

# Halifax Primary School

*Helping each other to aim high*



## Intimate Care Policy

Purpose	The purpose of Halifax Primary's Intimate Care Guidelines is to provide guidance on supporting pupils with their personal care in a safe and dignified manner.
Audience	School Governors Staff Pupils Parents
Related Policies	Safeguarding Policy Medical Conditions Policy
Policy updated	November 2023

## **Introduction**

This Policy alongside the Safeguarding Policy must be followed by *all* Halifax Primary School staff involved in the intimate care of children.

This Policy and Guidance should be read in conjunction with other policies including:

- The Safeguarding Policy
- The Medical Needs Policy

The Disability Discrimination act 2005, requires education providers to have guidance relating to if a child wets/soils themselves. As an inclusive school and in line with our Equalities Policy we would not refuse a pupil on the grounds that they have continence needs. Children and young people may require intimate personal care because they have a Physical Disability, Special Educational Need or short term condition/illness.

Halifax Primary School is committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers and visitors to share this commitment. All staff responsible for the intimate care of children in our school will undertake their duties in a professional manner at all times. Halifax Primary School recognises that there is a need to treat all children with respect when intimate care is given, their permission will be sought before support is given. No child will be attended to in a way that causes emotional discomfort, physical discomfort or lack of choice. The child's welfare and dignity is of paramount importance, every child's right to privacy will be respected.

Pupils and Parent/Carers views will be sought and listened to.

## **Definition of Intimate Care**

Intimate Care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a child after they have soiled themselves) to intimate areas. In most cases such care will involve cleaning for hygiene purposes, as part of a staff member's duty of care. In the case of a specialised procedure only a person suitably trained and assessed as competent should carry out the procedure. The issue of intimate care is a sensitive one and requires staff to be respectful of the child's needs.

Staff providing Intimate Care must be aware of the need to adhere to good Child Protection practice in order to minimise the risks for both children and staff. It is important that staff are supported and trained so that they feel confident in their practice.

## **AIMS**

- To safeguard the rights and well being of children and young people with regard to dignity, privacy, choice and safety.
- Provide staff with information and appropriate training in Intimate Care.

## **Partnership and participation**

Much of the information required to make the process of intimate care as comfortable as possible for the child is available from the child, parents and/or carers. They must be involved in the preparation of intimate care protocols and sign their consent.

### **Principles**

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has the right to feel safe and secure
- Every child has the right to be treated as an individual
- Every child has the right to remain healthy
- Every child has the right to privacy, dignity and a professional approach from all staff when meeting his or her needs
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities
- Every child has the right to have levels of intimate care that are appropriate to their physical/emotional needs and stage of development. This must be a consistent approach.

### **Approach to Best Practice**

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

-The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff encourage children to do as much for themselves as they can, lots of praise and encouragement will be given to the child when they achieve.

- When intimate care is given, the member of staff explains fully each task that is carried out, and the reason for it.

-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 involved in the intimate care of children will not be involved with the delivery of sex education to that child, as an additional safeguard to both the staff and child.

-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 toileted, where possible one child will be catered for by one adult (unless there is a sound reason for having more adults present). If this is the case, the reasons should be clearly documented.

-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.

-Intimate care arrangements will be discussed with parents on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and legislation.

### **The Protection of Children**

-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 appropriate manager/designated person for child protection.

-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 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.

### **Dealing with body fluids**

– Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely by using the yellow medical bin (blood), double bagging and placing in the outside bins (urine and faeces). When dealing with body fluids, staff will wear disposal plastic gloves and wash themselves thoroughly afterward. Soiled children's clothing will be double bagged to go home– staff will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with.

All staff maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.

### **Senior management responsibilities:**

- To ensure that all new staff are familiar with the school's Intimate Care policy and relevant individual Intimate Care protocols and that they receive the appropriate assistance from experienced staff to provide the children they are supporting with the Intimate Care as outlined in their individual protocols.

