



THE MILFORD ACADEMY

Intimate Care Policy

Ratified at Governors 28.9.23

M - Motivated

I - Independent

L - Learning

F - Forward Thinking

O - Outstanding

R - Respect

D - Determined

Introduction

The Milford Academy 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. We recognise that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

Definition

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself) to intimate personal areas. In most cases such care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process as part of a staff member's duty of care.

Our 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.

Staff who provide intimate care are trained to do so (including Child Protection and Safeguarding) and are fully aware of best practice. The child 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 him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstance of the 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 a child is 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.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's Intimate Care Plan. The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing and equal opportunities legislation.

The Protection of Children

Safeguarding Procedures and Multi-Agency Child Protection procedures will be adhered to.

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 Head Teacher (or other Designated Safeguarding Leads). 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/Carers 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.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Multi-Agency Child Protection Procedures for details). All staff will be required to confirm that they have read the document 'Keeping Children Safe in Education' and understand the need to refer to other policies the school may hold for clarification of practices and procedures.



GUIDANCE ON TOILETING AND PROVISION OF INTIMATE CARE

1. INTRODUCTION

The Intimate Care Policy and Guidelines applies to everyone involved in the intimate care of children. These guidelines should be read in conjunction with other policies a school may hold, for example:

- Child Protection policy
- Health & Safety policy
- Staff Recruitment policy
- Moving and Handling policy
- Safeguarding policy

The term parent/s is used to refer to parents, carers and legal guardians.

2. DEFINITION OF INTIMATE CARE

Intimate care is any care which involves washing, touching or carrying out an invasive procedure that most children carry out for themselves but which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or need arising from the child's stage of development.

Care may involve help with drinking, eating, dressing and toileting.

3. AIMS

The aims of this document and associated guidance are:

- To provide guidance and reassurance to staff
- To safeguard the dignity, rights and wellbeing of children and young people
- To assure parents that staff are knowledgeable about intimate care and that their individual needs and concerns are taken into account

4. PRINCIPLES

This document ensures that the child's rights remain paramount throughout any intimate care procedures.

- 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
- Every child has the right to be accepted for who they are, with regard to age, gender, ability, race, culture or beliefs

5. WORKING WITH PARENTS

Partnership with parents is a vital principle in any educational setting and is particularly necessary in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents, including knowledge and understanding of any religious or cultural sensitivities. Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met.

All parents of pupils starting in Nursery / EYFS will be given an Intimate Care Permissions form to sign, giving consent for their child to receive intimate care if / when necessary. This is part of their age-appropriate development and care, and therefore does not require an Intimate Care Plan. Where there are complex needs/procedures that must be followed, an Intimate Care Plan will also be put in place.

Where children are of primary school age and they require intimate care support, parents will be asked for their consent on the Intimate Care Permissions form and an Intimate Care Plan will be put in place. Parents are always involved with reviewing the Intimate Care Plans along with any other plans that identify the need to support with intimate care.

Exchanging information with parents is essential through personal contact, telephone or correspondence. However, information concerning intimate care procedures should not be recorded in home/school books or in any other way as it may contain confidential information that could be accessed by people other than the parent and staff member. Recording equipment such as mobile phones or cameras must not be taken into areas where intimate care is carried out.

6. WRITING AN INTIMATE CARE PLAN

Where a routine procedure is required an intimate care plan should be agreed in discussion with the child, school staff, parents and relevant health professional. The plan should just be available to those who will be involved with the child's intimate care.

In developing the plan the following should be considered:

- Staff ratios and procedures

- Toilet arrangements and equipment (e.g. spare clothes and disposable gloves)
- Awareness of a child's discomfort which may affect learning
- The importance of working towards independence

All plans must be clearly recorded to ensure clarity of expectation, roles and responsibilities. They should reflect all methods of communication including emergency procedures between home, school and the medical service. A procedure should also be included to explain how concerns arising from the intimate care process will be dealt with.

7. LINKS WITH OTHER AGENCIES

Positive links with other agencies will enable school-based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child's well-being and development remains paramount.

8. STAFF DEVELOPMENT

Staff must receive Safeguarding training every year. Staff must be trained in the specific types of intimate care that they carry out and fully understand the intimate care policy and guidelines within the context of their work.

Senior staff members should be able to:

- Ensure that sensitive information about a child is only shared with those who need to know, such as parents, members of staff specifically involved with the child. Other personnel should only be given information that keeps the child safe
- Consult parents about arrangements for intimate care
- Ensure staff are aware of all appropriate procedures, Child Protection Policy & Health & Safety Policy etc.
- Ensure staff understand the needs of refugee children, asylum seekers and children from different racial and cultural backgrounds and specialist advice is sought when necessary
- Ensure staff know who to ask for advice if they are unsure or uncomfortable about a particular situation

In addition, identified staff members should be able to:

- Identify and use a communication system that the child is most comfortable with
- 'Read' messages a young child is trying to convey
- Communicate with and involve the child in the intimate care process. This includes a commentary / talking the child through the process, for example 'I'm going to change your nappy now. I'm going to take your shoes off first.'

- Offer choices, wherever possible
- Develop, where possible, greater independence with the procedure of intimate care
- Maintain confidentiality with children who discuss elements of their intimate care unless it is a child protection issue when Child Protection procedures must be followed

9. ENVIRONMENTAL ADVICE

When children need intimate care facilities, reasonable adjustments will need to be made.

Additional considerations may include:

- Protective clothing including disposable protective gloves – provided by the school
- Labelled bins for the disposal of wet & soiled nappies
- Supplies of suitable cleaning material; anti-bacterial spray, sterilising fluid, deodorisers, anti-bacterial hand wash
- Supplies of appropriate clean clothing, nappies, disposal bags and wipes
- Changing mat or changing bench
- An effective system should be identified to alert staff for help in emergency
- The school should make arrangements to ensure that there is always a member of staff nearby or within earshot, when intimate care takes place

10. VULNERABILITY TO ABUSE

Children should be encouraged to recognise and challenge inappropriate assistance and behaviour that erodes their dignity and self-worth. Staff should be encouraged to listen. It is essential that all staff are familiar with the school's Safeguarding Policy and procedures.

The following are factors that can increase a child's vulnerability:

- Children with disabilities may have less control over their lives than others
- Children may experience multiple carers
- Children may not be able to distinguish between intimate care and abuse
- Children may not be able to communicate

If a child is hurt accidentally, he or she should be immediately reassured and the adult should check that he or she is safe and the incident reported immediately to the designated line manager.

11. SAFEGUARDING AND ALLEGATIONS OF ABUSE

It is essential that all staff are familiar with the school's Child Protection and Safeguarding Policies and procedures.

If a child is hurt accidentally he or she should be immediately reassured and the adult should check that he or she is safe and the incident reported immediately to the designated line manager.

If a child misunderstands or misinterprets an action / instruction, the incident should be reported immediately to the designated line manager.

Personnel working in intimate situations with children can feel particularly vulnerable. The School policy can help to reassure both staff involved and the parents of vulnerable children.

Action should be taken immediately should there be a discrepancy of reports between a child and the personal assistant, particularly with reference to time spent alone together.

Where there is an allegation of abuse, the guidelines in the Child Protection procedures should be followed.