

Policy for Intimate Care

Ely St John's Community Primary School

June 2013

Introduction

Ely St John's Primary School is committed to ensuring that all staff responsible for the intimate care of children or young people will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all children/young people with respect when intimate care is given. No child/young person should be attended to in a way that causes distress, embarrassment or pain.

What is Intimate Care?

Intimate care is any personal care that most people usually carry out for themselves.

Our Approach to Best Practice

The management of all children/young people with intimate care needs will be carefully planned and should be a positive experience for all involved. The child/young person who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance. The practical procedures/guidelines for carrying out intimate care are found in Appendix A.

Staff who provide this care are trained to do so (including Safeguarding and Child Protection and Moving and Handling Training) and are fully aware of best practice, including having read the Dept for Children Schools and Families (DCSF) now the Department of Education Guidance for Safer Working practice for Adults who work with children and young people in Education Settings. Suitable equipment and facilities can be identified to assist with children/young people who need special arrangements by an assessment from an Occupational Therapist. (OT)

It is the school/setting's responsibility to support staff that are carrying out intimate care procedures. Advice can be given by contacting the occupational therapy service, school nurse or the Education Child Protection Service as required. Whenever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex and relationships education to the children/young people in their care as an additional safeguard to both staff and children involved. If staff are involved care should be taken to ensure that resource materials cannot be misinterpreted and clearly relate to the learning outcomes identified by the lesson plan. This plan should highlight particular areas of risk and sensitivity.

Children/young people will be supported to achieve the highest level of autonomy possible given their age and abilities. Staff will ensure each child/young person does as much for him/herself as he/she can. This may

mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up as appropriate and shared and agreed by the child/young person and their parents/carers.

Each child/young person's right to privacy will be respected. Careful consideration will be given to each situation to determine how many staff need to be present when the child/young person is being cared for. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present. In this case, the reasons should be clearly documented and reassessed regularly.

Wherever reasonable and practical staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence, for example female staff supporting boys when there is no male staff.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan. The needs and wishes of children/young people and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Safeguarding Children

Cambridgeshire Local Safeguarding Children Board (LSCB) Safeguarding Interagency Procedures will be adhered to alongside the school/setting's safeguarding and child protection policy and procedures.

All children/young people will be taught personal safety skills as part of Personal Social and Health Education (PSHE) relative to their age, ability and understanding. Research indicates that children with an awareness of personal safety and the ability to be assertive are more resilient to abuse. These skills will be shared with parents/carers to enable them to be consolidated within the home/community.

If a member of staff has any concerns about physical or behavioural changes in a child/young person's presentation, e.g. marks, bruises, soreness or reluctance to go to certain places/people etc. s/he will immediately pass their concerns to the Designated Person for child protection in their school/setting.

If a child/young person is displaying inappropriate sexual behaviour/language, advice should be sought from the appropriate source (e.g. In schools this might be: Designated Person for Child Protection, School Nurse, Social Care, Education Child Protection Service, Cambridgeshire Sexual Behaviour Service)

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/young person's needs remain

paramount. Further advice, following the Interagency Procedures will be taken from outside agencies as necessary.

If a child makes an allegation against a member of staff the procedures for Allegations Against Staff will be followed as outlined in the school's Safeguarding and Child Protection policy. All staff involved in intimate care are required to have read the School's Policy and Guidance for Intimate Care and the DCSF (now Department of Education DfE) Guidance for Safer Working Practice as previously mentioned. Be aware of the need to refer to other policies the school/setting may have in place for clarification of practices and procedures.

This policy was developed by consultation between staff, the governing body or management committee, parents and children/young people (as appropriate) and was ratified

By the Governing Body on 12th November, 2013.

This policy will be reviewed as necessary.

Appendix A

Guidelines for staff on carrying out intimate care (day to day accidents).

1. Wear disposable gloves.
2. If an accident – use the appropriate toilets for the child e.g. for middays this is usually the Foundation Stage/Year 1 toilet.
3. Make sure another staff member knows where you are and what you are doing.
4. Allow the child privacy but also ensure you are not enclosed inside the cubicle with the child. In the disabled toilet the sliding door can be slightly open with the adult outside where necessary and in the usual toilets a cubicle door can be held ajar.
5. Talk to the child to reassure them and to make them feel at ease but also for your own personal safety – tell the child what you are doing as you do it and why.
6. There may not always be other adults around to help and with a child with a regular arrangement this is not necessary, or where a child has just had a wetting accident. However for something more serious where cleaning is involved the 'T' card may be sent to the staffroom for support.
7. There is a box in the Foundation Stage store cupboard and in the FDS/Yr 1 cloakroom marked 'T' which contains wipes, nappy sacks, gloves, aprons and yellow bags. Carrier bags are also in the cupboard for wet clothes.
8. Wipes must not be flushed down the toilets but placed in a nappy bag, tied and placed in yellow bags with disposed of gloves. These need to be put in the big green bin outside behind the hall.