safeguarding

Staffing arrangements for intimate care will be determined through an individual assessment of the child's needs, wishes, dignity, privacy, communication and safeguarding requirements.

Arrangements will be agreed through the child's intimate care plan and kept under review. Staff should not be excluded automatically from other areas of the curriculum solely because they provide intimate care.

Individual intimate care plans will be drawn up for children as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers will need to be present when the child is toileted.

If any member of staff has concerns about physical changes to a child's presentation, such as marks or bruises, they will immediately report the concerns to the Designated Safeguarding Leads.

Responsibilities

The school will:

Arrange a meeting to discuss the personal care needs of any pupil prior to them attending the school if they have medical needs or special educational needs that prevent them from using the toilet independently.

Involve the child who requires intimate care in planning for their own healthcare needs wherever possible.

Create, in liaison with the child and their parents or carers, an individual intimate care plan and risk assessment. Where the child has a medical condition, the intimate care arrangements should form part of, or be clearly linked to, the child's Individual Healthcare Plan. Where relevant, the plan should also align with the child's EHC plan and advice from appropriately qualified health professionals. The plan must set out the support required, the child's preferences and communication needs, authorised and trained staff, location and equipment, hygiene and disposal arrangements, recording requirements, emergency arrangements and the frequency of review.

Captains Close Primary School will:

- Regularly consult with all parents and pupils regarding toilet facilities and ensure the Intimate Care Policy is available on request and on the school website.
- Maintain the privacy and dignity of any pupil who requires intimate care.
- Change the child or assist them in changing themselves if they become wet, or soil themselves.
- Never leave a child in wet or soiled clothing.
- React to accidents in a calm and sympathetic manner.

- Keep an accurate record of each intimate care episode in accordance with the school's agreed recording system, including the date, time, reason for care, staff involved, any departure from the plan, any concerns observed and the action taken.
- Agree how often the child should be routinely changed if the child is in school for a full day and designate a member of staff to change them.
- Agree to encourage the child's participation in toileting procedures wherever possible.
- Discuss and take the appropriate action to respect the cultural practices of the family.
- The child's views and preferences about who provides intimate care will be sought and respected wherever reasonably practicable, taking account of their age, understanding, communication needs, privacy, dignity, cultural needs and individual risk assessment. The school will not delay or withhold necessary care where an immediate response is required to protect the child's health, dignity or welfare.
- Contact parents/carers if the child refuses to be changed or becomes distressed during the process.
- Maintain excellent standards of hygiene when carrying out intimate care.

The parents should:

Change their child or assist them in going to the toilet at the latest possible time before coming to school.

Provide the nappies, incontinence pads, wipes, personal-care products and spare clothing agreed in the child's intimate care plan, ensuring that products are suitable for the child and clearly labelled where required.

Read this policy to ensure they understand the policies and procedures around intimate care.

Sign the Intimate Care Plan for their child as necessary.

Inform the school should their child have any marks/rashes.

Discuss with the school how often their child will need to be changed, and who will do the changing.

Engage with health professionals eg school nurse team, to support their child's continence if relevant eg attend healthy bladder/bowel workshop and implement strategies at home.

Appendix 1: Intimate Care Plan Template

Intimate Care Parental Consent Form

This form must be completed by the class teacher in consultation with the child, their parents or carers, the SENDCo and any relevant health professionals, and signed by the child's parents or carers.

Name of child:		DOB:	
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Care requirements, including frequency: -
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The table below outlines the members of staff responsible for carrying out your child's intimate care programme, as well as the members of staff responsible in their absence:

Name of carers:	
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Where will the intimate care be carried out? -

What equipment/resources will be required? -

What disposal procedures are in place? -

What do parent/carers need to provide? -

I have read the Intimate Care Policy provided by Captains Close Primary School and I agree to the intimate care plan outlined above:

Signature of Parent/Carer:		Date:	
Signature of Class Teacher (Name)		Date:	
Signature of SENDCo		Date:	