

# Waterfield Primary School



## Intimate Care Policy

**Approved by:** Principal & LGB

**Date:** May 2021

**Last reviewed on:** May 2021

**Next review due by:** May 2022



The Collegiate Trust  
Exceptional Education for All

## **1 Introduction**

- 1.1 Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas. In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam)
- 1.2 The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.
- 1.3 Waterfield 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. Waterfield Primary 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.

## **2 Best Practice**

- 2.1 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.
- 2.2 Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in lifting and moving) 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 who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.
- 2.4 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 circumstances of the child.

- 2.5 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. In order to support and safeguard staff it is advisable to always have an additional staff member near-by, make others aware of the procedure to be carried out and never lock doors in the area in which the intimate care is to be carried out.
- 2.6 Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally 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, whilst at the same time guarding against the care being carried out by a succession of completely different carers. Any care will be recorded on the intimate care record form for that child.
- 2.7 Wherever possible staff should only care intimately for an individual of the same gender. 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.
- 2.8 Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

### **3 Children wearing nappies**

- 3.1 Schools may have concerns regarding Child Protection issues when they are asked by parents to admit a child who is still wearing nappies. Child protection need not present an issue. It is good practice to provide information for parents of the policy and practice in the school. Such information should include a simple agreement form for parents to sign- outlining who will be responsible, within the school, for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task right from the outset.
- 3.2 We will use a note book to record who changes a child, how often this task is carried out and the time they left/returned to the classroom following this task. Examples of such good practice provide reassurance for parents that systems are in place and that schools

have implemented procedures for staff to follow.

#### **4. Swimming**

- 4.1 In Key Stage Two children may participate in a swimming programme at The K2 Leisure Centre in Crawley. Children are entitled to respect and privacy when changing their clothes. However, there must be the required level of supervision to safeguard young people with regards to health safety considerations and to ensure that bullying, teasing or other unacceptable behaviour does not occur.
- 4.2 The K2 Centre supports effective and discrete supervision and privacy for our children when changing, by providing group changing rooms, away from the public. Where a child needs additional support for changing parental permission will be sought and a personal care plan will be drawn up so as to maintain dignity and continue to support development of independence.
- 4.3 Boys and girls will always change in separate changing rooms. School staff will wait outside the changing whilst children change. Under some circumstances (health and safety or unacceptable behaviour) a member of staff may have to enter the changing rooms. At this point the member of staff should announce their intention of entering changing rooms, avoid remaining in changing rooms unless pupils needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.
- As an inclusive school Waterfield will accommodate children who identify their own gender. With supportive discussion accommodation will be made to ensure ALL children feel comfortable and are given appropriate facilities in which to change.

#### **5. Residential Trips**

- 5.1 Children may sometimes partake in 'Residential'/ Overnight trips. Particular care is required when supervising pupils in this less formal setting.
- 5.2 As with Extra-Curricular Activities, although more informal relationships in such circumstances tend to be usual, staff are still guided by our Child Protection and Safeguarding Policy.

#### **Night Time Routines**

- 5.3 It is established practice that the children's bedrooms are private spaces and anyone else wanting to enter the room should knock and announce their intention to enter.
- 5.4 At bedtime, children are given a set amount of time to change and prepare for bed and will be told when the supervising teacher will visit the rooms to check

all is okay and switch off the lights. The same arrangement is in place in the mornings when waking children.

There are occasions when incidents take place during the night and the need arises to:

- **Provide comfort** to an upset or distressed child
- Assist a child who requires a specific medical procedure and who is not able to carry this out unaided. Guidance as above will be followed with the support of an additional member of staff in attendance.

## **6. Working with Children of the Opposite Sex**

6.1 There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman. The intimate care of children can be carried out by a member of staff of the opposite gender identification with the following provisions:

- When intimate care is being carried out, all children have the right to dignity and privacy, i.e., they should be appropriately covered, the door closed or screens/curtain put in place. If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance;
- Report any concerns to the Designated Safeguarding Leader for Child and make a written record via 'Safeguard my School' digital record.
- Parents must be informed about any concerns.

## **7. Communication with Children**

7.1 It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods – words, signs, symbols, body movement, eye pointing, etc. To ensure effective communication:

- Make eye contact at the child's level;
- Use simple language and repeat if necessary;
- Wait for a response;
- Continue to explain to the child what is happening even if there is no response;
- Treat the child as an individual with dignity and respect.

## **8. Equipment Provision**

- 8.1 Schools often ask for clarification regarding who is responsible for providing equipment when children require changing. Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

## **9. Health and Safety**

- 9.1 Some schools are concerned about health and safety issues when staff are changing children or dealing with a child who has had an accident and is bleeding.
- 9.2 Staff should always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. The bin should be emptied on a weekly basis and it can be collected as part of the usual refuse collection service as this waste is not classed as clinical waste. Staff should be aware of the school's Health and Safety policy

## **10 First Aid and intimate care**

- 10.1 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.
- 10.2 Regular requirements of an intimate nature should be planned for agreements between the school/organisation, those with parental responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed, (see Intimate Care Model Policy and Guidance)

## **11. Child Protection/Safeguarding Guidelines**

Staff are advised to follow the following simple actions to safeguard both themselves and the child.

1. Ensure that the action you are taking is necessary.
2. Get verbal agreement to proceed.

3. Proceed maintaining dignity and showing concern for the safeguarding of yourself and the child.

Take **Care** in what you doing.

Show **Concern** for the child's and your own safeguarding.

**Communicate** with both the child and other adults with the actions you are taking.

### **CARE – CONCERN – COMMUNICATE**

*This is supported and should be read in conjunction with our Child Protection and Safeguarding Policy.*

## **INTIMATE CARE POLICY PARENTAL AGREEMENT FORM**

- 1 Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas.
- 2 The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.
- 3 Waterfield 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. Waterfield Primary 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.
- 4 The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.
- 5 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/they as he/she/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.
- 6 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.
- 7 Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care.
- 8 Wherever possible staff should only care intimately for an individual of the same gender identified.
- 9 Waterfield Primary School has introduced a note book to record who changes a child, how often this task is carried out and the time they left/returned to the classroom following this task.
- 10 Parents have a role to play when their child is still wearing nappies.



The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

- 11 Staff should always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste.
- 12 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.

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### **INTIMATE CARE POLICY PARENTAL AGREEMENT FORM**

I agree to support the Intimate Care Policy and practice of Waterfield Primary School.

Signature of Parent / Carer.....

Print Name.....

Date.....

Signature of School Representative.....

Print Name.....

Position .....

Date .....

# INTIMATE CARE RECORD FORM

NAME..... Class .....

<b>Key Details:</b> Nappy Changing – NC	Toileting Support – TS
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**Location:** KS1 Toilets – **KS1** Disabled Toilet -**EY** KS2 Toilets Y3/4 – **Y3/4**

Disabled Toilets KS2 Y5/6 Block – **Y5/6**[illegible]