



Intimate Care Policy

Date of Policy: Autumn 2020

Date Ratified by Governors: Autumn 2020

Date for Review: Autumn 2024

Moulsham Junior School Intimate Care Policy

sharing, supporting, striving, succeeding

INTRODUCTION

Moulsham Junior School's Intimate Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children. Disabled children can be especially vulnerable. Staff involved with the intimate care of children need to be sensitive to the child's individual needs. Most pupils are able to look after their own intimate care needs but some are unable to because of their age, physical difficulties or special educational needs.

This is our policy for how we will manage intimate care for pupils who need it.

DEFINITION OF INTIMATE CARE

Intimate care may be defined as any activity required to meet the personal care needs of individual children. Parents have a responsibility to advise staff of the intimate care needs of their child, and staff have a responsibility to work in partnership with children and parents.

Intimate care is any care which involves washing, touching or carrying out a procedure to private parts of the body. Intimate care might also include supervision of pupils involved in intimate self-care, if this is needed.

Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing
- Toileting
- Menstrual Care
- Treatments such as enemas, suppositories, enteral feeds
- Catheter and stoma care
- Supervision of a child involved in intimate self-care

PRINCIPLES OF INTIMATE CARE

We take our responsibility to safeguard and promote the welfare of our pupils seriously and meeting a pupil's intimate care needs is part of this. We will adhere to Section 175/157 of the Education Act 2002 and the government guidance 'Keeping Children Safe in Education' to ensure we do this.

In line with the Equality Act 2010, we will not discriminate against a pupil with a disability. A person has a disability if they have a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.

We will treat all pupils, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is provided. We will ensure that all staff undertaking intimate care will do so in a professional manner. Each pupil will be treated as an individual and care

will be given gently and sensitively. Our staff will work closely with parent/carers and professionals to share information and provide continuity of care.

Pupils with complex or long-term medical conditions will have an individual healthcare plan that has been written in conjunction with parents and/or medical professionals. If such pupils need intimate care, their plan will take this policy into account.

The following are the fundamental principles upon which our Intimate Care Policy is based:

- Every child has the right to be safe.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect.
- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities.
- Every child has the right to express their views on their own intimate care and to have such views taken into account.
- Every child has the right to have levels of intimate care that are as consistent as possible.

INTIMATE CARE PLANS

Pupils who need regular intimate care will have an:

- Intimate care plan; or an
- Individual healthcare plan.

This is a written document that explains what will be done, when and by whom.

It will be written with input from the pupil (where possible), parents/carers, school staff and other professionals, such as a school nurse or physiotherapist. Ideally, this will take the form of a meeting. Any historical concerns will be taken into account. If needed, we will agree appropriate terminology for private parts of the body and functions and note this in the plan. In some cases, the support for a pupil's intimate care needs will be written into their Education, Health and Care (EHC) plan or their SEN Support plan (or equivalent document) rather than an intimate care plan or individual healthcare plan.

Intimate Care Plans will additionally:

- Respect the religious views, beliefs and cultural values of pupils and their families
- Respect the child's right to privacy and modesty
- Consider carefully who will support the pupil with intimate care and if this needs to be more than one person. As far as possible, each pupil will have a choice about who supports them.
- Take into account safer working practice and make sure our processes are transparent.
- Be reviewed as necessary, but at least annually.

BEST PRACTICE

- Pupils will be supported to do as much as they can for their own intimate care needs, taking into account their age and ability.
- The pupil's preferred means of communication will always be used.

- School staff will always explain or seek the permission of the pupil before starting an intimate care procedure, according to the pupil's age and level of understanding.
- Staff will be trained in personal care (e.g. safe moving and handling practice) according to the needs of the pupil.
- Staff will be aware of best practice regarding infection control, including the requirement to wear disposable gloves, aprons and face masks where appropriate.
- Staff will be supported to adapt how they support individual pupils when changes happen, such as the onset of puberty and menstruation.
- Only employees of the school will support pupils with intimate care (not students or volunteers). They will have the usual range of safer recruitment checks, including enhanced DBS checks.
- All staff will be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.

