

# Intimate Care Policy

Stanley Grove Primary and Nursery School

Revised March 2022



## **Rationale**

Intimate care/assistance and activities requiring close personal contact can be identified as any personal care/assistance that involves a child/young person's personal space.

In addition to care, safety and hygiene, the procedures must have due regard for dignity and privacy and take into account age, gender, culture and physical and development needs.

## **Purpose**

The purpose of the policy at Stanley Grove School:

- Uphold rights to privacy and dignity.
- Identify situations which have elements of close personal/intimate contact.
- Recognise the responsibilities of adults involved.
- Safeguard all from any misinterpretation of action.
- Ensure consistency of action whilst being sensitive to individual need.
- Dispose of waste safely.

## **Guidelines**

The guidelines cover a variety of activities and it must be accepted that there has to be a degree of flexibility and judgement within some situations. The guidelines must be followed in the context of Child Protection, Health & Safety and Police Clearance Procedures.

## **Police Clearance**

All adults participating in any activities including intimate/close personal contact will have undergone statutory DBS checks. All adults assisting with toileting should be employees of the school. (not students or volunteers)

Any nappy changing has to be conducted with the door open and by a member of staff (not students or volunteers).

## **Child Protection**

All child protection matters must be reported to the designated person in school responsible for child protection. Procedures should follow the Child Protection Policy. The designated person is Mrs J Frost is the Designated Safeguarding Lead and Mrs J Priest, Mrs Wood, Mrs Johnson and Mrs Knowles are the Deputy Designated persons. Child Protection Training is an ongoing part of staff training.

## **Health and Safety**

All staff should be aware of and adhere to the general health and safety guidelines as documented by the School. Appropriate risk assessments should be carried out. Any health and safety concerns or queries should be taken up with Mrs J Frost who will act upon the information.

## **The role of students/volunteer helpers**

Students/volunteer helpers/parents and supply agency staff:

- Can show children children where toilets are.
- May assist in helping pupils change for PE if under the close supervision of staff e.g. help with socks shoes etc
- Must not assist with any feeding requiring medical training to give food or respond to an emergency situation.
- May assist at the dining table in general situations.
- Must be supervised and not put in a situation where they are alone with children or young people except in extreme/emergency circumstances.
- Must have read the safeguarding and child protection policies

## **Individual Toilet Protocol/Programme**

Parents/Carers and School will be required to sign an agreement outlining responsibilities and procedures re the 'changing' of children who are soiling whilst in school. (See attached).

## **GENERAL GUIDELINES**

### **Toileting/changing**

The following must be taken into consideration:

1. The need for privacy whilst being aware of the need to protect staff from allegations and pupils from possible inappropriate touching.
2. Consistency of approach with necessary information being communicated at all appropriate staff.
3. Encourage as much independence as possible using the progression of skills opportunity
  - dependence
  - co-operation
  - participation
  - supervised independent action
  - independence
  - allowed to dress/undress where physically able
4. Be aware of assistants' own personal hygiene and use of appropriate aids – gloves, aprons etc.

5. Be aware of general hygiene and disposal of waste. (NB. Soiled nappies, catheters etc are not clinical waste – double bagging or nappy disposal unit is sufficient).
6. Give sufficient time, be aware of expectations and be familiar with the type and frequency of prompts.
7. Ensure females (and boys who catheterise) are cleaned front to back.
8. Creams etc only to be used with written permission from parents and provided by them.
9. Appropriateness of male/female assistance with boy/girl pupils to be agreed upon.
10. Secure documented parental agreement to procedures. If necessary this could include space for names of support staff members willing/able to assist at toileting times, and could include names of lunchtime staff available.
11. Prior to accompanying to the toilet, inform the relevant class teacher.
12. Report immediately back to the class teacher any concerns if a situation arises which causes support staff embarrassment.

### **Feeding/Eating**

1. All procedures to be kept up to date with information from health professionals and parents.
2. Account must be taken of individual likes and dislikes and normal routine.
3. Hygiene procedures to be adhered to.
4. Emergency procedures to be put in place if possible choking may be an issue.
5. The importance of social interaction at break/lunchtime should not be underestimated.

### **Physical Assistance**

1. Give verbal prompts/instructions before touching, moving or handling.
2. Have due regard for instructions given by therapists regarding an individual movement/transfer.
3. Always use equipment recommended to assist with moving/transfers.