### **Staff Responsibilities:**

- Staff must be familiar with the Intimate Care policy/procedures.
- Staff are asked to sign the intimate care plan if they agree to providing the care.

## **Appendix 1**

### **Hand Hygiene**

Good hand washing is the single most effective way of stopping germs from getting into our bodies and causing infection.

Liquid soap is better than solid soap because it is less likely to become contaminated.

In some circumstances it may be necessary to disinfect with an alcohol disinfectant solution e.g. when a child has an infectious disease.

Disposable paper towels are the best option for drying hands because damp towels can harbour germs.

**Don't assume children know how to wash their hands.**

#### **Hand washing procedure**

1. Wet hands under warm running water.
2. Apply a small amount of liquid soap.
3. Rub hands together vigorously ensuring soap and water is applied to all surfaces of the hands. Be sure to rub between fingers, the palms and the back of the hands.
4. Rinse hands under running water.
5. Dry hands, preferably using paper towels.

## **Appendix 2**

### **Dressing (Including swimming)**

Ensure facilities provide privacy and modesty e.g. separate toileting and changing for boys and girls or at least adequate screening. Separate changing cubicles should be available for swimming sessions.

Pupils should be encouraged to dress/undress themselves independently.

There should be a clear plan, appropriate to each individual for (un)dressing for those who require supervision.

When using Public Facilities e.g. staff should be aware in advance of the nature of the facilities, and to ensure the dignity of each participant in the activity.

**Procedure for undressing and dressing pupils who require full support: (swimming or when soiled)**

**Ensure privacy before procedure**

1. Remove clothing from lower body first
2. Put on swimming costume/or wash as required
3. Ensure lower regions are covered before removing garments from upper body
4. Encourage pupil to assist whatever way possible
5. Refer to moving and handling procedure for safe movement of pupil and safety of staff

## Appendix 3

### Toileting

#### Guidelines

- Where support is needed use the adapted toilet in KS1 or next to the Inclusion Office.
- There should be appropriate and specialised toilet seats provided for the size and physical needs of the child. A step may be necessary for younger children..
- Ensure that adequate facilities are provided, such as toilet paper, liquid soap, paper towels, wipes.
- Items of protective clothing such as disposable gloves and aprons must be provided and readily accessible.
- Some children may prefer to be changed by a single member of staff for reasons of privacy and dignity. Where an individual expresses a clear preference this must be respected if possible. It is acceptable for a single member of staff to change a child providing they ensure that:
  - another member of staff is aware of what is happening.
  - the event is recorded and initialled by the member of staff who changes the child. Any issue or problem, such as bad nappy rash, which may have arisen or been noticed should also be recorded. This should be shared with the parent/carer and a copy of the written record supplied.

It may be necessary, however, to have more than one member of staff to help while toileting a child because of health and safety or other considerations.

- The child's privacy and dignity should be maintained at all times. For example, talk to the child, not over the child to a colleague, do not comment about the child's body or body parts.
- Soiled clothes should be double bagged and given to the parent/carer/childminder at the end of the session



### Personal Care Plan

**Name:**

**D.O.B**

Name of key person(s) to change the child:	
Name of person(s) to change the child if main adult unavailable:	
Where changing will take place:	
Level of supervision and assistance required	
What resources and equipment will be used, who will provide them.	
Training requirements for staff:	-Read the Intimate care policy -Safeguarding training
Disposal of product in:	
Infection control measures:	
Special arrangements for trips/ outings:	
When will the plan be reviewed:	
Review comments:	

- If the child is unduly distressed, a member of staff will contact the parent/carer.
- If the above named members of staff are not available, then another person, familiar to the child will attend to the child's needs.

SENCO/ Inclusion Leader approval:

Date:

<b>This plan has been agreed by:</b>			
<b>Designation</b>	<b>Name</b>	<b>Signature</b>	<b>Date</b>
Parent/carer			
Phase Leader			
Class teacher			
SENCO	Mrs Walker		
Teaching assistants			

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