

School intimate care Policy

At All Saints' We are 'Children of God'.

We wear our crowns with pride.

Together, we are Included, Involved and Inspired

²⁴ Do you not know that in a race all the runners run, but only one gets the prize? Run in such a way as to get the prize. ²⁵ Everyone who competes in the games goes into strict training. They do it to get a crown that will not last; but we do it to get a crown that will last forever. ²⁶ So I run with purpose in every step.1 Corinthians 9 v 24-26

Vision Statement

At All Saints' everyone is welcomed and **included**. Each individual is acknowledged and valued as an equal member of our school family and we form a community where we worship God together freely. We celebrate our inclusivity and are respectful of our differences.

Our emblem is a crown; we wear it with pride because it reminds us that we are working for a purpose. This means that we are **involved** in our learning and are determined to take whatever action is needed for us to be the best that we can be.

We seek a clearer understanding of the world and confidently imagine a better future. With our eyes fixed on this prize, we are **inspired** to be life-long learners and we want to inspire others too to make a difference in this world.

INTRODUCTION AND PURPOSE

All Saints' CE Primary School 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. All Saints' School recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in any way that causes distress or pain.

What is meant by intimate care?

Several activities performed by adults in settings/schools could be described as intimate care. These could range from:

- supporting a pupil with dressing/undressing
- cleaning a young or disabled pupil who has soiled him/herself
- providing comfort and support for a distressed or grieving child
- assisting a pupil requiring regular medical care and unable to carry this out unaided.
- Changing a nappy

A situation requiring intimate care may be an irregular and unusual event or it may be a regular and integral part of the care plan associated with the provision of a curriculum for the child.

If intimate care is part of the regular integral part of the provision necessary for a child, their parent will be required to complete an 'Intimate Care Plan' and sign consent for this to take place on an annual basis. Where possible, this will be discussed and the child will be consulted during this process to ensure that the child's wishes are considered. (See Appendix 1)

Our approach to best practice

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

Staff training for those who provide intimate care includes Safeguarding, Child Protection and Manual Handling training where necessary. Any staff member may need to be involved with intimate care at any given time. It is important to emphasise that adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced DBS checks.

All staff are also fully aware of best practice and where necessary take on advice from external agencies such as doctors, school nurses and physiotherapy staff. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapist as required.

All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.

No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care

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/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.

The child 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 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 for particular children as appropriate to suit the circumstances of the child. These plans will be shared with the relevant staff but also parents too.

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 is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present (e.g. use of the hoist or if it is considered to be best interest of both the child and staff involved) Again this will be discussed with parents prior to intimate care beginning at school.

Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their ages. An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.

On the majority of occasions, intimate care will take place in the accessible toilet in school if that is the most appropriate place for the needs of the individual child. Their right to dignity and privacy will always be paramount.

There is always a supply of materials in order to carry out intimate care in school. These include: cleansing wipes, tissues, gloves etc. However, lots of children who have intimate care on regular basis usually provide their own and bring a supply to school each day.

All staff are aware that health and safety is important and we are committed to ensuring that we do our best to keep the school environment clean and thus prevent the spread of infection. All staff members should wear protective gloves when involved in intimate care and should ensure that they wash their hands both before and after. Everyone that uses the accessible toilet for intimate care duties will be expected to leave in a clean and sterile condition ready for the next person to use.

Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally 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, whilst at the same time guarding against the care being carried out by a succession of completely different carers. Some children however become distressed if their dedicated Teaching Assistant is not undertaking their intimate care, so sensitivity must be shown. Children are always treated according to their needs and on an individual basis.

As the vast majority of staff in the school are female most intimate care is carried out by females, whatever the sex of the child. If this is an issue, the school would attempt to employ staff of the same sex to provide intimate care. This may not be possible and again would be a conversation for parents to have with all professionals in school. The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer. The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing and equal opportunities legislation.

If an adult notices marks, bruises or injuries whilst they are involved in intimate care, they are required to record these on a body map and in the usual way that Safeguarding concerns are reported, recorded and passed on.

Pupils who require physiotherapy whilst at school should have this carried out by a trained physiotherapist. If it is agreed in the iPassport or care plan that a member of the school staff should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly. The physiotherapist should observe the member of staff applying the technique. Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes. Any concerns about the regime or any failure in equipment should be reported to the physiotherapist.

Any members of staff who administer first aid should be appropriately trained in accordance with LA guidance. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity.

Please also see;

SAFEGUARDING POLICY, Staff Code of Conduct and Guidance on Safer Working Practice, Whistle-blowing and Allegations Management policies, Health and Safety Policy and Procedures, Special Educational Needs and Disabilities Policy and Manual Handling procedures.

Version Control

Date	Change			
January 2011	Policy written by L.Panayi, PSHE Co-ordinator. Agreed by staff and			
	governors.			
May 2014	Policy reviewed. A couple of minor changes necessary – addition of 'What is			
	meant by intimate care?' and 'Sources of Information' sections, deletion of			
	'References' section. Agreed by staff and governors.			
January 2016	Policy reviewed as the responsibility of this was passed to the SENCo. Only a			
	few minor changes necessary. Agreed by staff and governors.			
May 2019	Policy reviewed by R.Bacon (SENDCo) more information added to			
	include:			
	Who the designated staff are			
	Where any cleaning of the child and changing of clothes will take			
	place			
	Whether anyone needs to be informed			
	 What materials will be used (for example, cleansing wipes) 			
	• What measures should be put in place to prevent the possible spread of			
	infection (for example, protective gloves)			
	 Checking that parents/carers have given permission for personal care 			
	to take place, the intimate care plan appendix 1.			

	 Updated appendix 1 so this process is 'Child Centred' and they are involved in process of drawing up a plan. What needs to be done if the staff member notices marks/injuries on the child How children should speak to a child during intimate care Religious beliefs/ views Information regarding mobile phones Physiotherapy guidance
May 2022	Policy reviewed and the wording of IEP amended to iPassport which is our school version of an IEP. Nappy changing added. Intimate care forms to be sent out each September at the start of the academic year for any children that need above and beyond the regular support and assistance.

Appendix 1



All Saints' CE Primary School, Newmarket

Intimate Care Plan

Pupil's name:		Date of Bi	Date of Birth:			
Reasons for the plan:						
Level of supervision:						
What assistance required:						
When?						
With a resident of the second						
Where?						
	Facilities and ed	quipment				
What equipment is required: Is there a toilet training programme? Yes/No If 'yes' list details:						
The plan will be monitored by Class teacher & SENCo						
Date: Date of next review: To be reviewed annually and updated as necessary						
THIS PLAN HAS BEEN AGREED BY:						
Designation	Name	Signature	Date			
Parent/carer						
Child						
Class Teacher						
Head Teacher						