Mill Hill Primary School

Policy on Intimate Care

<u>2020</u>

(See also Child Protection Safeguarding Policy, Whistle Blowing Policy and Medication Policy)

1. Introduction

1.1 Staff members who work with children/young people who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.

1.2 Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

1.3 Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Changing areas are visible to other staff members and the key worker will notify other staff that an intimate care task is to be undertaken.

1.4 Staff members who provide intimate care to children have a high awareness of child protection issues. Staff behaviour is open to scrutiny and staff at our school work in partnership with parents/carers to provide continuity of care to children/young people wherever possible. Key workers and their deputies are allocated by the Senior Leadership Team based on need.

1.5 Staff members deliver personal safety lessons as part of Personal, Social and Health Education, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

1.6 Mill Hill 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. This school recognises 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 or pain.

1.7 Clear processes and guidance in intimate care are highlighted specifically to staff upon their induction in the setting. New staff members are given the opportunity to discuss any queries or uncertainties they may have in relation to this policy. There is an open culture of challenge within the setting so that staff members feel confident to alert/inform senior members of staff to any concerns raised. Students, work experience students and visitors are not responsible for the intimate care of children in the setting.

2. Our approach to best practice

2.1 All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

2.2 Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.

2.3 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. Wherever possible staff members who are

involved in the intimate care of children/young people will not usually be involved with the delivery of sex and relationship education to their children/young people as an additional safeguard to both staff and children/young people involved.

2.4 There is careful communication with each child and family who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is always made aware of each procedure that is carried out and the reasons for it.

2.5 Parents are made aware of this intimate care policy and have a copy of their child's individual care plan as appropriate. Parents are made aware of their child's key worker and deputy, and the arrangements made in the school for their child including the processes and responsibilities agreed for supplying changing materials and transportation of soiled clothes from school. Changing records /documentation are kept by the key worker and overseen by the deputy and the SENDCo.

2.6 As a basic principle 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 themselves as they 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 circumstances of the child. These plans may include a risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health.

2.7 There are clear processes for changing wet/soiled children: Children are encouraged to do as much for themselves as possible (see 2.6) supported by school staff. If a child is unable to do so, parents are contacted to be given the chance to assist if they wish, or collect the child to go home if necessary. A named plastic bag is used to store the soiled clothes until home time (if appropriate). Class teacher will inform the parent of the accident and hand over the soiled clothing at the end of the day.

2.8 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 needs help with intimate care. Whenever possible, one child will be cared for by one adult unless there is a sound reason for having two adults present. If this is the case, the reasons should be clearly documented.

2.9 Whenever possible (unless specified in the care plan and agreed with parents) the same child will not be cared for by the same adult throughout their time in school; there will be two named people on each intimate care plan as well as different carers as the child moves through school. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.

2.10 Parents/carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints e.g. staffing and equal opportunities legislation.

2.11 Each child/young person will have an assigned senior member of staff (SENDCo)to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

3.0 The protection of children

3.1 Education Child Protection/ Safeguarding Procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to.

3.2 Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.

3.3 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 appropriate manager/ designated person for child protection. A clear record of the concern will be completed and referred to social care and/or the Police if necessary. Parents will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm. [See Child Protection/Safeguarding Procedures, available on the school's website].

3.4 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.

3.5 If a child makes an allegation against a member of staff, all necessary procedures will be followed [see Child Protection Procedures - for access details see 3.3].

4 Monitoring and review

4.1 This policy is monitored by the head teacher and SENDCo, who will report to governors on request about the effectiveness of the policy.

4.2 The Intimate Care policy is the governors' responsibility, and they regularly review its effectiveness through discussion with the head teacher.

4.3 This policy will be annually reviewed.

Joanne Gibson - SENDCo

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