



we are a learning community with the spirit to succeed

Holywell Primary School

Intimate Care Policy

Status:	Non-Statutory
Approval Body:	Governing Body
Review Frequency:	2 Years
Last Review:	March 2019
Next Review:	Spring 2021



Intimate Care Policy

Equalities Statement

The Equalities Act provides protection for anyone who has a physical, sensory or mental impairment that has an adverse effect on their ability to carry out normal day-to-day activities. It is clear therefore that anyone with a named condition that affects aspects of personal development must not be discriminated against. It is also unacceptable to refuse admission to other children who are delayed in achieving continence. Delayed continence is not necessarily linked with learning difficulties. However, children with global developmental delay which may not have been identified by the time they enter a setting/school are likely to be late coming out of nappies.

Holywell Primary will endeavour to meet the needs of children with delayed self care in the same way as they would meet the individual needs of children with delayed language or any other kind of delayed development. Children will not be excluded from normal every day school activities solely because of incontinence.

1. Introduction

- 1.1 Staff who work with children will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.
- 1.2 Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.
- 1.3 Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. Staff behaviour is open to scrutiny and staff at Holywell Primary work in partnership with parents/carers to provide continuity of care to children wherever possible.
- 1.4 Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents/carers who are encouraged to reinforce the personal safety messages within the home.
- 1.5 Holywell Primary 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. Holywell Primary recognises 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.

2. Our approach to best practice

- 2.1 All children who require intimate care are treated respectfully at all times; **the child's welfare and dignity is of paramount importance.**
- 2.2 Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in moving and handling) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapist as required.
- 2.3 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. Wherever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex and relationship education to their children as an additional safeguard to both staff and children involved.
- 2.4 There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.
- 2.5 As a basic principle children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. A Personal Care Management Plan (see pro forma in the Appendix at the end of this policy) will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health.
- 2.6 Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Where possible one child will be cared for by one adult unless there is a sound reason for having two adults present. If this is the case, the reasons should be clearly documented.
- 2.7 Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.
- 2.8 Parents/carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.
- 2.9 Each child will have an assigned senior member of staff to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

3. The protection of children

- 3.1 Education Child Protection Procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to.
- 3.2 Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.
- 3.3 If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the designated person for child protection. A clear record of the concern will be completed and referred to social care if necessary. Parents/carers will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm. (See the Child Protection Policy, available on the school's website).
- 3.4 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 schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- 3.5 If a child makes an allegation against a member of staff, all necessary procedures will be followed (see the Child Protection Policy).

4. Health & Safety

In the event that staff need to attend to a child in an intimate manner, as part of Holywell Primary Health and Safety Policy, the following procedures should be enacted whilst on the premises:

- Staff to wear disposable gloves and aprons while dealing with the incident
- Soiled nappies to be double wrapped, or placed in a hygienic disposal unit
- Changing area to be cleaned after use
- Hot water and liquid soap available to wash hands as soon as the task is completed
- Hot air dryer or paper towels available for drying hands.

5. Monitoring and review

- 4.1 The effectiveness of this policy will be monitored by the Governing Body.
- 4.2 This policy will be reviewed every two years.

Appendix

Personal Care Management Plan

Child / Young Person's Name:	
Date of Birth:	
Details of assistance required:	
Facilities and equipment: (Clarify responsibility for provision of supplies e.g. parent/carer/school/other)	
Regular Named Staff Member	
Regular Location for Change	
Back up Staff Member	
Training needs (individual staff must keep signed/dated records of training received in addition to school and setting held records. A record should be completed when training has been delivered and kept as part of the care plan)	
Curriculum specific needs:	
Arrangements for trips/transport:	
Procedures for monitoring and complaints: (including notification of changing needs by any relevant party)	
Any Further Comments:	
Review Date:	

This current plan has been agreed by:-

INCo Signature:

Date:

Class Teacher Signature:

Date:

Teaching Assistant Signature:

Date:

Parent's Signature:

Date:

