

God shines within our hearts.
Jesus walks by our side.
The Holy Spirit Gives us strength.

Intimate Care Policy

Intent

St Mary's Academy is a place where everyone is treated equally, encouraged and respected. We believe that all children should be able to achieve their full potential academically, socially and emotionally. We are committed to our school being a safe and inclusive place where learning is nurtured and encouraged in a happy, caring and fun environment. We all work for our school to be a happy place where good behaviour is expected and all children enjoy their educational journey. This policy is to help ensure good practice in this area.

This policy sets out clear principles and guidelines on supporting intimate care. It is in line with our Safeguarding Policy, Health and Safety Policies and Administering of Medicines policy.

This guidance refers to all children, of any age, who may require support for intimate/personal care from an adult on a daily basis and also those who may need it occasionally or exceptionally.

Staff who work with children and young people or those with SEN will realise that the issue of intimate/personal care is a difficult one and will require staff to be respectful of children's needs.

Description

Intimate care can be defined as any activity required to meet the personal care needs of each individual child. Parents have the responsibility to advise staff of any intimate care needs of their child and staff have a responsibility to work in partnership with children and parents. Children's dignity would need to be preserved and a high level of privacy, choice and control would need to be provided to them.

Intimate care tasks can include:

- Feeding
- Oral Care
- Washing
- Dressing/Undressing – supporting a pupil outside of the usual support already given for PE lessons or with zips, buttons etc.
- Toileting – assisting a pupil who may have soiled themselves or has vomited/feels unwell.
- Supervision of a child involved in intimate self-care. Providing comfort to support for a distressed pupil and assisting a pupil requiring medical care, who is not able to carry this out unaided are also considered as intimate care.
- Washing (including intimate parts),
- Helping someone use the toilet
- Changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Legislation

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2012, Special Educational Needs and Disability Act (2001), the Disability Discrimination Act (1995),

Equality Act (2010) and the Disability Discrimination Act (2005).

St Mary's, we will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part
- in day to day activities.
- No child with a named condition that affects personal development will be discriminated against.
- No child who is delayed in achieving continence will be refused admission.
- No child will be sent home or have to wait for their parents/carer due to incontinence.
- Adjustments will be made for any child who has delayed incontinence.

Partnership with Parents/Carers

Staff at St George's will work in partnership with parents/carers to provide care appropriate to the needs of the individual child and together will produce a care plan if necessary.

The care plan will set out:

- Number of staff needed to carry out the task (if more than one person is required, reason will be documented).
- Additional equipment required.
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions.

Parents/Carers with children on care plans are asked to supply the following:-

- Spare nappies
- Wipes, creams, nappy sacks etc
- Spare Clothes
- Spare underwear

Best Practice

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

Wherever possible, 2 members of staff will be present, preferably at least 1 member of staff will be of the same sex as the child who is receiving intimate care. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence for example, female staff supporting boys in a primary school, as no male staff are available.

Student teachers, volunteers and work experience students are not permitted to give intimate care to any child at any point.

Safeguarding

Staff are trained on the signs and symptoms of child abuse which are in line with the DCC guidelines and are aware of the DFES document 'Keeping children safe in education' and will follow the guidance given. If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc they will inform the Designated Safeguarding Lead (DSL) immediately. The Safeguarding Policy will then be implemented.

Should a child become unhappy about being cared for by a particular member of staff, the DSL will look into the situation and record any findings. These will be discussed with the child's parents/carers in order to resolve the problem. If necessary the DSL will seek advice from other agencies

If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

Dealing with body fluids

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a lidded bin (complete with a liner) which is specifically designated for the disposal of such waste. The lidded bin should be emptied on, at least, a daily basis and it can be collected as part of the usual refuse collection service as this waste is not classed as clinical waste.

When dealing with body fluids, staff wear protective clothing (disposal plastic gloves and aprons) wash themselves thoroughly afterward.

Soiled children's clothing will be 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.

In light of COVID-19

Clothing required for changing is as per normal and supports good practice. However, additional PPE may be used at this time. This will include:

- Disposable Gloves
- Disposable Apron
- Disposable Mask
- Disposable Visor

These will be disposed of after each use by using a red waste bag that is then disposed of in the Caretaker's office.

Additional cleanliness stations within each class is provided with tissues, hand-washing facilities, a closed top bin and hand sanitiser. Both staff and children will be required to thoroughly wash and dry their hands and ensure that the lidded bin is emptied regularly to ensure no cross-contamination. Hand-washing posters will be displayed to encourage good hand-washing routines.

Any sneezing or coughing will be into elbows, as per Government recommendation. Tissues will be disposed of immediately after use and hands will be washed afterwards.

Should any changing of children who have soiled be required, staff will change them from behind if possible to reduce passing on any potential infection. If this is not possible, full PPE will be worn.



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First Aid and intimate care

Staff who administer first aid should ensure wherever possible that another adult or other children are present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy. It will be reviewed bi-annually.

The next review is due 2025.



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INTIMATE CARE PLAN

Child's name..... Class..... Class teacher.....

Medical condition/diagnosis.....

Notes about condition (triggers etc).....

NEEDS	FREQUENCY	IMPLEMENTED BY	NOTES School Trips etc

Signed (parents/carers)..... Date

Signed (class teacher) Date

Signed (SENCO) Date

Signed (Headteacher) Date