Pupils may have individual bathroom/feeding/physical assistance regimes which will be reviewed and amended as required, following advice.

This policy will be reviewed in accordance with school/early years setting procedures for the review of all policies or sooner if national and/or local information impacts upon it.

### **GUIDELINES FOR CARING STAFF**

The essential requirement for good intimate care is that staff treats all children/young people with dignity and respect. It is also important that everyone sees themselves as belonging to a team. This ensures continuity and consistency of practice as well as allowing pupils to choose a personal carer with whom they feel comfortable. This is translated into practice in various ways:

1. Allow for a choice in the sequence of personal care.

If the child/young person indicates a preference for a particular sequence, then this should be followed rather than a sequence imposed by the carer. As long as necessary tasks are completed for the comfort and well-being of the individual, the order in which these tasks are completed is not important.

2. Ensure privacy appropriate to chronological age and situation.

The physical layout of the area to be used for the intimate care should be so designed as to ensure maximum privacy and maximum safety. The facilities should safeguard the staff's physical well-being. The number of staff required should reflect the safety requirements - (1 or 2 Staff). No unnecessary staff should be present and no other staff should interrupt the care procedure; adults as witnesses are not required.

3. Allow the individual to care for him/herself as far as possible.

This means allowing time and giving support where appropriate. Where possible, the learning of self-help skills should be seen as an educational priority. Check they are happy for you to help them or wipe them if they cannot wipe themselves.

4. Be aware of and responsive to the child/young person's reactions.

Always explain what the task involves and how you are going to carry it out. If their response is negative or fearful, be reassuring and check either with the child/young person or with a knowledgeable adult as to what would be a more appropriate method of care.

5. When carrying out intimate care away from school, remember the main issues of privacy and safety.

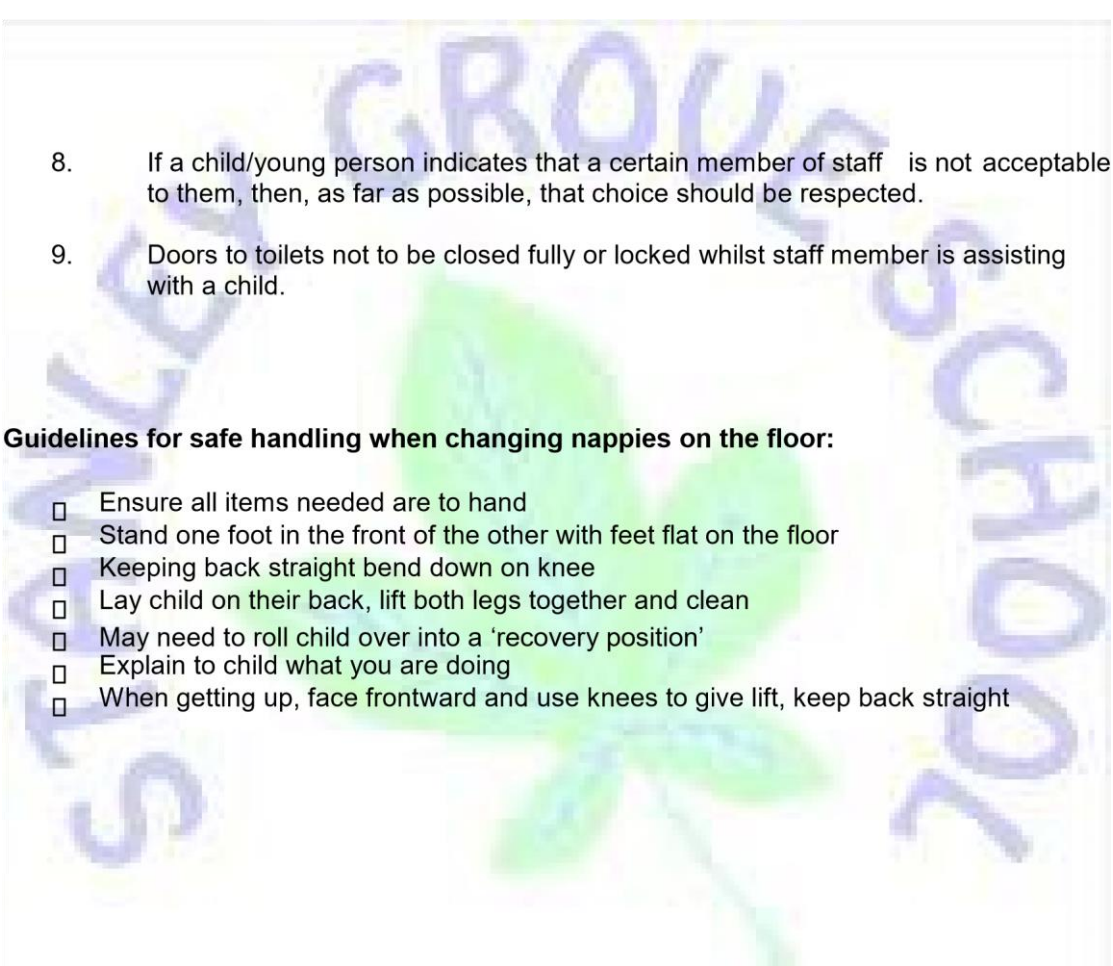
Most public places now provide a specially designed toilet for the disabled. Use this facility whenever possible. Carry with you those items deemed necessary for you to carry out intimate care tasks.

6. Encourage a positive body image.

Confident, assertive children/young people who feel their body belongs to them are less vulnerable to sexual abuse. The approach taken to provide intimate care is important: it conveys messages about what their body is 'worth'. Routine care should be enjoyable, relaxed and fun. All adult behaviour should be appropriate to the child/young persons chronological age.

7. Do not undertake any procedure, especially emergency medical procedures, without proper training.

For your own safety, as well as that of the child/young person, you should not

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8. If a child/young person indicates that a certain member of staff is not acceptable to them, then, as far as possible, that choice should be respected.
  9. Doors to toilets not to be closed fully or locked whilst staff member is assisting with a child.

**Guidelines for safe handling when changing nappies on the floor:**

- Ensure all items needed are to hand
- Stand one foot in the front of the other with feet flat on the floor
- Keeping back straight bend down on knee
- Lay child on their back, lift both legs together and clean
- May need to roll child over into a 'recovery position'
- Explain to child what you are doing
- When getting up, face forward and use knees to give lift, keep back straight

Do not undertake any procedure unless you have received appropriate training. If you are in doubt about any procedure, ask. Your safety and the pupil's safety are of the utmost importance.

## STANLEY GROVE PRIMARY AND NURSERY SCHOOL

### Individual Toilet Protocol

(Copies to be signed and given to parent and school)

Name of child ..... D.O.B. ....

#### Responsibilities

##### **The parent/carer will:**

- Provide the following:
  - o Nappies and pull ups
  - o Wet wipes
  - o Plastic bags to dispose of soiled items
  - o Change of clothing
- Understand and agree the procedures that will be followed when the child is changed at school.
- Agree to inform school should the child have any marks/rash. Agree to 'minimum change' policy i.e. the school would not undertake to change the child more frequently than if she/he were at home. Soiled nappies will be changed immediately and wet nappies when they look full.
- Work with school on a 'potty training' regime when and if the time is right.
- Agree a date to review arrangements.

##### **The school will:**

- Change the child as outlined in procedures established.
- Monitor the number of times the child is changed, in order to monitor progress made. This will be given to parent/carer.
- Report should the child be distressed, or if marks or rashes are seen.
- Agree a date to review arrangements.
- Provide plastic gloves, aprons, masks and a place for changing
- Inform parent/carer when supplies need replenishing.

**Individual plan**

Toilet procedures for .....

Date .....

Names of **staff** available to change and support: .....

**Actions to be carried out by member of school staff:**

- To take the child to the toilet when nappy is soiled
- To ensure PPE is worn
- To log time spent and make any relevance comments
- Soiled nappies to be disposed of appropriately
- It will be necessary for staff to see ..... Undressed and have contact with his/her more private areas, to ensure that he/she is thoroughly cleaned.

**Actions to be carried out by Child:**

**Actions to be carried out by Parent/Carer:**

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**Review date to be put on the 'Review Record' sheet (overleaf)**

Date .....

Signed .....(Parent/ Carer) Name

..... Signed .....(Inclusion Co-ordinator) Name .....

**Review Record**

<b>Review date</b>	<b>Developments</b>	<b>Amendments/updates to plan</b>	<b>Signed School/ parent</b>

