

# **Intimate Care Policy**

## **Burford Primary School**



*Respect, Aspire, Achieve*

This policy was reviewed in July 2023.

The policy must be reviewed at least every 36 months.

All children are provided with equal access to the curriculum. We aim to provide equitable learning opportunities regardless of gender, ethnicity or home background.

The impact of this policy on staff workload has been considered.

signed

*Elizabeth Mason*

*Jo White & Hannah Lake*

Interim Headteacher

Co-Chair of Governors

date

*14<sup>th</sup> July 2023*

## Intimate Care Policy

### **Introduction and Aims**

Burford Primary School takes the health and wellbeing of its pupils very seriously. As described in the Medical Conditions Policy, Supporting Pupils with Special Medical Needs, the school aims to support pupils with physical disabilities and illnesses to enable them to have a full and rich academic life whilst at school. The governing body recognises its duties and responsibilities in relation to the Equality Act 2010, which states that any pupil with an impairment affecting his/her ability to carry out normal day-to-day activities must not be discriminated against. Pupils will always be treated with care and respect when intimate care is given, and no pupil will be left feeling embarrassed.

This policy has due regard to relevant legislation and guidance, including, but not limited to, the following:

- Keeping Children Safe in Education
- The Children and Families Act 2014
- The Education Act 2011
- The Health Act 2006
- The Equality Act 2010

This Intimate Care Policy should be read in conjunction with the following

- ODST Safeguarding and Child Protection Policy
- Health and Safety Policy and Procedures
- Policy for the Administration of Medicines
- Burford Primary School Special Educational Needs and Disability Policy
- Staff Code of Conduct

Burford 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. It is acknowledged that these adults are in a position of great trust. We recognise that there is a need to treat all children, whatever their age, gender, disability, religion or ethnicity, with respect when intimate care is given. The child's welfare and dignity is of paramount importance. No child should be attended to in a way that causes distress or pain. Staff will work in close partnership with parent/carers to share information and provide continuity of care, and all incidents of intimate care will be recorded.

### **Definition**

Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some children are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing. It also includes supervision of children involved in intimate self-care.

## **Best Practice/Safeguarding**

Staff who provide intimate care at Burford Primary School adhere to child protection and health and safety training in moving and handling and are fully aware of best practice regarding infection control, including the need to wear disposable gloves and aprons where appropriate. 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.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss their needs and preferences. Where the child is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure. All children 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 his/herself as possible. Children who require regular assistance with intimate care have written care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer. Any historical concerns (such as past abuse) should be noted and taken into account.

Where a care plan is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g. has had an 'accident' and soiled him/herself). Information on intimate care will be treated as confidential and communicated in person, by telephone or by sealed letter. Every 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 needs help with intimate care. Parents will agree to provide spare nappies/pads, medical bags, wet wipes and a change of clothing in case of accidents.

It is not always practical for two members of staff to assist with an intimate procedure. It is advisable, however, for a member of staff to inform another adult when they are going to assist a child with intimate care. Wherever possible the same child will not be cared for by the same adult on a regular basis; 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. Male members of staff should not normally provide routine intimate care (such as toileting, changing or bathing) for adolescent girls. This is safe working practice to protect children and to protect staff from allegations of abuse. At Burford Primary School it is not always practical to have intimate care carried out by the same-sex. The religious views and cultural values of families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.

All staff should be aware of confidentiality, with sensitive information shared only with those who need to know. If necessary, advice should be taken from the local council regarding disposal of large amounts of waste products

If any member of staff has concerns about physical changes to a pupil's presentation, such as marks or bruises, they will report the concerns to a DSL immediately.

## **Physiotherapy**

Children who require physiotherapy whilst at school should have this carried out by a trained physiotherapist. If it is agreed in the care plan that a member of the school staff should undertake part of the physiotherapy regime e.g. exercises, then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly. Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes.

## **Medical Procedures**

Children with disabilities might require assistance with invasive or non-invasive medical procedures such as the administration of rectal medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the care plan and will only be carried out by staff who have been trained to do so. Any members of staff who administer first aid should be appropriately trained. 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.

## **Massage**

Massage is now commonly used with children who have complex needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation. Staff at Burford Primary School may be involved in delivering aspects of programmes devised by therapists. It is recommended that massage undertaken by school staff should be confined to parts of the body such as the hands, feet and face in order to safeguard the interest of both adults and children.

## **Record Keeping**

A written record (see Appendix A) will be kept in an agreed format every time a child has physiotherapy or requires assistance with intimate care, including date, times and procedures. It should be clear who was present.

A Toilet Management Plan (see Appendix B) will be kept for those children with toileting issues. All records will be kept in the child's file and available to parents/carers on request.



## Appendix B Toilet Management Plan

Pupil	Class / Year group
Teaching Assistants	
Date	Review Date
Area of Need	
Equipment Needed	

Location of Suitable Toilet Facilities

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Support Required

Frequency of Support

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**Appendix B Toilet Management Plan**

**Working towards independence**

Pupil will try to	School will	Parent / carer will	Target achieved (date)

Parent/carer name \_\_\_\_\_ Signed \_\_\_\_\_

Staff name \_\_\_\_\_ Signed \_\_\_\_\_

Staff name \_\_\_\_\_ Signed \_\_\_\_\_

Staff name \_\_\_\_\_ Signed \_\_\_\_\_

Staff name \_\_\_\_\_ Signed \_\_\_\_\_

Date \_\_\_\_\_

Designated Safeguarding Lead Signed \_\_\_\_\_

Pupil name \_\_\_\_\_ Signed \_\_\_\_\_

(where appropriate)