



# Kessingland Church of England Primary Academy

## Intimate Care Policy

<b>Policy Type:</b>	Trust Core Policy
<b>Approved By:</b>	DNEAT Trust Board
<b>Approval Date:</b>	December 2016
<b>Date Adopted by LGB:</b>	26/01/2017
<b>Review Date:</b>	December 2019
<b>Person Responsible:</b>	DNEAT Operations Manager

## **Roles and Accountabilities**

The Diocese of Norwich Education and Academies Trust is accountable for all policies across its Academies. All policies, whether relating to an individual academy or the whole Trust, will be written and implemented in line with our ethos and values as articulated in our prospectus. We are committed to the provision of high quality education in the context of the Christian values of service, thankfulness and humility where individuals are valued, aspirations are high, hope is nurtured and talents released.

A Scheme of Delegation for each academy sets out the responsibilities of the Local Governing Body and Principal / Head Teacher. The Principal / Head Teacher of each academy is responsible for the implementation of all policies of the Academy Trust.

All employees of the Academy Trust are subject to the Trust's policies.

## **Introduction**

Kessingland CofE Primary Academy is committed to ensuring that all staff responsible for intimate care of children and young people will undertake their duties in a professional manner at all times.

The academy takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care.

The Local Governing Body recognises its duties and responsibilities in relation to the Equality Act, with specific regard to disability, 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.

We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain.

Staff will work in close partnership with parents and carers to share information and provide continuity of care.

## **Aims of this policy**

- To ensure a whole school approach which ensures that the needs of the children are paramount and their rights and privacy are respected.
- To safeguard the dignity, rights and wellbeing of all children, regardless of disability, gender or race.

- To ensure staff are properly trained and briefed on any intimate care they provide.
- To ensure intimate care procedures minimise any risks associated with intimate care.
- To assure parents and carers that staff are knowledgeable about intimate care and that their child's individual needs and concerns are taken into account.
- To ensure the procedures are non-discriminatory and that parents of children with disabilities are not asked to do more than their peers who do not have children with disabilities.

## **Definition**

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. Pupils with a disability may be unable to meet their own care needs for a variety of reasons and will require regular support.

Our approach to best practice:

- The management of all children with intimate care needs will be carefully planned.
- Staff who provide intimate care are trained to do so (including Child Protection, and Moving and Handling where appropriate) and are fully aware of best practice.
- Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.
- There will be careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- 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 and menstruation.
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities.
- Individual care plans will be drawn up for any pupil requiring regular intimate care.
- Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Children who have an intimate care plan, should where possible, be cared for by one adult unless there is a sound reason for having more adults present. In such a case, the reasons will be documented. Adults will have undertaken safeguarding advice on the risks of working on a one to one basis as part of their safeguarding training.
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on a 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.

- Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day. This information should be treated as confidential and communicated in person, via telephone or by sealed letter (not via the home school diary).

## Procedures

All staff carrying out intimate care of children in the school must be aware and follow the procedures and advice outlined below:

- Any adult involved in intimate care should be a member of the school staff, not a volunteer or parent helper.
- Ensure they are aware of the child protection policy and procedures in place within the school. If concerned about a child's actions or comments whilst carrying out intimate care, staff should record this and discuss with the school's Designated Safeguarding Lead.
- Adults working on their own with a class or group of children should seek assistance from another member of staff (using the red card if appropriate) if a child needs intimate care.
- Children who need changing during lesson time due to a toileting accident should be changed, staff should choose the most appropriate space that allows privacy and/or supervision.
- Use the nature of the accident and the knowledge of the child to make a judgement on how many adults should be involved in intimate care. Wherever possible children should be responsible for attending to their needs. It is a requirement to have two adults in attendance if the child requires a high level of support (even if only one is directly attending to a child's needs and the other is in the same area).
- Consider the dignity of the child and allow them to make a decision on how they are assisted.
- Ensure another member of staff, preferably the class teacher if during lesson time, knows that you are withdrawing the child and why.
- Speak to the child by name and explain what is happening. Ensure privacy appropriate to the child's age and situation.
- If children can change themselves, wait outside the door with the younger children and reassure them you are there. If the child is mature enough, offer the option of going alone without an adult. Professional judgement should be used.
- Be aware and responsive to the child's reactions if assisting with intimate care.
- Ensure any religious and cultural values are taken into account.
- Ensure spare clothing is readily available. If washing is required, use a disposable cloth. Encourage the child to wash any intimate parts of the body.
- Any injuries needing intimate care should be dealt with sensitively. The Head or Deputy should be called in such circumstances and parents may be requested to attend as appropriate.

- Gloves should be used if assisting in any form of intimate care.
- Dispose of any used items appropriately. Soiled nappies should be double bagged and placed in the first aid bin. Creams or ointments for use in reducing soreness or rash should only be applied by prior agreement of parents and in line with the Administration of Medicines policy.
- If necessary, clean and disinfect any soiled surfaces once the child has returned to the classroom.
- If a child has need of support or reassurance after the incident, an appropriate space should be used.
- Record all incidents of intimate care on the log and inform the parents if the child has been assisted in any way, the same day.
- Confidentiality should be maintained at all times between child, school and parent/carer.
- Staff with concerns over any aspect of intimate care should discuss these with the Head or Deputy.

**Ask the following questions if relevant:**

Would you like some help?

Would you like me to help you?

Would you like me to come with you and wait outside the door in case you need any help?

**Regular Occurrences**

- Where a routine procedure needs to be established, a care plan should be prepared, in consultation with all relevant parties. Care plans should be prepared prior to admission, this should be signed by all parties who contribute and be reviewed on a regular basis.
- Children with a care plan will have a separate record where the date and time is noted and the signature of the staff member is kept on record. Parents of these children will be aware of the procedure and will not receive a note every day.

**Parents and carers**

- If the child has been assisted with intimate care, parents will be informed via a standard letter.
- Parents and carers will be made aware of the procedures in the prospectus and will be able to view the policy at any time.

**Child Protection**

The Local Governing Body and staff of Kessingland CofE Primary Academy recognise that children with disabilities are particularly vulnerable to all forms of abuse.

Child Protection, DNEAT Safeguarding policy and Multi-Agency Child Protection procedures will be adhered to at all times.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) she/he will immediately report concerns to the Designated Safeguarding Lead.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff this will be investigated in accordance with agreed procedures.

### **Associated Documents**

This policy should be read in conjunction with the academy's Safeguarding policy, Administration of Medicines policy and Code of Conduct for staff.

### **Contact details Sarah Smith**

### **Links to other policies**

- Supporting pupils with medical conditions
- Administration of medicines
- Health and Safety
- Safeguarding
- Pupil restraint
- Pupil behaviour