RECORD KEEPING

- School staff will inform another member of staff when they are going to assist a pupil with intimate care on their own.
- A written record will be kept every time a child has an invasive medical procedure, e.g. support with catheter usage. This will be kept in an agreed format as per the pupil's individual healthcare plan.
- Accurate records will also be kept when a pupil receives intimate care. These will be brief but will include date, time and any comments, such as changes in the child's behaviour. It will be clear who was present in every case.

CHILD PROTECTION

- We recognise that pupils with special educational needs or who are disabled are vulnerable to all types of abuse. The school's child protection policy will be adhered to.
- Intimate care involves risks for children and adults as it may involve staff touching private parts of a pupil's body. As such, best practice will be followed and staff will be encouraged to be vigilant at all times, seek advice where relevant and take account of safer working practice.
- Where appropriate, pupils will be taught personal safety skills according to their age and level of understanding.
- If a pupil becomes unusually distressed or unhappy about being cared for by a particular member of staff, this will be immediately reported to a senior member of staff.
- The matter will be investigated at an appropriate level and outcomes recorded. Parents/carers will be contacted as soon as possible. Staffing schedules will be altered until the issue is resolved. The child's needs will remain of upmost importance. Further advice will be taken from outside agencies if necessary.
- If a pupil, or any other person, including a staff member, makes an allegation against an adult working at the school this will be reported to the Headteacher (or to the Chair of Governors if the concern is about the Headteacher).
- The Headteacher or Chair of Governors will consult the Local Authority Designated Officer in accordance with our school's Child Protection Policy.

- If a member of staff has any concerns about a pupil's presentation, e.g. unexplained marks or bruises etc. they will report these to the Designated Safeguarding Lead using CPOMs immediately.

PHYSIOTHERAPY

- School staff may be asked to undertake a physiotherapy regime (such as assisting children with exercises).
- School staff must only do this once the technique has been demonstrated by a physiotherapist and written guidance has been provided. The physiotherapist will observe the member of staff undertaking the exercises. These will be recorded in the pupil's support plan and reviewed regularly.
- Any concerns about the regime or any failure in equipment will be reported to the physiotherapist.
- School staff will not devise and carry out their own exercises or physiotherapy programmes.

MEDICAL PROCEDURES

- Pupils who require help with medical procedures will have an individual healthcare plan that documents these procedures. These will have been written with parents/carers and medical professionals.
- Medical procedures will only be carried out by staff who have been trained.
- Staff will follow infection control guidelines and ensure that any medical items are disposed of correctly.
- Any members of staff who administer first aid will be trained in accordance with Local Authority guidance. If a pupil needs examining in an emergency aid situation, it is best to have another adult present, whilst respecting the child's privacy and dignity.

SUPPORTING DRESSING/UNDRESSING

- Sometimes it will be necessary for staff to aid a child in getting dressed or undressed. Staff will always encourage children to attempt dressing and/undressing unaided.

PROVIDING COMFORT OR SUPPORT

- Children may seek physical comfort from staff. 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 to be appropriate, staff must provide care which is suitable to the age and situation of the child.
- Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated.
- 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.

SOILING

- If a pupil soils themselves during the school day and they are unable to clean themselves due to a medical or physical condition the pupil's Individual Healthcare Plan should be followed.
- If there is no Individual Healthcare Plan in place:
 - The child will be encouraged to care for him / herself as far as possible.
 - Staff will provide the pupil with wipes (as necessary) and clean clothes.
 - Staff will put soiled clothing in a plastic bag, unwashed, and send home with the child.

OTHER POLICIES AND DOCUMENTS

This Intimate Care Policy should be read alongside the school's:

- Child Protection Policy
- Staff Code of Conduct
- Equalities Policy
- Keeping Children Safe in Education document
- Special Educational Needs and Disability Policy.

It should also be read alongside the:

- Moving and Handling Policy for Children's Services
- DfE guidance 'Supporting Pupils at School with Medical Conditions'.