



Intimate Care Policy

for

Oaklands Infant School

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Introduction

It is our intention to develop independence in each child, however there will be occasions when help is required. Our intimate care policy has been developed to safeguard children and staff. It is one of a range of specific policies that contribute to our pastoral care policy. The principles and procedures apply to everyone involved in the intimate care of children.

Children are generally more vulnerable than adults and staff involved with any aspect of pastoral care need to be sensitive to their individual needs.

Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities can include:

- * Feeding
- * Oral care
- * Washing
- * Changing clothes
- * Toileting
- * First aid and medical assistance
- * Supervision of a child involved in intimate self-care

Parents have a responsibility to advise the school of any known intimate care needs relating to their child.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are 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
- * All children have the right to be involved and consulted in their own intimate care to the best of their abilities
- * All children have 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 appropriate and consistent

Care Plans

Where a pupil has particular needs (eg wearing nappies or pull-ups regularly, or has continence difficulties which are more frequent than the odd 'accident', staff will work with parents/carers (and health visitors/school nurse, if appropriate) to set out a care plan to ensure that the child is able to attend daily.

The written care plan (Appendix A) will include:

- Who will change the child including back-up arrangements in case of staff absence or turnover
- Where changing will take place
- What resources and equipment will be used (cleansing agents used or cream to be applied?) and clarification of who is responsible (parent or school) for the provision of the resources and equipment.
- How the product, if used will be disposed of, or how wet or soiled clothes will be kept until they can be returned to the parent/carer
- What infection control measures are in place



- What the staff member will do if the child is unduly distressed by the experience or if the staff member notices marks or injuries
- Training requirements for staff
- Arrangements for school trips and outings
- Care plan review arrangements

School Responsibilities

All staff working with children are DBS checked. This includes students on work placement, teachers and volunteers.

Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are involved in the intimate care of children.

Intimate care arrangements, beyond the normal accidents children sometimes have, should be agreed between the school and parents (and also, if appropriate, by the child). Consent forms are signed by the parent and stored in the child's file (Appendix B). Only in emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school. Parents would then be informed. The views of all relevant parties should be sought and considered to inform future arrangements. If a staff member has concerns about a colleague's intimate care practice she or he must report this to the Designated Safeguarding Lead or Deputy Safeguarding Lead for child protection.

Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

All staff need to be aware that some adults may use intimate care, as an opportunity to abuse children.

It is important to bear in mind that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard children and staff.

- Involve the child in the intimate care: Try to encourage a child's independence as far as possible in his or her intimate care. When a situation renders a child fully dependent, talk about what is going to be done and give choices where possible. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation. Care should **not** be carried out by a member of staff working **alone** with a child unless this has been agreed. Staff are not expected to work alone unless there is a prior arrangement.
- Make sure practice in intimate care is consistent. As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
- Be aware of your own limitations Only carry out activities you understand and feel competent with. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.
- Promote positive self-esteem and body image Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse.



The approach you take to intimate care can convey lots of messages to a child about their body worth.

Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

f. If you have any concerns you must report them

If you observe any unusual markings, discolouration or swelling, report it immediately to the Designated Safeguarding Lead or Deputy Safeguarding Lead for child protection.

If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the Designated Safeguarding Lead or Deputy Safeguarding Lead.

Working with Children of the Opposite Sex

There is positive value in both female and male staff being involved with children. Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman.

The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- * When intimate care is being carried out all children have the right to dignity and privacy, i.e. they should be appropriately covered or the door partially closed
- * If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance
- * Report any concerns to the Designated Safeguarding Lead or Deputy Safeguarding Lead and make a written record
- * Parents must be informed about any concerns

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc.

To ensure effective communication:

- * Make eye contact at the child's level
- * Use simple language and repeat if necessary
- * Wait for response
- * Continue to explain to the child what is happening even if there is no response
- * Treat the child as an individual with dignity and respect



APPENDIX A

Oaklands Infant School

Intimate Care Plan

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| Name of child: | |
| Name of person(s) to change the child: | |
| Name of person(s) to change the child if main adult unavailable: | |
| Where changing will take place: | |
| What resources and equipment will be used: | |
| Who will provide the resources and equipment that will be used: | |
| Training requirements for staff: | |
| 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 member of staff is not available due to illness or staff training, then another person, familiar to the child will attend to the child's needs.*

Headteacher approval:

Date:



APPENDIX B

Oaklands Infant School

Intimate Care Plan Agreements

The parent:

- I agree to ensure that the child is changed at the latest possible time before being brought to the setting/school
- I will provide the setting/school with spare nappies or pull ups and a change of clothing
- I understand and agree the procedures that will be followed when my child is changed at school
 - including the use of any cleanser or wipes
- I agree to inform the setting/school should the child have any marks/rash
- I agree to review arrangements should this be necessary
- I agree that my child will be changed in the presence of up to two adults

Signed: (parent/carer)

The school:

- We agree to change the child during a single session should the child soil themselves or become uncomfortably wet
- We agree to monitor the number of times the child is changed in order to identify progress made
- We agree to report should the child be distressed, or if marks/rashes are seen
- We agree to review arrangements should this be necessary

Signed: (school member of staff)

Name: (school member of staff)

Date: